

Ferenczi, the Environment, and the Death Drive

Ferenczi, o Ambiente e a Pulsão de Morte

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Abstract

This article examines the vicissitudes of the death drive in Sándor Ferenczi's work. It takes as its point of departure four pillars of Freud's original formulation: the return to the inorganic, the compulsion to repeat, the destructive drive, and trauma. In this light, Ferenczi's ideas — namely, a general tendency to return to the womb; an emphasis on repetition, especially in the clinical setting; the view that the subject's destructive expressions are subordinated primarily to the action of objects; and the proposition of trauma as a relational phenomenon — allow us to situate the environment as the central protagonist in his theory. Although the Hungarian analyst never explicitly denied the death drive, the concept assumes a supporting role in his thought. Ferenczi's pioneering work decisively paved the way for an intersubjective and object-relations psychoanalysis.

Keywords: Ferenczi, death drive, environment, intersubjectivity, objectual relations.

Resumo

O presente trabalho tem por ponto de partida a investigação das vicissitudes da pulsão de morte na obra de Sándor Ferenczi. Toma-se, para tal, o que se entende como quatro eixos fundamentais do conceito na proposta original freudiana, quais sejam: o retorno ao inorgânico; a compulsão à repetição; a pulsão de destruição; e o trauma. Nesse sentido, a ideia ferencziana da tendência geral de retorno ao útero; a valorização da repetição, sobretudo no âmbito da clínica; a subordinação das manifestações destrutivas do sujeito à ação, em primeiro lugar, dos objetos; e a proposição do trauma como um fenômeno relacional são fatores que permitem situar o ambiente como o protagonista para Ferenczi. Embora o autor húngaro jamais tenha negado explicitamente a pulsão de morte, compreende-se que o conceito assume papel de coadjuvante no seu pensamento, cujo pioneirismo abriu caminho decididamente para a psicanálise da intersubjetividade e das relações objetais.

Palavras-chave: Ferenczi, pulsão de morte, ambiente, intersubjetividade, relações objetais.

Resumen

El presente trabajo tiene como punto de partida la investigación de las vicisitudes de la pulsión de la pulsión de muerte en la obra de Sándor Ferenczi. Se toma, para tal, lo que se entiende como cuatro ejes fundamentales del concepto en la propuesta original freudiana, a saber: el regreso al inorgánico; la compulsión a la repetición; la pulsión por destrucción; y el trauma. En este sentido, la idea ferencziana de la tendencia general de regreso al útero; la valorización de la repetición sobre todo en el ámbito de la clínica; la subordinación de las manifestaciones destructivas del sujeto a la acción, en primer lugar, de los objetos; y la proposición del trauma como un fenómeno relacional son factores que permiten situar el ambiente como el protagonista para Ferenczi. Aunque el autor húngaro jamás haya negado explícitamente la pulsión de muerte, se comprende que el concepto ocupa papel secundario en su pensamiento, cuyo pionerismo abrió camino decididamente para el psicoanálisis de la intersubjetividad y de las relaciones objetales.

Palabras clave: Ferenczi, pulsión de muerte, ambiente, intersubjetividad, relaciones objetales.

Résumé

Ce travail a pour point de départ l'enquête sur les vicissitudes de la pulsion de mort dans l'œuvre de Sándor Ferenczi. Pour cela, nous nous appuyons sur les quatre axes fondamentaux du concept dans la proposition freudienne originale : le retour à l'inorganique ; la contrainte à la répétition ; la pulsion de destruction ; et le traumatisme. En ce sens, l'idée de Ferenczi concernant la tendance générale à retourner dans l'utérus ; la valorisation de la répétition surtout dans le contexte clinique ; la subordination des manifestations destructrices du sujet à l'action, tout d'abord, des objets ; et la proposition du traumatisme comme phénomène relationnel permettent de considérer l'environnement comme un protagoniste pour Ferenczi. Bien que l'auteur hongrois n'ait jamais explicitement nié la pulsion de mort, il est entendu que ce concept joue un rôle de soutien dans sa pensée. Ses travaux pionniers ont ouvert la voie à la psychanalyse de l'intersubjectivité et des relations d'objet.

Mots-clés : Ferenczi, pulsion de mort, environnement, intersubjectivité, relations d'objet.

As is well known, psychoanalysis was created by Sigmund Freud at the turn of the 20th century. It is therefore a young discipline, particularly bound to its founder. Concepts such as the unconscious, drive, and transference were, if not invented, certainly popularized by Freud, and they still permeate psychoanalytic publications today. Not everything the Austrian author proposed, however, was accepted unequivocally. The well-known breaks with C. G. Jung, J. Breuer, A. Adler, O. Rank, W. Reich, and others exemplify these divergences. Disagreements also emerged within psychoanalysis among those who remained inside the field. In this sense, the death drive stands as a witness to enduring internal controversies.

At the outset, it seems pertinent to say that this concept is multifaceted. Freud introduced it in *Beyond the Pleasure Principle* (Freud, 1920/2017e), yet he did so hesitantly and with explicit doubts. The psychoanalytic community's reception was likewise far from unanimous. There remain a range of positions today, from adherence to outright rejection. Some also approach the concept through different paradigms — for example, as an innate substrate of human aggression, as a drive without representation, or as a reaction to environmental failure. In this article, we focus primarily on the last of these, through an author whose stance on the death drive continues to invite debate.

