



FUNCTIONAL ANALYSIS

ON WORKING ENERGETICALLY

Part II

Historical Material

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Introduction

This is the second of two papers focusing on working from a Reichian energetic perspective. Both papers are intended to make the distinction more clear between working from a psychological point of view compared to an orgonomic functional perspective. The first paper, "Meaning and Expression" (Davis, 1988), delineated Reich's understanding of natural functioning and contrasted it to a psychological orientation of using meaning and interpretation to understand human behavior. This paper views from a functional perspective the relevance of the patient's historical material in relation to a successful therapeutic process

In the November, 1986 issue of the *Journal of Orgonomy*, Dr. Myron Sharaf presents an article that raises the issue that "Reich, in his later years de-emphasized the therapeutic recapture of content and memory and stressed the importance of dealing directly with instinctual energies." He quotes Reich from 1949:¹

"Orgone therapeutic medicine does not attack memories but the present day anchorings of the historical experiences; thus it works with high-pitched realities, and not with shadows of memories from the past. A memory may or may not develop from this process of emotional upheaval. It is of no therapeutic value if it does or not." (J.O., 1986)

Sharaf's position is that Reich had "neglected" ideas and experiences in favor of "affect" and that he had "...jettisoned useful past knowledge (the psychoanalyst's use of personal history) in favor of knowledge unique to his system." Sharaf asks, "How did it happen that the original linkage of affect and idea was broken, that Freud emphasized unconscious ideas to the neglect of affect and Reich emphasized affect to the neglect---in his last years---of ideas and experiences?". (J.O., 1986) His answer is to demonstrate why and how Reich came to "neglect" ideas and experiences, and he concludes that because orgonomy needs the etiology of the past to facilitate the therapeutic process, history taking and memories are essential therapeutic tools.

In this article, I will present Sharaf's arguments in favor of the continued use of etiological material and then try to show that his arguments and examples do not support his position that a historical understanding of material is essential. I will conclude by suggesting that Reich was not "neglecting" historical material in favor of the instinctual, but rather due to his discoveries, a re-interpretation of techniques called for a re-ordering of priorities specifically in regards to the use of etiological material. Furthermore, I will argue that this re-prioritizing is in line with Sharaf's position when he argues in his article that, "In light of a new paradigm, old knowledge is re-interpreted."

¹ This quote is from the editorial disclaimer that appears at the beginning of the article. The statement then goes on to make clear that the College of Orgonomy "...retains the dual thrust of working characterologically and somatically with considerable emphasis on transference phenomena, as well as content, memories and dreams." They do acknowledge though that the point raised by Sharaf is a... "latter theoretical construct of Reich's."



Sharaf states that any new system, spawned from an established one, as orgonomy was from psychoanalysis, has to go through an "adolescent" growth stage whereby it separates from the "parent" system after a period of claiming to be closely related to the original. According to Sharaf, Reich needed to make a clear distinction in technique so that the separateness of his work would be established, and it could continue to develop. I see no problem with the theoretical position, but he does not explain why Reich would, consciously or unconsciously, choose the etiological aspect to declare his separation. In fact, at the time Reich was "separating", psychoanalysis still had one foot in the biological/energetic realm---the libido theory had not yet been discredited. The "storming out of the strangled affect" concept was still in recent memory. In actuality, by staying with the emphasis on affect, and therefore the energetic, Reich was, if anything, maintaining a "traditional" approach, and hardly breaking new ground!

In an earlier article, (J.O., May 1979) Sharaf writes that Reich's emphasis on strong emotional experiences, was in accord with an early concept of Freud, albeit one that was later to be relegated to the psychoanalytic dust bin. And he goes on to say that it is worthy of note that even though Reich had maintained Freud's early concept,

“...he also kept the Freudian stress on analyzing resistances to the welling-up of infantile memories and feelings. He did not attempt to bypass the defensive process...”

