

Journal of the American Psychoanalytic Association

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IVES HENDRICK, M.D.

*President of the American Psychoanalytic Association
1953-1955*

INTUITIVE PROCESSES IN THE PSYCHOTHERAPY OF SCHIZOPHRENICS¹

INTRODUCTION

FRIEDA FROMM-REICHMANN, M.D.

The papers presented in this panel are the outcome of one set of investigations in this research project.²

The papers are based on the following procedure: Five staff members of the Chestnut Lodge Sanitarium got together for recorded weekly conferences of two hours' duration for a period of nine months. We listened to a part of one of the continuously recorded interviews which one of us had made with a schizophrenic patient whom we all knew. In conference we compared our reactions to the recorded material and to our own comments, in an effort to detect the sources of variations in our reactions, as they related to our differing life histories, personalities, life experiences, clinical experiences and relationships with the reporter. The study of this part of the project is still under investigation.

In our efforts to delineate the factors which promote or inhibit the analyst's intuitive awareness, it became clear that many of these factors have been grouped under headings other than intuition per se. Thus we found ourselves considering such topics as trans-

¹ Presented at the Midwinter Meeting of the American Psychoanalytic Association, New York, December 5, 1953. Dr. Marvin L. Adland's paper, "Countertransference and the Intuitive Processes of the Psychoanalyst," presented at this panel, is not being published with this group of papers.

² This research was started under the auspices of the Social Research Fund, Inc. and has been continued under the auspices of its successor, The Foundation's Fund for Research in Psychiatry.

ference and countertransference, dependency processes, the status of anxiety arising between analyst and patient, and the manner in which these factors relate to the analyst's free utilization of intuitive processes.

Except for Dr. Szalita's paper on Conceptualization, our papers, which are the initial presentation of the first stage of our work, concern themselves to a large extent, with the general elucidation of the influence of these factors in the doctor-patient relationship on the therapist and on the therapeutic process. The special discussion of the analyst's intuitive processes in psychoanalytic therapy with schizophrenics has been, thus far, only one part of this general investigation.

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