Sándor Ferenczi (1873–1933) was a Hungarian psychoanalyst, a contemporary of Freud, and one of his main collaborators. Strictly speaking, “collaborator” is not entirely adequate. After meeting in 1908, Freud and Ferenczi developed a close relationship: they shared leadership roles in the International Psychoanalytic movement, traveled together, and exchanged extensive correspondence (Avello & Candiotti, 1998). They became friends, as Balint (1968/2011b) notes. At the same time, it is worth noting that Freud also occupied the position of Ferenczi's mentor and was, in fact, his analyst. Ultimately, analyst and analysand — master and apprentice — diverged when, from the mid-1920s on, Ferenczi took theoretical and technical directions that, while not causing a complete break, certainly displeased Freud (Balint, 1967/2011a).

The death drive occupies an especially interesting place. Freud introduced and consolidated the concept; Ferenczi's stance toward Thanatos was as ambivalent and nuanced as his relationship with psychoanalysis's founder. In his published writings, the Hungarian author never openly denied the concept and referred to it on more than one occasion. Yet he often subordinated it to environmental influences — something that, progressively, he did with many other aspects of his theory and technique, especially in the final phase of his “official” work. It is, however, in the “unofficial” portion of his oeuvre — namely, the texts published posthumously — that we find the strongest evidence of Ferenczi's distance from the death drive and of the merely supporting role it plays in his thought. In what follows, we examine some details and ramifications of these views.

A Return to the Womb as an Alternative to the Return to the Inorganic

In *Beyond the Pleasure Principle* (Freud, 1920/2017e), Freud drew on the inertia principle he had posited in *Project for a Scientific Psychology* (1950 [1895]/2006) to propose the Nirvana principle: a universal tendency in living beings to return to the inanimate, inorganic state that preceded life itself — a tendency that would correspond to the death drive. In Ferenczi's work, there is a similar proposition of a return to a more primitive, homeostatic organization, free from life's frustrations and suffering. This state, however, is not death but life within the maternal womb.

This idea appears in *Stages in the Development of the Sense of Reality* (Ferenczi, 1913/2011c). Ferenczi's concern at the time was to spell out the stages the individual traverses in moving from the rule of the pleasure principle to the establishment of the reality principle (or sense of reality), only alluded to — but not defined — by Freud in *Formulations on the Two Principles of Mental Functioning* (1911/2017b). For Ferenczi, life begins with a period of “unconditional omnipotence,” which has less to do with the infant's feeling that it creates the objects of the external world and more with a “state of repose,” in which one can live unharried by external stimuli (Molin et al., 2019). The newborn is still unable to differentiate itself from its surroundings or to grasp that the satisfaction of its needs fundamentally depends on another. The origin and explanation of this state, however, derive from an even more primitive reality:

(...) there exists a stage of human development that truly realizes this ideal of a being subject solely to pleasure, and not only in imagination and approximately, but in reality and effectively.

I am referring to the period of life spent in the mother's body. At this stage, the human being lives as a parasite of the maternal body. For the nascent being, the “external world” scarcely exists; all desires for protection, warmth, and nourishment are provided by the mother. (Ferenczi, 1913/2011c, p. 48)

With birth, the external world finally makes its presence felt, in stark contrast to intrauterine homeostasis. This leads the individual, “hardly delighted with the brutal disturbance of the desireless quiet he had enjoyed in the maternal womb” (Ferenczi, 1913/2011c, p. 49), to long “with all his strength to find himself once again in that situation.”

These ideas were developed substantially 11 years later in *Thalassa: A Theory of Genitality* (Ferenczi, 1924/2011e), another work Ferenczi wrote after a long “gestation” (Molin et al., 2019, p. 238) with the aim of extending Freudian concepts. This time, the focus was the psychosexual development Freud had presented in *Three Essays on the Theory of Sexuality* (Freud, 1905/2017a). Starting from the hypothesis of a universal tendency to return to the womb, Ferenczi reread the phases of infantile sexuality, viewing them “as a series of attempts—first hesitant and rudimentary, then increasingly explicit — to return to the maternal womb” (Ferenczi, 1924/2011e, p. 294).

In this new proposal, at the very beginning of life “those who care for the child must maintain for it the illusion of the intrauterine situation” (Ferenczi, 1924/2011e, p. 294), attending to the “conditions of warmth, darkness, and quiet the child needs to preserve that illusion.” Thus, during the oral–erotic stage the child is “in sum, an ectoparasite of the mother, just as it had been her endoparasite during the fetal period” (Ferenczi, 1924/2011e, p. 295). Ferenczi also names this stage passive object-love, a concept that would later gain prominence in his work — and is relevant to the lines of inquiry we pursue here.

