

**Summary: 26 May 2009 Workshop Meeting:**  
**Dissociation: An Evening with Janet, Freud and Jung in their own Words**

Moderated by Dr. Ken Kaplan

**Part 2. Jung and Summarizing Discussion**

Jung saw the natural state of mind as polarized or composed of opposite orientations. Jung sees these as biologically determined and serve the biological purpose of adaptation. His two main *attitudinal* types, the extravert and the introvert, describe the source of motivation as being either from within or from the outside. These two *attitudinal* types are found within all individuals to varying degrees. They are always in relationship to one another. One of these types tends to dominate and will evoke a compensatory response to achieve a state of equilibrium. If the dominant type is fixed or extreme, it could result in a variety of symptoms or emotional disturbance including dissociation. In addition to the two main *attitudinal* types, Jung also describes four basic *functions* of the psyche. These are thinking, feeling sensing and intuiting. Jung views these functions as two pairs of opposites; thinking-feeling and sensations-intuitions. The core of Jungian therapy is finding balance between opposites. This leads to growth and individuation.

Summarizing Discussion

Dissociation – unconscious defense mechanism involving the segregation of any group of mental or behavioral processes from the rest of the person’s psychic activity. (Sadock BJ, Sadock VA : *Synopsis of Psychiatry* 9th edition Lippincott Williams & Wilkins; 2003).

The term *dissociation* was used primarily by Janet. The term *splitting* has been the preferred term used not only by Janet but also Freud, Bleuler and many others. Historically the term *splitting* has been used to further elaborate the location and nature of the dissociation.

Janet – saw dissociation as a splitting of consciousness. He referred to this parallel splitting of consciousness as the subconscious. The subconscious consisted of fixed ideas associated with strong feeling states related to traumatic experiences. His patients showed symptoms of an altered state of consciousness (often without a sense of a personal self), amnesia, hallucinations and multiples personalities. Janet demonstrated that these patients could be treated by psychological analysis.

Freud – referred primarily to splitting of the mind as splitting between the conscious and unconscious mind. Freud described the nature of the split as a defense against an unacceptable idea. The affect was split off from the idea and “converted” to a somatic symptom

Bleuler – also referred to splitting of the mind. He coined the term schizophrenia to describe his patients. Here the primary problem was splitting within the thought

processes, which he referred to as a loosening of associations. This disrupted both the conscious and unconscious mind as well as the ability to differentiate the internal from the external world. This left these patients unable to resolve many of the naturally occurring contradictions within the psyche. These patients were often untreatable by psychological interventions alone.

Jung – saw the natural state of the mind as composed of opposite orientations which were in relationship with each other. He did not use the term splitting. He used the term dissociation for those extreme situations when there was a disruption in the relationship between opposites.

By 1938, Freud returned to the topic of “Splitting of the Ego in the process of Defense”. He stated it was important to return to the topic. Unfortunately this was an unfinished paper. Freud was correct in making this point but others including Klein, Kernberg and Winnicott, picked up on the topic of splitting after his death.

In child development, splitting is used to describe a stage of the developing mind when the perception, for example, of a two year old child of its caregiver involves a splitting of “good” and “bad” internal representations of the caregiver.

Dissociation is seen both as a defense mechanism for overwhelming affects and in everyday life situations (not related to trauma and overwhelming affects). Examples of the latter would include being “lost in thought” e.g. thinking, planning, daydreaming, and fantasizing as well as a variety of altered states of consciousness that might occur in activities as diverse as meditation and driving a car. Further elaboration is necessary to understand the underlying neuroscience for these two very different situations.