Freud’s Impact on Jung

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In *Psychoanalytic Approaches for Counselors*, it was suggested following Ellenberger (1970) that Freud was not a particularly original thinker, but instead that he was able to synthesize and express the thinking and intellectual currents of his time into a coherent psychotherapeutic enterprise. Remember also that it was suggested that this enterprise inaugurated a large number of therapeutic themes that periodically appeared and reappeared in the theory and practice of subsequent theorists—both those who identified as following Freud and those who did not—and that continue to have the utmost relevance today. Thus when we speak of Freud’s legacy for subsequent counselors and counseling theorists, we are describing how counselors and theorists staked out various claims and positions on elements that are integral to the therapeutic enterprise in response to Freud’s claims and positions on these same elements.

Despite Freud’s importance, one must remember that Freud was only one of many people who were attempting to understand people and how to help them with psychological and interpersonal issues. It is also important to realize that he was only one of the many influences that each contemporary and subsequent theorist felt, and that his influence can be overstated. As a case in point, Freud’s impact on Jung has been much discussed, to the point that certain historians have said that “a Freudocentric legend arose, which viewed Freud and psychoanalysis as the principal source for Jung’s work” (Shamdasani, 2011, p. x). The point of this present study is not to be “Freudocentric” (a word that echoes another word, “phallocentric,” and partakes of the wittiness that frequently accompanies critiques of Freud) in tracing the impact of Freud’s thought on Jung and on subsequent theorists. Jung had many influences, such as Eugen Bleuler, Pierre Janet, Théodore Flournoy, and William James, among others, and even while working with Freud, Jung maintained a separate theoretical identity (see Shamdasani, 2003). It is important to keep in mind that Freud was a tireless advocate and promoter of his own particular brand of psychological thought and treatment, and due in part to his efforts and those of his followers (of which Jung was one for a time), Freud’s views came to be widely disseminated (including the Freudocentric view that Freud single-handedly created psychoanalysis and concepts such as the unconscious).

But it is just as important to consider that the therapeutic enterprise appears to have a fairly limited number of reoccurring themes, themes that we can indeed trace back to Freud’s clinical work and theoretical formulations. Again, Freud did not invent these themes, but instead found himself grappling with them in more or less conscious and theoretically formulated ways. For instance, he wasn’t the first to discover that people seem to hide things from themselves—the concept of dramatic irony (in which a dramatic character is unaware of truths about himself that the audience knows) has been around for millennia; what he did was to formalize, investigate, and theorize how and why this might occur.

So it is in this vein that we may begin to trace how Freud impacted Jung’s work as an example of how theorists subsequent to Freud responded to him—by rejecting, accepting, or modifying his views. Important connections are to be made, not in service to further build a Freudocentric monument, but to again highlight the importance of historically situating past and current developments. The narrative that I am constructing is one that attempts to help counselors-in-training, counselor educators, and clinicians in a way to understand the history and development of counseling. It is suggested that each new major theorist, beginning with the case of Jung examined here, brought one or more important additions to the field, often in explicit or implicit response to Freud. These additions held, and continue to hold, vital therapeutic usefulness today.

In comparing and contrasting Jung’s approach to Freud, we see both similarities and differences. In terms of similarities, it is important to note that Jung was, like Freud, fundamentally concerned with the dynamics of unconscious processes. He expanded Freud’s view, most notably in concerning himself with aspects of consciousness that appeared to transcend individuals—what Jung termed the collective unconscious of all humanity. In addition, Jung’s therapeutic practice could be quite similar to Freud’s, such as his use of dream interpretation, free association (which Jung had earlier called “active imagination”), and a real concern with the therapeutic relationship (“unless both doctor and patient become a problem to each other, no solution is found,” Jung, 1961, p. 143). And, very importantly, Jung’s goal was similar—to bring unconscious material into conscious awareness. Also like Freud, he began with hypnosis, but rejected it out of technical and theoretical concerns.

Their differences were many; most importantly for contemporary counselors, we can identify Jung’s emphasis on intuitive approaches, his respect for and interest in religion, myth and spirituality, his concern with holism and integration, and his insight into psychotic experience and ways to understand that experience. Again, some of these differences grew out of Jung’s interaction with Freud, but some were the result of different temperaments, distinct research agendas, and the different composition of the patients that they saw.

Freud always emphasized rational approaches, saying that reason was the best hope for mankind—albeit one that could appear under constant threat. Jung gave value to intuitive approaches as well, and while Freud dismissed religion as truly wishful thinking, Jung remained concerned with spiritual and mystical experience. Their estrangement grew at least partly out of these profound differences; Jung said that Freud in fact never really rejected mysticism. In a very Freudian interpretation of Freud, Jung said that Freud did not realize that he had repressed the mystical side of himself, resulting in precisely what Freud said repression always resulted in—the symptoms popped up elsewhere. In this case, Jung said, Freud’s unsuccessful repression of his mystical/spiritual/religious side popped up in Freud’s neurotic obsession with sex. Freud believed he had dispensed with religion and religious impulses; Jung said that far from dispensing with them, Freud had become the high priest of sex, demanding obeisance from his followers in the Church of Freud.

