

The Case of Jane

Our next example concerns a twenty-seven-year-old hospitalized patient who, at the time she entered treatment, had been experiencing episodes of psychosis for several years. Jane's initial contact with her analyst followed shortly after a bitter argument between her and one of the hospital attendants. When asked why she had become so upset, she angrily replied that it was "all the fault of the Catholic Church," which, according to her, had never fully recognized "the human side of Jesus Christ." She argued that Jesus was human and real, and not just a deity, and furthermore that his "human realness" had been neglected in the teachings of Catholicism, which emphasized instead his perfect spiritual nature. She intended to bring this fact to the attention of the world and personally correct the historical one-sidedness of Catholic theology. Jane's affirmations of the reality of Jesus Christ as a human being were associated with her conviction that she was the earthly embodiment of the Holy Spirit. As a member of the Holy Trinity, she pictured herself as a channel through which God's love was being miraculously transmitted to the strife-torn, suffering world. She also claimed to be personally acquainted with God the Father and God the Son, who she said were incarnated in two individuals living in her hometown. In addition, she frequently asserted that the Second Coming of Christ was at hand and looked forward to the end of the world. In the world's final hour, as she pictured it, she and the two persons just mentioned were to undergo

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a glorious ascension into the Holy Trinity and participate in eternal life.

In what follows, we first trace the course of certain events during Jane's childhood and adolescence, with the aim of reconstructing the meaning of her delusional preoccupations in the context of her life history. The specific incidents reviewed came to be understood in the long course of her treatment as pivotal in shaping her psychological development. In the second section we discuss how a decoding of the subjective truths symbolized in her religious delusions was essential in establishing a therapeutic bond with her.

Historical Background

The patient's immediate family circle included only her mother and two older brothers. Jane's father had killed himself when she was ten years old. Both of the parents were Irish Catholics who had met and married shortly after emigrating to America in the early 1930s. During the first period of her life, Jane was a sensitive and vulnerable child whose only relationships were with the members of her family. In the parochial school she attended she formed no other friendships, relying instead for companionship on her more outgoing brothers. She remembered her mother during her early and middle childhood as a distant and punitive figure. There were numerous memories of being scolded, told to go to bed on time, and do her schoolwork, but no recall of incidents involving positive interactions with her. Jane's mother, in a separate interview, confirmed that she had been emotionally unavailable during much of her daughter's early life because of feeling overwhelmed by family responsibilities and especially by the needs of her husband. Throughout Jane's first ten years her father was subject to severe recurrent depressions and outbursts of unprovoked physical violence. The mother summarized her own experience of Jane's childhood with the statement, "It was all I could do to tread water and keep from being drowned."

In contrast to the tie with her mother, Jane felt extremely close to her father. In spite of his emotional instability, she experienced him as a nurturing figure who loved her very deeply. There were many memories of him comforting her when she was frightened by bad dreams, intervening when her brothers teased or fought with her, encouraging her to help him in working around the house, and allowing her to sit on his lap in the evenings when he came home from his job. This situation of being her father's favorite provided the organizing context of central aspects of Jane's self-definition. The central importance of her early bond with her father was suggested by the

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quality of her reactions to his periodic outbursts of rage and violence. In describing such incidents, which were always incomprehensible to her, she said, "When he exploded I felt the world coming to an end."

When Jane was ten years old her father's depressions grew more severe and prolonged. They eventually reached the point that her mother often had to physically force him to get dressed in the morning and leave the house for work. On one such morning, following several weeks of his apathy and inactivity, Jane found her father sitting in the kitchen, smiling and laughing to himself in a silly manner. She recalled hoping that this apparent good mood was a sign that he at last might recover from his long illness. On the contrary, he disappeared from the house and a few hours later was discovered hanging by his belt from a tree, with both wrists slashed.

The suicide was a devastating shock to everyone concerned and a source of special agony to Jane's mother, who was obliged to arrange her husband's burial in an atmosphere of deep shame. Jane only learned of it in the newspapers. It was never discussed in the home and, according to Jane's account, it was several years before her father's name was even mentioned by anyone in the family.