Immediately after the oral–erotic phase comes the cannibalistic oral stage, marked primarily by the development of the teeth — “instruments with which the child seeks to penetrate the mother's body” (Ferenczi, 1924/2011e, p. 295). Ferenczi further notes the “symbolic identity between the penis and the tooth” (Ferenczi, 1924/2011e, p. 295) — two instruments of penetration through which, at different moments in life, the individual seeks to consummate the desire to return to the intrauterine environment. Here we see a privileging — already prominent in Freud — of the perspective of those who possess a penis, namely men. It is true that Ferenczi briefly addressed female sexuality in *Thalassa*. Yet he later reproached himself, in notes from *The Clinical Diary of Sándor Ferenczi* (Ferenczi, 1985 [1932]/1995), published posthumously, for the way he did so, too close “to the master's words; a new edition would mean a complete rewrite” (Ferenczi, 1985 [1932]/1995, p. 187).

The third stage in this developmental sequence is the sadistic–anal organization. Here we see the “displacement of originally ‘cannibalistic’ aggression onto the intestinal function” (Ferenczi, 1924/2011e, pp. 295–296), as a reaction to the cleanliness rules imposed by adults at this time of life. The dominant idea is that feces are identified with the child itself, who thus becomes “at once the mother and the child (intestinal content)” (Ferenczi, 1924/2011e, p. 296).

Next comes the period of masturbation, “the first phase to inaugurate the primacy of the genital zone” (Ferenczi, 1924/2011e, p. 296). At this moment, “the symbolic equation ‘child = feces’ is replaced by the symbol ‘child = penis’” (Ferenczi, 1924/2011e, p. 296). Finally, the primacy of genitality is consummated with the emergence of “a more suitable offensive weapon” (Ferenczi, 1924/2011e, p. 296) for returning to the womb: the erect penis. In this final phase, the sexual act represents “a return — half fantasied, half real — to the maternal womb” (Ferenczi, 1924/2011e, p. 310), insofar as the individual identifies “with the virile member that penetrates the vagina and with the spermatozoa that pour into the woman's body” (Ferenczi, 1924/2011e, p. 318).

Ferenczi also classifies the oral stage in the development of what he calls the “sense of erotic reality” (Ferenczi, 1924/2011e, p. 297) — clearly inspired by the earlier “sense of reality” he posited for the ego — as alloplastic, whereas the anal and masturbatory periods would be autoplasic. Alloplasty would reappear only in the final moment of coitus. The idea is that, in autoplasy, the individual “seeks in his own body a phantasmatic substitute for the lost object” (Ferenczi, 1924/2011e, p. 297), while the alloplastic counterpart entails concrete action on the environment — in the cases under discussion, parasitic sucking and attempts to penetrate the maternal body via teeth and penis. These propositions about acting on the environment as opposed to transforming oneself would also become salient in Ferenczi’s later theorization of trauma.

Thalassa (Ferenczi, 1924/2011e) is a wide-ranging text, full of propositions. Ferenczi, for instance, draws a parallel between developments in the history of the individual — ontogenesis — and claims about the history of the species — phylogenesis. He describes successive catastrophes — five in all — that would be reenacted, at the ontogenetic level, through events such as birth, the development of the aforementioned sense of erotic reality, and the latency period. In this sense, it would be after the Ice Age — the phylogenetic counterpart of latency — that “the development of civilization occurred as a reaction to this catastrophe” (Ferenczi, 1924/2011e, pp. 335-336).

One point in these texts is especially relevant for us: “the central role that the mother (real or Thalassic) progressively takes on” (Avello & Candiotti, 1998, p. 192). This protagonism is evident in theory across all the propositions concerning the universal tendency to return to the womb. But Ferenczi was, above all, a clinician, and he did not keep his ideas separate from his practice: he increasingly emphasized the “maternal role of the analyst” (Avello & Candiotti, 1998, p. 192), a position that figured prominently in his divergences with Freud — who regarded his Hungarian colleague as “the godfather of maternal overflows of affect that could lead young analysts down a questionable path” (Sabourin, 2011, p. 8).

Repetition in the Service of Cure

In *Beyond the Pleasure Principle* (Freud, 1920/2017e), Freud examines the compulsion to repeat in four key dimensions: dreams in traumatic neuroses; the child’s *fort-da* game; “fates” or life patterns; and transference in the analytic setting. In a note from the posthumous collection *Reflections on Trauma* (Ferenczi, 1934 [1931-1932]/2011), Ferenczi not only agrees that repetitions of traumatic experiences in dreams are attempts at working-through that go beyond wish-fulfillment; he also extends the idea by proposing that “every dream whatsoever, even the most unpleasant, is an attempt to bring traumatic events to a better psychic resolution and mastery” (Ferenczi, 1934 [1931-1932]/2011, p. 128). Gondar (2013) explores this specifically traumatolytic function of dreams in Ferenczi’s thought. In *Thalassa* (Ferenczi, 1924/2011e), Ferenczi compares the effort to work through repetitive mechanisms in traumatic dreams and in the *fort-da* to the function of coitus, which would “partially discharge the ‘shock effect’ of the birth trauma that has not yet been liquidated” (Ferenczi, 1924/2011e, pp. 310-311). In *The Psychoanalytic Treatment of Character* (Ferenczi, 1949 [1930]/2011n), he refers to something seemingly akin to “fateful” neuroses when he writes about a friend “who had not been analyzed and who constantly complained of being pursued by bad luck” (Ferenczi, 1949 [1930], p. 249), but who in fact sought out that very misfortune “in order to resemble, at least in his misfortune, his father, who met a tragic end” (Ferenczi, 1949 [1930], p. 249). Still, the most salient dimension of repetition in Ferenczi’s work is the one enacted in the clinic.

