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Paul Parin

A case of „Brain-Fag“ Syndrome: Psychotherapy of the Patient Adou A. in the Village of Yosso, Ivory Coast Republic

(Translated by Patricia Klamerth)

During the course of our ethnopschoanalytical field research among the Anyi of the Ivory Coast Republic, a young man named Adou A. made an appointment to talk with me. My interviews with him, begun in the interests of our study, developed into effective, psychoanalytically oriented psychotherapy. The case report has been published in German (Parin, Morgenthaler, Parin-Matthèy, 1971), but was not included in the American edition of our book (id., 1980).

The disturbances from which Adou A. suffered are typical of many students of high-school and college age in West Africa and frequently compel their victims to give up their studies entirely. The course of psychotherapy sheds light on the genesis and the internal dynamics of the disturbances involved against the background of the culture-specific psychical development of a young man living in an Anyi coffee-growing village located in the rain forest belt of the eastern Ivory Coast. Insofar as possible, the method and the technique of resistance analysis followed the pattern established in Freudian psychoanalysis. No remuneration was requested or offered. The interviews were conducted in French and took place in an open-air tent, furnished with a table, two chairs, and a cot, which I had set up in the shade of a tree on the outskirts of the village of Yosso (approximately 300 inhabitants).

PRELIMINARY INTERVIEW (1 FEBRUARY 1966)

In a courtyard in Yosso a young man in European dress advances to greet me. He is the grand-nephew of Madame Akouassi, whom I regularly supply with medicines, and whom he addresses as "maman" (mother).

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With great politeness he delivers his "first news," explaining that he has come from Abidjan with the village chief of Yosso, Monsieur N., to work for him, and that he will be

going out into the rain forest with the foreman, whose job it is to mark the trees to be felled for their precious wood.

He also tells me that he is sick. He has lost his memory and thus has had to abandon his studies. He informs me that two psychiatrists (Dr. Abeh in Bingerville and Dr. Duplessis in Abidjan) had examined him thoroughly because of his complaint-his head, his eyes, blood tests, and EEG-and had found nothing organically wrong. Nevertheless, he insists, there *is* something the matter with him. His mind no longer functions properly, and he is bothered by an itching under the skin (he shows me the inner side of his lower arm).

When I suggest that he come to my medical consultation hour, he replies that today he has to go out into the rain forest, but that he will come without fail tomorrow at nine o'clock. (Much later, in one of our therapy interviews, Adou asks me what this treatment is called. At my reply, "psychoanalysis," he recalls that one of the two psychiatrists had mentioned that he might be cured by this method, but that there was no one in the Ivory Coast Republic who was able to apply it. He adds: "It's a good thing that I have finally found someone here in Yosso.")

FIRST INTERVIEW (2 FEBRUARY 1966)

I arrive in the village at eight o'clock and, with the help of some children, unlace the tent. Then I go down to the road where I meet Adou.

Adou chats with me on our way to the tent, and as soon as he is seated opposite me, he continues the conversation. We are "two intellectuals in a Negro village"; on this basis he is able to identify with me. At the beginning of the hour we are disturbed several times by villagers who want me to treat them. I greet them briefly and ask Adou to interpret for me and explain to them that I will examine them later. Soon he begins to do this independently, calling out to them before they reach the tent and telling them to go back to the village and make appointments with my "assistant" (our interpreter, François) to be examined.

Later on he often comes back to this identificatory response, remarking about how dreadful it is that the people here in the village have no medical care and how sorry he is for them. Things were better in the village in which he grew up; there, at least, they had a medical orderly, and the hospital in Abengourou was only twenty kilometers away. In Yosso, though, when a child gets sick, it simply dies. And this, he feels, is very wrong.

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It becomes clear to me later that Adou himself feels like a child who has no one to take care of him and who might simply die. His self-pity is expressed in various forms, such as when he wonders just how I happened to come to Yosso, and pretends to himself that I am being paid by the government as a doctor to help the people here. Actually, the village means little to him; he is not one of its inhabitants. He is a stranger here. And despite the fact that he is in the process of consulting me, this means that I am only here for the villagers and have no intention of helping *him*.

Without any prompting on my part, Adou describes his illness. He has two groups of symptoms which are closely related, one group in his head, and the other in his body. When he speaks of the latter group, he usually points vaguely to the inner side of his arm or occasionally to his chest.

Adou feels a pain in his head, between his spine and the back of his head, and this pain is constant, except when he is asleep. This is the consequence, or perhaps an accompanying phenomenon, or perhaps the reason for his inability to remember anything. Prior to his illness he had only to listen attentively in class and he would remember what the teacher had said. He was good in examinations and was always able to repeat what he had learned, not always by heart, but at least the sense. He had only to read a thing through once to be able to remember it. But since his illness began, he has found it impossible to remember anything, no matter how hard he tries, even when he goes over the lesson several times. And it's not only his lessons-he can't remember "anything at all." He forgets everything people tell him to do, everything he sees, reads, or hears. His head is very sick. The second group of symptoms, the physical ones, are either the cause of his forgetfulness, or are the result of it, or are connected with it. He can feel something moving around in his body, worms underneath his skin; they leave him no peace, he is already weak and has lost weight, as anyone can see. People can tell from his face, especially from his eyes, that he is sick. (Adou is powerfully built and is obviously well-nourished. His eyes and face are perfectly normal; his expression is somewhat depressive.)

Adou describes his ailment as suddenly appearing "two years ago" when he was attending school in Bassam, and as a result of it was forced to repeat the same class twice without passing. Since that time the ailment has continued unabated, with no sign of remission, let alone improvement. Later on we shall have to reassess and correct all this information.

Adou describes his symptoms in somewhat the same fashion that gravely depressed European patients usually speak of their ailments, though it must be admitted that his mood is far less depressive. Sometimes he seems fearful, like a typical hypochondriac, sometimes

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resigned and hopeless; sometimes he bemoans his fate and blames others for it; and sometimes-when he speaks of the worms in his body-one has the impression that he is the victim of physical hallucinations. All in all, his laments are more resigned, more stereotyped, more matter-of-fact, and less demonstrative than those of hysterical European patients.

So far, Adou has been speaking spontaneously, interrupted only by occasional questions from me. Now he begins to repeat himself, telling me again about the two psychiatrists who had examined him and giving me to understand that they had deliberately withheld the proper medicine. Once again he intimates that there is no one who is willing to help him.

When I make no reply to this, he repeats the account of his illness, especially his inability to remember things. At this point I venture my first interpretation, explaining to him that he has experienced some very bad things and that this is why his head refuses to remember anything. At first he accepts my interpretation; he laughs, but then comes right back to the stereotype account of his symptoms.

I interrupt him after a moment and explain to him the basic rules of psychoanalysis, emphasizing that he must talk with me for one hour every day and tell me whatever comes to his mind.¹ I point out that this is the only proper treatment for his illness. He would lie on the cot, completely relaxed, I would sit behind him, and he would tell me his thoughts, just as they came to him. Again, to begin with he is delighted and agrees. But then an objection occurs to him, and he informs me that he will be in Yosso only until Friday. I reply that we can't possibly get very far by Friday, that treatment of this kind requires much longer. Hereupon he says that he could come back to the village after his trip and continue the treatment. He adds: "It would be better, though, if you would give me some medicine. That would be quicker and simpler." My response to his request for medicine is to assure him that I will tell no one anything about what we discuss together

¹ To choose interviews of one hour a day, as with European patients, may not be appropriate to other cultural settings. All three members of our team felt this suited our Anyi partner. I would not advise maintaining this setting in other cultures if it seems to provoke resistance or acting out.

and that this discretion is necessary so that he can tell me everything. I promise him that I will always interrupt our conversation if we should be disturbed by visitors.

This confirmation of my willingness to concern myself with him and to keep his secret has an immediate and extraordinary effect. It appears-not only at this moment, but also during the later course of treatment-that Adou is capable of accepting friendly interest in exchange for the "object withheld," but that his feeling that he is somehow being taken advantage of is not so easy to dispel.

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Adou starts to relate the story of his life, beginning with the period of poverty and loneliness in Bassam and going on to his childhood, then the later years, with their setbacks and disappointments. The episodes he narrates are not chronologically ordered, but related in keeping with the contrast between the time before his illness-when everything was good-and the period after his illness began-when everything became bad. This turn for the worse is now attributed to the evil machinations of his teachers or of Monsieur N., who favor others over him or withdraw their patronage for selfish reasons and discriminate against him, and now to his poor physical condition. It is significant that Adou's complaints of pains in his head and of his weakened body with its peculiar internal upheavals appear consistently when he is forced to recall sad, lonely periods of his life. His accounts of occasions on which he played a more energetic role, presumably during periods when he did not feel so alone, generally end in a repetition of his suspicions of evil-intentioned persons, suspicions that I would immediately regard as paranoid distortions of memory if they occurred in a European. The most important events in Adou's life are outlined chronologically below. He contradicted himself several times in his account of his most recent years. His conscious belief that his sickness began while he was attending school in Bassam and that it resulted in the unfortunate dependence on his uncle, Monsieur N., which began immediately thereafter, could not be substantiated. The onset of this illness is the only significant episode in his life which-later on during the course of treatment I shall have to place at a different point of time. Though all his other memories were subsequently embroidered in great detail, it was possible to confirm them during treatment. Adou has no idea how old he is-and in this he resembles most Anyi who were born in a village. He gives his age as 19 or 20. The reconstruction of his life story makes it seem more likely that he was about 23 at the time he came to me for treatment. He was born and raised in a village located some twenty kilometers from Abengourou

along the road leading to Agnibilekrou. He is his mother's only child. He reports that from early childhood he was always alone; not only did he have no brothers and sisters, but he was also without playmates. His parents are planters. He makes no mention of whether his mother or father ever had other marriage partners, either before or after his birth. He describes them as simple people who were never very successful in life because neither had important relations of any kind who might have helped them along. They worked their plantations separately, but together they managed to save enough money to be able to send their son (then about 9 or 10 years of age) to a foster father in Agnibilekrou so that he could attend school there. Adou proved to be

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such an apt pupil that he was able to pass the examination admitting him to a secondary school ("college"). He tells me nothing about this foster father, but does mention that he had no friends or playmates during that period and was often alone.

After passing his examinations, he enrolled in the secondary school in Bassam. There he did not live with a foster family, but rented a room of his own, bought food at the market, and cooked for himself. His father had given him 2000 or 3000 francs*. When his money ran out, he wrote to his father. He often had to go hungry because it took such a long time for his parents to send him money. During the school vacations he was unable to return home (as he had been able to do when he was still in Agnibilekrou) .

Apparently he was unable to make any friends in Bassam. He was different from the other young people, he explains, and his clothes were different. When he sees that I do not understand what he means, he says: " Just look, my shirt is all ragged." (And in fact Adou does have on a brightly-colored, extremely tattered shirt of European cut with a pair of blue jeans that are rather the worse for wear.) He complains that his schoolmates, like the people here in Yosso, were unable to understand why he wore a ragged shirt. But he didn't want any other shirt, and in fact he didn't have any others; he was what he was-different from the others.

Apparently Adou was one of the poorest pupils in Bassam and-either at the time or later-had made a virtue out of necessity. He deliberately dissociated himself from his school fellows and voluntarily renounced the prestige that better clothing would have conferred (this presumably made it possible for him to avoid having to reproach his parents, who were unable to do any better for him). On the other hand, Adou developed the fantasy (or formed the opinion) that the teachers in

Bassam had been bribed by the parents of other pupils, who were richer than his own parents, to have him removed from school in order to give his place to a wealthier boy. In his mind this unjust discrimination goes hand in hand with the other reason, namely that his sickness prevented him from learning his lessons properly.

Adou's later attempts to complete his secondary education were apparently interrupted by intervals lasting months, or even years, during which he lived in the household of his “uncle”, Monsieur N., in Abidjan. His first attempt took him to the vocational high school, which he attended only a few months; later he enrolled in the Naval School in Grand Bassam, where he stayed for nine months. According to one version,

* In 1966 1000 CFA francs was equivalent to U.S. \$4.50.

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he did well in this school and passed his examinations at the end of the trial period, but then was dismissed for the same reason as in Bassam; the instructors, all of them whites, were corrupt and sent him away so that they could give his place to a child of wealthy parents. According to a second version, he enjoyed the months at the Naval School, where he did well and never contradicted his teachers, but-again for the reasons already mentioned-failed to graduate. In still a third version, he speaks of his illness-it was the Naval School that referred him to the two psychiatrists-as the reason why he had to give up his studies there.

He tells me that if he could have followed his own inclinations, he would have become a mechanic or a medical orderly. Even now, he says, he could enroll in a two-year course for medical personnel, but he does not intend to do so because he would be handicapped by his illness and only fall again. He would like to have a real profession and earn money so that he could send something to his parents.

