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It is clear that Freud's theories have had a profound and revolutionary impact on ideas about human nature and human rationality. However, the precise nature of that impact is less clear. It is often said that psychoanalysis reveals the irrational forces at the root of even the most apparently rational forms of thought and activity; and that, in so doing, it undermines ideas about human rationality which have dominated western thought. That is undoubtedly true. However, it is only one aspect of the truth. For the implications of psychoanalysis are more complex and far-reaching than this currently fashionable view suggests.

The Enlightenment View of Reason

Modern western philosophy is founded on the idea that human beings are conscious and rational subjects, capable of governing their thoughts and actions by the principles of reason. According to the view that became dominant with the Enlightenment, human nature is divided into a rational part, the faculty of reason, and a non-rational part comprised of emotions, appetites and desires. These two parts are distinct and opposed. Reason is disinterested, universal, objective and autonomous in its operation. The emotions and appetites, by contrast, are partial, particular, subjective. They are a force hostile to reason in human life. According to the mainstream Enlightenment view, however, reason can and should guide and determine human action and thought, and we are rational to the extent that it does so.

Psychoanalytic theory calls this whole picture into question. Freud portrays the human being as a creature dominated by unconscious instincts, by infantile desires and primitive drives. He shows how consciousness and rationality are only one, relatively minor, facet of our psychology. He demonstrates how even the most apparently 'rational' and conscious activities and experiences are influenced by unconscious wishes and fantasies, which operate in ways which pay no heed to the principles of reason and logic. The 'reasons' that we believe we have for our thoughts and actions are revealed as mere 'rationalizations', which cloak and deny their real, unconscious motives.

Psychoanalytic theory thus undermines the Enlightenment idea of the rational human subject. In this respect, it is now often claimed, Freud should be seen as part of a broader movement of modern thought, which includes Marx and Nietzsche, and which culminates in contemporary 'postmodernism'. Thus—through a Nietzschean reading of Freud—we are led to a thorough-going scepticism which rejects the idea of the human rationality as an Enlightenment myth. Summing up these views, McCarthy writes, 'it is no longer possible, the critics argue, to overlook the influence of the unconscious on the conscious, the role of the preconceptual and nonconceptual in the conceptual; the presence of the irrational—the economy of desire, the will to power—at the very core of the rational.'¹

There is some truth in this account. Psychoanalysis does, indeed, reveal the ubiquitous influence of unconscious and irrational forces in human life; it does undermine the Enlightenment idea of the purely conscious and rational subject. This is the negative and critical side to its impact on traditional, Enlightenment thought. The postmodernist account tends to stress this aspect in an exclusive and one-sided way. However, it is only one part of the picture, and the less important part at that. For psychoanalysis also questions traditional, Enlightenment ideas of human irrationality. Only if this too is recognized is it possible to reach a satisfactory understanding of Freud's theory. This is what I shall argue.

Dreams and Neurotic Symptoms

Freud's work focused primarily on phenomena like neurotic symptoms, dreams, fantasies and errors—on phenomena which appear to be senseless, arbitrary, inexplicable, non-rational or irrational. His great achievement was to show that they are not so. Such phenomena can be interpreted and understood as intentional phenomena: they have a meaning, they happen for a reason, they can be explained in psychological terms.

This is perhaps most familiar in the case of dreams. According to the traditional view, dreams are the very paradigm of irrationality, of illusory and senseless experience. This is indeed how they usually appear to the dreamer. Dreams play a central role in the initial, sceptical arguments in Descartes' *Meditations*, and in the whole subsequent tradition of western philosophy, on just this basis. However, as Freud discovered, and in many cases demonstrated, dreams can be *interpreted*; they have a *meaning*. Dreams, says Freud, 'are not meaningless, they are not absurd.... On the contrary, they are psychological phenomena of complete validity... they can be inserted into the chain of our mental acts.'²

According to Freud, dreams have the form of 'wish-fulfillments'. Interpreting a dream and coming to see how it 'fits into the chain of our mental acts' involves discovering the wish that is expressed in it. In the case of young children's dreams, and occasionally with those of adults, this is evident. One of the many examples Freud cites involves a 22 month old child called Hermann. He was asked to hand over a basket of cherries to someone as a birthday present. He was very unwilling to do this, even though he was promised some of the cherries for himself as a reward. The next morning he reported having dreamed, '*Hermann eaten all the cherries!*'. Summarizing his conclusions, Freud writes,

Children's dreams are not senseless. They are *intelligible, completely valid mental acts*.... A child's dream is a reaction to an experience of the previous day, which has left behind it a regret, a longing, a wish that has not been dealt with. The dream produces a direct, undisguised fulfilment of that wish.³

The meaning of young children's dreams is often quite evident. Adult dreams, by contrast, usually appear arbitrary, senseless, irrational, and alien to the dreamer. Nevertheless, Freud maintains, they have the same wish-fulfilling form as the dreams of children. This is not immediately apparent because they have been subjected to 'distortion'. The wishes they express are repressed and unconscious ones, which reach consciousness in the dream only via the mechanisms of condensation, displacement, visual representation and symbolization.