Jane remembered crying to herself upon learning of her father's death, but there was no protracted period of mourning and absolutely no sharing of feelings about the death by anyone in or outside the home. She told of how after the suicide a "dark cloud" descended upon the family. Her mother became deeply depressed and spoke frequently of dying, warning her children that they should now learn to fend for themselves. Jane described her mother's condition at that time with the words, "My mother closed up like gates crashing shut." She also experienced desertion in her life at school. She recalled writing short stories for two of her favorite teachers concerning the plight of lost animals that could not find their way home. Hoping for personal reactions to the stories, she was terribly disappointed and crushed when her work was handed back with comments only about her many errors of grammar and spelling.

The absence of any new bond in which Jane could feel comforted and the meaning of her devastating loss understood left her without a foundation for surviving and continuing to grow as a person. At this point a shift occurred in which the focus on her father's life and death was gradually supplanted in her awareness as she constructed from sources deep within herself a preoccupying relationship with Jesus Christ. She began to experience as literal truth the idea that Jesus enters the hearts of those who need him; in nightly prayers she sought to bring the power of his love into the center of her shattered life. Included within the developing bond to Jesus was a sense that he

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expected and needed her to perform his work in the world, a project in return for which he promised her the gift of everlasting love.

When Jane was thirteen years old, the tie to Jesus led her to form a close relationship to a younger girl who was suffering from bone cancer. The course of this relationship was to foreshadow many of her later experiences. She visited this girl regularly, comforted her when she lost hope, helped her carry her books to and from school, and prayed nightly to Jesus for her recovery. A secret salvation fantasy crystallized in which Jane pictured herself as an intermediary between God and her friend, as a conduit through which the miraculous powers of Jesus could be transmitted. This young friend's illness thus presented an opportunity for the God to whom Jane prayed to show his love in a tangible way. In spite of these efforts, the condition of the girl worsened, and when she eventually died, Jane thought to herself: "Jesus Christ abandoned me." Her pain in this situation was enormous, for she had believed that Jesus, if she did what he wished of her, would surely never let her down.

During the next few months, Jane reassessed the meaning of her friend's death, entertaining the idea that perhaps her faith had not been sufficiently strong and pure for her prayers to be answered. She thereby restored her tie to Jesus by a familiar means: holding herself to blame for its demise. Carrying such thoughts to great extremes, she underwent a religious crisis profoundly affecting the subsequent direction of her life. Two great pathways seemed to open up before her, one leading to the satisfactions of earthly existence, and the other to spiritual development and ultimate union with Jesus Christ. Keeping her thoughts secret from her family, she chose the latter path and resolved to become "spiritually perfect," no matter what the cost. This project meant eradicating within herself all traces of self-interest and generally dissolving all the ties that ordinarily hold a person to the mundane world of human affairs. It meant obliterating her emerging sexuality, her need for human companionship, and her enjoyment of all the simple pleasures of life. Spiritual perfection, as she pictured it, also involved acquiring the Christlike qualities of kindness, compassion, and mercy. As a way of carrying through her resolve in action, she looked forward to becoming a nun and missionary, and to spending the remainder of her life helping unfortunate people around the world.

After graduating from high school, she made an effort to put these plans into effect. She entered a convent with the expectation of drawing closer to Jesus Christ and attaining inner peace and fulfillment. The rigorous training and instruction she encountered there, however, were utterly unlike the union with God she had anticipated, and instead of achieving perfection and tranquility, she came to feel deeply

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confused and depressed. At the end of her first year she found herself in chaos, and again felt abandoned by Jesus Christ. Her plans to become a nun and missionary were therefore relinquished and Jane returned home to live with her mother.

She remembered thinking that something disastrous was occurring in her life during the period after leaving the convent. Terrifying sensations that she described as "inner deadness" afflicted her, along with relentless depression and periodic outbursts of anger. Although she was now twenty years old, Jane was still unable to form relationships with anyone outside her family; and her anxiety kept her from becoming involved with any of the young men who occasionally expressed interest in her. She talked over some of these matters with her priest and, following his suggestion, entered on a brief but fateful course of treatment with a Catholic counselor who worked closely with the Church. This man consulted frequently at convents and seminaries and was himself a deeply religious person. Jane saw him on a weekly basis for eighteen months and, with his help, obtained a part-time job in a charity organization that was overseen by the bishop of her diocese.

