ANALYTICAL PSYCHOLOGY

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Summary
The fundamental principles of analytical psychology are introduced through C.G. Jung’s work and research, so deeply rooted in his personal existential experience, in his aptitude to empirical observations, and in his vast culture and wide-ranging studies.

Jung’s research can be divided into three different phases. In the psychiatric phase (from 1900 to 1912) the fundamental core of psychic dynamics and organization: the “feeling-toned representation complex” is individuated, representing a psychic unit endowed with a certain degree of specificity and autonomy. The affect autonomy and its role in the organization of psychic life was subsequently transformed into the concept of “psychic energy.” This concept accounts for the relationships existing among all psychic contents, both conscious and unconscious. In a subsequent phase (from 1912 to the 1920s) the structural and dynamic organization of psychic life is defined. The unconscious contains all that is not in direct touch with consciousness. It consists of a personal sphere and of the collective unconscious archetypal structure that Jung had detected in the cultural productions of all times as well as in dreams, visions, and hallucinations. Finally, in the third phase, the theorization of quantum physics and the interpretation of alchemy as a projection process of psychic contents offer Jung the language and the conceptual tools for a holistic view of psychic life. In this vision, consciousness, in its process of gradual integration of the unconscious contents, is transformed along the individuation process.

Individuation is viewed as a specifically human task that leads personality, previously centered in the power of the ego complex, to the wider horizon of the self, that is to the
never attained and never perfected psychic wholeness. Individuation, emerging from the relationship between the ego and the self, is the motor that drives the evolution of individual consciousness and of the collective cultural dimension. Moreover, the therapeutic relationship is viewed as the source of the transforming and individuating potentialities of the relationship between consciousness and the unconscious.

Since its very beginning, Jungian theorization became the origin of a general psychology and to a symmetric psychopathology. A general vision of analytical psychology is briefly presented tracing the theoretical lines of the development of Jungian studies.

1. Introduction

The term “analytical psychology,” introduced by C.G. Jung (Kesswil 1875–Küsnacht 1961) in 1913 to define his psychological theory, refers to a complex and elaborate theoretical system concerning the organization of psychic life as it can be perceived in the manifestations of individual psychic experiences and in collective cultural expressions. “Analytical” because the psychological conception presupposes an analytical process, that is to say the inclusion of the unconscious. Subsequently, Jung also adopted the definition of “complex psychology” the better to characterize his view of the psyche from a theoretical point of view. The term analytical psychology also refers to the psychotherapy that is based on this theoretic system.

Analytical psychology, though born from the bifurcations within the original body of psychoanalysis at the beginning of the twentieth century, actually moves from autonomous cultural and scientific assumptions that draw their inspiration from the philosophy of nature and from the basic formulation of romantic psychiatry. Jung’s approach to psychiatry is based on a very clear idea of the research field of psychology, that is, the scientific study of the human soul through those objective expressions that he defined as psychic realities. In all his studies and research, he aimed at reaching the objectification of psychic reality through the analysis of the most different materials, from the hallucinations and the delusions of mental patients, to cultural productions, to his own personal existential experience. Jung explored this vast horizon with a non-reductionist attitude that led him to oscillate between dogmatism, seen as a basic need of objectification, and a relativistic attitude intended as a methodological tool.