Adou's accounts of his various failures create the impression that, presumably for years, he has been so lonely and so depressively inclined that he is no longer capable of studying with any prospect of success. He does not blame his parents for this, but rather his illness, his teachers, and the doctors. This is a conspicuous deviation from the norm, because other Anyi who have failed in school in similar fashion invariably tend to blame their parents; also because we have regularly observed that in other Anyi young people the active renunciation of attractive clothing and of association with comrades is never a permanent character attitude, but at most a temporary form of behavior that can be traced back to an acute affront. In Adou's case (he is capable of actively renouncing things

which he passively wishes to obtain), the fact that he seems less depressive than many other Yosso or Bébou young people who are better off than he is may be connected with this achievement of his ego.

For some time now, probably even prior to his attendance at the Naval School, Adou has been living in the household of Monsieur N., for whom he voluntarily performs odd jobs without payment. Adou has frequently accompanied him on business trips as his interpreter, for Monsieur N. has never learned more than a few words of Adou's language. Monsieur N.'s obligations towards his assistant are just as vaguely defined as Adou's tasks. When Monsieur N. needs him, he has him summoned and issues his orders. Adou receives no salary and demands nothing of him, though he does expect Monsieur N.'s mother to look after his needs, at least to see that he is given his meals.

Even in the simplest assignments, says Adou, who has now come to the end of his life story, his forgetfulness is such a handicap that he is not good for anything. He relates that Monsieur N. sent him twice from Abidjan to some village (to Yosso perhaps?) to collect a few cans of

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paint. Each time Adou made the trip for nothing because on both occasions he had forgotten his purpose.

Here I present my second interpretation: this kind of forgetfulness is a sign that Adou has something against his employer. Perhaps he does not want to do anything for Monsieur N. because Monsieur N. does not provide for him properly. At first Adou laughs and admits that this is quite possible, but then he adds that it's not exactly the same thing as when one goes into a shop for something and then cannot remember what it was. His mind is simply unable to retain anything at all, it goes completely blank, and there are animals underneath his skin-he looks worriedly at his forearms, as if he expected to see them there-and he can feel the animals all through his body.

My interpretation was evidently premature. I declare today's interview at an end, while Adou, still thinking of his bodily sensations, begins to speak admiringly of how, by treating its inhabitants, I am contributing to the health of Yosso.

The course of this interview was similar to what one can experience with rather lonely, timorous, youthful patients in Europe. Adou's mood fluctuated between a childlike expectation (occasionally developing into a depressive wish fantasy), that the doctor finally was going to find out what was wrong with him and would help him, and a

disappointing conviction that nothing could be done for him, that all was hopeless. Sometimes his trouble is other people (his teachers and instructors), and sometimes the sensations he feels in his body. His suspicions are directed only briefly and very vaguely towards me and-consciously at any rate-not at all towards his parents or Monsieur N. Although his attitude towards his illness has paranoid overtones, and although the description of his symptoms is more consistent with a grave disturbance of his body feeling than with hysterical disturbances, he does not go so far as to assert that his mind has been bewitched. His loneliness, his poverty, and his lack of contact with his fellows seem to bother him very little; he sees nothing abnormal or pathological in these conditions, but rather accepts them as a part of his personality.

Adou speaks excellent French. During our talks his emotional involvement is good. What he has to say is expressed much more coherently and clearly than is the case with other Anyi young people. Nevertheless, a good deal of his life story remains obscure, incomprehensible.

At this point, it should be emphasized that during psychoanalytical exploration we deliberately accept the disadvantage of certain gaps so as to not disrupt with our questions the order of narration selected by the patient. For example, throughout the entire course of treatment we learned nothing about the relationship between Adou and the foster-father in Agnibilekrou with whom he lived during the five or six years of his schooling there and in whose home, as we discovered later, the first

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symptoms of the boy's illness appeared. On the other hand, by the time the treatment was nearing its end, it had become clear to us that while Adou accepts orders from some authority figures (such as Monsieur N.) without resistance, an over emphasis of his submissive role hems him in and makes him ill. He has no expectations of positive wish fulfilment (care, attention, affection) from such figures. When he is confronted with failure, he feels more persecuted by others than disappointed in himself. There are other authority figures to whom he submits, his parents for example; in this case there *are* wishes involved, some of which he fulfils by means of identification. Conversely, he feels the wish to care for them. Disappointments and other conflicts are warded off primarily through identification. Finally, there is a third type of authority figure from whom Adou expects a great deal. As long as he is able to identify with these authorities, his mood is slightly manic. Originally, these figures were gratifying, good objects, capable of being

projected in any direction, as required. These are figures one strives to emulate, not figures to whom one must submit. When they emerge from Adou's fantasy into his real environment, they, too, are often disappointing. Such persons probably partake of the idealized parent images of early childhood. Disappointment in them leads either to a feeling of sadness, to the oral wish to be given something, or as is the case with the first group of figures-to paranoid anxiety.

SECOND INTERVIEW (3 FEBRUARY 1966)

When I arrive in Madame Akouassi's courtyard to bring her the promised medicine and to pick up Adou, I find him rocking an infant in his arms. Three small children are dancing around him in delight and playing with him. Madame Akouassi 's is standing nearby, watching the scene. Politely, Adou places the infant in his aunt's arms.

On our way to the tent, Adou tells me that he gets along best with children "until they are so big" (he indicates the height of a 10to 12-year old child). "Children of this age like me and I like them; but when they get old enough that they could be my friends, something always goes wrong." During the session that follows, he interrupts his account of his unhappy fate with a repetition of his remark about how well he understands small children. This leads me to assume that up to that age he enjoyed a happy childhood. It was only after he left his parents and after the onset of puberty that things began to go wrong for him.

Spontaneously, Adou begins to tell me about an affair that had the whole village holding its breath yesterday. A young man, a stranger from Korhogo, had made use of a sly subterfuge to sneak into the bed of a

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married woman. The woman's husband heard of what was going on, returned home unexpectedly with some of his friends, and caught the adulterer in flagranti. They gave him a good thrashing and he had to flee to the forest. Adou finds the whole business amusing; he is quite clearly on the side of the husband and morality.

Despite the relaxed, matter-of-fact fashion in which he relates this story, it contains the most important theme of our second session, a matter which is apparently a serious personal problem for Adou himself. He cannot permit himself to be like that young man who wants to sleep with a married woman, the mother; by avoiding aggressive rivalry, by

submitting, and by renouncing his own wishes, he stands safely on the side of morality, but is as helpless as a child when it comes to coping with his life.

He continues, assuring me that he does without attractive clothing and thus renounces the society of companions; he is content when he has enough to eat and drink. The only reason he wants to earn money is to be able to build his parents a better house. When I suggest that his renunciation also gives him a feeling of greater independence, he does not understand what I mean. Getting along without attractive clothes, companions of his own age, and girls does not seem to be easy for him, nor can he conceive of wanting to be more independent. All he needs is good health -and he begins once more, as in our first interview, to enumerate his symptoms, asking: "Isn't there some medicine to cure this itching under my skin? Can't they operate on my head?"

These hypochondriacal, imploring pleas are in striking contrast to the energetic and ruthless manner in which Adou chases away village patients who come to consult me during "his" hour.

I explain to him that if he is so ill, he is neither able, nor expected, to assume responsibility for his own life, that it is up to others to care for him as if he were a child, but that these others, myself included, would disappoint him, too, just as he had been disappointed as a child. But all this has no effect on his stereotyped laments, and he goes on to describe a terrible cough from which he suffers. I point out that I have a white colleague in Bébou who also coughs the whole night. Since Adou identifies with me in keeping our interview sessions free of outside interruptions, I expect him to identify as well with my attitude towards illness.

My remark fulfils at least half its intended purpose. He continues to speak of the "misfortunes", that befall him continually, but there is hardly any further mention of his physical ills and none at all of his cough. I interpret for him, saying that all these misfortunes caused by other people-his parents' poverty, the fact that he was unable to find

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work in Abidjan, that his teachers discriminated against him in school, that Monsieur N. never pays him for his work, that the young men in Yosso never talk to him but spend their time running after girls-simply mean that there is no point in his even trying to better his lot, since it is always the others who are to blame for his difficulties.

This interpretation elicits an unexpected response. Adou sits up, suddenly pulls off his shirt, kneels beside my chair, and leans over backwards across my knees, so that I am confronted with his bare chest. He places his hand over a thickened cheloidal scar about six centimeters long over the sternum, then seizes my hand and guides it to the scar so that I can feel it. I remain silent. Adou straightens up slowly. "It would be good," he says, "if that scar could be operated on. It's too bad it's not a tropical ulcer, because then a shot of penicillin in the buttocks would cure it. I've shown it to doctors and orderlies several times, but they all say there's nothing they can do. I always do just what they tell me to, buy all the medicines, but I'm still sick. I can't learn anything and that's why I can't go back to school."

Obviously my exhortation to him to be more active has enhanced the transference of passive-homosexual desires, by means of which he hopes to ward off the danger (castration anxiety) inherent in a phallic competitive attitude. The acting out I have described came impulsively, suddenly; the cheloidal scar had never figured previously in his complaints. I merely assure him that he is a fine fellow, that the scar won't kill him, and that he doesn't need an operation.

Adou resumes his position on the cot. He has overcome his anxiety; I have neither assaulted him sexually nor operated on him. He has become "a fine fellow" and is busy identifying with what I expect of him as such. Admittedly, the term has a meaning for him that is specific to himself and to his milieu. He criticizes the young people of Yosso. They are lazy, he asserts, and have no respect for their elders. When their fathers reprove them, they answer back and call them assholes ("con"), and if the fathers try to beat them, they strike back. They are good for nothing and will never succeed in life. On the other hand, he reveres his parents and has always obeyed them; it is only that they are poor. This is not his father's fault, for he had no uncle. This is one of the disadvantages of the matrilineal inheritance laws, and it is these laws, the system, and fate in general that he criticizes, not his father.

Now that his castration anxiety has been overcome, for the moment anyway, and he has been able to identify with me in order to ward off a passive-homosexual impulse, he is in a position to adopt independently the "normal", behavior pattern of the Anyi, to submit to authority and to criticize intelligently.

On the other hand, his passive dependency (or its pathological component) has not been overcome by any means.² He realizes that he finally ought to learn some trade, or at least complete his treatment with me, but Monsieur N. would never permit him to take up an occupation-out of pure selfishness, so that he can continue to exploit his nephew-and he will surely send him away from Yosso, and that will be the end of the treatment. Today, to be sure, Adou no longer speaks of his employer in such glowing terms as yesterday. I am tempted to give Adou a letter for Monsieur N., asking him to let his nephew stay in Yosso for a while; this (i.e. the counter-transference it reflects) makes it clear to me just how intensely my patient is appealing to me. On the other hand there would be nothing gained if my interference only served to subject Adou to my authority rather than to that of his uncle. I would simply be helping him to transfer to me the dependency strivings that make him so helpless and unsure of himself .

In the absence of any reaction to his fears on my part, Adou resumes his tirade against the young people of Yosso. "Not one of them is willing to talk with you. I'll be back tomorrow at eight o'clock." With these words, he himself for the first time takes the initiative in arranging for continuation of the treatment.

The course of the second interview suggests that the patient's complaints, though still hypochondriacal and anxious, are hysterical rather than depressive-psychotic. The fear of adopting an active, masculine competitive attitude seems to correspond to castration anxiety, which is warded off partly by a turning to (anal) passivity and homosexual object choice (in keeping with the negative outcome of the oedipal conflict), and partly by conversion. The peculiar overtones coloring his physical complaints as well as their paranoid character (less pronounced today) suggest that Adou's anxiety has its origin in pre-oedipal fears. Occasionally he is able to overcome both his passivity and his anxiety through identification. It seems clear that his childlike attitude towards me and

² The culture-specific passive dependent attitude of the male Anyi is further discussed subsequently. I am convinced that the best, or even the only, way to further the art of psychoanalytically oriented interviews with people of non-western cultures (as well as with lower class Europeans) is to make early interpretations of resistance. This way the deepening transference prevents interruption of the sessions with partners who have no (e.g. "research-patients") or little motivation to continue (as Adou). Of course in this second session I could not be sure how much of Adou's passive dependency was culture specific and how much was not. At least I knew that when the scar was exposed his acting out was intense as was my feeling that I should help him against his uncle. To interpret attitudes which are culture-specific does no harm at all, no more than interpretation of normal behavior in our culture. Rather, it facilitates subsequent steps aiming to distinguish idiosyncratic from ordinary traits.

towards his parents, even though it, too, is passive-dependent and masochistic in character, cannot be regarded as truly pathological, primarily because it is accompanied by better ego performance, a reasonable way of looking at things, and a keen intelligence. Adou's comments on the deplorable social and hygienic conditions in Yosso, on his parents, and on the consequences of the (now superseded) traditional law of inheritance through the maternal lineage are alert, well organized, and reflect intelligent interest on his part. When he is confronted with his illness, his unhappy situation, and especially with the problem of whether or not Monsieur N. may make it impossible for him to continue his treatment, he is as helpless as a toddler; even his use of language becomes childish and falterin.