Shortly after this therapy commenced, Jane developed great love and respect for her counselor. He seemed to her to be a very spiritual person and their weekly meetings quickly became the center of her life. So far as it was possible to determine, the major portion of their time together was spent in informal exchanges touching on Jane's everyday experiences and often also on various aspects of her counselor's work in the area of civil rights and other social causes. At no time did Jane disclose her secret relationship to God that had been the theme of her inner life, and the counselor apparently did not recognize the extent of her emotional disturbance. As time passed, she increasingly experienced him as a special person with qualities setting him apart from other human beings. She was particularly impressed with his ability to cope with the suffering of other persons, and imagined that he was taking on to himself the pain and misery of hundreds of people. Sometimes it seemed to her that his compassion was without limit and that the whole world was depending on him. In part because of such perceptions, Jane offered support and sympathy to him and listened patiently as he told her of his work for the Church. She also remembered experiencing a strong sexual attraction during this period, which confused and bewildered her. Jane's counselor now seemed to be a perfect and holy figure, and she was terrified to let him know about any of her secret ideas and feelings.

In a state of growing inner turmoil, exacerbated by losing her job with the charity organization, Jane one day suggested very tentatively that perhaps she should stop coming to the counseling sessions.

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She recalled her counselor replying, “Oh Jane, now what would I do without you?” This response added to her confusion and she then dramatically shouted the words: “Jesus Christ abandoned me!” As she recounted it, her counselor’s jaw dropped in surprise. He mumbled something to the effect that Jesus had not abandoned her, and she walked out of his office—never to return. She could not explain clearly why she had broken off their relationship in this way, except to say that he had seemed unaware and unconcerned that she was falling apart before his eyes. The counselor made no attempt to contact Jane after their last meeting. A few weeks later she was hospitalized in a psychotic state. Her psychiatric records from that period indicate that she made statements concerning the Second Coming of Christ and the mystery of the Holy Trinity. Thus began the long series of psychotic episodes that were to disrupt her life over the next several years.

The delusions that appeared during this period never became fully systematized, but rather remained loosely organized and interconnected. Jane identified herself with the Holy Spirit, her former counselor with Jesus Christ, and the bishop for whom she had worked with God the Father. She also anticipated the Second Coming of Christ and looked forward to the end of the world. On the Day of Judgment, she was to be elevated into the Holy Trinity, along with her former counselor and the bishop. Sometimes she was overwhelmed by a feeling of great inner holiness and awaited a proclamation from Rome that she had been declared a saint. On one occasion she imagined she was flying through space to Rome, where she planned to sit on the lap of the Pope. On the other hand, she also frequently thought the bishop was about to be elected pope by the College of Cardinals.

Jane entertained the idea that she was pregnant, though still a virgin, and once told a psychiatrist she had experienced sexual intercourse with Jesus Christ. At other times she implied that she had been impregnated by the Holy Spirit. She often claimed to be experiencing an immense pain of some kind, sometimes linking this pain to the feeling that she had been abandoned by Jesus Christ. She also spent a great deal of time painting during this period when she was in and out of psychiatric hospitals. Her paintings were chiefly concerned with religious themes, e.g., the Crucifixion, the Resurrection, and the Holy Virgin, but there were other recurring images of the world being torn apart, roses dripping with blood, and vivid representations of fire with the words, “I AM PAIN,” “I AM ANGER,” or simply “I AM,” scrawled across the canvases in large capital letters. As can be seen, these ideas and images are confused and even contradictory

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at a number of points. There is nevertheless unity and coherence in the way in which they express the themes of Jane’s life. Let us now consider the subjective truths symbolically encoded in Jane’s delusions and describe how an understanding of these truths aided in the conduct of her psychotherapy.