During his research on dementia praecox (schizophrenia), the careful and sympathetic observation of mental illness as it occurred in individual patients analyzed through a specific instrument of survey—the word association test—led him to identify feeling-toned complexes as the organizing principles of psychic life. He regarded psychic life as the result of the dynamic processes among those complexes with reference to a particular complex, the ego complex, viewed as the center of individual consciousness. This view of the psyche sets normality and pathology along a continuum and, rather than listing a specific psychopathological inventory, suggests a common root of mental diseases but at the same time the oneness of every single pathological manifestation. On the other hand, it also indicates the peculiar elements and the organizing modalities of psychic life.
According to Jung’s theory, the fundamental instrument in the study of the psyche is analysts’ subjectivity, their psychological constellation; it thus rejected the claim of positivism and scientism that pretended to reach an objective knowledge of the psychological world and that was at the basis of experimental psychology and of the deterministic organization of the unconscious in Freud’s theory. The most immediate consequence of this epistemological position is the possibility of focusing both on the observer and on the observed object, in this case “the other” in the sense of psychological determiners, through a net of reciprocal influences and relations. Thus psychic life is viewed in a continuous exchange between individual requirements and the collective milieu, besides being shaped from the inside and organizing itself in “an individuation process” aimed at the realization of an integrated and mature personality that can be threatened or interrupted by conflicts and mental disturbances.

The individuation process takes place thanks to the continuous transformation of individual consciousness as it integrates the contents of the unconscious that is regarded as a sort of inexhaustible reservoir, not only of removed experiences but also of evolutorial potentialities and hitherto unconscious materials that never succeeded in reaching consciousness. The collective dimension is not intended exclusively as the social and historical background from which the individual emerges but also as a stratification of the experiences of the species and of its cultural evolution condensed and expressed in myths and in religious language. In this sense analytical psychology has an anthropological dimension while opening at the same time to the vast domain of human sciences.

The meaning of personal realization through confrontation with the unconscious contents in the course of his own individuation process is described by Jung in the opening lines of his 1963 autobiography *Memories, Dreams, Reflections*, where he states that his life has been a self-realization of the unconscious since everything in the unconscious seeks outward manifestation, and the personality too desires to evolve out of its unconscious conditions and to experience itself as a whole.

Thus the theoretical system drawn by Jung embraces a general psychology and a symmetric psychopathology and tends to attribute to the psychological dimension the status of instrument *par excellence* of human knowledge and experience. However, this model is neither self-included nor all-inclusive, as it takes place through the inexhaustible and evolutorial activity of the psyche. In coherence with this interpretation, which pointed out the inadequacy of any theory, Jung did not want to create a rigid theory and a definite and codified therapeutic system. In his 1935 *Principles of Practical Psychotherapy* he writes that the more deeply we penetrate the nature of the psyche, the more the conviction grows upon us that the diversity, the multidimensionality of human nature requires the greatest variety of standpoints and methods in order to satisfy the variety of psychic dispositions. Moreover with a closer reference to the relationship between theory and the clinical method, he indicates that although the new, highly differentiated methods allow an unsuspected glimpse into the endless complications of psychic relationships and have gone a long way to putting them on a theoretical basis, they nevertheless confine themselves to the analytical-reductive standpoint, so that the possibilities of individual development are obscured by being reduced to some general principle, such as sexuality.
This suggests that in therapeutic relationships, analysts should assume as the medium to activate analysands’ evolutilional potentials not only their own individual development but, above all, their sensitivity to and awareness of such development.

The implicit difficulty in finding a descriptive level that could account for the wealth of the psychological world from the standpoint of empirical observation and Jung’s personal experience, and at the same time the need to substantiate his theories with references to the history of cultural development, forced Jung to use often metaphorical and evocative language. He tended to formulate theoretical statements in as broad and general a manner as possible and this has allowed the extension of the original system to different scientific fields—humanistic and naturalistic—which makes Jung’s work extremely appealing to contemporary research and full of possibilities for development and interconnections with contemporary streams of thought. Jung’s work does not appear the organic development of a persistently coherent thought. Rather it appears as a sort of texture where different research themes and intuitions run parallel for years to join at a certain point in a new work and then split up again to follow distinct paths, each one integrated into a new stream of thought.

The complexity and intimate coherence of the evolution of Jung’s thought can be identified by three different phases interwoven in their biographical, theoretical, and historical aspects, although it must be admitted that neither a critical comment nor a proper arrangement of the development of Jung’s enormous production exist so far.