THIRD INTERVIEW (4 FERBRUARY 1966)

Adou:

“There is a certain sickness here, which makes children have fits, once a week or once a month. They act as if they were crazy, but not quite. They're not crazy and they're not normal; they just do whatever they please. “ (A little boy of about ten, who looks erethistic and somewhat feeble-minded, refuses to be chased away like the other children; he remains standing about ten meters away from the tent, sometimes pulling faces and sometimes smiling slyly.)

Adou:

(continuing) "These children can't be brought to their senses. It's all the same whether you say something nice to them or threaten them ... They don't act like normal children. They refuse to obey. They have to be spanked, to feel it on their own skins, then they'll obey. By the next time they've forgotten everything and refuse to obey all over again."

A few moments later he jumps up, grabs a stick, and chases after the feeble-minded boy, but does not strike him. Apparently he wants to show me that this is the proper way to deal with them.

I interpret this as an appeal to me; this is the way Adou would like me to deal with him, then he would be satisfied. He himself is not crazy, of course, but not normal either, because he forgets everything. Yet Adou is utterly frank and confiding with me. I have the impression that he has not warded off the passive-homosexual transference to me. The idea of being beaten serves on the one hand to gratify a desire of punishment; at the same time it emphasizes the distinction - those little boys need a thrashing; I don't, I'll obey when I'm told to. During the course of this

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interview I offer a number of interpretations: “You want to keep on being a little boy”; “You don't want to grow up because then you feel alone”; “You think like an adult, but your character is like a small boy's-as long as you were a little boy, you were happy at home. And you were an intelligent little boy, that's why you still want to go back to school, just as you did then.”

Adou's reply to the last interpretation is rather surprising: “You can waste a lot of time with girls. The other boys run after them, but I don't even talk to them any more.” And this, he says, is the reason why he is never able to get along with boys of his own age, why they refuse to accept him. And he concludes his lengthy speech with the words: “I can't just make up my mind to lead my own life. First I have to get rich and take care of my parents, and then, maybe, I'll be able to think of girls.”

I interpret: “You're afraid of girls and you're afraid of male companions of your own age. You want to give up both and continue your schooling. That way you may be able to help your parents. And that's something you're not afraid of.”

My patient lies on the cot, completely relaxed. He replies to my interpretation as follows:

Adou:

“I want to go on working with you, to get to know myself better, and to get well at last. But I don 't dare ask Monsieur N. to let me stay here in the village. If you could give me a letter for him, then surely my uncle would allow me to stay here. But I don 't know whether that would be good or not.”

Parin:

“I don't believe that would be good. It would make you just as dependent on me as you are now on Monsieur N. and as you used to be on your parents.”

Adou looks around at me in horror, sits up on the cot, and then cannot help laughing. On the whole he seems much more relaxed. He has spoken of his illness three times, very briefly-once when he was talking about his school, once in connection with his mention of girls, and now, in response to my last interpretation. He unbuttons his shirt and asks me whether it might not be possible after all to have the scar removed by surgery. This time I reply: “So far you've always gone to see the medical orderly. If you now turn yourself over to me and I cut something out of your body, you hope that it will make you well again. Then you would have submitted to me completely.”

He makes no reply to this, but his mood undergoes a change. He sits up on his cot and inquires very objectively about the training of medical orderlies in Switzerland. After a fairly long interval he comes back to his scar and tells me that the orderlies had once removed such a scar from his back. He adds that the result was not at all satisfactory.

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Adou continues to relax on his cot till the end of the hour. He talks about how much he enjoys going out into the rain forest alone. He goes fishing and watches the animals. Many human diseases are transmitted by animals that are sick. Once he had even written a letter to the Ministry of Health, suggesting that they set up a veterinary service to deal with this problem, but naturally he had never received any reply. It was always that way whenever anyone suggested something sensible. Towards the end of the hour, a few children appear outside the tent, but-as is usual whenever Adou and I are deeply engaged in conversation-it is no problem to get them to leave. Adou tells me once again that the villagers do not like him, “because he is a stranger”, (thus no longer because he is poor or because he dresses differently ...).

My interpretation of his wish to be a small child again brings us to his rejection of the opposite sex. And here he expresses his desire for dependency more directly. I am to protect him from Monsieur N. At the conclusion of our interview I interpret for him the passive desires he projects to me, as evidenced by his wish to have me operate on him. As in the previous interview, this results in his identifying with me and at the same time in an enhancement of his self-esteem and in an improved functioning of the self as a whole. I make the following entry in my records: good therapeutic success through interpretation of passive-homosexual desires; reinforced identificatory transference.

FOURTH INTERVIEW (10 FEBRUARY 1966)

Adou has gone to Abidjan with his employer, leaving me a message to the effect that he would be back in a few days. This was six days ago. When Adou returned after three days' absence, I happened to be away. Yesterday he drove to Bébou to look for me with the white foreman hired by Monsieur N.

In other respects as well, Adou is now taking a more active part than before our interviews were interrupted. It is possible that my interpretation of his passive submissiveness may have had some effect, or perhaps, now that he has been "compelled"

to submit to Monsieur N., he feels 'surer of himself in his relationship with me. N. is a violating, evil figure, a split off father-*imago*, while I represent the good, nurturing aspect of the father-*imago*. The latter assumption is substantiated by Adou's passiveness in allowing me to lead him to the tent, despite the fact that he had been looking forward to our interview and had been waiting for me. Back on his cot, he complains about the people in the village, saying that they wouldn't even give him a place to sleep. He had had to spend the entire night in a deck chair. He also complains about his employer-if

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he'll look for another job. N. is not the only employer in the world. He brusquely sends his great-aunt away when she comes into the tent to consult me.

When Adou once more adopts his "altruistic" pose, when he begins to stress his own modest way of living and to emphasize how sorry he is for the poor, suffering, ignorant people of Yosso, I make it clear to him that he is trying to think in the way he believes I think, and that he is thinking for others in order to avoid having to think about his own problems.

And-predictably-he starts to speak of the problems connected with his schooling. His memory is simply too poor, he complains. I assure him that I have never noticed it, and he admits that his head no longer bothers him quite so much as it used to. But it's not just because of his memory, he continues, he ought to look for a better job. He'll never get anywhere with the few thousand francs that Monsieur N. pays him (so N. does pay him for his work; apparently his feeling that N. is exploiting him is somewhat exaggerated). "I've got to have a profession and earn some money. The entire village is living on Monsieur N.'s eternal promises, which he never keeps. I'm going to look for another job." Adou is no longer bothered by his inability to finish his schooling or by his mental trouble. Nor does he ever mention the other, physical symptoms any more. He has achieved identification with me and, once I have made this clear to him, is able to make use of some of the activity potential-and aggression inherent in him. The "evil" Monsieur N., who had forced him to interrupt his treatment, is no longer an omnipotent pursuer, but merely an unsatisfactory employer. The difficulties now lie outside, no longer inside Adou himself.

Girls and women are mentioned only briefly. Adou feels that the ones here in the village tend to marry men who are too young and not yet able to provide for their children. In fact, he says, when a child gets sick, the only hope is that kind-hearted whites may turn up

on the scene and treat it free of charge; otherwise it would be doomed to a sorry death. Adou himself is the poor abandoned child who is brought to me to be cured; he imagines himself at my side as I treat my patients, and he links this positive and identificatory transference with his own personal problem, namely that he is unwilling or-as I suspect-unable to develop any relationship with a woman.

FIFTH INTERVIEW (11 FEBRUARY 1966)

Adou is in a cheerful and friendly mood. He finds ample opportunity to identify with me when he speaks about the dreadful conditions in the village. He has no job at the moment, and goes fishing a lot; he intends to go today, too, though it is so hot that the fish certainly won't be

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biting. He speaks with great interest of my car. He seems much healthier now, like a rather childish young man.

About halfway through the hour, I decide to seize the initiative; I say that he is talking about "the general interest" when he means only his own. When he fails to respond, I interrupt him several times, pointing out that he is talking only about things we have in common, never about things we do not share.

He begins immediately to rail at Monsieur N., accusing him of being not only a half-breed, but also a skirt-chaser. Right after he arrived in the village, he forced a young woman to sleep with him and got her pregnant, and now the same thing has happened again. He's constantly deceiving his wife in Abidjan. He lets his aged mother do all the work. Even in the capital he had treated her like a common servant, so that she finally decided to move back to the village in spite of the lack of conveniences here. And here in Yosso, Monsieur N. goes right on being inconsiderate and fathering children right and left. His old mother is expected to cook for his concubines. The villagers are sadly mistaken if they believe that a half-breed like him, interested only in his own profit and pleasure, will bring them work.

When he senses that the hour is coming to an end, Adou resumes his gentle mood and once again becomes the "good little boy", whose only aim is to take care of his parents and-he mentions this in passing, as it were-perhaps to go back to school again after all.

Adou's tirade against Monsieur N. reveals envy, homosexual admiration, and submissiveness. His interest in chemistry, medicine, and disease-an interest shared with me-probably also represents an attempt to cope with his hypochondriacal anxieties.

SIXTH INTERVIEW (12 FEBRUARY 1966)

I have the impression that Adou, who seems even more childlike and more gentle than during the previous interview, is struggling to maintain his precarious psychological balance. A plump, healthy-looking little boy dressed in an extremely skimpy shirt who dares to approach our tent all by himself fills Adou with delight. "He's so sweet and round, so nice and strong, really more like a baby, even though he's older. What I like most about little children is that they're still so awkward." He identifies himself with the little boy, who is awkward and alone, and also with the mother who cares for him. Abruptly he informs me that he has to leave Yosso. He cannot ask anyone to give him a place to sleep, and he expresses his pity, not for himself (at least not in so many words), but-altruistically-for the other poor inhabitants of the village.

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When I explain that what he really wants is to be taken care of himself, he comes back to his inability to remember anything.

Adou:

"For instance, I can never remember the number of our mailbox or the license number of Monsieur N.'s car, though I've seen them both often enough."

Parin:

"You're mad at him, that's all."

Adou:

"That's right, I am. I'm going to look for another job. I'll stay here a few days more and then go fishing along the Comoe (River). And then I'll go to Abidjan and try to find a real job, so that I'll have something to fall back on when I finish my treatment here. But my memory is still not so good as it should be."

Parin:

"People are very likely to forget things they find unpleasant, especially things from childhood."

Adou:

“I was very happy as a child ...Our village was not so backward as Yosso. But those people who have forgotten things just don't want to admit to the doctor that they have venereal disease; then the doctor makes a wrong diagnosis and can't cure them. It's impossible for a European to know about all the diseases that occur in Africa. My own mother has venereal disease. She can't have any more children. Two days before her period is due, she has pains down there. If I had enough money, I would take her to a specialist in Abidjan. She ought to have an examination. She's still young, and she could easily have more children. That would be the best thing for her .”

Parin:

"You're ashamed to talk about your own sexual difficulties. That's why you want to help your mother .”

Adou:

"There are people who go out into the rain forest, suddenly keel over and are dead. Sometimes it's their own fault."³ (Because they go into the forest on a day when it is forbidden.)

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Adou relaxes on the cot and, undeterred by my questions, discourses fluently on deadly enchantments until the end of the hour. He himself has witnessed cases in his own village. A young girl, for example, had met sudden death in this fashion. Sometimes it happens to old people, then again to young persons. Despite my attempt to link these tales with his recently expressed fear of venereal disease, he continues to speak in general terms: "You have to ask the shamans; if the reason was not sickness, they just know. I know nothing about it myself." Before he leaves, Adou informs me that he wants to interrupt his treatment for two days. Tomorrow he intends to go fishing, even though the fish aren't biting right now, and the day after tomorrow is Sunday.

Even though the positive relationship with me and the identification with me as a European, a doctor, and a stranger in the village have brought about some improvement,

³ A reader of this paper objected that id-analysis would be in place here; e.g. one should have interpreted the dangerous rain forest as a wet vagina. I may add that id-analysis could have been easily justified with Adou as with other Anyi informants. It certainly would provide data about sexual practices within the cultural context. However, we felt that a more or less strict adherence to ego-analysis provides a better understanding and a less confused picture of psychic structure, while the provoked irruption of sexual strivings tends to obscure the whole relationship unless a longer series of interviews is feasible (see Jean-Pierre in Parin et al., 1980; pp. 248-305). About Adou's sexual life, see pages 192-204.

Adou still does not dare to speak of his sexual anxieties. It is striking that he speaks so frankly about his mother's venereal disease. This is certainly not due to any uninhibited sexual interest in his mother, such as a non-repressed oedipal passion or anything of that kind. In the first place, the Anyi see nothing shameful in speaking openly about the sexual functions of the female, and in the second place, as a result of Adou's renunciation of the male role, that is, his desire to remain the "good little boy" (negative outcome of the oedipal conflict), his relationship to his mother has been desexualized and remains relatively accessible. In terms of transference: I am not supposed to heal his own sexuality, for that would give rise to anxiety (castration anxiety) in him. Instead, I am to heal his mother so that she can have more children. I am even to help her become pregnant so that he will no longer have to fear her, but can remain a child himself and can gratify (with me) his passive and (with his siblings) his active female maternal desires. My assumption (confirmed by later interviews) that Adou feels himself sexually disturbed might well imply that it was his shame at the inadequacy of his maleness, and not his anxiety, that prevented him from talking about his own sexuality. Yet neither his gestures nor his behavior indicated any feeling of shame whatsoever, and he was always able (prior to this time and afterwards) to speak about sexual matters without the least embarrassment. The renunciation of male sexuality is a matter of personal pride for him, for it brings him into harmony with the ego ideal of the "good little boy." The assumption that my treatment had mobilized not shame, but castration anxiety, can be regarded as confirmed. Initially this castration anxiety is warded off by repression and by the

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cathexis of a displacement substitute (I am not the one who is sick; my mother is). When I expose this defense by interpreting it, it is replaced by another one.

