

Inspired by Erich Fromm

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Abstract: This paper discusses some reasons Erich Fromm's thinking is essential in analytic treatment and training today. Nevertheless, one frequently encounters resistances when presenting his ideas to candidates in psychoanalytic programs in the USA. Trends toward relativism have diluted the sense of purpose in psychoanalysis. This makes Fromm's passionate dedication to human freedom and self-actualization crucial. But, ironically, the postmodern sensibility often contributes to a rejection of Fromm's legacy. The paper offers suggestions about how Fromm's thinking, with its emphasis on authenticity, directness, intensity, full presence, and passionate purposefulness, can be fruitfully integrated into an interpersonal psychoanalytic approach.

When I began preparing for the conference that led to this book, I had a most unusual experience, which brought to mind questions about how Erich Fromm's influence operates. As I researched, I had the sensation that many of the concepts I have developed in the last thirty years or so were more indebted to Fromm than I had realized. Of course, I always knew I had been influenced by his thinking, but not to this extent. I would have expected it to be somewhat disconcerting to find out that "my" ideas were not very original, but, actually, it was immensely pleasurable. I felt as though I had, at last, found my home.

How does Fromm's influence work?

What does this say about how Fromm's influence works? How did I come to write about ideas that I thought were mostly my own, but were really so heavily indebted to him? Had I read these ideas years ago, squirreled them away, and "discovered" them without realizing where they came from? Or, imprinted by Fromm himself, did my analytic parents, my training analyst, supervisors, and teachers convey more of his ideas than I consciously knew, during my candidacy at White? I am aware that I read Fromm hungrily in college, and ever since. But when I wrote my papers and books I didn't realize how much of a debt they, and I, owe to him.

I think we can learn from this about how Fromm's influence generally works, although perhaps my experience is somewhat idiosyncratic. A few examples will have to suffice. I offer here a few of the ideas I now see were very similar to Fromm's in order to encourage a larger discussion of the contemporary relevance of Fromm in psychoanalysis.

1. *The way the analyst focuses is an expression of values, intentions, and feelings:* Reading Rainer Funk's paper, "Direct Meeting" I was struck by his description of how much Fromm expressed in his way of establishing eye contact. In Funk's words, "His gaze corresponded to his way of being interested in my inner life, my soul" (Funk 2009, p. 61). This reminded me of an experience of my own. As a candidate I volunteered to present a case to Alberta Szalita, in an all-day-long conference at the New York William Alanson White Institute. The day was unforgettable and formative for me. The unwavering intensity of her focus on me was palpable. I felt as though her eyes reached into my innermost being, and saw into me as one can see into clear water, to its very depths. Many years later, writing (Buechler 2008) about focus as an interpretation, and an expression of values, affects, and intentions, I credited Szalita as the source of my view about what focus can express. But now I wonder whether the idea really came from Fromm, and how that may have happened. Did Fromm influence Szalita to communicate through her focus, and did she then pass this on to me? I also wonder whether reading and absorbing Fromm helped prepare me to pick this up from Szalita. And I know that many who trained me were profoundly affected by Fromm. Perhaps they all contributed to pri-