The first phase, which can be defined as the “psychiatric phase,” goes from 1900, the year in which Jung started his work at the Mental Hospital of Zurich University, to 1912, the year of the break from Freud. During this period Jung developed his general theory centered on the concept of “feeling-toned complex.” The next phase goes to the end of the 1920s and can be defined as “the phase of archetype and of collective unconscious” since it clarified the role of both individual and collective unconscious dynamics in the development of consciousness and personality. A third phase covers the last 30 years of Jung’s life when the study of the psyche and of matter relationships, starting from alchemy to the recent discoveries of quantum physics, marks “the search for a new cultural and theoretical synthesis.”

A general vision of analytical psychology is briefly presented with reference to the individuation process and traces the theoretic and clinical lines of the development of Jungian studies starting from Jung.

2. The Psychiatric Phase

Jung graduated in medicine in 1899 with a final paper in which he reported the case of a young medium and classified various psychic phenomena from her somnambulism to hallucinations. In this paper mediumistic activities are interpreted as a means devised by the unconscious to overcome the psychological and social impediments that hindered the development of the woman’s personality. The paper, which was published some years later, was favorably commented on by T. Flournoy, a doctor and psychologist who was also interested in exploring parapsychological problems by means of experimental psychology.
At the end of 1899, Jung started his activity as an assistant at the Bürgholzli Mental Hospital of Zurich. This university center was at the time the meeting point of the main European schools of psychiatric thought: the German school of psychiatry of naturalistic-descriptive inspiration, the French schools devoted to the study of different states of consciousness, and the original Freudian theoretic formulation of the role of the unconscious. Each of these three different approaches offered ideas and instruments the better to evaluate and understand pathological phenomena thanks to the synthesis of E. Bleuler, who also took into consideration the family component and the social background as insuppressible influences in the organization of mental processes. Central to the research was the study of the genesis of dementia praecox, its psychopathological form, and its systematic description. In his 1906 essay “Affektivitat, Suggestibilität, Paranoia,” Bleuler speculated on what the destiny of affects was in dementia praecox since the affect world of those patients seemed to disappear. He maintained that the seeming lack of emotional reactions in those patients could be considered the consequence of a mental deficit, that is to say, of the difficulty of forming adequate conceptual representations.

Bleuler thus intended to differentiate clearly affects from any other psychic process connected with perception, sensation, and thinking. In his view, affectivity is to be considered an original and autonomous function that children, even though lacking structured thought, have been endowed with since birth and that they will start to experience during their relationship with their mother. The intellectual functions, which will reach maturation in the course of time, are only necessary for affectivity to be properly expressed and managed. Affects therefore seem to be more strictly linked to drives and instincts rather than to will and intellectual processes. This is a very important distinction and is an element of the wide divergence from Freud. Freud considers sexuality the organic basis of psychic life and sees the sexual instinct as the motor impulse of behavior. For Bleuler, however, the affectivity claims the sexual instinct and elects it as privileged site of its manifestation.

Bleuler’s work clearly shows the research trend at Bürgholzli and the tendency to analyze the essence of affectivity to make it the basis of organic and psychic life. Bleuler proposes a synthesis between organic and dynamic psychiatry, a synthesis already to be found in the theories of W. Griesinger, the most representative psychiatrist of the mid nineteenth century and a distant predecessor of Bleuler as first director at Bürgholzli.

On one hand, Griesinger maintained that the developments in the study of brain pathological anatomy would explain the genesis of mental diseases; on the other hand, he attributed emotions a pathological role and maintained that not properly assimilated clusters of representations were endowed with the power to distort the ego more or less heavily. Moreover, he maintained a holistic view of the mental disease that he defined as “unitary psychosis” (Einheitpsychose). Insanity was thus viewed as the product of one all-inclusive disease with different stages and symptoms that do not make up different mental diseases, but rather specific stages of one single disease whose clinical evolution is influenced in its various manifestations by individual patients’ specific reactions. It is personal behavior and reaction modalities that cause the transition through various stages of insanity.
The role of affects in psychic life and mental disease viewed in its all-inclusive nature and in the individual manifestations due to individual patients’ personal characteristics makes up the scientific background of Jung’s research on dementia praecox.