Adou is no longer afraid. His thinking is coherent, and his behavior towards me is characterized by self-confidence. He is talking about the deadly influence exerted by witches and shamans. Judging from the content of the dangers he mentions, a regression from the phallic to the oral phase seems to have taken place; he speaks of being poisoned, devoured, annihilated instead of being sexually injured. His defense mechanism is now projection instead of the previous repression and displacement to a different object. Accordingly, we can assume a regression to a more primitive form of defense. Inasmuch as he shows a general improved functioning, that is, there has been a trend towards the

restitution of various ego functions, we can surmise that the regression described above took place "in the service of the ego." Oral (aggressive and libidinal) desires evoke less anxiety in Adou than phallic (and anal) ones. The projection to witches and shamans is in keeping with the animistic beliefs of his people. This means that the discrepancy between the ego ideal (whose individual shaping conforms to the ideals of the subject's environment) and the ego itself becomes smaller. The objects to which aggressive and dangerous libidinal tendencies are attributed have not merely been projected outside; they have been conjured away in the form of definable spirits and shamans. (The animistic religion espoused by the Anyi can be viewed as a successful attempt to localize threatening objects outside instead of inside, in the self.) And finally, this form of defense permits its user to cope better with reality. For spirits can be conjured away, and shamans can be bribed; it is possible to evade these "external" dangers by resorting to a form of behavior similar to that of our phobic patients. The process of consulting the magicians had taken the place of the anxiety-filled thoughts of sexual injury that the individual is unable to banish; for it is the function of the magicians to provide the means with which danger can be met.

We have given detailed consideration to an example of "normal" behavior on Adou's part because it offers a chance to derive the functioning of a defense mechanism from the event (warding off castration anxiety) that gave rise to it and then to describe the psychology of the resultant behavior with some degree of exactness. The projective-animistic attitude is typical of all our Anyi subjects. The situations in which such behavior is appropriate are many and varied; the need to ward off castration anxiety is only one of them.

Identification with me has not given Adou adequate protection against his castration anxiety. He has to interrupt the treatment a second time, thus, in effect, abandoning me. There is a good deal of passive defiance

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in this, as there is in his illness as well, and also a certain anticipatory defense-it is he who abandons me, so that I cannot abandon him, which would be tantamount to a punishment of sorts. For he also loves me, and is not only passively submissive to me as he is to Monsieur N. As long as he identifies with me, he can take part in the most satisfying conversations, his thinking is logical and ordered, and he enjoys a high degree of self-esteem.

In a European youth as well, the narcissistic gain to be derived from such an "ideal" relationship would be a predictable development and a useful aid in the process of treatment. It seems to me, however, that Anyi men *must* have an identificatory relationship to a phallic-active or even aggressive authority figure if they are to function well. For one thing, they cannot overcome their castration anxiety any other way, and for another, their own identification with the female is so strong that this is the only way they are able to acquire masculine character traits, not to mention a phallic-oriented behavior pattern.

SEVENTH INTERVIEW (25 FEBRUARY 1966)

(Resumption of the Talks Interrupted 13 Days Before)

Yesterday (on the 24th) I happened to meet Adou on the street. He greeted me in friendly fashion, but his expression was rather sad. He told me that he had been back for several days, but that now he was leaving for good, for Abidjan-tomorrow or the day after-in order to look for a decent job. He says that he is fed up with Monsieur N. and that there is no point in wasting his time here any longer. And he says goodbye to me. (I know that there is a car leaving for Abidjan tomorrow)

I suspect that Adou is disappointed in me because I had to be away for two days just when he returned. But he seems so determined to leave that I have no opportunity to test this hypothesis. I can only request him to go to Goldy (Parin), who is in Yosso this morning, to take a Rohrschach test. He offers a number of rather lame excuses, which I refuse to accept, saying: "No. You have to take the test in any case, and it might just as well be right now." Whereupon he agrees.

(No interpreter is needed for Adou during the test. He gives numerous answers, some of them highly original, enters into the spirit of the game, and-in the end-is well satisfied with his own performance. He experiences the request to interpret the shapes as a kind of school examination, which he passes with flying colors.)

Following the test, Adou's attitude undergoes a complete change. He told Goldy that he intended to remain here for a long time and to

continue his treatment with me. In reply to my query whether we should schedule more interview sessions, he answers, by all means, whenever I like. He gives me precise instructions as to where I am to pick him up-smiling broadly the while.

It is conceivable that the transference significance of the test may have calmed his castration anxiety-the father had sent him to the mother, he had been permitted to impress the mother as an intelligent son, and the father had no objections. In other words, I had made up for his disappointment at my not being available when he first came by undertaking something on his behalf. Quite probably it was my firmness in insisting that he had to take the test that brought about the change in his mood. His passive defiance, his spoilsport mood, and his intention of fleeing (akin to his earlier flight into illness) were overcome by the "gratifying" compulsion exerted by loving parents and gave way to joyful compliance.

During this interview, Adou makes no mention of his "illness" or of his schooling. He is now supervising-without pay, he says-the work going on at the house Monsieur N. is having built in Yosso.

Without any preamble, he suddenly asks me whether I have a remedy for "clap," adding that he has suffered from it ever since he was five years old. I encourage him to give me more details about his sickness. It turns out that since his fifth or sixth year he has had the feeling that there is something wrong with his genitals. He has noticed hardly any physical symptoms, except that about once a year he feels a slight burning sensation in his urethra for a few minutes after urinating. He is convinced that this must be a very grave illness.

I explain that this sickness, like the sickness in his head, is caused by his anxiety, and that this anxiety must be connected somehow with his sex life. Right away Adou loses interest in his own illness. He starts to tell me of his desire to become a doctor and says he would like to come to Switzerland with me for this purpose. He wants to be able to help people, as I do, etc., etc. I try to make it clear to him that the reason he wants to come with me and learn how to help people is that he himself needs help in connection with his sexual anxieties and does not dare to speak about them.

EIGHTH AND NINTH INTERVIEWS (26 AND 27 FEBRUARY 1966)

Once Adou happens to make mention of his "sexual disease," he takes refuge in a relaxed identification with me. He would like to be like me. In addition he would like to be with me and stay with me. He experiences

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my interpretations as rejections. Nevertheless he is not offended; in fact he takes pleasure in the fact that I correct him, and shows intelligence and eagerness in his efforts to become more like me and to learn from me. At this stage I probably represent the "good father," who also has maternal qualities and who takes an active interest in his son. The women have been eliminated; there is no longer any motivation for aggressions, and anxiety is evaded.

Adou would like to have my address, he would like to be as I am. When I try to show him that he is making an ideal figure out of me and that he would like to become what he imagines me to be, he visualizes himself in the role of a learned man, a scholar whose mission is to live and work for all mankind and not just for his own family.

During the next hour he asks me whether I wouldn't like to go fishing with him. He tells me that there are prehistoric settlements in the rain forest that he would like to show me-I could do some research there, or collect insects, like a professor from America whom he once assisted.

Since his speech is becoming more and more perfunctory and beginning to falter, I try repeatedly to make it clear to him that he is simply attempting to evade his personal problems and his anxiety. This only serves to make him more "European"; he speaks disapprovingly of the African "evolués" who migrate to the cities and let their villages go to rack and ruin because they are afraid of the devils out in the bush. Next, he takes up the topic of diseases, even including those that afflict European children, leaving them mentally deficient so that they fail in school because they are unable to remember anything. It is obvious that he wants me to correct him, to instruct him. Finally he is completely relaxed. He gives me his views on the conflict between the Russians and the Americans and then talks about my car. I make a note to show him during the next interview that the more alien, and thus uncanny, I seem to him, the more he must try to adjust.

TENTH INTERVIEW (1 MARCH 1966)

Adou opens the conversation with the topic of money, declaring that one ought to work and earn money as long as one is still young. Then, in the manner of an agent from one of the development aid organizations, he outlines a number of proposals for ways to help the young people in Yosso to earn more. I try to show him how alien I am to him, and suggest that this is the reason why he feels it necessary to act so "European." I tell him that he is afraid of me and that when he is here talking with me, he is no longer sure just where he belongs-with his family or with me.

This inspires him to relate a story he has heard recently. A Djoula had

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kidnapped two small children and had sold them for 200,000 CFA francs. The children were old enough that they could talk, and they insisted that they came from here, from Yosso. But the village had not reported any children missing. Finally, everyone accepted the explanation that these must be children from Yosso who had died long ago and now wanted to come back. Adou becomes thoughtful, and says: "I don't know whether this is a true story or one that people have made up. It's the children I'm thinking of. The whole business is strange. In a village the size of Yosso, the people must know whether or not a child is missing."

Adou's tale proves that my assumption is correct; he really does not know where he belongs. He has transferred his "family romance" to me. But he has come to realize more clearly where *I* belong.

My patient's eyes follow the flight of a pretty butterfly that has found its way into the tent as he muses: "The blacks say that when the butterflies gather in large flocks and rise from the grass like a blue cloud, it is time to get out the 'dabas' (picks) and go out into the bush to plant the cassava. That's what they say, and they do it, too. The plants that grow here are so different from the ones that grow where you live. You have no way of knowing how things are here."

Outside the tent a woman goes by, carrying a baby on her back. She stops and points at me, obviously trying to frighten the child. She is probably saying something like "Look, that's the evil white man," or "If you don't obey, the white man will get you!", She laughs as she speaks, and the baby laughs, too.

Adou:

"The children are afraid. As long as they don't see anything bad, they have no reason to be frightened. But their mothers show them bad things deliberately." (He sits up and changes

the subject.) "Here they don't have any marketplaces; the people sell their wares along the edge of the road. You should see the marketplace in Katiola, every Friday-you should see the pottery they sell, spread out over hundreds of meters. You'd like that. If you ever come back to Africa, you ought to make Katiola your headquarters."

Before I have a chance to reply, we are interrupted by Benoit, a Mossi whom I have treated and who has just recovered from a bout with pneumonia. He enters the tent thoroughly inebriated, sits down on the cot beside Adou, and stammers something totally incomprehensible in French. I stand up, shake hands with him, and maneuver him gently out

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of the tent. He departs with a friendly farewell. Presumably this was a thank you visit to show his appreciation for my having treated him successfully.

Adou:

"He's completely drunk. People start drinking early in the morning, and then they don't know what they're saying. There's no way to stop them. Benoit goes out to get palmwine before he even has breakfast. By midday he's drunk as a lord and has no idea what he's talking about."

Parin:

"Maybe you, too, are afraid of not knowing what you are talking about-like the woman who tells lies, or like Benoit. You were just telling me that I ought to go to Katiola. But right now I'm here, and there's nothing you can do to get rid of me."

Adou:

(laughs, pauses for a moment, then goes on): "When I sleep well, I don't have any dreams. It's the dreams that always deceive me. In my dreams I see myself living in luxury. I am in a beautiful house, where there's everything I could possibly wish for. Yes, that's the truth-when I dream, I deceive myself."

Parin:

"Have you had any dreams lately?"

Adou:

"Yes, I have. The day before yesterday. I dreamed about a huge shop-like the ones the Syrians have in the downtown section of Abidjan. It had all sorts of things for sale. It was beautiful to look at.

Sometimes I dream that I am in a car. I'm steering it-I know how to drive. Either I'm driving the car first, or I'm repairing it. Something is wrong with it and it won't go. I fix it and drive off again."

Parin:

"These dreams of yours fulfil wishes."

Adou:

"Exactly. But whenever I dream of a young girl, even when she's extremely young, it brings me bad luck. And that's not good at all. A dream of that kind lasts all night. All I do is talk with the girl, and it goes on and on. It's nice, and the girl is sweet, and I keep on talking with her. But it brings bad luck. I've learned that from experience."

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Because these dreams upset him, Adou had bought a book on the interpretation of dreams, and the book also said that dreams like his brought bad luck.

Adou:

"The day I was sent away from school I had a dream like that."

He tells me that he dreamed of the young girl three times, and that was a sign that something bad would happen to him at school.

Adou:

"When I dream that I am driving a car, or that I'm sitting in a pirogue, that's good. Then I can do anything I want; when I'm talking with girls, I can't."

Parin:

"You're afraid that something bad is going to happen, that you're going to be dismissed from school. Then you dream of something pleasant, something you want to happen-like talking with a pretty girl, for example. But that's something you're not allowed to do. You mustn't even do it when you're awake, you're afraid to. What happens at school is your punishment for having dared to talk with the girl."