- ming me for the impact Alberta Szalita's riveted and riveting focus had on me, about thirty-three years ago, on a day I will never forget.
2. *The importance of attempting to "heighten the immediate reality and concreteness of the situation" as the patient talks about an experience:* Reading an article by David E. Schecter (2009), as I prepared for the conference, felt truly uncanny. He describes some of Fromm's methods for connecting the patient with immediate experience in words that recall to me some of the advice I have so frequently given supervisees. I can't count the number of times I have told them that it doesn't have much impact to develop a fine, abstract theory about the patient, with the patient. Experience is what changes people. I didn't realize how closely this connects with Fromm's teachings.
 3. *The centrality of the analyst's courage:* Ruth M. Lesser (2009) described Fromm as expressing how much courage it takes to be an analyst. This has been a central theme in my own writing. Of course I knew Fromm wrote a great deal about human courage, but I didn't realize how much he referred to the analyst's courage.
 4. *The importance of embracing the paradox that human beings express ourselves in characteristic patterns, and nothing human is alien to us all, but we are also very much individuals:* In much of Fromm's work I now see the effort to recognize patterns that recur in human beings, but also acknowledge each person's unique individuality. Holding the tension between these viewpoints has always challenged me in teaching the course on diagnosis at White. For years, I saw myself as finding my own way to deal with Sullivan's ideas about personality patterns and individuality. I didn't realize how closely my understanding of this issue follows that of Fromm.
 5. I was certainly aware that *Fromm's emphasis on values* directly influenced my own writing, especially in my book (Buechler 2004) on *Clinical Values*. I knew that his attitude of cherishing truth deeply affected me. But when I have asked supervisees to voice "inconvenient truths" and become "radical truth tellers" I have not always consciously connected these ideas with Fromm, although I think I could have done so.
 6. My belief that clinicians should aim for *relatively non narcissistic investments in our patients* now seems to me not unlike Fromm's way of ex-

- pressing “central relatedness” (Fromm 2009, p. 18). In his words: “Then I do not think about myself, then my Ego does not stand in my way.”
7. Consciously, I thought it was Edgar Levenson’s influence that made me so careful at the outset of a treatment not to promise more than I know the work can deliver. But now I read Fromm’s words, “When you come to me, I will be completely open to you, and I shall respond with all the chords in myself which are touched by the chords in yourself. That is all we can promise, and that is a promise we can keep” (Fromm 2009, pp. 26–27). Again, I ask, was Edgar influenced by Fromm? Or, did Fromm, Edgar, and I have some similar experiences that led all three of us to take this position?
 8. My thinking about the *role of empathy in treatment* has evolved a great deal over time. I think it has circled closer to Fromm’s. I love what Harold Davis wrote about Fromm. “His directness was a means of being in touch with a person without physically touching; the essence of empathy” (Davis 2009, p. 87).

Fromm’s passionate promotion of passion in treatment was certainly known to me, and directly affected my work. His privileging of the power of human feeling has always very much appealed to me. His thinking about hope, his open promotion of biophilia, his distaste for cliché, canned interpretations, and sentiment, his compassionate humanism, his willingness to take positions, and stand up for what he believed in, his championing of freedom, have moved me all my adult life. What has surprised me, over these last months, is the specificity with which Fromm’s ideas antedated so many of my own. I know that I did not consciously, deliberately fail to note how much Fromm affected my clinical writing and practice. I will continue to think about how this happened, because I believe that if I could understand it better, I might be able to contribute something about the process by which our analytic ancestors live on in us.

Teaching Fromm Today

In thinking about these issues, I posted a request on William Alanson White’s listserv for reflections about experiences of teaching Fromm’s work

to candidates and others today. This is hardly a scientific inquiry. But I did get some interesting replies. Here are a few excerpts.

A graduate of WAWI wrote that when he taught at a small institute and assigned a paper by Fromm, “it’s amazing how relevant and prescient his work still is...” But then he asked whether I think Fromm has become out of fashion.

Someone who is still a candidate and teaches a practicum has assigned students to read chapters from *The Art of Loving* (Fromm 1956a) and *The Sane Society* (Fromm 1955a). Her own attitude about Fromm is very positive, but she offered these thoughts about her current masters level counseling students. “They are all ‘digital natives’ and don’t know life without a cell phone, texting, email, social media, etc.” She goes on to say that this technology often does little to foster intimacy with others. “Some students can barely articulate a definition of interpersonal intimacy.” She went on to speculate that Fromm’s ideas about directness and his approach, with its immediacy of experience, may be particularly challenging for some students in their twenties today who are not familiar with, or comfortable with direct, immediate interpersonal interaction.