And

“Indeed, in the face of various criticisms from different analysts during this period, Reich steadily argued that his own contributions were nothing but a consistent application and extension of Freud's concepts...Later he was to claim - in my opinion correctly - that from the very beginning his approach contained some radical differences from Freud's.” (J.O. #1, 1979)

Sharaf's choice of this aspect of Reich's work as a point of departure only confuses the issue. Viewed in light of the comments above, Reich's emphasis on affect would be seen as an attempt to keep the status quo. Although he was to state in the fifties that he had "left" psychoanalysis in the early thirties, he at the same time maintained that the energetic/affect aspect was exactly where he felt he had never abandoned Freud and his work. Until his death, he maintained that his work was rooted in the further investigation of the biological foundations of early psychoanalysis and that it was this that lead him to the discovery of the orgone.

It appears to me that if Reich wanted to separate from "Daddy" there were more distinct aspects of his work that would have served his purpose better than the affect/historical issue. In *Fury on Earth*, Sharaf points out that in the thirties Reich began to break two of the strongest psychoanalytic taboos: touching the patient, this would violate the principle of analytic neutrality, and seeing the patient undressed. He goes on to say that Freud had worked hard to distinguish between psychoanalysis and medical procedures, in which patients were routinely undressed and touched. Analysts in general were worried about questions of unprofessional behavior arising concerning sexuality if clients were touched in a semi-naked state.

"Touching the patient and seeing the patient either nude or semi-nude remain two of the most controversial aspects of Reichian technique, especially in established circles." (*Fury on Earth*, pp.234-6)

Also, as he points out, respiration became central to Reich's work during the same period. Any of the three above mentioned areas of Reich's work would have served more convincingly to show that a new and separate style was developing.



Later in the article, Sharaf discussed this point from a different perspective. His writings about Reich are filled with a characterological approach and he speculates why Reich was not so interested in early childhood experiences, and concludes that it was because Reich himself had not worked through his own early personal history, and therefore it was blocking his ability to work well with that as a therapist and to see its value in the therapeutic process.²

“His emphasis on resistances, for example, to some extent, downplayed the importance of working through the content of infantile experiences. To put it more exactly, Reich argued that only a consistent analysis of resistances would bring up early memories in their full affective vividness. However, he was somewhat impatient---and grew more so over the years---with the slow working through of childhood events, the repeated review of infantile experiences and fantasies and of the family constellation within which they occurred. ...I would hypothesize that, to some extent this particular weakness was connected with difficulties in working through the details of his own childhood traumas.” (J.O. #1, 1979)

This understanding of working through one's own personal history is the basis for the requirement of in-depth therapy for a trainee in any training program. But the difficulty is that earlier in the same article, he points out that Reich was particularly adept at spotting latent negative transference specifically because, "More or less hidden negative feelings had played such a crucial role in his own life...."(J.O.,#1,1979). This unique and beneficial ability has its source in the same unworked through childhood experiences mentioned earlier, that Sharaf

² The characterological approach that Sharaf uses plagues him throughout the article. In an attempt to work with the "interwovenness" of Reich the man and his work, he clouds the issue. In an article written later the same year, (J.O.Vol.13#2, 1979) he warns against ...”psychoanalytic reductionism” whereby One postulates a flaw or over-emphasis in a person's work and then one 'explains' it on the basis of a personality conflict. This kind of argument is demeaning. It requires the acceptance of the original, unsupported premise... It leaves unexplained why others who suffered from similar childhood experiences did not make of them what Reich did." He also suggests that another shortcoming of this approach is that it leaves out the "greatness" of the man. He then goes on to consistently discuss Reich in psychoanalytic reductionistic terms, with the 1986 article based on "a postulated flaw or over-emphasis". It confuses the issue - Is the consistent review of historical material indispensable in good ergonomic work or not? And, did Reich in fact develop new and more effective techniques?