Adou:

"Exactly the same thing happened in Agnibilekrou. I saw a young girl who was all alone. She was very young, and we spent the whole night together, talking. And the next day I got a falling mark on my essay. Before I knew it, I was two months behind in school, and I got further and further behind, and they told me I wouldn't be allowed to continue. That all happened because of those dreams."

Parin:

"What can you tell me about this girl?"

Adou:

"I just imagined her. I didn't know her. She was very young, younger than I was at the time. But it brought me bad luck. I got a falling grade and was expelled from school. That dream went on the whole night, and the next day I failed on my essay."

Parin:

"It could easily be that your desire to have a girlfriend interfered with your schoolwork."

Adou:

"Swiss watches are very good. There are very thin ones-I've seen them in the shops.

Yours is not so thin."

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Parin:

"I understand. The conversation is beginning to embarrass you, and you think that since I am fortunate enough to possess such a good watch, I ought to take a look at it and stop talking. As a matter of fact, we've been at it for 55 minutes. Let's stop."

Adou:

(laughs): "See you tomorrow!"

Once I have finally succeeded in interpreting Adou's "European" identification, now clearly recognizable as a form of resistance, he shows me-with his tale about the children who were sold by their kidnappers-how alone and abandoned he himself feels. He is afraid of losing his self-control here with me (like that woman, or like the drunkard, Benoit) and is able to admit that I, as a white man, am incapable of understanding him, and that, since no understanding is possible, he wishes I would go away. Here it is impossible to decide whether it is my alien status-as a white-or the fears Adou has transferred to me that have contributed more to the development of his resistance.

Once he is able to express with impunity the "aggressive" wish that I should go away, he confides his dreams to me, i.e., a part of his life over which he has no control. He begins with the wish-fulfilment dreams (corresponding to the Freudian "childhood dreams") that compensate for his sad lot in life, and recognizes them for what they are. Probably he interprets my comment to the effect that these dreams express his wishes as permission to confide in me even more. Anxieties that are latent in his dreams can be overcome by means of dream-work; for example he is able to repair the car .

The dreams about “talking with a girl”, which he tells me subsequently are clearly subject to a number of distortions. I restrict my interpretation to only one distortion-the fact that he views the dreams as portents and the misfortune that follows, i.e. his failure in school, as a magical consequence of the ill-omened dreams; I define the conflict that exists between his sexual desires and his duty to do well in his studies, and explain to him that his academic failure is a self-inflicted punishment for his forbidden desires.

The latent content of "we spent the whole night together, talking" may well be sexual. The "very young girls," whom he "does not know" could very well represent an older woman of his acquaintance, his mother, for instance, whom he longs for and whose sexual disturbances (with which he identifies) preoccupy his mind. But what I have learned thus far about Adou's personality makes it seem more likely that the , “very young girl whom he does not know”, stands for a “young boy whom he knows very well," and that "talking together" represents a

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compromise between his fondness for younger children, his desire for companions of his own sex, and the anxiety-evoking homosexual desires that he has defended against.

It is impossible to decide which of these desires are reflected in his dreams. The fact that Adou takes the initiative to end the interview tells me that his resistance is increasing again.

During the interview reported here Adou has revealed something more-or rather corrected previous statements-of the story of his life and his illness. His academic failure did not begin in Bassam, where he probably did not attend a secondary school (“collège”) at all, but much earlier, in Agnibilekrou, when he was living with his foster father and failed to pass the final examination in the primary school. In fact, in Bassam he was presumably trying to complete his primary education. I assume that the fact that he first told me that he had graduated from primary school and had encountered his first difficulties at the "collège" in Bassam - in other words, that he had lied to me-reinforced his fear and thus contributed to the development of his resistance. Thus his failure in school and the onset of his illness (at the same time or later) took place at a time when he was not yet living far away from home and could still visit his parents. Since he attended school in Agnibilekrou until he was about fifteen or sixteen, his academic difficulties may have begun with puberty. It is not improbable that his foster father, parents, or teachers may have warned him against going with girls because it might interfere with his studies.

ELEVENTH INTERVIEW (2 MARCH 1966)

At the beginning of the hour, for the first time, Adou is in a state of confusion, something which happens repeatedly to other subjects (Jean-Pierre and Elisa, for example) when they talk with us. Though he articulates normally, his speech is incomprehensible, exhibiting the total disregard for grammar and syntax characteristic of “word salad.” His ability to comprehend is presumably reduced as well. He mentions that he has just come from Monsieur N.'s house. I do not understand which house he means, the one that is now under construction, or the house of Monsieur N. 's mother. He becomes confused and begins to stammer, like someone who has been caught in a lie. He mutters something about meals. As if to calm him, I inquire whether he does his own cooking or whether he has someone to cook for him. He replies: "That depends on you."

After a few minutes Adou's confusion subsides and he is able to speak normally once more. He remains tense, however, more nervous than I have ever known him to be before.

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There is a good deal of excitement in the village today-the female shamans are going to dance. While we are talking in the tent, we can hear the sound of drums and excited conversation. A woman passes by, on her way out to the bush. Adou calls out to her: "You're going out to the bush today?" (It is a Wednesday , the day the spirits forbid people to work out in the bush.) She replies: "I couldn't care less. I'm a Christian." Adou turns to me: "The Attié" (normally Adou finds this neighboring people anything but congenial) "...they have no magicians. They pay no attention to that sort of thing. They're better off than we are." He pauses, then goes on: "Yesterday it almost rained. We get some very bad thunderstorms here. One time the wind blew off the tin roof of a house. The wind often comes during the night, and then it kills people; the houses are no protection ...And what people eat here is not good, either; it can kill you ..." In sentences that are barely coherent, he describes the uncanny and dangerous things that one is exposed to in Yosso.

On our way to the tent, Adou felt the urge to hug and kiss a child about one and a half years old. He explains: "Its mother neglected it. It was still crawling on its hands and knees. I taught it to walk."

-The other, older children are getting on his nerves today. The feeble-minded boy is there; there is also a saucy five-year-old girl, and three other children. They tease him and he threatens them, rushing out of the tent as if to grab them. The children act as if they thought he was playing tag with them. He picks up a stick and shakes it at them, takes off his sandals, and pretends to throw them at them. The children scream: “You can't catch us! You can't run because you have feet that point backwards, like the spirits in the forest!”

Obviously it is Adou himself, with his nervousness and his anger, who is making the children so excited that they refuse to go away. The feeble-minded boy stands balancing on one leg; he has wound his scarf around his throat and masturbates, grinning fixedly at Adou.

Some 40 minutes later, we have still not succeeded in getting a sensible conversation started. I tell Adou that he is responsible for provoking the children and that he is using his anger to keep them here because he doesn't feel like talking with me—all to no effect. Suddenly he leaps to his feet and holds out a coin to the feeble-minded boy. The boy approaches and is about to take the money when Adou grabs him by the arm and drags him into the tent. He lays him across his knees and spansks him as hard as he can. He releases the little boy, who holds his smarting rear and asks me for some medicine for it, then departs. Adou, now calm and relaxed, lies down comfortably on the cot. He is silent. Finally, I ask him what he is thinking about. He replies that he had gone fishing the day before with a small friend, evidently a boy of about five or six. They didn't go fishing on the Manzan River, or on the even

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broader Comoë, but along a tiny brook. Adou caught five fish, the other boy only one. It's ridiculous, he adds, how small the fish in this brook are, but he enjoyed it anyway.

Adou turns the conversation to food, asking me whether we eat frogs in Switzerland, too. The French eat them, he assures me. Here people prefer snails. The Mossi are not too fond of snails, but they love snakes. He speculates on what might be regarded as the best food for human beings. ...

Towards the end of the hour, he reverts to the Americans and the Russians. This is a "neutral" topic; both nations are far away, and we can discuss them together. The subject is a particularly good one for Adou, since it helps him to identify with me. In reply to his

question earlier, I had told him that I had been in the Soviet Union and that, like him, I would like to visit America some day.

Adou's confused state at the beginning of the hour, the tension in the atmosphere, and also his moodiness and the events leading up to the spanking of the feeble-minded boy can be regarded as a consequence of what he had experienced during the previous interview session.⁴ There is no doubt that Adou, fearful of being punished for his sexual desires, has developed a resistance that takes the form of reversible ego regression. He is confused, even his communicative competence is temporarily disturbed; his relationship to me is less close, and he is exposed to tensions which he is unable to verbalize and which drive him to aggressive behavior (acting out).

It can be assumed that my interpretation, namely that Adou's failure in school was either a consequence of or a punishment for his forbidden desires, was perceived not as a mitigating explanation, but rather as a threat. It is impossible to state with certainty whether or not we are dealing here with oedipal wishes, with phallic tendencies directed to the mother. They could also be passive desires to be violated, desires whose object (after the termination of the oedipal conflict) was the father. Adou has less fear of the latter type of sexual urges. His castration anxiety is warded off through identification and is replaced by the permissible

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masochistic desire to be operated upon (the business of the scar in the second interview) or otherwise medically treated.

It goes without saying that Adou's perception of my interpretation as a threat is based on a number of premises. Projection to physical symptoms typical of the "hypochondriac" and to the "paranoiac" persecutions practiced by his teachers has been superseded by a more conscious processing and internalization of the conflict.

In order to understand just what Adou is experiencing; we must think back to similar situations with European patients whose ego formation has been disturbed by a

⁴ A European patient could display a state of confusion and disturbed "word salad" speech to show to his partner how crazy he is, or to let him know: "Certainly you think I am crazy (for instance because I fear the shamans)." Among the Anyi, similar confused states are considered as inevitable normal events; they have no connotation of craziness. Incidentally, not even kings can avoid stammering this way (see Parin et al., 1980; pp. 306-308).

At other times, Adou has an attitude of detachment and contempt, sometimes he alludes to his involvement with and respect for shamans and other "magical" beliefs without disturbing our relationship. Perhaps this time he was afraid I could but would not protect him and felt helplessly exposed to these culture-specific agents of unconscious-aggressive and omnipotent phantasies.

particularly intense constellation of problems at the pre-oedipal stage and who suffer from neuroses characterized by pregenital fixation. Then we must review carefully the course of this particular interview.

An *uncontrollable development of anxiety* is responsible for the regression (including linguistic deterioration). The aggressor (unconsciously) is first of all the patient himself (phallic desires directed to the mother), while the *counter-aggression* stems from the partner (the avenging father or a violating figure, the father or the phallic mother). Once the regression has taken place, oral anxieties have been mobilized to replace the castration anxiety, or, more precisely, the castration anxiety is now expressed in oral form (uncanny fantasies, spirits, a deadly flash of lightning, poisonings). Adou is able to ward off oral anxieties by means of projection. Object cathexis is withdrawn from the analyst and is assigned to the women who pass by the tent, the female shamans, and above all the children. And this *shift of object* in itself represents a restitutive process—the oedipal objects, with whom the patient has conflicts he is unable to resolve for the moment, are replaced by other, preoedipal ones. Conflicts with the last-named group of figures can be resolved by projection (the female shamans, for example) and, above all, by identification. These identifications have special significance—not only for the interview described above, but also for the ego formation of our patient and, very probably, for the character development of a great many Anyi. For this reason we shall describe them in some detail.

The first group of identifications has to do with Adou's mother. This means that his behavior towards children reflects his experience of how his mother behaved towards him when he was a child. He takes care of infants, fondles them, and shows a motherly concern for their well-being; at the same time he chases older children away, lets himself be annoyed by them, threatens to hit them, and in the end carries out his threat. In these identifications with the mother, self and object are not clearly delineated. Sometimes the patient is the mother, and sometimes the child, the baby who wants to be cared for and petted, and also the toddler, who clings to his mother and provokes her with his defiance,

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who desires punishment to take the place of the tenderness that is no longer forthcoming. The fact that all the Anyi mothers we were able to observe demonstrated the behavior that we attribute to Adou's mother, serves to substantiate this reconstruction.

There is a second group of identifications far more specific to the course of Adou's life- for example, the identification with the maternal aspects of the father (in contradistinction of the rival father and his aspect as an aggressor). It manifests itself in defiant, provocative behavior towards the father and in ultimate passive submission to him. One facet of Adou's identification with his father was quite incomprehensible in the beginning and was not clarified until the fifteenth interview, when Adou related a childhood memory. I refer here to his oddly sadistic behavior towards the feeble-minded boy first enticing him with money to approach, then seizing him and beating him-which did not seem at all consistent with Adou's character .

Even earlier (in the third interview) I had suspected that Adou was trying to show me something by his treatment of the feeble-minded child-this is the way you should treat me; he has to feel it on his own skin. Unconsciously he was acting out what I, as a father, should do with him. At the same time he himself is the little boy who is spanked. The feeble-minded boy cooperates and demands some medicine for his smarting buttocks, just as Adou had asked me for medicine. That Adou has not simply worked off his aggressions and feels calmer for this reason, but that he has acted out and experienced the blows as if he had received them himself, is clear from what he tells me afterwards: he is a very good little boy, he goes fishing for little fish with another little boy, and is interested in food. Using this as a point of departure, he is now able to re-establish the more mature form of his identification with the aggressor , with me, the European, which he had been forced to abandon during the previous hour.