In *Remembering, Repeating and Working-Through* (Freud, 1914/2017d), Freud situates repetition in analysis — the transferential re-enactment of the patient’s past — as something short of the true aim of treatment: recollection. Transference itself had been treated as a manifestation of resistance; thus, “the greater the resistance, the more will remembering be replaced by acting (repeating)” (Freud, 1914/2017d, p. 201). Freud adds that “remembering in the old manner, reproducing it in the psychical sphere, remains the aim to which we adhere” (Freud, 1914/2017d, p. 204).

In 1924, Ferenczi published *Perspectives in Psychoanalysis* with Otto Rank, where he proposed something different: repetitions in analysis are “the true unconscious material” (Ferenczi, 1924/2011d, p. 245). Consequently, “in analytic technique, the principal role seems therefore to belong to repetition rather than to recollection” (Ferenczi, 1924/2011d, p. 246). This does not mean recollection has no place. He clarifies that “this repetition consists ... in allowing these affects and then progressively liquidating them, or else in transforming repeated elements into a present memory” (Ferenczi, 1924/2011d, p. 246). Even so, there is a clear emphasis on the need to “properly appraise the fundamental importance of the compulsion to repeat” (Ferenczi, 1924/2011d, p. 246).

At that time, Ferenczi was still experimenting with the active technique — a radicalization of Freud’s principles of frustration and abstinence. Laplanche and Pontalis (2016) help clarify these tools: from a technical standpoint, the idea that neurosis finds its condition in *Versagung* undergirds the rule of abstinence; the analyst should refuse the substitutive satisfactions that could appease the patient’s libidinal demands — the analyst must maintain frustration (Laplanche & Pontalis, 2016, p. 204).

The ideas germinating in *Perspectives in Psychoanalysis* (Ferenczi, 1924/2011d) were soon developed in the opposite direction of the active technique, which he abandoned in subsequent works. In *The Elasticity of Psycho-Analytic Technique* (Ferenczi, 1928/2011g), he writes: “nothing is more harmful in analysis than a teacherly attitude or even that of an authoritarian physician” (Ferenczi, 1928/2011g, p. 36). In *The Principle of Relaxation and Neocatharsis* (Ferenczi, 1930/2011i, p. 65), he criticizes his earlier “excesses,” noting that they can place “the patient in confrontation with useless and avoidable difficulties; there must be ways of making the patient perceive our kindly benevolent attitude” (Ferenczi, 1930/2011i, p. 69). The *mea culpa* continues in *Child-Analyses with Adults* (Ferenczi, 1931/2011j, p. 82): “cold, mute expectation, as well as the analyst’s lack of response, often seemed to disturb the freedom of association.” Ferenczi thus begins to consider affects and attitudes on the analyst’s side as well — countertransference. This leads him to question practices such as attributing therapeutic failures to the analysand’s resistance: “is it not rather our own comfort that scorns adapting the method to the particularities of the person?” (Ferenczi, 1931/2011j, p. 81).

Such analyst authority — marked by coldness, silence, disdain, and lack of response, a kind of “professional hypocrisy” (Ferenczi, 1933/2011k, p. 113) — can have only one consequence: the repetition of the very events that led the patient to the illness he now seeks to treat. As he writes:

(...) the patient may view the severe and cold reserve of the analyst as a continuation of the infantile struggle against adult authority, and now repeats the character and symptomatic reactions that lay at the basis of his neurosis proper. (Ferenczi, 1930/2011i, p. 70)

Yet we have seen that, from 1924 on, Ferenczi valued repetition in analysis. The proposal, of course, was not an identical acting-out of the original pathogenic situation. Rather, it entailed the inevitable re-enactment of “trance states” (Ferenczi, 1930/2011i, p. 72), in which “fragments of the past were relived, and the person of the physician then formed the only bridge between the patient and reality.” In short, it was a therapeutic repetition that he called *neocatharsis* — in reference to Freud and Breuer’s cathartic method in the period preceding the creation of psychoanalysis — distinct from that primitive proposal, which he reclassified as *paleocatharsis*.

The fundamental difference between the repetition Ferenczi condemns — abandoning the active technique — and the repetition he proposes in the context of neocatharsis lies in the analyst’s stance. If the analyst’s hypocritical attitude engenders repetitions of the situation that originally produced illness, something different must enable reproductions (Avello & Candiotti, 1998) with curative aims. Ferenczi therefore advocates relaxation — a clinical *laissez-faire* (Ferenczi, 1930/2011i, p. 68) — in direct opposition to rigid principles of frustration and abstinence. Thus, the patient, “impressed by our behavior, which contrasts with the events lived in his own family, and now known to be protected from repetition, will dare to plunge into the reproduction of the unpleasant past” (Ferenczi, 1931/2011j, p. 85). How is this behavioral contrast achieved? Ferenczi cites “almost unlimited patience, understanding, benevolence, and kindness” (p. 85) on the analyst’s part. He also writes that “the only claim nurtured by analysis is the claim to trust in the candor and sincerity of the physician” (Ferenczi, 1928/2011g, p. 37). Finally, he defines a key component: tact — “the capacity to ‘feel with’” (Ferenczi, 1928/2011g, p. 31) — on the part of the person who, after all, occupies the position of authority in the analytic relationship:

I have become convinced that, above all, it is a matter of psychological tact—knowing when and how to communicate something to the analysand; when one may declare that the material provided is sufficient to draw certain conclusions; in what form each communication should be presented; how to react to an unexpected or disconcerting response from the patient; when to keep silent and await further associations; and when silence becomes a useless torture for the patient, etc. (Ferenczi, 1928/2011g, p. 31)

Since Freud (1913/2017c), it is true, the timing of interventions has been a consideration. But Ferenczi is emphasizing something more. For him, the analyst must attune to “the patient’s pitch” (Ferenczi, 1928/2011i, p. 42), adapting — so far as is possible and desirable in each case — to the singular issues that emerge. The aim is to build an “atmosphere of trust” (Ferenczi, 1932/1985, p. 170) in analysis that will, in fact, stand in contrast to the traumatic past and serve as a medium for the intended cure.

We may notice that we have said little here about the death drive — our object of study in this article. In Freud’s clinic, the concept is particularly useful as a theoretical representative of diverse clinical phenomena, such as the negative therapeutic reaction (Freud, 1923/2017f). More than that, Thanatos is useful because it belongs to the subject and yet is, in a sense, unknown, alien, and beyond that subject’s control. The analyst, observing manifestations of the death drive from a privileged position, must discover, identify, and reveal it to the analysand through interpretation. In Ferenczi’s *laissez-faire* clinic there are, of course, interpretations; but what is at stake is less the unveiling of a drive conflict narrated through recollections and more the reviviscence of primitive affective states within a welcoming, curative setting.

The maternal role, to reiterate, becomes decisive in Ferenczi’s thought — at a theoretical level, with the proposal of a universal tendency to return to the womb, and at a technical level, with ideas such as the analyst’s benevolence and tact. Equally important is the notion of repetition — particularly therapeutic reproductions that contrast with the original pathogenic situations. All of this points to yet another crucial horizon: the centrality of the environment, which is capable of producing both suffering and cure.

Destruction as Environment-Linked

In *The Unwelcome Child and His Death-Instinct* (Ferenczi, 1929/2011h, pp. 56-57), Ferenczi examines patients with “unconscious tendencies toward self-destruction,” “suicidal tendencies,” and a broad range of people “almost free of the inhibitions of the will to live,” who lack any “taste for life.” We know that in works such as *Civilization and Its Discontents* (Freud, 1930/2017h), Freud attributed human destructiveness — against oneself and others — to an innate death drive. Since texts such as *The Economic Problem of Masochism* (Freud, 1924/2017g), he held that, early in life, Thanatos is expelled from its primordial amalgam with Eros toward the external world, where it manifests as the destructive drive. For Ferenczi (1929/2011h), the lethal element here arises from the fact that these individuals were originally children poorly welcomed by their families:

I merely wanted to indicate the probability that children received with harshness and without affection die easily and willingly. Or they resort to one of the numerous organic means to disappear quickly, or, if they escape that fate, they will retain a certain pessimism and aversion to life. (Ferenczi, 1929/2011h, p. 58)

Ferenczi thus proposes a predominance of the death drive at the beginning of life. He concludes that a strong influence from a positive, welcoming, loving environment is necessary to enable healthy development in this initially unpromising scenario:

Fascinated by the impressive impetus toward growth at the beginning of life, there was a tendency to think that in newborns the life drives would be largely predominant; in general, one tended to represent the death and life drives as complementary series in which the maximum of life would correspond to the beginning of life and the zero point of the life drive to old age. Things do not seem to be exactly like that, however. In any case, at the beginning of life — both intra- and extra-uterine — the organs and their functions develop with surprising abundance and speed, but only under particularly favorable conditions of protection for the embryo and the child. The child must be led, through a prodigious expenditure of love, tenderness, and care, to forgive the parents for having brought it into the world without asking its intention; otherwise, the destructive drives soon come into action. And, fundamentally, this should not surprise us, since the infant, unlike the adult, is still much closer to the non-being of individuality, from which life experience has not yet separated it. Sliding back into that non-being could therefore occur much more easily in children. The “vital force” that resists life’s difficulties is not, then, very strong at birth; apparently, it is strengthened only after progressive immunization against physical and psychic assaults through tactful treatment and upbringing. In line with the decline in morbidity and mortality in middle age, the life drive could, in maturity, counterbalance tendencies toward self-destruction. (Ferenczi, 1929/2011h, p. 58)

A similar idea had already appeared in *Stages in the Development of the Sense of Reality* (Ferenczi, 1913/2011c, p. 60), where a footnote points to “a tendency to inertia or regression, dominating organic life itself,” such that “the tendency toward evolution, toward adaptation, etc. would, on the contrary, depend solely on external stimuli.”