The research started when Jung joined the staff at Bürgholzli where he first made use of the “word association test” as a research instrument. This test consisted of a sequence of carefully chosen words: patients were asked to respond to the stimulus word with the first word that came up to their minds, the reaction time being carefully measured. By choosing certain delayed response words, it was often possible to connect them to meaningful underlying associations.

The working hypothesis was that the basic symptom in dementia praecox was slackening of the associative tension, a sort of decrease in mental capacities because certain heavily emotion-charged representations occupied the mental substratum and withheld it from consciousness.

Jung’s mainly intended to analyze and describe complexes of representations that, in the above context, were called feeling-toned complexes. He tried to attain his goal by perfecting the word association test and submitting it to a wide series of cases whose statistical evaluation led him to the distinction of complexes into normal, accidental, and permanent. These last assumed a particular meaning in patients affected by hysteria and dementia praecox. These studies led to the individuation of the constitutive aspects of psychic life whose elements, such as thoughts, feelings, and sensations, are passed on to consciousness in the form of definite units called “complexes.”

In his work *The Psychology of Dementia Praecox* (1907), Jung reports the detailed analysis of the case of an old patient. The choice of stimulus words that seemed to be the key words of her delusions and hallucinations had allowed him to identify a great number of complexes that expressed compensatory aspects and the implementation of wishes quite opposite to the patient’s poor and unhappy life.

Unlike in hysteria, where associations revealed a wound that could be healed if the complexes were assimilated by consciousness, in dementia praecox psychic life remained fixed to complexes and this fixation was impossible to overcome. Although the mental decay observed in dementia praecox was attributed to a “toxin” liberated by the powerful emotional tone—a tribute paid to the organic component in keeping with the naturalistic approach still relevant in Bleuler—Jung attributes a primarily psychic etiology to dementia praecox. In fact, after overcoming some divergences with Bleuler, he argues that psychotic delusions are expressions of attempts to organize a new vision of the world.

Dementia praecox, later defined by Bleuler as “schizophrenia,” is no longer regarded by Jung as a definite pathological entity but as the extreme manifestation of a psyche gradually overwhelmed by the sufferings due to the strength reduction of the ego threatened by the complex contents. This approach to pathology within the framework of a unitary psychosis makes dementia praecox the furthest limit of pathological potentialities and a metaphorical model through which all other mental disorders can be interpreted, since they represent less impressive manifestations of one and the same
disease, both from a clinical standpoint and from the point of view of patients’ life experiences.

The concept of feeling-toned complex will become a key issue and will persist in all Jung’s works until 1960. It represents a psychic unit endowed with a certain degree of specificity and autonomy. The complex, as Jung himself specified, is the image of a certain psychic situation that is strongly accentuated emotionally, it has a powerful inner coherence, its own wholeness and, in addition, a relatively high degree of autonomy, so that it is subject to the control of the conscious mind to only a limited extent, and therefore behaves like an animated foreign body in the sphere of consciousness.

The whole of this psychic structure is usually under the domain of the ego complex. The ego is the subject of consciousness and, at the same time, the center of consciousness as it owns a high degree of continuity and identity since all the experiences of individuals’ inner worlds and of the outer world pass through the ego to be perceived. As a matter of fact, all the representations that constitute it are accompanied by the powerful, continuous, and vital affect tone that characterizes all somatic sensations.

In this sense, the ego complex is just one of the many complexes that make up our psyche and, as the center of the field of consciousness, it implies the possibility of assimilating unconscious contents. Sometimes, because of a particular weakness of the ego complex or, vice versa, because of the increase in the affect intensity of another complex, consciousness is invaded and occupied by psychic contents that the ego will perceive as extraneous and unusual.