In such 'distorted' dreams, the 'manifest content'—the dream as it appears to the dreamer—must be distinguished from the 'latent content', the unconscious wishes and thoughts which are expressed in it. The manifest content both expresses the latent content, and yet also distorts and conceals it. The manifest dream is thus the product of a compromise between the unconscious wishes expressed in it and the forces of repression and censorship operating in the dreamer's psyche.

This, briefly, is Freud's account of dreams. Clearly it involves a rejection of the Enlightenment view of them. Dreams are not, as Descartes believed, a purely delusive and irrational form of experience. Freud's great achievement was to show that dreams are a manifestation of a previously unknown, unconscious, psychological realm. Understood in this way, dreams no longer appear to be senseless and arbitrary. They occur and take the form they do for a reason; they have a meaning, they can be interpreted and understood in psychological terms.

Freud gives a similar account of many other apparently senseless and non-rational phenomena in human life. His earliest work focused on the treatment of patients diagnosed as 'hysterical'. This diagnostic category is no longer used, but the condition is still common. These patients suffer from physical symptoms like pains and paralyses, which have no

apparent physical basis or cause. To traditional psychology, such symptoms appear inexplicable, senseless and non-rational. Orthodox psychiatry often tends either to dismiss them as subjective and illusory—as a form of malingering—or to suppose some physical basis for them in some as yet undiscovered biological malfunction.

Freud's approach was different. Gradually, and by stages, he investigated the psychological roots of such symptoms, and came to understand that they are explicable in psychological terms. They can be traced back to conflicts between a person's libidinal and pleasure-seeking desires, and opposing repressive forces within the personality, particularly the dictates of reason—of morality and conscience. The idea of a conflict between reason and emotion, morality and desire, was familiar before Freud. However, what Freud shows is that when such conflicts become sufficiently intense, the desires are repressed—they are excluded from consciousness and denied active expression. The repression of these desires does not eradicate them, however. They continue to 'press for satisfaction'; and they achieve it, in thought in the form of fantasy, and in a physical form as neurotic symptoms. Neurosis is 'the return of the repressed'.

Thus hysterical symptoms, like dreams, 'have a sense and are related to the patient's experiences'.⁴ Indeed, according to Freud, they have precisely the same structure of repression and compromise as dreams. They too express repressed and unconscious wishes and desires in a distorted form. Moreover, Freud extends this form of explanation to cover compulsions, irrational anxieties, fears and phobias, fantasies, errors, slips of the tongue, and a vast range of other apparently arbitrary and senseless kinds of behavior and experience.

What all these phenomena have in common is that they appear meaningless—irrational or non-rational, and what Freud shows is that, like dreams, they have a meaning, they can be interpreted, they occur for a reason; they can be fitted into the course of our lives and understood in psychological terms. In short, he demonstrates that there is rationality in a great deal of our apparently irrational and non-rational behavior.

The Realm of Fantasy

How do these ideas bear on the Enlightenment idea of human rationality? To clarify this issue we need a better understanding of the sense in which, for Freud, dreams and symptoms are 'intelligible' and 'rational'.

As we have seen, to interpret a dream or a symptom is to show that it is the effect of (unconscious) beliefs and desires, in terms of which it can be fitted into the course of the subject's life in a psychologically intelligible manner. It may seem that this approach makes dreams and symptoms intelligible only in a subjective sense, and that this is quite different to the objective sense of rationality involved in the Enlightenment outlook. This is the view taken by the phenomenological and hermeneutic accounts of psychoanalysis.⁵ In different ways, both give a subjective account of the meaning of symptoms.

According to the phenomenological approach, in explaining an action we must put aside—'bracket off'—all questions of the objective truth or rationality of the subject's beliefs and desires, and consider these beliefs and desires only as they are experienced by the subject. For it is the way in which a person *experiences* his situation—his subjectivity—that determines the way in which he behaves, rather than the objective character of the situation itself.

The hermeneutic approach arrives at a similar conclusion via a different route. Despite what Freud himself maintains, it denies that psychoanalysis gives a causal account of the genesis of dreams and symptoms. Rather, a psychoanalytic interpretation is a form of narrative. It provides a 'story' which links the elements of a dream or symptom with incidents from the subject's life into a coherent whole. It is neither appropriate nor relevant to ask for objective, empirical evidence in favor of this story. Its validity is a matter of its subjective acceptability; and, again, the phenomenon it explains is 'meaningful' only in a subjective

sense.