In *The Problem of Affirmation of Unpleasure* (Ferenczi, 1926/2011f, p. 439), he likewise refers to “primitive organisms” that “are still so close to the point of emergence from the inorganic that their destructive drive has far less distance to travel to return to it and is therefore much more effective.” In the same text, Ferenczi introduces the idea of a “troublesome object” (Ferenczi, 1926/2011f, p. 436) and its effects in triggering death-laden tendencies:

The appearance of this obstacle entailed a disentangling of the drives under the crescendo of the aggressive and destructive component; after the satisfaction obtained through revenge, the other drive component, love, also seeks satisfaction. Everything happens as if the two kinds of drives neutralized each other when the ego is in a state of repose — like negative and positive electricity in an inert electrical body — and as if in both cases particular external influences were necessary to separate the two kinds of currents and make them active again. (Ferenczi, 1926/2011f, pp. 436-437)

All of this underscores the decisive influence of the environment. It is the environment, after all, that can inhibit early destructive tendencies and allow healthy development. And it is likewise the environment that, by poorly receiving the individual, can promote a drive disentangling that unleashes enduring deathward mechanisms — such as the feeling that life is not “worth living” (Ferenczi, 1929/2011h, p. 56).

Let us return now to Ferenczi’s earlier propositions. In *The Concept of Introjection* (Ferenczi, 1912/2011b, p. 209), he defines introjection as “the extension to the external world of the originally autoerotic interest, by introducing external objects into the sphere of the ego,” as opposed to projection. In that text — and in *Transference and Introjection* (Ferenczi, 1909/2011a) and *Stages in the Development of the Sense of Reality* (Ferenczi, 1913/2011c) — introjection predominates in the initial period of life, the stage of omnipotence governed by the pleasure principle, while the projective counterpart characterizes a later moment, when a relation to the external world is recognized and developed: the sense of reality.

We have already emphasized that, for Freud, the death drive arises from within before finding its path outward. Under this view, prohibitions on satisfying the destructive drive toward objects eventually direct Thanatos back inward in the form of the superego, or moral masochism (Freud, 1924/2017g). Freud's death drive thus emanates from the intrapsychic realm and returns to it.

Again foregrounding the importance of the environment, Ferenczi offers notions such as *introjection of the aggressor*¹. This account explains how people exposed to extreme situations of violence and fear may “automatically submit to the aggressor's will, anticipate his slightest wishes, obey while forgetting themselves, and identify themselves completely with the aggressor” (Ferenczi, 1933/2011k, p. 117). The bad objects internalized in this way do not integrate well with the ego; they behave like “split-off, foreign transplants” (Ferenczi, 1985 [1932]/1995, p. 81) that can generate behaviors mirroring those of their source. In other words, the result is “a victim who, identifying with the aggressor, employs the aggressor's very mechanism” (Avello, 2006, p. 159). From this Ferenczi derives notions of pathological modes of the superego. In *The Clinical Diary* (Ferenczi, 1985 [1932]/1995) he speaks of a “mad superego” (p. 50) and a “bad superego” (p. 77); another posthumous note mentions an “unassimilated superego” (Dupont, 1998, p. 78); and Avello (2006, p. 169) discusses a “ferocious superego.” These are, in short, foreign bodies produced by an action coming from outside — not, as Freud would have it, a destructive drive substrate inherent to the subject.

Trauma

The aggressions noted above; the situations to be repeated (or reproduced) under analytic relaxation; and the analyst's stance toward these repetitions — marked by sincerity and tact, in contrast to the original pathogenic scene — lead to a specific concept that occupied a central place in Ferenczi's late thought and practice: trauma.

Returning once more to Freud, we see that trauma was largely absent from his work until it resurfaced with his confrontation with dreams in traumatic neuroses in *Beyond the Pleasure Principle* (Freud, 1920/2017e). At that point, however, the perspective was drive-centered: trauma as a flooding of the psyche by destructive, disorganizing excitations. Little emphasis was placed on the real events from which those excitations may have been released. It was not always so: in the period of the cathartic method — the *paleocatharsis* to which Ferenczi refers in *The Principle of Relaxation and Neocatharsis* (Ferenczi, 1930/2011i) — the traumatic etiology of neuroses was a pivotal point in Freud's theory and practice. The shift in perspective is marked by the famous “Letter 69” to Fliess, in which Freud expresses disbelief regarding the trauma reports — especially childhood sexual abuse by the father — he so often heard from his hysterical patients. Emphasis then moves from the original valorization of lived sexual abuses to ideas of fantasy, psychic reality, and the economic aspect of mental functioning (Laplanche & Pontalis, 2016).

Ferenczi's account of trauma is, of course, quite different. Equipped with the main concepts and technical tools outlined so far, he writes in *Confusion of Tongues Between Adults and the Child* (Ferenczi, 1933/2011k, p. 116):

(...) It can never be stressed enough how important traumatism is — and sexual traumatism in particular — as a pathogenic factor. Even children from respectable, puritan families are, more often than one would dare think, victims of violence and rape. Sometimes it is the parents themselves who seek, in this pathological way, a substitute for their dissatisfactions; sometimes trusted persons — members of the same family (uncles, aunts, grandparents), tutors, or domestic staff — who abuse the child's ignorance and innocence. The objection that these are the child's own fantasies unfortunately loses its force in view of the considerable number of patients in analysis who confess to having had sexual relations with children.