TWELFTH INTERVIEW (3 MARCH 1966)

My patient arrives in an ebullient mood. He announces that Monsieur N. will be coming to Yosso sometime during the next few days. Casually, he remarks that he no longer intends to let himself be exploited by his employer. For example, when Monsieur N. sends him away on a trip he is going to demand money from him, instead of having to beg or borrow the necessary funds and then wait patiently until Monsieur N. sees fit to reimburse him for his expenses. The impression he makes is not exactly that of a clerical employee in Europe; he is more like a European teenager who does odd jobs for his father and has now reached the stage where he feels grown-up enough to be paid for them.

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Then he drifts into his altruistic “European” manner of speaking. His posture is tense; he begins to talk about medical matters and asks me a great many questions. He wants to know, for instance, whether there are many insects where I come from. When I decline to be drawn into this sort of conversation, he comes back to the Americans and the Russians. What interests him most is which of the two will be the first to send a manned satellite to the moon.

I remark: "Actually you're only interested in where there's a contest, a controversy-where one side can beat the other. All this friendly helpfulness of yours is just a substitute."

Adou:

"If the Russians conquer the moon, they'll be at a tremendous advantage." (This reminds him of some of the races in Africa, the Bete, for example.) "It's easy to tell them from the others, they're always quarrelling with one another."

Parin:

"There's even more difference between blacks and whites. You 're living in a permanent conflict with me, but you refuse to admit it."

Adou does not respond directly to my comment. His statement that the Mossi and the Anyi, different as they are from one another, both observe the custom of taking enemas, except that the Anyi use a rubber syringe and the Mossi a bamboo pipe, is actually intended as a protest. (It is as if he knew the answer to the question of why he cannot tolerate competition-because, like all Anyi, trained to passive submission by the daily enemas, he has been violated by the phallic mother.) He himself has stopped taking enemas since his mother no longer administers them. "I'm too modern. I use suppositories instead. That's all."

I interpret his submissive acceptance of me, whom he always feels constrained to place on a pedestal, and his passive, defiant obedience towards Monsieur N. as the consequence of a character attitude he had acquired at the time his mother was giving him enemas every day against his will and he still had to obey her in everything.

Adou points out how unhygienic enemas are; laxatives are much better; he takes them, too, now and then. He can hardly have misunderstood my meaning, but he cannot bring himself to accept it. He adopts his "European" pose in order to deny the content of my interpretation.

I repeat: "It's not your belly that suffers, it's your character. A person turns into an asshole ("con") when he always does what he is told and is scared to speak his mind if he thinks it may lead to a quarrel or to rivalry."

Adou's response comes like a shot from a pistol: "Do you have any children! Monsieur?"
Though he has often asked me questions about

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things in Europe, this is the first time he has ever asked me anything really personal. In the course of a rambling speech, it gradually becomes clear how much Adou would like to be my child. He goes on to say how absolutely necessary it is to have children, and that he, too, will have to think of having some day, so that they can take his place when he grows old and dies.

Adou is capable of pursuing adult, masculine goals. The passive-submissive behavior acted out during the previous hour could now be interpreted. His question "do you have any children?" shows that the transference to me has become firmer, is less impaired by anxiety and aggressive tendencies, and that he has managed to regain, perhaps only temporarily, a part of his active role as a male.⁵

I have to cancel our interviews for the next three days because of a trip to Abidjan. On the fourth day, I receive a short letter from Adou, very neatly and correctly written, explaining the reasons why he will not be able to resume his treatment for another two days. He now has a real job, and no longer feels "compelled" by Monsieur N.

And then Adou disappears from Yosso. On March 17th, two weeks after our last interview, I run into him on the street. He comes up to me with a broad smile and apologizes very politely for his absence, clearly annoyed with his employer because he had to accompany him to Abidjan and had had to leave so suddenly that he did not even have time to pack his razor .

He would like to come to talk with me the following day, but not until after the medical consultation hour, because he has some work to do first at the building site.

When I open the consultation hour down in the village, Adou comes in and says with some embarrassment: "Today I'm your first patient." For several days now he has noticed mucus in his stool, a symptom of the amoebic dysentery he used to suffer from. I give

⁵ The drift of his associations and his mood support the view that either he did not want to attack the therapist or he could successfully ward off such hostile feelings

him the appropriate medicine, and he thanks me, stopping a moment before returning to work to play with a baby on its sister's back, waiting its turn to be examined.

THIRTEENTH INTERVIEW (18 MARCH 1966)

When Adou once again begins to speak of sickness during the course of the hour, I suspect that the fact that I gave him medicine yesterday has reinforced his neurotic desire to have me treat him.

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I comment: "You're still afraid of diseases." To which he replies: "Naturally. If a person gets bitten by a snake, there's nothing he can do about it. But for diseases that don't kill you right away, you can at least go to the hospital in Abengourou or Adzopé ..." Adou is now more realistic in his attitude towards sickness. There is no longer any trace of his earlier irrational longing to be cured of his mental sufferings by having his body treated. Adou has divided the paternal figures upon whom he depends into two groups, the good ones and the bad ones. I am among the former. When I leave, he will still have his father to turn to. He can go home to his village any time he likes; if he should become ill, his father would take care of him. Adou complains about the bad authorities, primarily Monsieur N., and he tells me something about his experiences in Monsieur N.'s household. In the summer of last year, one of the schools to which Adou wanted to apply for admission required that Monsieur N. wrote a letter of recommendation for his foster son. "I didn't write anything good about you", Monsieur N. told Adou, "there's no reason why you should be able to do in two years what it has taken me forty to accomplish." In Adou's eyes, Monsieur N. is a bad fellow because he is half-breed. If he acted in any other village, as he does in Yosso, the people wouldn't stand for it. The people of Yosso had decided never to keep pigs again, because they made the village so dirty. Monsieur N., in his capacity as chief, gave orders that all the pigs were to be slaughtered. Then he himself went ahead and brought some more pigs into the village, and they run around everywhere and make the whole village filthy. Nobody protests. Nobody likes Monsieur N.; everyone is afraid of him because he is successful and powerful. If a thing like that happened in Adou's home village, the inhabitants would simply kill the chief's pigs, and keep on killing them until he realized that he couldn't get away with everything. But here nobody does anything. Adou is speaking in free association, completely uninhibited. The

village children no longer bother us. When they do come to the tent out of curiosity, they soon get bored and go away again. In his social and political views, Adou is less altruistic than he used to be, more like other Anyi. If Kwame N'krumah (who has just been granted asylum in Guinea after the army's coup d'etat) should try to return to Ghana, he would be killed. The Ghanaians, according to Adou, have always been the most savage of all. The peoples here along the Ivory Coast are not so cruel, except perhaps the Attié. When the whites first came here, the Attié killed them. He refuses to consider my objection that at that time the whites came as conquerors and enemies. Other Africans, he points out, soon discovered that they could get along very well with the whites. He himself was once in the land of the Attié, on

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foot. He was thirsty and asked for a drink of water in a village. They refused to give him any. That's the sort of people the Attié are.

The Attié are traditionally the "bad neighbors" of the Anyi. They put a stop to the conquests of the Anyi in the 18th century and drove them back into their present territory east of the Comoë River. The fact that Adou now shares the prejudices of his environment is a sign that his attitudes have become sounder, more normal. Many of the stories he tells me today reflect the slightly malicious satisfaction at aggressive actions that is characteristic of so many Anyi. The narrator takes pleasure in relating these aggressive events, but in the end dissociates himself from them-not for reasons of morality, but with an odd turning to the dictates of common sense. It is as if they were saying: "It must be nice to be able to fight so ruthlessly; unfortunately, I can't, so I have to try to gain my advantage some other way."

While he was in Abidjan, Adou went to two movies whose heroes impressed him *tremendously-Hannibal* and *Ben Hur*. Both heroes defeat their enemies, but refrain from killing them. My patient explains that they probably think it may be to their advantage some day if they spare their foes-after all, people have to depend on one another. This is the way he would like to be, too.

In the oedipal situation, the desire to kill the father is evaded. The sado-anal fixations lead to aggressions directed to rivals, and if these aggressions cannot be warded off by a turning to passivity, oral regression takes place. The more mature form of the latter is identification with the father in a form which partakes to a considerable extent of the earlier "oral-incorporating" modality of the identification process. Still another form of

regressive defense against sadistic aggressions is the wish to obtain an advantage of some kind from the enemy. We shall deal elsewhere with the change of object that takes place, from the rival-father to the mother, in this type of regression.

In the foregoing discussion, I have stressed a number of healthy, “normal” aspects of Adou's character, aspects which would strike the observer as peculiar or even pathological in a European. On the other hand, Adou has acquired insights comparable to those we try to bring about when we treat Europeans as well. During this interview he confesses: "I'm very easily discouraged. When I want something, and I run into difficulty getting it, I'm completely paralyzed. I'm incapable of taking any action at all, and I can't even think any more. I could resign myself to this state of affairs, because I really need very little in life. But I have other goals as well. I want to be able to help my parents some day, to have plantations myself at home, and to introduce new crops. The only reason why there's any point in staying with Monsieur N. is that I

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can learn something from him. Now, for instance, I have learned how a house is built. When there's nothing more he can teach me, I'll leave him."

FOURTEENTH INTERVIEW (19 MARCH 1966)

For a short time at the beginning of the hour, my patient is in a state of confusion, muttering that he had expected me earlier-or later, that he had missed me because he had confused the trucks transporting the first loads of lumber (huge vehicles, with a loading capacity of some 20 tons or so) with my Landrover .

As soon as he pauses for breath and leans back on the cot, his confusion vanishes. He asks me a question: “What is your little assistant (François, our interpreter) going to do when you leave?"

Adou has obviously been thinking of my departure, of the separation that lies before us. This is more realistic than his earlier wish to accompany me. His grief had led to bewilderment and regression for a short while (as during the eleventh interview).

I assure him that I can understand his worrying about the future and that I realize that he has good reason to be afraid of sickness.

Calmly, Adou goes on speaking and comes to the problem of “blacks and whites in Africa.” For the first time in talking with me, he emphasizes the legitimate interests of the

black Africans, without self-abnegation, but also without resentment. After exactly 60 minutes he suggests that we terminate our conversation. Adou has no watch, and from where he is sitting is unable to see mine, either. It is extremely rare to find such a precise feeling for time in an Anyi. In reply to my inquiry as to when our next interview should take place, Adou says: "Tomorrow is Sunday; I'm going fishing. I'd like to come again on Monday."

On Sunday afternoon (March 20th), I drive some women who have been visiting in Bébou back to Yosso, and we pick up a few young people on the way. There's a football game going on in Yosso today, and a dance in the evening. I run into Adou, dressed in the old, patched clothes he wears out in the bush and accompanied by several children, as he is just returning from his fishing expedition. He is in a happy mood and starts a conversation with me, in which he soon includes my passengers, but only after having stopped to pick up a baby, whom he rocks on his hip as the women do. He says that he has had a good day. The conversation turns to a minor accident that has just occurred—without my noticing it, a 19-year-old youth had hopped a ride by clinging to the rear of my car and had lost his hold and fallen onto the road, without, however,

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suffering any serious injury. Adou reacts like a true Anyi: "Good! That will teach him a lesson; if he ever tries such a silly thing again, he'll break his arms and legs."

Adou takes no part in the activities going on at the football field, where the young people are strolling back and forth, calling out to each other as they pass. They all seem nervous and uneasy, and the remarks they make are usually malicious.

FIFTEENTH INTERVIEW (21 MARCH 1966)

Adou resumes his laments about how awful it will be for Yosso when I am gone. I point out that I am leaving because I came here originally to carry out certain investigations that interested me, not to treat the villagers. Hereupon Adou begins to talk, quite sensibly, about his own future. If he cannot become a medical orderly, which he would like most of all, then he intends to take a course as a mechanic. Referring back to yesterday, he explains that there are two reasons why he does not like the young people in the village: first, because all they are interested in is spending money and buying attractive clothes, and second, because they have no respect for their parents. "Right now, my father is still

supporting me; later on I'll have to think about earning money myself. Now I'm still learning." It strikes me that this time he does not mention his desire to take care of his father .

Enthusiastically, Adou describes the wonderful days he has spent fishing and roaming about in the rain forest. It is there that he feels happiest.

"Even when I was a little boy, I always loved going out into the forest with my parents. In fact it was one of those times that my father beat me, the only time he ever did. I wanted to go out to the forest with him, and he didn't want to take me along. He gave me a five-franc bill to get me to stay home. That was before coins were introduced. I took the bill and tore it up. And that's why my father beat me. He kept the torn bill; later on they always used to show it to me as a reminder when I refused to obey."

It is the childhood memory of Adou's that explains his odd behavior during the eleventh interview, when he gave the feeble-minded boy a spanking. At that time he was trying to show me how he wanted me to treat him. He played the role of the father, roughly pushing away the little boy clinging to his legs, and giving him money to get rid of him, money that the little boy defiantly tears up. In the end, he finds masochistic enjoyment in his father's attentions, which take the form of a beating. This experience is repeated during treatment, when Adou is

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confronted with the prohibition of his sexual desires. As a "screen memory", his relation of this incident from his childhood helps me to understand the genesis of certain character traits which later impeded his development in the direction of male independence.