We know from Sharaf's biography of Reich that he was dissatisfied---angered---with Reich's refusal to work with his own historical material. Should we "psychoanalytically reduce" Sharaf's whole argument to a "postulated flaw" and declare that his own personal dissatisfaction with Reich refusal to work with historical material is the reason he has taken up this argument in his article. Or should we ask the same question he asks: ...why is it that others who "suffered" through this same style of work with Reich did not make of it what Sharaf did? I think not. It is better to go through his logic and reasons and evaluate them singularly without denying, if not their greatness, then at least their relevance.



postulates were such a detriment to Reich, and was the reason for his unwillingness to give due attention to early childhood experiences.

Sharaf is saying that on the one hand, because of his unworked through childhood experiences, Reich had blocked the importance of this factor in therapy, and so could not work effectively with it. Yet, on the other hand, because of this same unworked through material, he had a unique talent for spotting and working with the symptomatic behavior that arises from this material - latent negative transferences. And he ..."kept the stress on analyzing resistances to the welling up of infantile memories and feelings."

It is difficult to understand why in one instance unworked through material is a great disadvantage in working with patients, while in another, the same unworked through material puts Reich at a great advantage. Certainly a characterological trait can be both a benefit and a curse. Reich points out how schizophrenics, being in more direct contact with the energetic streamings, can be incredibly perceptive about themselves and their surroundings despite the overall problems of this debilitating disease. What is missing here is some comment or understanding as to how Sharaf came to the conclusions he did. Otherwise it appears as an arbitrary statement.

Without his understanding as to how he reached his conclusions, others could be easily drawn from the same information presented. For example, just as Reich's early history provided him with the ability to see latent negative transference clearly because it was such a big part of his life, so too could he see that unworked through childhood experiences, which manifest as resistances and transferences, were important but were not a detriment to the therapeutic process if one discovered another way of working without avoiding them. Theoretically, we could say that because of his unworked through material, Reich was able to develop an effective technique with an "over-emphasis" on resistances, that did not require the necessity of going through all of that again and again. Reich was not bored with it, or avoiding it because he was unable to work with it. He had developed a new and more effective technique. Without supporting his statements, Sharaf's position becomes meaningless. It may be true, but we would like to know how and why it is so.

He goes on to discuss his reasons why etiology is important to good orgonomic work and points out that it offers an opportunity for the therapist to employ techniques that he would otherwise not know to use. I believe this is true, but to me a functional evaluation would be more effective than a psychological one under all circumstances. His next two reasons are closely related, the first of which is that going through historical material can be valuable to the patient because he can see more clearly that his symptoms and defenses did not suddenly appear from nowhere, but rather that they have a history and are there for good reasons. This helps to relieve some of the guilt and sense of "badness" experienced by the patient about his defenses and character traits.

The second reason is that at times, a patient's defensive traits can be distasteful to the therapist, and to know the etiology helps the therapist to be comfortable with them because they are justifiable in the eyes of the therapist. If one were to work with Reich's understanding that everyone is right in his own way, or with the similar conceptualization of Carl Rogers' "unconditional positive regard", it would be possible accept these distasteful behaviors not knowing the etiology and without being repulsed. As Sharaf points out in the above paragraph, if the therapist assumes that uncomfortable behaviors do not suddenly appear, he then will bene-



fit from the same process the patient profits from when he understands that there are good reasons for this behavior. As Reich has pointed out, and Rogers' is willing to simply accept, there are always "good reasons" for a patient's behavior, whether we understand these reasons or not. Knowing historical material is then irrelevant, and as Rogers points out, one does not have to like these behaviors to accept them.

At times, focusing on historical material can present more problems than it solves. What happens if the patient does not have enough "terrible pain" to use Sharaf's phrasing, in his or her background to justify the behavior in the eyes of the therapist? The result would be that "unpleasant, if not obnoxious" behavior would be a problem for the therapist. What to do then? I had a patient whose reported personal history did not, in my evaluation, justify her behavior. However, I had no recourse but to believe that her behaviors, which I did not like, were there for some good reason which at that point neither she nor I understood. In this case what it came to was that she was unconsciously mis-representing herself to justify behaviors she saw herself engaging in, when in fact she could not let herself see her true behaviors because she could not justify them to herself or to others. Thus her personal history presentation was not so much incomplete, as distorted and exaggerated to fulfill her neurotic view of herself. She was not oral dependent but passive-aggressive. Her presentation of historical material was by any standards inadequate, and if I had not understood that these behaviors are there for a reason, it would have been very difficult for me to maintain a good working relationship with this woman. My knowledge of her personal history – as she represented it to me - did not help in the therapeutic process, if anything, it interfered.