Freud's work is often interpreted along these lines, and not only by writers explicitly within the phenomenological or hermeneutic camps. At times, indeed, Freud seems to endorse such a subjective interpretation; but it is not ultimately tenable as an account of his views. To understand why this is so it is necessary to see the way in which Freud's theory developed.

Freud's earliest investigations into hysterical symptoms led him to the view that they are rooted in hidden memories of painful and traumatic events which occur in early life. These memories are repressed and excluded from consciousness, but they return and manifest themselves in the form of symptoms: 'hysterics suffer mainly from reminiscences'.⁶ As is well-known, Freud's work increasingly pointed to the conclusion that these traumatic events were seductions in childhood by an adult, usually a parent or nurse.

However, Freud began to have increasing doubts about the reality of these events; and eventually he was forced to abandon this 'seduction theory'. The supposed seductions had not occurred—the 'memories' of them were fantasies.⁷ It is sometimes suggested that Freud should simply have abandoned his theories as 'refuted' at this point.⁸ Fortunately he did not do so. The conclusion he drew was rather as follows. 'If hysterics trace back their symptoms to fictitious traumas, this new fact signifies that they create such scenes in fantasy, and psychological reality requires to be taken into account alongside actual reality'.⁹

From this point onwards, unconscious fantasy assumes a central place in Freud's psychology. 'Psychical reality' replaces 'material reality' as the decisive factor in neurosis. 'Fantasies', Freud writes, 'possess *psychical* reality as contrasted with *material* reality; and we gradually learn to understand that in the world of the neuroses it is *psychical* reality which is of the decisive kind'.¹⁰

With this distinction, Freud appears to adopt a purely subjective approach to the explanation of neurosis. However, it is not ultimately possible to understand Freud's account in these terms. This becomes clear when one sees how Freud responded to the discovery that his patients' ideas of seduction were mere fantasies.

Whether or not they were fantasies, Freud had discovered that such beliefs were actually present in his patients' minds: they *believed* (albeit unconsciously) that they had been seduced, and this exercised a determining influence on their behavior. Had Freud's approach been a purely subjective one, he would have stopped there, and not concerned himself further about the truth or falsity, rationally or irrationally, of these fantasies. For the phenomenological approach requires us to put these questions 'in brackets'; while the hermeneutic account looks only for a subjectively satisfying narrative. However, Freud was not content with that.¹¹ He went on to ask the question: if these seductions had not occurred, why did his patients form fantasies of them? This question was quite crucial to the subsequent development of psychoanalysis; and it is a major criticism both of the phenomenological and hermeneutic approaches that, in effect, they discourage this line of questioning.

Freud, however, was certainly concerned by the discovery that his patient's beliefs in seduction were false. They could no longer be explained as 'reminiscences' of actual events. An alternative account was required. Freud eventually found this in the theories of infantile sexuality and the Oedipus Complex. 'I...came to understand that hysterical symptoms are derived from fantasies and not from real occurrences. It was only later that I was able to recognize in this fantasy of being seduced...the expression of the typical Oedipus Complex.' Moreover, 'from behind the[se] fantasies, the whole range of the child's sexual life came to light'.¹²

Thus Freud did not simply abandon the seduction theory as refuted. Instead, he replaced it with a more satisfactory theory, which developed out of the seduction theory, and preserved the elements of truth contained in it. In particular, in abandoning the idea that an actual seduction had taken place, Freud was led to reject the idea that sexuality is something

which is imposed upon the innocent child by adults from outside. The child is inherently a sexual being. And, once Freud appreciated this, he began to understand that the fantasies of seduction that he had unearthed were not entirely arbitrary and illusory. On the contrary, such fantasies are the psychological expression of instinct.¹³ In the form of wish-fulfillments, they express and reflect real and objective sexual drives and feelings which the child has.¹⁴ Properly interpreted, these apparently illusory seduction fantasies thus reflect and reveal a whole new realm of human psychology—the world of infantile sexuality. They occur for a reason; they have an intelligible place in the psychology of hysteria.

Freud's dictum, that it is 'psychical reality' that is 'the decisive factor in neurosis' is misleading here: it positively obscures this point. For it suggests that Freud's only concern is to discover the subjective reasons for the symptoms—to trace them back to the subjective experiences which give rise to them. As we have seen, however, Freud is not content to leave things there. He wants also to show how these subjective fantasies are themselves intelligible in the situation.

The Rationality of Desire

Similar points may be made about Freud's treatment of desires, wishes and feelings. These, too, must be understood as intelligible; they cannot be taken simply as they are subjectively given. Even apparently irrational feelings and emotional responses, Freud aims to show, occur for a reason.