All contents not assimilated by the consciousness and based for instance on subliminal perceptions or representing creative contents, behave like complexes in the sense that they are endowed with an autonomy of their own. In artistic and religious manifestations such autonomous contents may sometimes appear to be personified. The more deeply the unconscious contents are rooted, thanks to the affect, in the instinctual world of individuals as members of their species, the stronger the coercive power of the unconscious content on the consciousness will be. In its turn, the affect is rooted in generalizable experiences of an individual nature but deeply founded in the infant-mother relationship.

On the whole, the representation organization is sustained by dynamics that cannot be represented and that belong to what is called the psychoid matrix; which was in Bleuler’s thought a sort of psycho-biological matrix. Consciousness tries to appropriate unconscious contents and in so doing they become personal experiences fitted in consciousness development. This process, linked to the relations of complexes with consciousness and with the development of its integrative capacity, allowed Jung to reintroduce the uniqueness component in the deep dynamic structures. The concept of the psychoid matrix will subsequently be developed by Jung, in the psychological sense, also thanks to contributions from such disciplines as physics, mathematics, and alchemy.

The individual psyche, therefore, is not a unique and indivisible whole, but can split up into lesser autonomous units. In 1947 in On the Nature of Psyche, a text that presents a
completed form of the psyche organization hypothesis as it had been drawn in the studies of the psychiatric period, the possibility of dissociation is clearly regarded by Jung as a general tendency, characteristic of both healthy and unhealthy minds.

The superiority of the ego complex is thus relativized and personality integrity is not taken for granted but rather is viewed as a process that pertains to the evolitional history of psychological life.

The results of the research on the word association test concerning the split contents of the unconscious seemed to confirm experimentally Freud’s thesis about the role of traumatic memories on the unconscious dynamics and on dreams.

In Freud’s theory these traumatic memories are linked to the destiny of sexual drive. Jung, however, attributed a deeper dynamics to affectivity than to sexuality, thus remaining more faithful to Bleuler’s theories.

The last phase of the psychiatric period is marked by Jung’s increasing interest in psychoanalysis. His relationship with Freud, based on reciprocal esteem and cooperation, brought Jung to acquire a relevant position in the psychoanalytical movement and to be elected in 1909 the first president of the International Psychoanalytic Association and sole director of the *Jahrbuch für psychoanalytische und psychopathologische Forschungen*, the first review of psychoanalysis.

In those years Jung worked out a personal view of the basic processes that contribute to the shaping of psychic life and explained them in lectures and short essays and, more exhaustively, in his “Wandlungen und Symbole der Libido” published in the *Jahrbuch* in two parts, in 1911 and 1912. The publication of this work signaled the final and painful break from Freud: the concept of libido starts from Freud’s original conception based on the sexual instinct but becomes in Jung’s theory a more general vital energy.

As Jung himself later explained, the contrast with Freud regarded the “basic postulates” of a new theory of the psychic life; but the break was also due to the cultural climate of the time and the controversies about the discovery and definition of the unconscious process and to the different fields of clinical research—neurosis for Freud and psychosis for Jung—as well as to temperamental reasons. In the following years, this last aspect led Jung to focus on the role of the observer’s subjectivity in the observation of psychic phenomena.

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Bibliography


Biographical Sketch

**Concetto Gullotta** was born at Fiumefreddo di Sicilia on March 14, 1940. A medical doctor and a neuropsychiatrist, he worked in Rome University as a CNR researcher till 1973 and at SMI Guidonia (Rome) Psychiatric Hospital until 1975. At present he is an Associazione Italiana di Psicologia Analitica (AIPA) analyst, AIPA president, and director of the *Studi Junghiani* Review (1997–2002). His main research field is the study of the relationship between analytical psychology, psychopathology, and psychiatry from both the historical and the clinical points of view. He works and lives in Rome.