THE CLINICAL APPLICATION OF KAREN HORNEY’S THEORY TO GROUP PSYCHOANALYSIS

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The aim of this paper is not only to analyze to what extent group psychoanalysis can utilize Karen Horney’s clinical concepts but also to show how powerfully her theory works in the clinical practice of group analysis. In this clinical discussion I will be referring primarily to Horney’s theory (with an overall reference to her writings and to my own text: Garofalo, 1979) as well as to V. Morrone’s skillful clinical work (who brought me directly into clinical group work and whom I would like to take this opportunity to thank explicitly).

Morrone’s clinical work is inspired by the teaching of H. Kelman, one of the pioneers of Horney group analysis (Kelman, 1948, 1971). Morrone has reached that level of mature understanding that Horney herself had hoped for in her 1951 symposium (De Rosis et al., 1952) thanks mainly to specialists like L. De Rosis, S. Rose, B. Wassell, L. Landman and, of course, to Kelman himself. They were the first to point out certain problems and techniques of group therapy, the richness of the analytic and interindividual relationship in group analysis, and its particular advantages and disadvantages tied to the specific nature of the constructive and obstructive forces that are at work (De Rosis et al., 1955; Rose, 1953, 1956). For clarity (and possibly at the cost of some repetition) I will hinge my argument on three basic themes or angles of the therapeutic process, seen in the light of Horney’s theory applied to group analysis: the consciousness-unconscious relationship, the ego-others relationship, and the patient-therapist relationship.

THE CONSCIOUSNESS-UNCONSCIOUS RELATIONSHIP

Horney has often repeated that hers is a psychoanalytic theory, in that she believes in unconscious psychic forces and consequently in psychic determinism, and insofar as she makes use of the psychoanalytic method of “working through” and the analysis of the transference, and recognizes her

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debt to Freud’s genius for these concepts. Even by the most orthodox of today’s analysts, these fundamentals are still considered “the accepted basis for any set of propositions that goes by the name of ‘psychoanalysis’” (Cooper, 1985, p. 14). On the other hand, there is also no doubt that Horney’s psychoanalysis gives primary importance to conscious and self-referential processes of the individual, what we would call today autopoietic processes, using the terminology of Maturana and Varela (1980), through her basic concept of “real self.” It is the real self that guides the therapeutic process from the idealized self to authentic self-realization due to its inherent qualities of “positiveness,” “unity,” and at least partial “genuineness.”

Moreover, Horney deviates from the mechanistic and unilinear view of the single pathological elements seen in terms of drives (such as childhood trauma, fixation, regression, etc.), which is so typical of 19th-century Freudianism, proposing instead a holistic approach (Kelman, 1959) to neurosis. In this approach, neurosis is seen rather as a functional distortion deriving from a disturbance in the primary affective relationship. Hers is a more modern, systemic, structural way of looking at neurosis. Here, the character structure develops vicious circles (which recall the Jungian idea of “spiral”) due to the unsuppressable psychic needs of unity and functional integrity. Intuition, which frees us from this intrapsychic and interpersonal tangle, is entrusted to the painful growing self-awareness of the patient and the “newness” of the relationship with the analyst rather than to the classical “interpretation” the analyst offers.

The same happens in the dynamics of a group, which consists of more than the unconscious of the individuals that make it up. The group is the site of the “transpersonal” that encompasses both the “social unconscious” that crosses its individual components at different levels and the relational network that makes up its own being, “greater than the mere sum of the original personal factors comprising it” (Napolitani and De Risio, 1994). In group analysis, therapeutic action takes place primarily at the verbal and “actual” level, or as Foulkes (1973) puts it, the usual psychoanalytic concepts of repressed unconscious and mechanisms of defense are not essential because in the group the individual’s repressed parts are manifested through the interaction with the group participants. The application of Horney’s theory to group analysis is therefore evidently quite appropriate, and it is not surprising that Fritz Perls, who invented Gestalt therapy, was analyzed by Horney herself. This may explain how there are so many points in common between Horney’s theory and Perls’s Gestalt and encounter groups (Cavaleri, 1990; Morrone, 1991b).

An approach like Horney’s emphasizes the environment as “facilitator,” both in the development of neuroses and in their cure. Thus, the group,