He then presents a case study from his practice citing examples of how the use of technique is based on the knowledge of the patient's history. After reviewing the case, I will present Sharaf's understanding of how the etiological information was essential to the work. Commenting on each of the examples, I will demonstrate that although the techniques were effective, the necessity of having personal historical material available was irrelevant; that is, what was done could have been done without this knowledge if Sharaf had worked from a wholly functional and energetic understanding.

Case Study and Discussion

"Jack" was a thirty year old man who had a serious throat block that manifested in controlled and slowed speech. He did not speak until he was four years old, "possibly because he was overwhelmed by his mother's rapid, controlling, critical flow of speech." He identified with his mother's controlling aspects but instead of his mother's rapid, dominating style, he used slowed speech to demand that people pay attention to him.

During the session Sharaf was asked by the patient, who had become agitated while Sharaf was speaking to him, to talk slower and later, to "slow down", because it was all too much for him to "swallow." Making a connection between Jack's reaction and his relationship to his mother, Sharaf, with the permission of the patient, re-played the conversation but this time he talked faster while speaking close to Jack's ear. Jack then began "...shouting and sobbing...his throat now open, his voice stronger and clear and his respiration...fuller." Using this case as a foundation for his arguments in favor of the importance of etiological material, Sharaf elaborated on five points in support of his position.



"There are several points here relevant to my argument about the role of the patient's past in organomic treatment. First, such knowledge helped me to understand the patient's objections to my speaking too fast. His complaint, I would add, represented not only an expression of negative transference, but also a realistic criticism of my style. (Real as well as transference elements are often contained in such criticism and both need to be acknowledged by the therapist as well as by the patient.)" (J.O., 1986)

Since Sharaf knows he speaks too fast, what was the advantage in knowing the patient's objection to this? At best, all that it seemed to do was to make the therapist more comfortable so that a counter transference did not arise. But as mentioned earlier, this can be easily avoided by knowing that all behaviors are there for a reason, and therefore it is not necessary to know why they are there to work with them. Another possibility, the knowledge of historical material guiding the selection of what specific techniques to use, is discussed below.

"Second, with the knowledge of the past, my fast-speaking error could be used not in a futile effort to persuade the patient, but to provoke his energetic-emotional expression." (J.O., 1986)

Again, there is no disputing the use of the technique or its effectiveness, but the point is that the knowledge of the historical was irrelevant. Jack had become agitated before Sharaf had realized that his own fast talking was connected to Jack's mother. The issue is not the connection per se, but rather that the knowledge of the history would not be necessary if Sharaf had taken a functional rather than a psychological approach. It is possible to work with the emerging "agitation" directly rather than having to understand what was happening by putting it in a psychological framework, and then only to do what one would do without psychologizing it! Using a psychological model, one would have to think:

"I see something happening here. I think this is transference material from Jack's relationship with his mother, plus real material because I do speak too fast, and now I will do something that will remind him of his mother even more in order to increase his agitation or possibly only elicit the same irritation I get from others when I speak too fast no matter how the other person's mother speaks."

With a functional approach, the therapist could see the rising agitation, and if he wanted to provoke the patient, he would continue what he was doing, which was obviously bringing up strong movement, or could exaggerate it to provoke even further. Sharaf saw the rising agitation but was unable to work with it until he had put it into a psychological (transference) framework so that he could understand that it was connected with Jack's historical material, and only then could he make an appropriate intervention. It is possible to do deep work without the etiological and, I believe, this is what Reich is saying when he writes:

"Again and again, it is striking how the dissolution of a muscular rigidity not only liberates vegetative energy, but in addition also brings back into memory the very infantile situation in which repression had taken effect." (Function of the Orgasm, p.267).