Before seeing how he does this, however, the very terms here need some explanation and justification. For to talk of feelings as rational or irrational challenges a view about their nature which runs throughout Enlightenment thought. According to this, reason and emotion are exclusive and opposed factors in human life. Desires and feelings—in contrast to beliefs—cannot be rational: by their very nature they are non-rational—purely arbitrary and subjective. Hume puts the point clearly. 'Our passions, volitions and actions...being original facts and realities, complete in themselves...imply no reference to other passions, volitions or actions. 'Tis impossible, therefore, they can be pronounced true or false, and be either contrary or conformable to reason.'¹⁵

No matter how deeply entrenched these views may be, there are good grounds for questioning them. Just as beliefs refer to objects, so too do feelings; and just as a belief is judged false when it fails to reflect appropriately the object to which it refers, so too a feeling can be regarded as abnormal or irrational when it is inappropriate to its object. This, at least, is Freud's view. Thus, for example, he distinguishes 'objective' or 'realistic' anxiety from 'neurotic' anxiety in these terms. 'Realistic anxiety strikes us as something very rational and intelligible....It is a reaction to the perception of an external danger—that is, of an injury which is expected and foreseen...it may be regarded as a manifestation of the self-preservative instinct.'¹⁶ Neurotic anxiety, by contrast, appears irrational and unintelligible. It may take a number of different forms. Perhaps the most familiar are fears and phobias of objects such as spiders or snakes, or of situations like the dark or crowds. These things may contain the possibility of danger, but in the neurotic case, the anxiety they provoke is felt with an abnormal and irrational intensity.

These are the initial appearances that the phenomenon of anxiety presents. However, as Freud goes on to argue, they must be questioned. The rationality even of objective anxiety is doubtful; the 'judgment that realistic anxiety is rational and expedient calls for drastic revision.' For the rational response when danger threatens is 'a cool estimate' of the situation, and then a decision about how to react based upon it.¹⁷ Anxiety, except in so far as it heightens our awareness, is not rational. In other words, there is a neurotic and irrational element even in a great deal of supposedly realistic and rational anxiety.

Conversely, phobias and other quite clearly neurotic forms of anxiety, which have every

appearance of being exaggerated and irrational, are only apparently so. As with dreams and symptoms, on deeper analysis it turns out that they are intelligible reactions to the situations which actually give rise to them.

In general, indeed, it is a basic and crucially important principle of psychoanalysis that those of our desires and feelings which seem unintelligible and abnormal only appear to be so. A fuller and deeper understanding of psychology shows that even the craziest-seeming and most apparently irrational human reactions are intelligible responses to the situations which give rise to them.

But what constitutes an intelligible response? This question raises difficult issues, particularly in the context of psychoanalysis. For one of the effects of Freud's work has been to alter significantly our ideas about people's most basic motivations. In particular, Freud has greatly extended the range in which sexuality is thought to operate, taking it even into the world of infancy. These ideas are, of course, highly controversial; but I do not wish to get involved in these controversies here. My only purpose in mentioning them is to clarify the psychoanalytic notion of what it is for an action to be meaningful. As we have already seen, the beliefs involved in an action must be objectively intelligible ones. The basic point I want to make here is that Freud always seeks to explain psychological phenomena by showing that they issue from a limited number of drives and instincts, among which self-preservation and sexuality, in Freud's wide sense, are the most important. He seeks to show that our motives are intelligible in that they are the outcome of what Freud regards as a common—objective and universal—human nature. In short, for Freud an action or response is intelligible only to the extent that it is the product of beliefs and desires which are themselves intelligible.

Freud describes his basic approach in an early paper on 'The Aetiology of Hysteria' (1896). He is discussing the fact that the reactions of hysterics often appear to be 'abnormal and exaggerated'. This is how they were standardly treated by the medical psychiatry of his day, which postulated a biologically based 'general abnormal sensibility to stimulation' in the hysterics to explain them. Psychoanalysis involves a different approach, Freud argues, according to which

the reaction of hysterics only appears exaggerated; it is bound to appear so to us, because we know only a small part of the motive forces behind it. In reality, this reaction is proportionate to the exciting stimulus and therefore normal and psychologically intelligible. We immediately perceive this when analysis has added to the manifest causes of which the patient is conscious, those other causes which have contributed to the result, though the patient knows nothing about them and is therefore unable to tell us anything.¹⁸

The principles that Freud here outlines for the explanation of abnormal behavior guide his work throughout. They may be summed up as follows. Everything that happens in psychological life happens for a reason and has an intelligible cause. Even the most apparently arbitrary, insignificant, irrational, meaningless, abnormal and crazy thoughts, beliefs, feelings and actions can be shown to have a valid and psychologically explicable place in our lives. There are reasons for even the most irrational phenomena, and those reasons are objective, not purely subjective, in character.