Ferenczi holds that children and adults inhabit different registers—different “languages”: children in passive object-love, in tenderness; adults in passion. Since Ferenczi himself concedes in the Postscript to *Confusion of Tongues Between Adults and the Child* that “the problem of the very essence” (Ferenczi, 1933/2011k, p. 121) of this difference remains open, we draw on other texts to mark the distinction. In *The Clinical Diary* (1995) he writes: “Normal life then begins exclusively with passive object-love. Children do not love; they must be loved” (p. 189). Only after this initial moment does a stage of object-love emerge in which one first takes oneself as object before finally investing love in the external world, as Freud proposed. Adults, then, stand in this final stage of object-love.

Passion involves more than a genealogy of libidinal development. In another diary note, Ferenczi (1985 [1932]/1995, p. 151) writes: “Man becomes passionate and implacable purely as a consequence of suffering.” That suffering begins, as we have seen, with the abandonment of the maternal womb — “a period without passion” — and it is updated by events such as “regulation of organ functions, toilet training, weaning,” which “make every human being more or less passionate.” Passion thus also arises from trauma, whose importance in psychic constitution Ferenczi universalizes (Avello & Candiotti, 1998). Yet, just as psychic configurations vary widely, not all traumas are the same. Here we focus on its pathogenic, disorganizing form.

¹ The use of the term “introjection” in such cases is contested — even though Ferenczi himself employs it. Some authors argue that “incorporation” of the aggressor would be more appropriate. For this debate, see Abraham and Torok (1995), Mourning or Melancholia: Introjection–Incorporation.

Back to *Confusion of Tongues Between Adults and the Child* (Ferenczi, 1933/2011k). Having established the empirical reality of trauma and discussed the frequency of childhood sexual abuse, Ferenczi describes how such cases typically unfold. Adults who are themselves unwell mistake “children’s games for the wishes of a person who has reached sexual maturity, and allow themselves to be carried away into sexual acts without thinking of the consequences” (Ferenczi, 1933/2011k, p. 116). They take the child’s demand for love — passive, tender, playful — for fully genital, active, passionate manifestations: this is the confusion of tongues to which the title refers. This is not the only traumatic abuse. He also describes “unbearable punitive measures,” or “passionate punishments” (Ferenczi, 1933/2011k, p. 119), in which “offenses that the child commits in play” acquire “the character of reality” through punishments imposed by “adults furious, roaring with anger.” Finally, in the “terrorism of suffering” (Ferenczi, 1933/2011k, p. 120), children “are forced to resolve all manner of family conflicts and bear on their frail shoulders the burden of all the other members.” Roles invert: those who should be cared for become caregivers.

Ideally, the victim’s immediate response to any such traumatizing action would be alloplastic — “a real defense against harmfulness, i.e., a transformation of the surrounding world so as to remove the cause of disturbance” (Ferenczi, 1934 [1931-1932]/2011l, pp. 125-126). Yet the “suddenness” of events and the lack of preparedness — born of a prior “feeling of security” and “trust in oneself and in the surrounding world” — may make such action impossible. Avello (2006) adds the asymmetry between aggressor and victim as a precondition — part of the “favorable ground” (Avello, 2006, p. 143) for establishing pathogenic trauma — namely, “a good prior relationship between someone in a position of power ... and someone in a position of submission and weakness.”

In this scenario, shock ensues — a psychic commotion marked by intense anxiety and displeasure. When alloplastic action is impossible, what remains is an autoplasmic solution: “self-destruction which, as a factor that frees from anxiety, will be preferred to mute suffering” (Ferenczi, 1934 [1931-1932]/2011l, p. 127). One consequence is that “no mnemonic trace will subsist of these impressions, not even in the unconscious, so that the origins of the commotion are inaccessible to memory” (Ferenczi, 1934 [1931-1932]/2011l, p. 130). Hence the importance of neocatharsis: by “repeating the very traumatism under more favorable conditions” (Ferenczi, 1934 [1931-1932]/2011l, p. 130), the trauma can be brought “for the first time to perception and motor discharge.” It is also at this traumatic juncture that identification with the aggressor occurs; we have already noted some of its repercussions. The shock also installs the aggressor’s “feeling of guilt” (Ferenczi, 1933/2011k, p. 117) within the victim.

Even after these stages of traumatism, not all is lost. The victim — paradigmatically, the child — stunned, tends to seek help from another person. Yet, as Ferenczi notes, “as a rule, relations with a second trusted person — in the example chosen, the mother — are not sufficiently intimate for the child to find help with her” (Ferenczi, 1933/2011k, p. 117). This is the moment of *denial*:

The worst is really the denial — the assertion that nothing happened, that there was no suffering; or even being beaten and scolded when the traumatic paralysis of thought or movement appears. This is, above all, what renders the traumatism pathogenic. One even has the impression that such severe shocks are overcome — without amnesia or neurotic sequelae — if the mother is present, with all her understanding, her tenderness, and, rarer still, complete sincerity. (Ferenczi, 1931/2011j, p. 91)