The wish to stay with his parents like a "good little boy" was in keeping with the affectionate, passive desires which Adou had probably transferred from his mother to his father. Since he was not permitted to remain at home (and in reality did not want to), his thoughts often revolve around the idea of returning home at some time in the future and taking care of his parents. And he is able to experience this happy, desired, and-for him-normal state when he goes fishing in the forest (for his father took him along after all) together with a few children (for his behavior towards the children is what he wanted his parents' behavior towards him to be). By renouncing his own phallic goals he has remained an obedient son, but at the same time childlike, ineffectual, and in fact, sick; he is unable to assert himself aggressively, or even actively. If he were successful in school, it would make him superior to his parents; if he were to go with girls, he would be acting

contrary to his parents' admonitions; if he possessed attractive clothing and enjoyed wearing it, he would be doing an injustice to his parents, who could not effort to buy it for him, and this would be a type of phallic exhibitionism. There can be no doubt that Adou's renunciation of money and success embodies a good deal of passive defiance, as if he were still tearing up the money his father gives him and defying his father to beat him. His father's money cannot tempt him to give up his passive, childlike wishes.

SIXTEENTH INTERVIEW (22 MARCH 1966)

Adou starts off the hour with a tirade against Monsieur N., insisting that he is not dependent on the latter's money. Referring back to yesterday's interview, I explain that his rejection of money is not due to the fact that his needs are so modest, but goes back to his defiant rejection of the money his father offered to him. Even today, I add, he is still trying to show people that if they don't like him, he wants nothing to do with their money.

Adou half turns to smile at me and concedes: "That's so, I never want money just for myself." But the people of Yosso are poor-"They have no doctor to take care of them. Everybody's forgotten them."

Parin

“What you mean is that I'll go away and forget all about you.”

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Adou shakes his head, then agrees: “Yes, that *is* what I mean. ., Then, for no apparent reason, he launches into a paean of praise for the Attié. When they have a child in school, the whole family gets together to contribute to its support, while Anyi children only turn to their immediate parents.

Parin:

“You are dissatisfied because your parents didn't contribute more towards your support, and because I'm not contributing as much as you think I should.”

Adou:

"I don't ever let anyone give me an injection. I'm against them. Not like the conceited people here in the village. When I need something, I take pills, but not so often that there's any danger of my getting used to them."

I try to make him see that he has become dependent in a different way than other Anyi. He does not wait impatiently for an injection, as the children do for their enemas. He renounces money and waits for someone to take care of him. When he sees that nobody is willing to, he becomes sad and has to treat his body with pills.

This time Adou accepts my interpretation. "That's true," he says, "but right now I feel fine and I don 't need any pills."

He mentions my coming departure, and says that he would like to give me a present. He has been out in the rain forest looking for tools from the Stone Age, but he is not very well acquainted with this part of the country and has not been able to find any. But he does tell me that the people who used to live here in prehistoric times left a monument in the Comoë River; they carved a rock that protrudes from the surface of the water during the dry period to resemble a girl's breasts, so that they appear to be floating on the water. If you walk past the rock and sprinkle it with water, there will be rain. This is one way to make it rain.

Adou falls silent. He yawns. He sleeps very poorly here, he complains, and has no dreams. If he could see his parents in a dream and talk with them, then he would go home to his village and visit them. He loses himself in the contemplation of plans for helping his village some day by introducing new crops on his plantations. After a lengthy discussion of such plans, he concludes:

Adou:

"Yes, in most families there are quarrels. When a stranger happens to be present, they're polite and friendly to one another. As soon as he' s gone, they start fighting again."

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Parin:

"I imagine there's some quarrelling in your family, too. If your father were really such a good man as you say, you'd probably be working with him on his plantations."

Adou:

"But he *is!* He has a very strong character. He doesn't drink. Only once, during the funeral festivities for his own father, then he drank a lot, but it didn't last long. He's not so fond of the rain forest as I am, though. He doesn't enjoy going out there. Even on Wednesdays I always used to go out. My father stayed in the village. But you're right, there *is* something my family fights about-my father and mother, that is-and they have for years. They can't

agree on how the work should be done; that's why they don't work together. My mother always wants to use the bushwhacker herself, she says she doesn't really feel alive otherwise. But my father says that's not right; you have to hire workers for that job. He won't touch a bushwhacker himself. He doesn't enjoy working in the forest."

Parin:

"Which one do you help when your mother and father disagree?"

Adou:

"I work with my mother, because my father has money enough to hire helpers. My mother has no money, and I prefer helping her because we both work the same way."

And enthusiastically he describes his mother's enterprise and efficiency in baking and selling a special kind of small round pastry; this brings her enough money so that she can manage on her own. His father has no say in what she does with this money, and she has used it to enlarge her plantations.

Parin:

"Your parents are probably very glad to see you when you come for a visit."

Adou:

"Oh, yes ...They are-but they always want me to sit around in the village while they're out working. They say it tires me too much to go out in the forest, and that if I get tired, I'm liable to be sick. Sometimes I try to sneak out early in the morning, but they always wake up and tell me not to go. But I go anyway."

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I establish a link between his parents' fears for his health and his own anxieties in this regard.

Adou:

"Yes, you're right. When I feel tired I always start thinking about what my parents say. Especially what my father says-you get tired and then you begin to be aware of your own body ."

Parin:

"Well, at least in this respect you are like your parents."

Adou:

(laughing): "No, I'm not like them. There are two things I don 't like-affairs with women, and quarreling. I can't stand them."

Parin:

“Then you think it's the same thing-to take a wife and to quarrel. That's why you're afraid to have anything to do with women. Because you're afraid of getting into a quarrel. And if there's no conflict with the wife, then you think there is bound to be one with her father, or with another lover.”

Adou:

"No, that's not it. It's just that I haven't reached that point yet. If I have a wife to take care of, I can't concentrate on making a success of my life. Supporting a wife requires all your energy. You have to take care of your family, and that's the end of your career."

Adou returns to the subject of his parents, assuring me that their quarrels are not really so serious. He himself could easily find a girl with whom he could get along, but this would interfere with his career all the same. Once again he loses himself in fantasies of the future-how wonderful it would be if he could attend the school in Bobo Dioulasso and become a real, trained medical orderly. But that school will not admit him because he has no high school diploma. Last year the school accepted only applicants with diplomas.

Adou falls silent.

Parin:

“You want to become a doctor, like me, or at least a medical orderly. That way you would have something from me. You have your fear of sickness from your parents. You would like at least what you want to become to come from me.“

Adou:

(after a lengthy pause) "Yes, I admit that. I'm thinking of your return home. What route do you plan to take? Are you going via Mali? Or is that too far?"

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Parin:

"Yes, by way of Mali."

There is a long pause. Adou's cheeks are wet with tears.

Parin:

“You are sad because I am leaving, and you can 't even become a medical orderly.”

Adou:

(laughing through his tears, wiping them away) "No. I'm not sad. I'm just thinking about how dangerous it is in those countries you're going to be traveling through. Won't you be

constantly being searched by the police? The people there are very strict with travellers. What will you take along in the way of provisions? There's nothing to eat in those places- nothing at all in Guinea, and very little in Mali."

I do my best to reassure him, and his mood becomes more cheerful. Now he is speculating about the adventures one can have on such a trip.

He concludes with the words:

"I'll certainly never be able to take a trip like that. The most I can hope for is that someday I'll earn enough to buy the food and clothing I need. But trips like that-I'll just have to get along without them. How often will we meet again before you leave?"

Parin:

"Once, or perhaps twice more

During this hour I make use of the insights Adou has gained into the conflict with his parents to show him that he has reached a deadlock in his passive, self defeating waiting for his parents to provide-in the last analysis, inadequately-for his welfare. He responds by describing his parents more realistically, telling me about the quarrelling that has been going on between them for years, and-inadvertently-making it clear to me why he cannot stand to live at home. Even his identification with his father's exaggerated, hypochondriacally colored fears for his health seems open to question. The "more mature" identification with me is untenable. He is sad because I am leaving him, and is able to cope with his grief .

SEVENTEENTH INTERVIEW (23 MARCH 1966)

It is obvious that my patient is reluctant to involve himself with me more deeply in the time we have left. Soon after the beginning of the

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hour, an ant crawls over his forehead. He removes it calmly with the words: "When they're very young they don't bite. The older ones do, of course. Sometimes even the young ones bite in self-defense if you knock over their hills."

Adou discourses on the problems faced by his people. He is skeptical of the abilities of the Africans, and does not believe that they will ever learn to study their land, their diseases, their habits and customs systematically and scientifically. If they were ever given grants for such research projects, the money would all be spent on food before the

projects even got started. Still, he no longer views the future so pessimistically as before. The 1964 law replacing matrilineal inheritance by inheritance through the paternal line was at least a step in the right direction.

Parin:

"But you yourself have neither a father nor an uncle from whom you can expect to inherit anything"

Adou:

"I don't need any inheritance. I can make my own way."

Adou asks me a number of questions, and I answer him more fully than I usually do.⁶ Then I ask him, in return, to answer some questions for me, too. I ask him about his sex life. Since he replies without embarrassment, and since his answers are detailed and contain no contradictions, I assume that the information he gives me corresponds to the facts. He informs me that he did witness sexual acts on occasion while he was living at home, but hardly ever spoke about them with his parents or his friends. He masturbated only as a child. At puberty he began to have nocturnal emissions; at this time he found it easy to get along with girls, and had intercourse with various partners on a number of occasions. He never experienced any difficulty in this respect. Many of his friends had trouble with delayed ejaculation as long as they were not well acquainted with their partners, but this was never a problem for Adou. Here in Yosso, he mentions, there are only two girls who are still unattached, and he would probably have no difficulty getting one of them. But neither one appeals to him. But because he has no girl here, he is having nocturnal emissions again, sometimes accompanied by dreams, and sometimes not. He is unable to recall the dreams. No, his "clap" has never bothered him during intercourse with girls; in fact it has never occurred to him in this connection that he might have a disease. Adou amplifies this clear and simple account with some remarks that appear to be much more problematical, concerning just how a young

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man goes about finding a girl to marry. The customs are no longer the same everywhere. To Adou the best system seems to be the one followed in his home village. The young man simply asks his parents to suggest a girl. Once permission to marry has been

⁶ My attitude was geared to transferring the interviews to a more superficial level as our departure from Anyiland was imminent.

received, the young man must then see how he gets along with his prospective wife. This includes sleeping together in order to make certain that the sexual aspect is also satisfactory. If it is not, he asks his parents to suggest some other girl. Any other system, Adou assures me, would be bound to have disadvantages. Here in Yosso, for example, a young man simply picks out a girl and declares her his wife—all without any ceremony, without any exchange of drinks or marriage gifts, and even though the families may not agree with the match. This only gives rise to dissatisfaction and usually leads to divorce. But even when a young man requests an older woman to act as intermediary, or perhaps one of his friends, or a girlfriend of the girl he is interested in, or—even worse—when the two families decide on a marriage without consulting the young people involved, as the custom used to be, the result is only trouble and unhappiness. It can probably be concluded that Adou is not suffering from a disturbance in sexual functioning; this does not contradict in any way the assumption that the phallic-oedipal phase of libido development in his case was such that he lacks the ability to feel and act like an independent male. Many European patients in whom a fixation to pre-oedipal experience modalities predominates are sexually potent precisely because they arrange their love lives in such a way that no oedipal rivalry can emerge. Adou's psychical development during childhood was such that he was later unable to tolerate the separation from his parents, his disappointment in them, and the exacting demands made upon him in school. The symptoms of his illness, "brain-fag" syndrome with accompanying signs of hypochondria and paranoia, disappeared when he succeeded in mastering his anxieties, which had been transferred to me. It is possible, of course, that the same symptoms may reappear if he is subjected to similar stress at some time in the future. The acquired insights have not yet been worked through adequately. At the moment, however, the patient's predisposition to anxiety is less than in the past. There has been no serious regression, and above all the more disturbing impairments of body feeling have disappeared. The tendency towards repression is greatly reduced. Paranoid projections have given way to more realistic attitudes. Passive-homosexual tendencies and instances of passive-masochistic defiant behavior have decreased, and that latter are no longer transferred indiscriminately to every authority figure. Adou's character formation should not be viewed as pathological merely because it has failed to protect him against developing certain serious symptoms. At the present time he is in a very difficult situation, one which offers very little hope for his future prospects in life: yet his

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mood is normal and his mental processes satisfactory. He is capable of making plans that seem as reasonable as possible under the circumstances, and his relationship to his family and to his fellows is characterized by a lack of any special feeling of hatred and by wishes that he can reasonably expect to see fulfilled. That there has been no fundamental change in Adou's character is demonstrated by the course of our final interview.