It’s important to note that Jung began his training and worked from 1900 to 1909 at the Burghölzli, a large, humanely run mental institution; most of his patients during that time were struggling with schizophrenia and other serious mental illnesses. Thus he provides for counselors-in-training with some of the first modern examples of how to work with these populations. Freud, on the other hand, worked primarily with the “worried well,” patients who at the time were said to be suffering from neuroses and who were typically well-to-do women. As Freud continued, he also saw people who were interested in becoming analysts themselves, and in these training analyses he saw people who varied in terms of the severity of issues that emerged. It is somewhat of an oversimplification to say that Freud was concerned with neurotic experience, and Jung was concerned with psychotic experience—Freud was familiar with psychoses and did write about Daniel Schreber, who suffered from schizophrenia, and after Jung left the Burghölzli he saw less-serious patients in his private practice. But the dichotomy is broadly useful and helpful in understanding the respective work of each.

Jung’s (1961) description of his psychiatric activities at the Burghölzli in *Memories, Dreams, Reflections* shows that he was deeply engaged in trying to understand schizophrenic experience. He speaks about Babette S., who “had served as an object lesson to hundreds of medical students” (p. 125). He records some of her seemingly nonsensical speech: “I am the Lorelei.” “I am Socrates’ deputy.” “I am the double polytechnic irreplaceable.” “I am Germania and Helvetia of exclusively sweet butter.” “Naples and I must supply the world with noodles” (p. 126). He shows that he is listening to her and understands something of her experience when he perceptively writes that her statements “signified an increase in her self-valuation, that is to say, a compensation for inferiority feelings” (p. 126). This interpretation seems empathic and correct: This was a woman whose entire life was to serve as an object lesson to medical students. It doesn’t take much imagination to picture the disrespect and the joking that some of the students may have displayed, and the fact that Babette S., though chronically psychotic, knew very well how they felt about her and what her position was.

In my work as a residential program director working with clients diagnosed with serious mental illness, I often struggled to understand what my clients needed. I developed a method that I called “listening to the music rather than the words” of schizophrenic speech. That is, I did what Jung did with Babette, which was to listen for the underlying tonal attributes of the words. When one of my clients would come to me in the afternoon and literally shout full in my face, I would venture guesses as to what she might be feeling: “Are you feeling a bit sad today?” for example. Many times, in the midst of a disordered stream of sentences, “islands of clarity” would jump out from a tempest of sound and fury—psychotic speech … “Yes I’m feeling miserable today” … more psychotic speech. It wasn’t magical, and it didn’t always work, but it demonstrated that this particular client was often reachable at a deep level, even when the surface level was tormented and stormy.

This difference in population puts in perspective their differences on rational processes. It can be argued that Freud was able to emphasize reason and rationality to the degree that he did because the patients that he was working with were fundamentally intact in terms of their cognitive processes; Jung, on the other hand, worked with people whose executive function was often impaired. Freud could reasonably expect his patients to make logical choices with unearthed unconscious material; Jung might well fear that this material might overwhelm the patients that he attended, and so he tended to strongly urge that synthesis and integration be important parts of treatment.

Finally, when Jung describes his work with clients and his therapeutic technique, he describes himself as eclectic, saying that “I am unsystematic very much by intention…. We need a different language for every patient. In one analysis I can be heard talking the Adlerian dialect, in another the Freudian. The crucial point is that I confront the patient as one human being to another” (p. 131). This eclectic approach is consonant with a common factors approach and is a useful example for counselors-in-training, showing that even an originator of a theory could be comfortable with technical flexibility.

Counselor education programs are in the middle of important debates on the place of religion and spirituality in working with clients and in training counselors themselves. Are counselors being tolerant and flexible with clients who are religiously inclined? What does a counselor do with a client whose religious worldviews conflict with their own—especially in cases where a religious worldview seems to promote values contrary to liberal Western thinking? (For example, religious practices that appear to promote the subordination of women.) What do counselor education programs do with students who themselves question whether they can or should work with clients whose behavior seems to go against the student’s religious beliefs?

Jung’s background and subsequent clinical practice serve as a great venue to bring up with students when discussing these important questions about the place of religion and spirituality in counseling. Jung was descended from a long line of ministers and struggled all of his life to articulate a position that felt to him alive to the possibility of the spiritual without being dogmatic about its reality. Simply asking students to reflect on Jung’s experience can spark wonderful class discussions. Jung’s response—to neither wholly reject nor wholly accept his heritage—is instructive as well for those who may be having difficulty accepting that even in this contentious area there are possibilities of compromise. And, framing Jung’s experience as journey may also help counselors-in-training to see religious belief as less of a settled fact and more of an ongoing process of development, a position that accords with the profession’s growth-oriented perspective.

References

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