And

"This fact, which is as important as it is typical, cannot be stressed too much: in this case it is not a matter of memory which, under favorable circumstances, produces an effect, but the reverse: the concentration of a vegetative excitement and its breaking through reproduces the memory." (Ibid. p.280)

It is this understanding of human functioning that is the crux of the matter, distinguishing Reich's work from psychology and its dependence on the etiological. Reich's "later constructs" are based on an understanding of how the energetic structures operate, giving a deeper understanding of what psychological components are dependent upon, and as a result, he did not



neglect, but rather re-ordered the importance of the use of historical material in the therapeutic process.

The third reason given by Sharaf is that the session was successful because some trust had developed between Jack and him due to the fact that they had shared the knowledge of the patient's history. As a result, Jack could allow some emotion to come. This is undoubtedly true, but again, there are many other ways to establish trust than through history taking. The issue here is trust, and not the importance of historical material being available to the therapist. In the example given, historical material is a secondary aspect of the trust issue. In fact, most patients will not share their history---what is really personal to them---until trust is established; rather, as trust develops, the personal history revelations become more personal and deeper. Using history taking as a technique of trust-building is a personal choice and it does work as Sharaf points out. But that is a different issue than thinking that history taking is indispensable. Trust is indispensable. Reich is saying that it is possible to do deep work without the need of the etiological a priori. It is important to distinguish here between the issue of trust as an essential part of a successful therapeutic relationship, and the technique used to foster trust: history taking, re-phrasing, even physical exercises. Trust is essential in this relationship however, I do not see any information presented to believe that history taking is.

The fourth point made is a good example of the difference between his approach and what Reich was advocating in his later years. Sharaf states that it is necessary to work through the transference manifestations before going further. It would be important to know for example that a person who was punished for vomiting should not be encouraged to gag, or whose father used his son's crying as a sign of acquiescence should not be encouraged to sob until this is cleared. Again, I am not disputing the effectiveness of this therapeutic principle. But Reich makes the point that memories and associations are made as a result of the emerging energetic processes and not the other way around. If one works with the emerging energetic processes, for example Jack's agitation, and if it is relevant to the situation---Sharaf's talking too fast was the same as Jack's controlling mother---the historical and meaningful connections will be made as a result of the energetic work. And then it is important to work through it because it could become a stumbling block in the therapeutic process. The material can then be worked with in a transference way, but on the conscious level, with the "adult" patient participating. In this manner, the work can largely define itself. What needs to be worked with will surface in an orderly fashion and show itself to be significant when it is significant. It is not necessary to work through all the early material. A functional approach will offer an opportunity to evaluate what is significant. Working characterologically from a functional approach, one quickly sees re-occurring patterns of behavior; that is what character is, repetitious patterns. Working functionally, one works with a pattern and not with every occurrence in the person's life where this character trait manifests. It is not necessary to go through it all, each historical experience, if a pattern exists. Working functionally with known patterns is enough. I suspect that this is one reason why Reich did not feel it was necessary to directly work through all the infantile material.

An advantage of the functional approach is that analysis of what the patient needs can be based on the reality of what is happening at the time, not on the speculation of what may or may not be important material. There is more of a natural "unfolding" of personal material in an order that is a direct function of where the patient is in his development at that moment. It is easy to "see" things that as a therapist one knows are important for the patient to see also.



But always the timing and the presentation are critical. With a functional orientation a great deal of this timing and order is taken care of; the patient brings it up when he or she is ready to work with it, and no amount of persuading and provoking will do otherwise. The final determinate is always the patient's receptivity, and functioning will reveal that. This is true for psychoanalysis when too early an interpretation provides no therapeutic results, as well as in organomic work when pushing the patient only re-enforces the blocking.