Freud's Account of Rationality

The time has now come to take stock and bring the discussion back to the issues with which it began: the implications of psychoanalysis for the concept of human rationality. In explaining the psychoanalytic account of dreams and symptoms I have tried to bring out two points. On the one hand, psychoanalysis demonstrates that there is an unconscious, irrational, dimension to a great many supposedly rational forms of thought and activity. Even the most

apparently normal life, Freud maintains, 'is interspersed with a great number of trivial and in practice unimportant symptoms'.¹⁹ In this way, psychoanalysis shows that there is no such thing as absolute or 'pure' rationality; and it thus subverts the Enlightenment conception of human rationality. At the same time, however, it also shows that there is no such thing as pure irrationality in our psychology. Even the most apparently abnormal and irrational phenomena are meaningful: they can be interpreted in psychological terms, they occur for a reason; and, in that sense, they are intelligible and rational.

At first it may seem that these two conclusions point in opposite directions and conflict. They do indeed do so if human rationality is viewed in the absolute terms of the Enlightenment account. However, the conflict here can be resolved by seeing that rationality and irrationality are not absolute, either/or phenomena. The difference between normality and abnormality, sanity and madness, rationality and irrationality is one of degree and relative. There is a continuum between them.

This is Freud's view. On the one hand, he writes, 'neuroses...shade off into what is described as the normal by a series of transitional steps, and on the other hand there is scarcely any condition generally recognized as normal in which it would not be possible to demonstrate neurotic traits.'²⁰ Moreover, he insists that psychoanalysis is not merely a theory of abnormal psychology. In contrast to traditional abnormal psychology and psychiatry, it is one of the distinctive features of psychoanalysis that it is a general psychology which applies both to normal and abnormal phenomena alike.

However, this line of thought seems to invite a form of sceptical relativism which has become very influential in recent times. Mental illness is a 'myth', it is said, it is merely a 'label' signifying deviation from social norms. The distinction between health and illness, rationality and irrationality, is arbitrary, relative and socially determined.²¹ This is not Freud's view, however. Though the distinction between health and illness is one of degree for Freud, there is, he insists, a real and important difference between them, which can be specified in intrinsic, psychological terms.

Freud's account of the concepts of health and illness develops and changes through the course of his life, with the development of psychoanalytic theory. It is convenient to divide this development into two periods. The first extends up to the publication of *Beyond the Pleasure Principle* (1920). In this period, Freud portrays the mind as split into two basic parts: conscious and unconscious; and he specifies the criteria for health and illness in these terms. What makes behavior pathological is that it is motivated by unconscious forces. Dreams, fantasies, errors, neurotic anxieties and symptoms, according to this view, involve an impaired or diminished form of rationality. There are reasons for these phenomena, but those reasons have an irrational—neurotic—form. They are hidden, repressed and unconscious. The subject neither understands them, nor can he exercise choice or control over them. These phenomena thus appear to him to be alien occurrences—mere happenings—which he passively suffers.

That is to say, there is a rationality to these irrational phenomena, there are reasons for them; but this rationality is operating in the most impaired and least rational fashion: under conditions of repression and unconsciousness.

The pathogenic conflict in neurotics is not to be confused with a normal struggle between mental impulses both of which are on the same psychological footing. In the former case the dissension is between two powers, one of which has made its way to the stage of what is preconscious or conscious while the other has been held back at the stage of the unconscious. For that reason the conflict cannot be brought to an issue.... A true decision can only be reached when they both meet on the same ground.²²

The more conscious we are of the reasons for our actions, the more rational they are, and the

freer we are in respect to them. It is in these terms that Freud describes the goals of psychoanalytic therapy: 'We can express the aim of our efforts in a variety of formulas: making conscious what is unconscious, lifting repressions, filling gaps in the memory—all these amount to the same thing.'²³

This account associates greater rationality with greater consciousness and greater freedom. Is this correct? Are there not forms of irrational behavior which are conscious? I can, of course, deliberately behave irrationally. To take a trivial case, I can, for example, say that $2 + 2 = 5$. This is only superficially and apparently an irrational action. Insofar as I act deliberately, my intention is other than to state a mathematical truth: I may perhaps be trying to make a point in a philosophical argument. This then is the reason for my action, and there need be nothing irrational about it. Alternatively, I may make an unintended mistake when adding up a column of figures and equate $2 + 2$ with 5. However in such case, Freud maintains, the error is in all probability unconsciously motivated, and must be explained in psychoanalytic terms.²⁴

There are more sophisticated examples of apparently conscious irrationality which have been much discussed by philosophers. These include cases of 'weakness of will' (when one acts against what one believes to be one's own best interests) and 'self-deception'.²⁵ Like the cases dealt with by Freud, these phenomena are deeply puzzling and problematic for traditional views of rationality. What seems clear, however, is that to account for them it is necessary to conceive of the mind as divided into relatively autonomous parts. According to some recent writers, this can be done, and these phenomena satisfactorily accounted for, without invoking the concept of the unconscious.²⁶

It would take me too far out of my way to engage with these arguments here. Suffice it to say that for Freud, at least, motivated irrationality requires us to posit a division in the mind between a conscious and repressed unconscious part. Indeed, for Freud, in the first phase of his work at any rate, the primary division of the mind is between consciousness and the unconscious; and it is in these terms that he gauges rationality and irrationality. In order for us to be functioning in a rational and healthy way, his theory implies, repression must be eliminated and what is unconscious made conscious.