Emily Kuriloff, a graduate of WAWI, has recently published a book, *Contemporary Psychoanalysis and the Legacy of the Third Reich*. In it, she offers an appreciation of Fromm’s contribution, in its humanism and ideas about the individual’s agency, but also some criticism of his thinking. In her own words, Fromm leaves us a “choice” between going in the exalted direction of humanism or the much less exalted direction of surrendering to authority. She asks, “Where is Fromm’s tolerance for the grey area that is so characteristic of a psychoanalytic awareness, the struggle back and forth that is itself transformative, and moreover, the mourning for what is always lost by virtue of one’s having chosen?” (Kuriloff 2014, pp. 19–20). Kuriloff speculates that Fromm’s WWII experiences contributed to this polarizing tendency.

Personally, I have noticed a trend in candidates toward looking for theory that tells them precisely how to react in sessions with their patients. They don’t find this kind of concrete direction in Fromm. Some, as a result, reject his writing as too complicated, theoretical, and abstract. Perhaps ironically, others view him (along with the other interpersonalists) as too directive and superficial. In other words, candidates who want a script to read in

sessions dismiss him as concentrating too much on underlying causes, but classically inclined analysts reject him for not working deeply enough.

Cortina's paper in this volume summarizes some of Fromm's contributions, and suggests some ways that current research in attachment theory, evolutionary sociobiology, and other recent research efforts could be utilized to correct some of Fromm's errors and supplement his theories. I think these ideas could prove fruitful.

If I had to name the most significant reason for a decline in Fromm's presence, at least, in my analytic neighborhood, it would be the meteoric rise in popularity of the relational school of psychoanalysis. Relational psychoanalysis is immensely attractive, particularly to the younger attendees at conferences in New York, and, increasingly, in many other locations throughout the world. It is hard to capture the reasons for its powerful appeal, but I do believe that (on the whole) the more an analyst identifies with the relational school the less likely they are to accord an important place in their thinking to Fromm.

A paper by Jay Frankel (1998) titled "Are Interpersonal and Relational Psychoanalysis the Same?" illustrates the relationalists' attitude. Frankel suggests that interpersonal analysts like Fromm harbor "a lingering positivism," even when we disavow it. In other words, we think we know objective reality, in contrast to the patient, and we feel relatively free to express it, without worrying about the patient's readiness to hear it, because of our confidence in the therapeutic value of authentic communication. In his words "the interpersonal approach creates what is often a challenging and confronting atmosphere in the treatment room, with a focus on clarity, directness, and honesty in communication" (Frankel 1998, p. 487).

I think many who hear this today, most especially those who are young and in an early stage of their careers, associate interpersonalism in general, and Fromm's writings in particular, with an authoritarian, patriarchal, old-fashioned, moralistic approach. In contrast, they see relationalists as, in his words, "more likely to be comfortable being 'playmates' and going with the flow of mutually, unconsciously directed self-state shifts, involving both patient and therapist" (Frankel 1998, p. 494). In other words, as I hear it, relationalists are better able to level the playing field between themselves and the patient, more aware of their own vulnerabilities and willing to admit them, more comfortable with being pulled into enactments, and better able

to bear uncertainty. When I was in school, Fromm strongly appealed to a young person's appetite for freedom from authoritarian control, and for human equality and human dignity. Now those very appetites are motivating some to turn against Fromm! It is a remarkable phenomenon.

There is something hollow and sad, to me, in the effort many analysts expend to find a theory that will make them popular. Of course this occurs in every school of thought. But I have been to many meetings and conferences that rapidly become competitions for which analyst can reveal greater shortcomings, thus proving that he or she is actually the most humble. Grandiosity peaks through the thin veneer of humility. Some analysts try to prove that they have no vision of health. They just follow the patients' lead, expressing no values of their own. To me, this is the postmodern edition of the classical analyst's neutrality. On the contrary, I think we can't function without the inspiration that conviction can lend us. Passionate desires for our patients can center us and imbue our work with stamina and courage.