The Delusions and the Course of Psychotherapy

The psychotherapeutic approach taken in this case initially consisted in building a relationship that the patient could experience as concretely real and reliably available. Jane at that time seemed to be more involved with the products of her imagination than with any of the actual people living around her, giving her new analyst the impression that for her the world of other human beings did not really exist. In the beginning he did not respond directly to any of the voluminous religious material that she expressed, but tried instead to shift the focus of the sessions to more concrete aspects of their interactions. In addition to spending many hours simply listening to all she said, the analyst engaged her in conversations about her physical appearance, discussed her daily activities in the hospital, and encouraged her to participate with him in various art projects. Jane was never disturbed by these interventions and, in fact, seemed to enjoy them more than when her therapist tried to follow the streaming of her religious fantasies. Engaging in a direct dialogue concerning her delusions seemed impossible, for such conversation led her invariably to experience disorganizing feelings of excitement and godlike power.

Although the concrete interventions of her therapist seemed to serve as a means of establishing rapport with the patient, they bypassed the central core of her religious preoccupations and thus were not sufficient to bring her out of her psychotic state. One idea in particular that seemed to gather strength over the first months of treatment involved what Jane described as “my plan to reach my gold.” The word “gold,” it was later understood, condensed the two words “goal” and “God,” expressing the idea that the goal of her striving was precisely to become *one* with God. It is also worth mentioning that Jane experienced occasional visitations by Jesus Christ in terms of dazzling flashes of *golden* light. What her plan entailed was a program of meditation and prayer that she believed would exert a peace-making force upon the world and ultimately bring about the Second Coming of Christ. “Reaching my gold” meant beinglifted up into the Holy Trinity.

On the first occasion that her analyst expressed reservations about

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this plan, Jane forcefully denounced him for trying to interfere with her sacred mission on earth. She asserted in loud, commanding tones that if the analyst wanted to be a part of her life, he was obliged to participate in her plan and follow all her instructions regarding it. One such instruction was for him to immediately telephone her beloved former counselor and arrange for her to meet with him. She imagined this meeting as the first step toward bringing an age of eternal peace and tranquility to the human race. The meeting was also to be a prelude to her ascension into the Holy Trinity.

It was now dramatically clear that Jane had experienced the analyst’s reservations about her plan as a threat to the organization of her world and that it was in response to this threat that she resurrected the tie to the counselor. In retrospect, though not recognized at the time, it seems likely that Jane had already perceived her new analyst’s initial failure to respond to her religious preoccupations,

along with his efforts to shift her attention to other matters, as a turning away from her reality and an imposition of his own. This repeated the trauma she had experienced when her adored former counselor turned abruptly away after she had opened her secret world to him. It is possible, looking back, that the disorganizing feelings that developed in response to her analyst's occasional direct comments on what he saw as delusions were the result of her sensing that his remarks were threatening to the constructions in which her last remaining hopes were then embedded. The expressions of Godlike power that ensued at such times, and the archaic longings for and delusions of merger with God, were, in all likelihood, urgent compensatory efforts to restore these structures in the face of the assault she was experiencing. It seems possible that had the analyst been able to comprehend this unfolding intersubjective situation, and to communicate this understanding to the patient, the delusional spiral might have been averted.

It was through the eventual understanding of Jane's efforts to involve her therapist in the enactment of her delusional plan that he finally recognized the implicit truths symbolized in her religious fantasies. His perception of these subjective truths in turn enabled him to adopt a stance with his patient that was responsive to her deepest needs. He grasped Jane's plan to achieve union with God through ascension into the Holy Trinity as a symbolization in religious images of her need to rematerialize a bond to a loving paternal figure—a need that had dominated her life since the time of her father's suicide. The tie to the father, it will be recalled, was the principal medium within which Jane's early self-definition crystallized. The circumstances and aftermath of his death presented her not only with the

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loss of a central selfobject, but also with the *invalidation* of her whole historical experience of their relationship. This invalidation arose first out of his implicit rejection of her in his willful act of suicide and, next, out of the family's relegation of the father after his death to the effective status of someone who had never been. The loss of the father, followed by the family's turning away from his life and death, together with the covert demand that she also renounce her tie to him, provided the specific context for Jane's first secret ruminations on the figure of Jesus Christ. Her embracing Jesus may therefore be viewed as an effort to preserve a remnant of the shattered and invalidated selfobject bond by encapsulating it within the symbols of the Catholic faith. The subjective truth inherent in Jane's delusional linking of herself to Jesus Christ was that the very substance of her being had been, and continued to be, bound up in the connection she had felt between herself and her beloved father. Later assertions that she had been abandoned by Jesus Christ equally reflected core truths of her existence, for such claims gave tangible form to the devastating experiences of desertion she had endured at the hands of her father, her family, her teachers, and her first counselor as well.