However, this account has consequences which Freud himself was ultimately unwilling to accept. For it involves a conception of rationality and health which appears to have radical social and political implications. According to Freud, the state of 'normality' is revealed by psychoanalysis as one that is infected with unconsciousness and irrationality. Repression and neurosis are universal features of our normal, everyday lives.

It is impossible to overlook the extent to which civilization is built upon a renunciation of instinct; how much it presupposes precisely the non-satisfaction (by suppression, repression or some other means?) of powerful instincts. This 'cultural frustration' dominates the large field of social relationships between human beings.²⁷

Psychoanalytic theory thus contains within it the basis for a radical critique of conventional norms and the present social order. Such a critique may take various forms. Following Lacan, a great deal of recent writing has stressed the radical irrationality of the unconscious; and used this to cast sceptical doubt on the Enlightenment idea of the rational subject.²⁸ A main purpose of this paper so far has been to question this interpretation of Freud's work and to argue that it is one-sided.

Other radical interpretations of psychoanalysis are based upon accounts more in line with the present one. Underlying the work of writers such as Reich, Marcuse, Fromm, Fanon and Laing,²⁹ is the view that the repressed demands of the unconscious have a validity and rationality, which must be incorporated into our understanding of human psychology and human rationality. Rather than rejecting the concept of human rationality, they hold out the

hope that its radical and critical dimension, which was such an important ingredient of it during the Enlightenment, can be renewed through psychoanalysis.³⁰

Freud, however, explicitly dissociates himself from all attempts to read a radical message into his work. His pessimism and conservatism are notorious. Although he is fully aware of the extent to which present society requires repression and unconsciousness, he does not believe that any significant improvement is possible. Neurosis, and the irrationality it involves, are, Freud believes, inevitable. Although he is prepared to criticize the more repressive aspects of the sexual morality of his time in psychoanalytic terms,³¹ beyond that he is hostile to attempts to see radical social and political implications in his thought.³² We are not reformers but merely observers,' he insists.³³

Partly to eliminate these unwanted radical implications, but also for important theoretical reasons, Freud changes his view of the basic divisions of the mind in his later work, and with it his account of the distinction between health and illness. The mind is now divided into three parts: id, ego and superego. Initially the mind is one. It has an id-like character; it is a mass of mere instincts. Ego and superego emerge in the course of development, under the impact of external reality. These divisions are essential for the development of the self—they are formative of it. There is no question of overcoming them in later life.

Thus the idea that health consists in the removal of divisions within the self is abandoned. Consciousness is located in a small part only of the ego. The remainder of the mind is unconscious, and must remain so. Indeed, when the ego is not safeguarded against the id by resistances,³⁴ and is invaded by material from the unconscious (as occurs in dreams, for example) the result is neurosis and irrationality.³⁵ Illness is the result of a weakening of the ego and disruption of its relations with the id, superego, and/or external world.

These views have none of the radical implications of Freud's earlier account. There is no thought of making conscious the unconscious or of liberating repressed desires. The aim now is the integrity of the ego, and its functioning in harmony with the other parts of the self and the outside world. The aim is not the removal of the divisions within the psyche, but the harmonious mutual relationship of its different parts, under the control of the ego. Moreover, with the introduction of external reality as a crucial element to be integrated, what is required is acceptance of and adaptation to social reality, rather than a criticism and rejection of it. These conservative features of Freud's later ego psychology are often criticized by radicals,³⁶ but they were quite deliberate on Freud's part. He explicitly identifies rationality with social norms and conventions, and he rejects the suggestion that there could be a radical divergence between them.

Conclusion

Freud's theories have transformed modern thinking about human nature and human rationality. In part their impact has been negative and sceptical. They have called in question ideas on these issues which have dominated western thought since the Enlightenment. However, the full significance of psychoanalysis cannot be appreciated if it is seen only in this negative light. For it has also provided an immensely illuminating and fruitful framework within which these issues can be rethought and worked out in contemporary terms.