The last point that Sharaf makes is that it is useful to mix one's styles and approaches to the work to throw the patient off balance, without manipulating or surprising him unduly. I agree, but I do not see what it has to do with his position that etiological material is essential to good organomic work. Actually, what he is saying is that mixing approaches is useful in good organomic work. He used a combination of psychodrama and Gestalt to re-play what had brought up the original agitation. As far as I understand, this intervention had nothing to do with his position that intended to show that historical material is indispensable. All he did was re-play, in an exaggerated form, what had already happened. Doing this is not dependent upon knowledge of historical material; it is simply good Gestalt work. Varying one's approach can be useful, and there are many ways to do this. Similarly, trust is important and there are many ways to develop it. Neither varying approaches nor building trust is dependent upon knowledge of historical material. It is fuzzing the issue by saying that varying approaches and developing trust are important in good organomic work and they are connected to the use of historical material. This argument is not a validation of the use of historical material; it is arguments in support of the importance of developing trust and using a variety of methods.

Sharaf concludes with a summation of his position that the use of techniques from previous styles of work is both useful and desirable.

"In light of a new paradigm, old knowledge is re-interpreted.", [and] ..."to employ techniques within a new paradigm the same way they were used in an old one scants the re-interpretive task. It blunts the full vitalization of both the old and the new..."(J.O., 1986)

Specifically, he is referring to the use of psychoanalytic techniques that he feels Reich "jettisoned" in his overemphasis on affect at the expense of ideas and memories. He is saying that Reich threw out too much, yet, he is also saying that one cannot use old techniques in the same way they would be employed in the new style of work. The second half of this statement is exactly my position because my understanding of Reich's work is in accordance with Sharaf's view which to employ old techniques in the same way they had been used in a new work blunts effectiveness of both the old and the new. The re-interpretation of the old, within the concepts of the new, is both what is called for, and is what Reich has done with his discoveries.

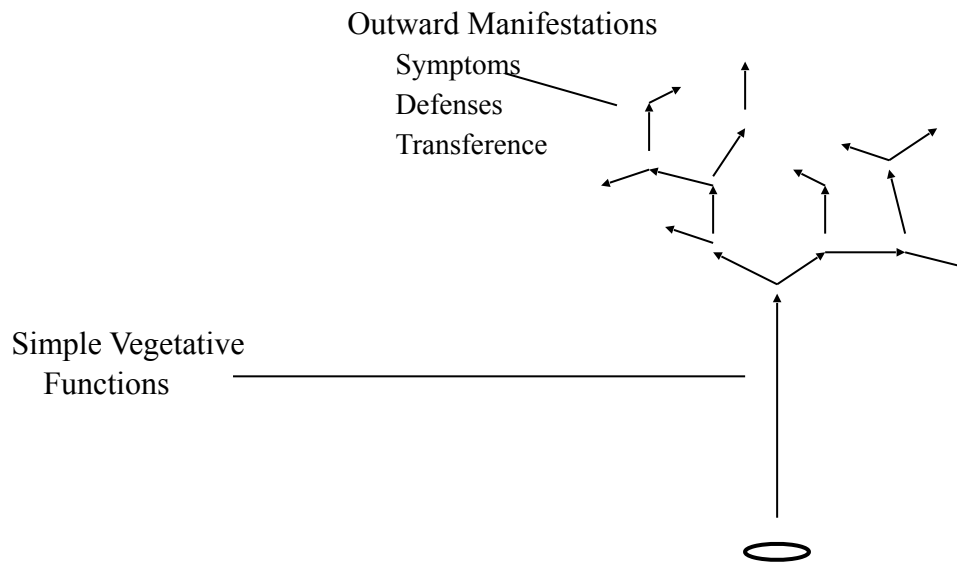
For Reich, the psychic apparatus is not psychological, but biological, and at first his analytic theory of character seemed to be an amplification of Freud's theories. But on closer investigation the differences become clear. (Function of the Orgasm, p.115-6) I interpret Reich's position as such: there is an energetic constellation in the organism that manifests itself as character attitudes and muscular defenses, the two being functionally identical. This constellation is essentially energetic, and by its energy, it supports and maintains the resistances and defenses.