After this last phase of trauma, “narcissistic self-splitting” is established (Ferenczi, 1949 [1920-1932]/2011m, p. 290), the most radical mechanism of personality splitting. Part of the subject “regresses to a pre-traumatic beatitude, seeking to make the shock nonexistent” (Ferenczi, 1933/2011k, p. 119). Another part matures abruptly — like a “worm-eaten fruit” (Ferenczi, 1933/2011k, p. 119) that “ripens and becomes tasty too quickly when a bird’s beak pierces it” (Ferenczi, 1933/2011k, p. 120) — or like a “wise baby,” a newborn who “suddenly begins to speak and even to display wisdom to the entire family.” This is “traumatic progression” (Ferenczi, 1933/2011k, p. 120), through which part of the ego becomes a “guardian angel” (Ferenczi, 1934 [1931-1932]/2011l, p. 134) to the regressed part — an instance that “looks from outside at the child who suffers or who has been killed (i.e., it slipped out of the person during the process of ‘fragmentation’) and roams the whole world in search of help.”

Final Considerations

We have examined the proposal of a return to the womb as an alternative to the notion of a return to the inorganic; noted Ferenczi’s valorization of the compulsion to repeat in analysis within the framework of neocatharsis; explored how a subject’s aggressivity and destructiveness emerge from drive disentanglement and identification with the aggressor; and conceptualized trauma both as a mechanism in the constitution of the psyche and as a pathogenic factor — always through a relational lens. In short, we have outlined Ferenczi’s distinctive treatment of the four axes we identified in Freud’s original formulation of the death drive. Yet Ferenczi also advances ideas that do not fit neatly within this schema, especially in writings never published in his lifetime.

In a note titled *Every adaptation is preceded by an inhibited attempt at integration*, he remarks that “instead of ‘death drive’ it would be preferable to choose a word that expresses the complete passivity of the process” (Ferenczi, 1949 [1920-1932]/2011m, p. 271). In *Reflections on the Pleasure of Passivity, On the Male and Female Principles in Nature*, and *The Three Capital Principles*, he discusses egoistic and altruistic drives, aligning the former with life drives and the latter with death drives. He adds: “all this would represent only a slight modification of Freud’s supposition of life and death drives. I would give the same thing other names” (Ferenczi, 1995, p. 41). In *Contribution to the Phallus Cult*, he asks: “should the death drive be posited as a drive of goodness and self-sacrifice, something maternal-feminine as opposed to the masculine?” (p. 91).

More explicit divergences appear in notes such as *Fakirism*, where we read: “Death drive? Only the individual’s death (damage)” (Ferenczi, 1949 [1920-1932]/2011m, p. 295). In *A Catalogue of the Sins of Psychoanalysis*, he states that “the idea of the death drive goes too far and is already tinged with sadism” (Ferenczi, 1985 [1932]/1995, p. 200). Nowhere, however, is the critique as stark as in a brief undated note — estimated to be from August 1932 — published more than 60 years later by his literary executor, Judith Dupont: “Nothing but life drive. Death drive, an error. (Pessimist)” (Dupont, 1998, p. 82).

What, then, was Ferenczi’s definitive view of Thanatos? There is no simple answer. “Officially,” he worked with the concept as we have shown; he also conspicuously omitted it from his final construction of trauma in *Confusion of Tongues Between Adults and the Child* and even in the posthumous *Reflections on Trauma* (Herzog & Pacheco-Ferreira, 2015). “Unofficially,” harsher critiques and reformulations remain fragmentary. Some commentators, such as Avello (2006), suggest setting the death drive aside in Ferenczi’s thought, which was moving toward a new metapsychology distinct from Freud’s. Others, like Molin et al. (2019), prefer to explore his singular perspectives on Thanatos.

Ferenczi died only months after most of the posthumous notes cited here were written, the victim of pernicious anemia. We will never know in which directions he would have taken these ideas. In what he actually published, he never publicly denied the death drive. Our reading is that, particularly in the final phase of his work — the only period in which the concept could be addressed, given its coinage in 1920 — he increasingly foregrounds the environment, with consequences for his treatment of Thanatos as well. For Ferenczi, the subject’s destructive force is triggered through relation to the other — when the other receives the subject poorly, assaults, abuses, or traumatizes. And this same other is the only agent capable of neutralizing the death drive, whose potential is especially great at the outset of life. Whether within the early family milieu or in the psychoanalytic clinic, the relational field eclipses the purely drive-based account.

It is, of course, granted that something belongs to the subject beyond environmental influence. Eros is unquestionable for Ferenczi, and we do not share Avello’s (2006) conclusion that there is no death drive in his thought. Our aim has been to show the specific place and meaning the concept assumes vis-à-vis Freud’s original proposal. As environmental influence — i.e., the subject’s relations with those around them — takes center stage in Ferenczi’s theory and clinic, Thanatos, and the drives as a whole, can play no more than a supporting role.

These conceptions “opened new paths for successors, whose fruitfulness becomes increasingly apparent as research progresses” (Dupont, 1995, p. 11). Indeed, Michael Balint, D. W. Winnicott, and many others followed the fertile path laid by the thinker who “established the foundations of an object-relations theory, was the first to develop an intersubjective theory of the psyche, and to conceive the analytic situation as a field created between two persons” (Avello & Candiotti, 1998, p. 281): Sándor Ferenczi.

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