EIGHTEENTH INTERVIEW (24 MARCH 1966)

Together with a group of workers, Adou comes into the village from the lumber camp in the rain forest. He makes a self-confident impression, just like a real foreman. The only incongruity is the high-school textbook on Greek history that he carries along with his bushwhacker and that contrasts oddly with his work-clothes. Later he shows me the well-thumbed, ink-spotted book. He has actually read it, and knows what is in it.

In the village, he complains, he is still being treated as a stranger. This is not directed against him personally; no stranger ever feels entirely at home in a village like this. His next words seem to contradict his statement that he feels like a stranger. He relates the legend of how Yosso was first founded. The ancient breadfruit tree, towering over all the others, sprouted from a twig stuck into the earth by the first inhabitant of Yosso to mark the place where he was accustomed to bathe.

In reply to my question about the sickness in his head, Adou says that he has no way of knowing whether or not he is cured. At the moment it no longer bothers him. And he thinks that, if he should return to school, he would not let himself be so easily discouraged the next time. But whether his mind would function properly, whether he would encounter corrupt instructors or good ones-these are things he is not sure of. On the whole, he says, whether or not he succeeds in achieving a position in life will depend mostly on himself. But one thing is certain-before he dies, he wants to have a soil.

Looking back on his illness, Adou mentions that in April 1965 he had spent a month with Master Edjro Josué in Akrodjo in the hope of being cured of his forgetfulness (Parin & Parin-Matthèy, 1980). But Edjro had not helped him at all. Obviously the Master's powers had been diminished by his sojourn in the forest. People said that he was still able to cure the blind, but Adou's memory had remained just as poor as before. Naturally he had made the usual confession, drunk the holy water, and-for a time anyway-observed the taboos

connected with it. It was like going to a doctor, and doctors also don't want their patients to take any medicines they haven't prescribed. But there was no power behind it

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all. According to Adou, all Edjro does is to try to train people's characters; otherwise he accomplishes nothing. The best part is that he refuses to accept money from people. And Adou liked him better as long as he wore only a pair of shorts while he was working; now that he has started all that nonsense with robes, like a Catholic priest, he doesn't like him any more.

I call Adou's attention to the fact that Edjro's rejection of money and beautiful clothing reminds me of his own attitude, and he admits with a laugh that I am right. In Adou's case it is the renunciation of phallic-exhibitionist attitudes that opens the way to greater independence. Only when one has submitted to a constraint can one become active and strong. What, for our ego, stems from phallic activity is in his case the product of sado-anal submission. Once he has internalized the anal phallus of the mother, he is able to live with it “like a man.”

To my surprise Adou continues this line of thought and-with the following comment-summarizes what he hopes to gain from a genuine cure and a feeling of well-being:

Adou:

"My father told me this. There is another healer who lives in Ferkessedougou; If you drink *his* holy water and then break his commandments, he really kills you. That's the secret of his success. When someone has the power to kill, you have to obey him. And that way you are cured."

(25 March 1966)

Adou helps me to dismantle our tent. I make him a present of medicines for amoebic dysentery and malaria as well as some antibiotics. He is surprised at the quantity and says that he had not expected so much. He writes down his address-c/o Monsieur N., Abidjan-on a slip of paper for me so that I can send him a copy of the photograph I took of him while he was helping with the tent.

Two years later I receive a long letter from my patient from which I am able to deduce that he has not resumed his studies and that his illness has not reappeared. With gratitude and with a feeling of melancholy, he cherishes the memory of our friendship.

Adou differs from the other Anyi with whom we had daily interviews in that he does not feel that I am forcing him to come to me for treatment, but sincerely hopes that psychoanalysis may provide a cure for his illness .

Yet he, too, is unable to avoid entirely the feeling that some sort of compulsion has been exerted on him. He is exposed repeatedly to

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compulsion on the part of Monsieur N., who orders him to go away, to stay here, to work for him. During the early stages of treatment I had the impression that he was gradually succeeding in asserting himself in the face of Monsieur N.'s repressive authority, and that his health was improving as a result. In the end, however, he seems to have retained his basic, passive-masochistic attitude after all.

The therapeutic success of our interviews can probably be attributed to the fact that the "negative outcome of the oedipal conflict" was transferred, made a part of Adou's conscious awareness through my interpretations, and successfully processed by his ego through an act of internalization and detachment from the father whom he loves and to whom he had submitted. He had transferred to me the compulsion exerted by his father. The corresponding screen memory from childhood is the scene in which his father beat him after first having rejected the boy's love, which led to Adou's gesture of defiance in tearing up the money. In Adou's case the "negative outcome" of the oedipal conflict is a pathological construct of the type found in male European patients in whom it has led to the development of a strong, unconscious homosexuality. Introjection of the father's authority as the outcome of the oedipal conflict and the resultant formation of the "paternal" super-ego-a normal process for Europeans-seems to have played no decisive role in Adou's case.

The wish to be compelled by an omnipotent figure, however, is still present. During our final interview Adou expresses his admiration for the healer who kills the patients who do not obey him and thereby is able to effect real cures. Submission to the will of the omnipotent, compelling mother has also contributed to the formation of Adou's character; this pre-oedipal fixation is reflected in his tendency to submit to a hierarchic authoritarian power (despite his conscious identity as an outsider) and in his attitudes towards his own body. I could safely assume that Adou, like most Anyi children, had been treated by his mother with forcibly administered chilli-pepper enemas and with harsh commands. An introjection of this aspect of the mother leads, first, to a form of behavior which-in a

European-could only be described as an altruistic, submissive, and masochistic spectrum, and, second, to a preoccupation with the functioning of one's own body which-to us-seems hypochondriacal in the extreme. The first may have formed a component of Adou's super-ego in relation to the social group; this super-ego, of course, can fulfil its function only when the environment responds “appropriately.” The second enables Adou to deal independently with his body, which had been violently manipulated and anally stimulated by his mother until he reached the end of the toddler stage. The fact that he alone, and no one else, controls his body and what it contains confers a measure of secondary autonomy of his ego.

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In European males, the syndrome of identification with a pre-oedipal mother who stimulates the child's body and violates him anally, combined with a negative outcome of the oedipal conflict may lead to homosexuality. And the same *can* be true of an Anyi as well. Adou, though, seems to have internalized the pre-oedipal mother image more completely and to have assimilated it better than is usually the case with European homosexuals. His castration anxiety and his submission to his father have led to a clearly recognizable, but by no means decisive, homosexual turning.

Adou's identification with the maternal-nurturing aspects of my person enabled him to see in me the "good," weak mother instead of the strong, cruel, compelling one, to whom one has no alternative but to submit. When he is feeling sad because of our coming separation, he immediately imagines that I, too, am weak, hungry, and helpless in the hands of the police, who search my person and beat me mercilessly.

One of the ways that would make it possible for an Anyi to be healthy and to function normally would be for his submission to the compulsion exerted by the mother to be transferred to a male-paternal authority from whom he would receive commands to achieve and, at the same time, affection, security, and food (as he had from the mother during the nursing period), but who would remain exempt from passive wishes originating in the oedipal conflict (negative outcome). Good chiefs can fulfil this function for their subjects.

As regards these needs at the adult level, the matrilineal family structure offers the advantage that the male authority figure is not a member of the individual's immediate family, but rather a relative or a chief, someone who does not live in the same household and whose person is not cathected with the legacy of oedipal rivalry. In addition, an

oedipal father seems to be indispensable, with whom the subject carries out the rivalry conflict and experiences castration anxiety, and who ultimately serves as an identification ideal. From the point of view of the functioning of society, the disadvantages of this psychical development lie in the fact that there are too few chiefs who are sufficiently authoritarian and at the same time possess the maternal-nurturing quality, that the office of chief has been stripped of its political power, that the need to organize for military actions has long since become superfluous, and that the patrilocal family has become extremely rare. Men whose wives and courts have been bestowed upon them by a chief are entitled to head a family outside the lineage of their wives and can be experienced as oedipal fathers. The rest, materially dependent on their wives and their wives' families, are incapable of serving as sufficiently stable father images because of their weaker position in comparison with their wives, and the resultant instability of their marriages. Children who are given away

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to other families, or who have to follow their mothers from one husband to the next, are especially disadvantaged as regards ideal paternal figures. All male Anyi, however, have a tendency to act "independently" only when they are able to convince themselves that they are being-compelled to do so.

THE "BRAIN-FAG" SYNDROME

The disturbance from which Adou suffered was described by Prince (1960) as "a very widespread syndrome among students in southern Nigeria" (most of them Yoruba). A later study revealed that of 844 students enrolled in secondary schools and colleges, 54% suffered to some extent from this "brain-fag" syndrome (in other words, "a brain that has had too much crammed into it").

The fact that the syndrome is found among students coming from different cultural areas in Africa, and that their complaints (and other symptoms) are invariably related with their inability to continue their studies, suggest that it may be a consequence of Europeanization, of the stress caused by cultural change. For where there are no higher-level schools, there are no mental breakdowns among students.

The attempts made so far to explain this ailment and to classify it in diagnostic terms have been characteristic of the difficulties encountered by European psychiatry when it is

applied to patients from such a totally different culture. Designation of the brain-fag syndrome as a consequence of acculturation is hardly more illuminating than the opinion held by the Anyi-that it is a disturbance in the spiritual equilibrium of the individual concerned (which does at least imply consideration of the constellation of material and magical influences to which the patient has been subjected). Taking Adou's "case" as a basis, we would like to attempt to establish a correlation between this and other criteria, no one of which is actually false, but each one of which-taken alone-is inadequate. In Adou's case Europeanization intensified an already present disturbance in the development of his feeling of identity, influenced the manifest content of some (though not all) of his symptoms, and ultimately provided his ego, super-ego, and ideal self with new possibilities for the gratification of identificatory needs.

In the beginning we assumed (Boroffka and Marinho, 1963; Prince, 1960; Savage and Prince, 1967) that we were dealing with a psychoneurosis, and tentatively diagnosed either hysteria coupled with disturbances in ego formation going back to childhood or a borderline condition characterized by hysteriform symptoms. Later we realized that there are specific aspects in the normal course of ego development among the

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Anyi which account for the fact that the moderately serious neurotic disturbances we observed in them may resemble European borderline hysteria in their manifestations, though not as regards their prognosis or course. Depression, which has been suggested as a possible diagnosis for brain-fag syndrome (Neki and Marinho, 1968) can be regarded as an accompanying symptom of the neurosis. An early dynamic explanation (Prince, 1960) was based on the hypothesis that the European approach to higher education requires of the Anyi that they work alone, responsible only to themselves, and according to a systematic plan, whereas they have been brought up in a collectivist society, whose greater "orality" and emphasis on drive gratification cannot possibly prepare them for such a task. And in fact many Anyi *are* ill-suited to tasks that require independent, isolated activity and individual responsibility. Whether or not they are able to perform such tasks satisfactorily has nothing to do with their having grown up in a collectivist society, but depends upon whether or not they have learned to work through their conflicts adequately within that society. It is above all the "negative" outcome of the oedipal conflict, which often makes itself felt as a neurotic disturbance even in our "individualistic" society, that makes Adou vulnerable to an outbreak of his neurotic

symptoms. Thus, his illness is not the result of a conflict with the group or with the will of his ancestors as embodied in the traditions of his society (Savage and Prince, 1967). He possesses an internalized super-ego of his own, which has come into conflict with his desires, giving rise to guilt feelings which immobilize him. On the other hand, one can imagine that the "clan conscience" might have made it possible for him to work through his conflicts in another fashion if he had lived in a smoothly functioning Anyi environment, and that his ego might also have remained better able to function if he had not been deprived of, and-as it were-isolated from certain functions of the "group ego" by his choice of profession and his neurosis.

.The purpose of the foregoing speculations is not merely to demonstrate once again the inadequacy of Western psychiatry in a non-Western society. We have tried to show that there is much to be gained by treating psychical ailments according to the established psychoanalytic model. Under these circumstances, it is not difficult to equate African with European psychopathology, and to trace back seemingly irreconcilable discrepancies to specific differences in ego formation, the organization of defenses, and libidinal fixation.

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Jules Cotard described, in 1880, the case of a patient characterized by delusions of negation, immortality, and guilt as well as melancholic anxiety among other clinical features. Later this constellation of symptoms was given the eponym Cotard's syndrome, going through a series of theoretical vicissitudes, considering itself currently as just the presence of nihilistic delusions. Upper endoscopy showed esophagitis Los Angeles A. On brain computerized tomography (CT) scan no alterations were found. If the occurrence of Cotard's syndrome in the context of depression is unusual, it is even more unusual among patients with schizophrenia spectrum disorders. Psychotherapy is often the first form of treatment recommended for depression. Read about the different types of therapy, and get tips on how to get started with psychotherapy. Types of Therapy for Depression. Therapy can be given in a variety of formats, including: Individual: This therapy involves only the patient and the therapist. Group: 2 or more patients may participate in therapy at the same time. Patients are able to share experiences and learn that others feel the same way, and have had the same experiences. Marital/couples: This type of therapy helps spouses and partners understand why their loved one has depression, what changes in communication and behaviors can help, and what they can do to cope.