But my main argument when analysts profess they are not motivated by their own values is that I don't believe it is true. How we understand health shapes what we focus on, remember, and comment on, whether we know it or not. There is no such thing as value free treatment. When a patient spends five hours a day in hand washing rituals, do we make no judgment? Do we have no hopes, no direction? I believe that some who have dismissed Fromm for his passionate advocacy of living fully don't realize how they convey their own priorities in every session, in their tone, in their focus, in their manner, in their bodies, and in countless other ways. Personally, I think I give patients a better chance to know themselves if I am direct and open about my values so we can discuss the issues. Otherwise patients will still be influenced, but, perhaps, without an ability to formulate their own opinions. I see all analytic treatments as dialogues about what it means to live life as a human being. This dialogue is not always spoken in words. It may be expressed in the interest the clinician takes in the patient, the commitment to the work, or in many other ways.

What can we reply to some of the relationalist's other criticisms? In a discussion of Frankel's paper, Irwin Hirsch made the significant point that Frankel seems to be saying that Fromm was not empathic and nurturing.

If one speaks in terms of empathy, Fromm was empathically attuned to pa-

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tients' wishes toward making the most of themselves, toward the desire for self-actualization. It is inaccurate, however, to conclude that Fromm was unaware of regressive and passive longings. (...) Fromm's attunement to symbiotic desires was acute and motivated him toward efforts to help patients combat the temptations of prolonged and comfortable regressive experience (Hirsch 1998, p. 506).

As for the issue of the common humanity of patients and their analysts, Hirsch says:

Many current analysts tend to view analyst and patient as more alike and human than otherwise. Hierarchies based on perceived respective health have diminished. Fromm and his socialist, humanistic colleagues should get partial credit for this shift in hierarchical attitude (Hirsch 1998, p. 521).

Again, I would suggest, values that Fromm championed, in his time, are being used as arguments against his merit now.

My Personal Integration of Fromm and Sullivan

I feel that Fromm provided, and still provides, a much needed antidote to the more removed aesthetic of the Sullivanian expert. For Fromm we are here, in our profession and, more generally, on this planet, to promote life passionately. I need Fromm. Very often he lends me courage and stamina. He provides a forceful ballast against my becoming too much of a cool, Sullivanian observer. On the other hand, I understand that Fromm can persuade me to be too forceful an advocate for fuller living, perhaps making it hard for some of my patients to express their depressive, hopeless, regressive urges.

Fromm is so different from Sullivan, that it is hard to integrate them into an interpersonal point of view. And yet, I think it is ultimately very fortunate that we can draw on both Sullivan and Fromm. Where Sullivan warns us to beware of evoking too much anxiety in the patient, Fromm challenges us to challenge our patients. Fromm exhorts us to have the courage to leave our own comfort zones, in order to help patients outgrow constraints that have limited their ability to fully live. He can be seen as an advocate of

tough love. He adds a note of urgency. Clinicians should have a sense of purpose about our mission to overcome stagnation. Only honesty and directness are respectful toward the patient. Fromm had a vision of who the patient could become, and a passionate dedication to facilitating growth, as he understood it.

Sullivan's caution can be tempered by Fromm's zeal, and vice versa. Where Sullivan worried about whether a patient was ready to hear something, Fromm confronted, believing the truth really sets us free. I agree with Hirsch when he says that, "Analysis without a touch of Fromm's authenticity and romanticism is a far less rich enterprise" (Hirsch 1998, p. 510).

I have often played with the idea that Sullivan and Fromm recapitulate the old tension between Apollonian and Dionysian cultures. The cooler, more cognitive Apollonian approach emphasizes achieving greater clarity about one's interpersonal patterns, while the hotter, more passionate Dionysian empowers movement and accelerates change. For me, at least, one without the other is incomplete. And a re-examination within psychoanalysis of Fromm's often unacknowledged influence might help keep the tensions in productive dialogue.

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