Although there is no doubt where Freud himself stood politically or morally, there are crucial ambiguities in psychoanalytic theory, particularly in its earlier form. These have enabled it to provide a basis not only for a conservative and pessimistic outlook of the kind adopted by Freud, but also for various forms of social radicalism. Whatever Freud himself may have thought, it seems clear, from the subsequent history of his theories, that psychoanalytic considerations in and of themselves cannot resolve the issue between these opposite interpretations. Perhaps psychoanalysis has been fortunate in this. For these ambiguities have enabled psychoanalysis to continue to appeal both to radicals and conservatives, optimists

and pessimists; and thus it has been able to provide a theoretical framework for both sides of some of the most central moral and social controversies of our time. This may go some way towards explaining its enduring centrality to current debates.³⁶

Notes

- 1 T. McCarthy, 'Introduction', J. Habermas, *The Philosophical Discourse of Modernity* (Cambridge: Polity, 1987), ix.
- 2 S. Freud, *Interpretation of Dreams* (London: Allen and Unwin, 1954), 122.
- 3 Freud, *Introductory Lectures* (Harmondsworth: Penguin, 1973), 158-9.
- 4 Freud, *Introductory Lectures*, 296.
- 5 For the former see, e.g., R. D. Laing, *The Divided Self* (Harmondsworth: Penguin, 1965); for the latter, P. Ricoeur, *Freud and Philosophy* (New Haven: Yale University Press, 1970).
- 6 S. Freud and J. Breuer, *Studies on Hysteria* (Harmondsworth: Penguin, 1974), 58.
- 7 Freud's views on this have recently been challenged. See J. M. Masson, *The Assault on Truth: Freud's Suppression of the Seduction Theory* (Harmondsworth: Penguin, 1985), and Alice Miller, *Thou Shalt Not be Aware: Society's Betrayal of the Child* (London: Pluto Press, 1985). For a discussion of these issues more sympathetic to Freud, see Ann Scott, 'Feminism and the Seductiveness of the "Real Event"', *Feminist Review* No. 28 (January 1988), 88-102.
- 8 F. Cioffi, 'Freud and the Idea of a Pseudoscience', *Explanation in the Behavioral Sciences*, R. Borger and F. Cioffi (eds.) (Cambridge: Cambridge University Press, 1970). For criticisms of this view see S. Sayers, *Reality and Reason* (Oxford: Blackwell, 1985), ch. 9.
- 9 Freud, 'On the History of the Psychoanalytic Movement', *Collected Papers*, Vol. 1 (London: Hogarth, 1924), 299-300.
- 10 Freud, *Introductory Lectures*, 415.
- 11 See A. Grünbaum, *The Foundations of Psychoanalysis* (Berkeley: University of California Press, 1984), Introduction, for trenchant criticism of the hermeneutic account.
- 12 Freud, *New Introductory Lectures* (Harmondsworth: Penguin, 1973), 154; Freud, 'On the History of the Psychoanalytic Movement', 300.
- 13 Freud, *New Introductory Lectures*, 106.
- 14 It may well be that these fantasies and the feelings they express are also called forth and developed by outward conditions. Cf. S. Sayers, 'Review of J. Malcolm, *In the Freud Archives* and J. M. Masson, *The Assault on Truth: Explorations in Knowledge*', 3, No. 2 (1986), 71-7.
- 15 D. Hume, *Treatise of Human Nature* (Oxford: Clarendon, 1888), III, i.1.
- 16 Freud, *Introductory Lectures*, 441.
- 17 *Ibid.*, 442.
- 18 Freud, 'The Aetiology of Hysteria', *Collected Papers*, Vol. I (London: Hogarth, 1924), 214.
- 19 Freud, *Introductory Lectures*, 510.
- 20 Freud, *An Outline of Psychoanalysis* (New York: Norton, 1949), 81.
- 21 T. Szasz, 'The Myth of Mental Illness', *Ideology and Insanity* (London: Calder & Boyars, 1973); T. Schiefel, *Being Mentally Ill* (London: Weidenfeld and Nicholson, 1966); R. D. Laing, *The Politics of Experience* (Harmondsworth: Penguin, 1967), etc.
- 22 Freud, *Introductory Lectures*, 484.
- 23 Freud, *Introductory Lectures*, 486.
- 24 See Freud, *Introductory Lectures*, Part I, and *The Psychopathology of Everyday Life* (Harmondsworth: Penguin, 1975), *passim*. In the latter work, Freud suggests that all unintended errors and mistakes occur for a reason and can be explained in psychoanalytic terms.
- 25 Aristotle, *Ethics* (Harmondsworth: Penguin, 1976), Book 7, j; P. Sartre, *Being and Nothingness* (London: Methuen, 1957), Part I ch. 2.
- 26 D. Pears, 'Motivated Irrationality' and D. Davidson, 'Paradoxes of Irrationality', *Philosophical Essays on Freud*, R. Wollheim and J. Hopkins (eds.) (Cambridge: Cambridge University

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Press, 1982). See also Sartre, *Being and Nothingness*, Part I, ch. 2.