Diagram I

Energetic Constellation

Schema of the structure of the armor



Modified from Reich (Character Analysis)

The diagram shows the "interlacing" and the "web of forces" (armoring structure).j

One cannot understand these through a mechanistic thought process, they must be understood functionally. What then becomes clear is that what appears to be chaotic, has form and structure and is a...progressive unfolding, splitting, and antithesis of simple vegetative functions." (Character Analysis, pp.350-1)

Traditionally therapy calls for working with the constellation itself; the outward manifestations in the form of symptoms and behaviors---including historical material---and as a result, freeing the blocked energy. Reich's work offers the possibility of working directly with the energetic processes in the organism---the simple vegetative functions---changing the constellation structurally as a result of alterations on the energetic level. The creative source of the character armor has been altered, and as a result, the character defenses are re-structured. Because the character armor can no longer sustain itself in its usual form, the emotional and personal material flows forth. At this point a functional evaluation can determine whether traditional approaches are more appropriate. If so, we have the utilization of the old within the paradigm of the new. *I am not arguing for the elimination of the technique of using historical material within the therapist's repertoire. But I am arguing that it is not as necessary to work with that material as it was before Reich's discoveries, and specifically not in the same fashion.*

The significant personal material will come in an ordered and meaningful manner when a functional approach is used, and the timing of this is essentially determined by the patients and their work. It should also be noted that doing deep energetic work is not for all people at



all times. The traditional approaches can be more productive before someone is ready to do energetic work. But it is important to make the distinction between the two styles of work, and to know what each offers, and to be able to discern which is most appropriate for a specific situation.

I am also arguing for the point that Reich made in his statements quoted above, not because he was trying to create a separation and to establish his work independently, but rather because he continued to develop more effective techniques and was not as dependent on the older ones, which were based on quite different conceptual and theoretical principles. To use Sharaf's terminology, I believe that it was a realistic re-evaluation of the old within light of the new paradigm, and this information was accordingly re-interpreted so that its effectiveness could still be used without being burdened by the restrictions of the previous style of work.

My experience in working with more direct energetic techniques is similar to what I understand Reich was saying in his later years; it is not necessary to go through the entire historical material first, it comes afterwards and may or may not be of importance. The specific situation determines that; it is decided on a case by case evaluation. Some people spontaneously integrate the material that emerges and are freed from it, while others need time and assistance in processing it. I prefer, whenever possible, to let the experience define the image/memory and not the other way around. As Ilse Mittendorf writes, one can create an image of a tree and as a result, feel like a tree, or one can feel grounded, rooted, and solid and then the image of the tree comes. These are two different approaches that are based on coming to the experience from different directions, and as a result one ends up in two different places. Psychology has a direction of coming from "without", and trying to get "in". Energetic work stimulates and mobilizes from within and as it moves out, the 'psychological' material comes to the fore. (Refer to Diagram No.1)

Sharaf's position in working with Jack was clearly from "without"; a psychological point of view. When he was speaking too fast for Jack, the patient became charged and agitated. Sharaf could not act directly with this information and respond from an energetic/functional position. Rather he had to understand what was happening in a psychological/contextual framework before he could decide on what was an appropriate response. Clearly he was right and did effective work, but the point is that he was dependent on the psychological model. When viewed from a functional position, he already had enough information to act meaningfully without having access to historical material. My impression is that in the same session, a therapist using a functional model would have responded to the emerging energetic experience, facilitated it---not needing the historical information to do that because it was already happening---and then afterwards worked with the connection with the mother if it had been necessary. It is my contention that Sharaf's argument for the necessity of etiological material in successful organomic work, reveals an inability to conceptualize and contact without the psychological model, and I believe that this is what underlies Reich's statements about working with the instinctual energies.

The psychological model does not include the energetic. On the other hand, the energetic model always includes the psychological. *It has not been forgotten, neglected, or jettisoned*, but rather re-ordered in light of Reich's discoveries. This re-prioritizing is exactly what Sharaf argues for when he writes..."to employ techniques within a new paradigm the same



way they were used in an old one scants the re-interpretive task. It blunts the full vitalization of both..."