Jane's demand that contact be established with her counselor, the man whom she identified as the incarnation of Christ on earth, expressed once again her need to resurrect and concretize the lost prior selfobject bond, following her experience of her analyst as someone who was once again requiring repudiation of this vital tie. Her increasingly desperate efforts to involve her new therapist in the enactment of her delusional plan was understood as an urgent communication of her need for a different kind of response from *him*. He had never considered or observed the effect on her of his persistent efforts to redirect their conversations toward the concrete aspects of their interactions. Now, however, he recognized that she required a more powerful intervention, one that would establish the possibility of rematerializing the lost and deeply longed-for selfobject bond *within the transference*, rather than solely within her delusions. He also understood that his failure to comprehend the meaning of her urgent demands for help with her plan was being experienced by her as a new abandonment, repeating and magnifying the long history of abandonments that had so catastrophically affected her life. This could only further entrench the delusions that encapsulated both the history of desertion and her unmet archaic longing.

Bearing these general ideas in mind, Jane's analyst adopted a different strategy at their next meeting. Rather than allowing her to continue speaking of her religious plans and her goal of meeting with her old counselor, he stopped her from talking and insisted that for

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once she was to listen to what he had to say. He stated unequivocally that there was to be no meeting with her former counselor. He told her that he was bringing a new plan into operation, a plan in which she would become well again and return to live with the people who loved her. He added emphatically that he was himself the only person in this world she should be concerned about seeing, for it was in their work together that the goal of this new plan would be attained. In spite of Jane's initial resistance to these ideas, the analyst firmly insisted that she understand what he was communicating to her. She finally stopped objecting and began to cry. For perhaps twenty minutes she sat quietly in tears and then thanked him and ended her appointment.

The analyst's new understanding of Jane's need for him to assume a central place in her world marked the turning point of the therapeutic relationship and was followed by a dramatic diminution of her religious preoccupations in favor of a renewed interest in the actual persons of her social world. To Jane, the therapist's changed stance dramatized his understanding of her deepest longings and needs, and she responded by forming a profound idealizing relationship with him. Each day she brought paintings and other gifts, and when she was upset he became the only person who could console her. There were to be sure many times during the period after Jane's initial improvement when she would again begin to dwell on the figure of Jesus Christ and her own special place in the Holy Trinity. This occurred primarily when the new bond that had been established was threatened or temporarily disrupted, for example during separations. She constantly feared and anticipated desertion, and reached in the early stages to even brief interruptions in their work as if the fragile bond connecting them had been completely ruptured, as it had been with her father. At such times it was necessary for her analyst to resume their frequent contacts and reaffirm his new and more active stance in the therapeutic relationship. As the bond was in each instance reestablished, the delusional concretizations receded and the progress of Jane's recovery continued.

After some months, during which the idealizing selfobject transference bond seemed to be stabilizing, Jane's mixed feelings of deep sadness and rage focused on her father began to emerge in the therapeutic sessions. Until this time Jane had been more concerned with Jesus Christ than with her father, and in discussing his suicide only spoke of how badly her mother had been injured. But now, with the increasing understanding of the devastating truths symbolized in her religious delusions and the concomitant restoration of the severed tie to her father within the therapeutic transference, she was able for the first time to become furious at her father for deserting her. Her

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hostility alternated with expressions of profound grief and loss. Having found a validating intersubjective context in the therapeutic relationship, Jane began a mourning process that had been blocked nearly twenty years before and, at the same time, revived the archaic bond that would enable her to resume the arrested process of her own psychological development.