²⁷ Freud, *Civilization and its Discontents*, in *Civilization, Society and Religion* (Penguin Freud Library, Vol 12) (Harmondsworth: Penguin, 1985), 286-7.

²⁸ For an unusually clear account of this work, stressing this aspect of it, see Elizabeth Grosz, *Jacques Lacan: A Feminist Introduction* (London: Routledge, 1990).

²⁹ W. Reich, *The Function of the Orgasm* (London: Panther, 1968); H. Marcuse, *Eros and Civilization* (New York: Vintage, 1962); E. Fromm, *The Sane Society* (London: Routledge & Kegan Paul, 1956); F. Fanon, *Black Skin, White Masks* (London: Macgibbon & Key, 1968); R.D. Laing, *The Divided Self*, and *The Politics of Experience*. See also, F.A. Robinson, *The Sexual*

³⁰ *Radicals* (London: Temple Smith, 1970); R. King, *The Party of Eros* (New York: Delta, 1973).

³¹ For a more extended account of this position, see S. Sayers, 'Mental Illness as a Moral Concept', *The Radical Philosophy Reader*, R. Edgley and R. Osborne (eds.) (London: Verso, 1985).

³² Freud, "'Civilized' Sexual Morality and Modern Nervous Illness', in *Civilization, Society and Religion* (Penguin Freud Library, Vol. 12).

³³ Freud, *Civilization and its Discontents*.

³⁴ Freud, *Introductory Lectures*, 485.

³⁵ Freud, *Outline of Psychoanalysis*, 46.

³⁶ The *locus classicus* is H. Marcuse, *Eros and Civilization*, 'Epilogue: Critique of Neo-Freudian Revisionism'. This is also a central theme of much recent Lacanian writing.

³⁷ I am grateful to Ian Hunt for helpful comments on an earlier draft of this paper.

Many problems of the contemporary world demand collective or political action for their solution. Examples of this include world hunger and homelessness in our own society. To deal with problems such as these, people must mobilize groups or institutions that already exist or else they must create appropriate groups and bring them to act. In certain circumstances, moreover, a person may properly be blamed for failing to do what she could do to bring about the cooperative action required to deal with a social problem, even if she did not create the problem and could not solve it on her own.

It is relatively uncontroversial, for example, that an administrator of an agency charged with disaster relief may have the responsibility to mobilize the agency to bring relief to the victims of a disaster. And if she fails to do this, she may be to blame for her failure. But the more difficult and interesting cases are those in which either there is no institutionalized entity with the responsibility to deal with a social problem, or the entity with the responsibility is not doing what it ought, and no other institution or organization is working effectively to cause the responsible agency to do what it ought. Collective action may still be possible in cases of this kind, however, for there may be a group of people that could organize and mobilize itself either to deal directly with the social problem or else to prod an existing agency or institution to do what it ought. Larry May has written about cases of this kind in his "Collective Inaction and Shared Responsibility".¹ May refers to the groups he is interested in as "loosely structured groups", and I will call them "LSGs".

The problem of homelessness in the United States is a case in which LSGs could have a role to play. For although there are institutions with the responsibility to deal with such problems, including Congress and the state legislatures, they are not dealing with homelessness in an effective way, and no other agency is working effectively to bring them to act. But there are LSGs which could organize themselves either to help the homeless directly, or to lobby legislatures, political parties or other agencies to take action. There may be interest groups within certain charitable organizations, for example, that could press the administrators of their respective organizations to do something to help the homeless. To take a more prosaic example, suppose that three people in a car pool witness a motorist in need of help. In this case, there are four groups (each with more than one member) that we might consider to be in a position to help.

The questions that interest Larry May and me arise in situations where groups that could mobilize to deal in some way with a social problem fail to do so. One theoretical question that arises is whether the analysis of situations of this kind, where social problems call for cooperative group action, is helped by introducing the idea that the groups themselves can appropriately be blamed in certain cases for failing to act. I believe our understanding is helped by this idea, for, as we will see, it is more clear in some cases how to apportion responsibility to collectivities than it is how to apportion responsibility to their members. I shall focus in this paper on two important additional questions. First, under what circumstances, if any, would an LSG have responsibility for failing to prevent a harm? And second, under what circumstances would a member of such a group *ipso facto* share responsibility for the group's failure?

I shall begin with a general discussion of the proposition that certain collective entities are capable of acting intentionally and can have moral responsibility for their actions. I shall then discuss cases which involve LSGs and their failures to act. Finally, I shall discuss May's claim that if an LSG is blameworthy for failing to prevent a harm, then each member shares in the blame "based on the role" that she "could have played in bringing the group to prevent the harm".²