Working from an energetic and functional position has specific advantages. There is more "meaning" for the patient and a stronger identification with his emerging experiences including the historical material. Because this style of work is intrapsychic compared to traditional psychology which is inter-psychoic---therapist/patient relationship, trust, transference---The patient has a sense that what has happened has come from within and not only is it from himself, but he is somehow responsible for it, even if he does not like or agree with it. As a result, there are less unnecessary transferences and resistances, in particular the resistances geared to going out and against are not activated.³

The intrapsychic quality of a functional approach, besides offering the opportunity to avoid unnecessary transference and resistances, also helps to make the connection between the historical and the present. When working functionally, the historical material that arises is felt in the present moment. It has the unique quality of being "me" in both the past and the present. The patient can experience it as an adult in the present moment and as a child concurrently. It has less of a regression quality, whereby the patient gives up his status as a potentially responsible and effective adult. In a regressive state, the patient relinquishes his power, and therefore the possibility to actually do something about the situation. He is left with re-living the past when it was, and still is, not possible to do anything to change the original experience. My position supports Reich's statements that one does not truly regress: "We are dealing here with actual, present day functioning's of the organism, AND NOT WITH HISTORICAL EVENTS."(Character Analysis, p.492) As a result, an additional advantage of working functionally is that less interpretation and integration is needed in the work.

Summary

Sharaf has taken the position that Reich had neglected ideas and historical material in favor of the energetic/instinctual, that the integration of old information within a new system is the better approach and that it is not necessary to discard previous knowledge but rather to re-interpret it in light of the new. Using the case study of Jack he argues for the importance the etiological in doing successful organomic work. My position has been to support his understanding that the old must be re-interpreted and integrated with the new so that both systems can benefit. But I have disagreed with Schraf's analysis of Reich's position that he has not done this and I have disagreed with his reasons why he thinks this has not happened.

For me, Reich has clearly re-evaluated the concept of the historical material's role in the therapeutic process and has successfully re-integrated it into his work based on the knowledge he

³ To state briefly, transference is a "form" for the individual to manifest and work through deeper unconscious processes. It is not necessarily a "reality" in the absolute sense. If one offers the patient another "form" to work out important aspects---say intrapsychically---transference becomes of less importance. The need for a "form", a way to do it, has been met. Only that material that is truly transference then needs to be worked with as such. In Character Analysis, Reich points out that such techniques as respiration and breaking blocks are tools and should not be confused with a therapeutic end in itself. "To mistake mere tools of medical endeavors for the end itself is the result of bad thinking due to the lack of coordinated knowledge of the organism...". With Reich's discoveries, it is possible to keep transference in its proper place as a tool and not as an indispensable end.



had from his own discoveries and the resultant innovations. It is not a denial of the historical, rather a re-prioritizing, and to not utilize this new formulation is to continue to work psychologically and not functionally.

I have also disagreed with Sharaf's reasoning presented in the case study to support his contention that the etiological is indispensable. I went through each of his reasons arguing for the necessity of having historical material available to the therapist and tried to show that although the work demonstrated was effective, all of it could have been done without the knowledge of the patient's past. It is my contention that Reich was offering a way to do in-depth therapy based on a functional understanding of energetic process that made the working through of infantile and childhood experiences less relevant. It is also my contention that the dependency on the psychological understanding of human behavior is more a function of the therapist's inability to work energetically than it is a result of the incompleteness or the inadequacies of the functional approach. There is nothing outside the realm of natural functioning Reich advises. And just as the mechanist must resort to mysticism to fill the gaps in his mechanistic thinking, so too the psychologist in all of us must resort to psychologizing (the functional equivalent of mysticism) when our knowledge of energetic functioning reaches its limits. I believe that most body oriented therapists resort to memories, interpreting, and meaning when they think that the energetic techniques are not appropriate. I would argue that the energetic techniques are still appropriate, but that the individual's knowledge of them has been overtaken by the demands of the specific situation



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