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Section “Traces” of the journal *Psicoterapia e Scienze Umane*

Edited by Pier Francesco Galli and Alberto Merini

In this section of the journal Psicoterapia e Scienze Umane we present previously published or unpublished material in an attempt to retrace a sort of history of psychology, psychiatry and psychotherapy, at times with the emotional power of anecdotes that usually do not appear in academic historiographies. The analysis is developed along three fronts. The first is an analysis of the various psychoanalytic stereotypes in their declinations and the manner in which theory of technique was passed down; the second is a reconstruction of parts of the history of our field in Italy, within the framework that has always characterized the group of Psicoterapia e Scienze Umane [“Psychotherapy, Humanities, and Social Sciences”]; the third is a reprint of “vintage” articles relevant to the current debate. At the web site <http://www.psicoterapiaescienzeumane.it/traces.htm> there is the list of all material published in this section.

EDITORIAL NOTE. *We reprint this paper, which was published in the journal Il piccolo Hans, 1986, 50 (April-June): 173-190 (published by Dedalo publisher of Bari, Italy), as a “trace of the journey” of some of us and of the cultural trend of the journal Psicoterapia e Scienze Umane (www.psicoterapiaescienzeumane.it).*

Psychotherapy, psychoanalysis, and psychiatry in the early 1960s. Annotations for a history

*Pier Francesco Galli**

It is within these notes, on the subject of the psychologist in psychiatric services, that I will frame the issue of psychoanalysis. I will thus observe psychoanalysis in reference to the various psychotherapies and their vicissitudes in Italy and to the ways in which a culture has developed around them. My point of view is personal and comes from within the discipline itself. I have paid special attention to these phenomena and have continued to observe them to this day, a unique moment in terms of the possible destiny of psychotherapies since a legal definition for this sector is in the process of being formulated¹. Besides being a witness, I have also been present at a series of actual and specific events, which took place during the course of my practice in this field. I am not an historian. The material that I submit is not organized according to correct historical methodology. It represents a partial account of an experience that also takes into consideration the modalities and tools with which we, as a group and as individuals, have analyzed the occurrences in our field over time, in order to define the types of “psycho-social” treatment procedures that have characterized my actions and those of my colleagues with whom I was formally collaborating, in the *Gruppo Milanese per lo Sviluppo della Psicoterapia*² (Milan Group for the Advancement of

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¹ The reference here is to the Italian Law no. 56/1989, which will be enacted three years after the drafting of this paper. In relation to this, see the column “Traces” of issue no. 2/2005, under the title of “Piccoli mostri crescono: scuole di psicoterapia, ECM, illusioni di controllo” (“Small Monsters Grow: Schools of Psychotherapy, CME, Illusions of Control”) (Galli, 2005a). See also Borsci (2005), who reconstructs the history of this Italian Law. [editor’s note]

² For various comments on the *Gruppo Milanese per lo Sviluppo della Psicoterapia* (which in 1978 took the name of *Psicoterapia e Scienze Umane* [Psychotherapy, Humanities, and Social Sciences]), see the web site: <http://www.psicoterapiaescienzeumane.it/presentaz-engl.htm> where some mention of the group’s history is given. See as well the column “Traces” of the issues 4/2005 and 1/2009, and pp. 283-288 of issue no. 2/2010 of *Psicoterapia e Scienze Umane*. [editor’s note.]

Psychotherapy) or with whom I was informally collaborating, in connection with the specific treatment procedures performed in those years.

My summary will certainly be fragmentary and anecdotal. Moreover, on an emotional level, I do not claim to have sufficient historical distance to be able to organize the topics in orderly fashion. However, in terms of one of my principal scientific interests, the question namely of psychotherapeutic techniques and the theory of technique, I do believe that emotional history is a valid method of understanding what really happened, an impossible task if one attempts an historiographic reconstruction using only writings about technique. In fact, many revision processes of the most recent years are emphasizing criteria of rationality in psychoanalytic technique, pointing out the close tie with emotional factors. Furthermore, the personal reference implies a description of an intellectual itinerary, in which others may recognize themselves, and enters into a type of sociology that today is becoming more and more scientifically formalized. We are referring here to the reconstruction of individual histories for the understanding of social phenomena³.

A first emotional factor is the place of origin, Nocera Inferiore, a small town near Salerno (South Italy) where psychiatry was familiar, since there was a psychiatric hospital there with over three thousand beds. The mentally ill were part of our daily life, as for instance in the town of Imola in the “Emilia-Romagna” Italian region. The meeting with professor Marco Levi Bianchini⁴, a psychiatrist in Nocera, represented my first contact with psychoanalysis. At the same time, the impact of modernization problems in Italy in the aftermath of the Second World War and the subjects dealt with by the magazine of Francesco Compagna, *Nord e Sud* (North and South), accustomed many of my generation to a certain clarity of mind with respect to the questions of treatment planning.

The *Piano Campano* (The Plan of the Italian Region “Campania”), one of the first treatment planning experiments in the 1950s, for which Gino Coccioli, of Nocera, student of Manlio Rossi Doria, and later Rocco Scotellaro, served as administrators, was an important stimulus in that direction. Scotellaro (1954), a poet for sociologists and a sociologist for poets, was in fact a forerunner of modern sociological methods, as a reading of *Contadini del Sud* (Peasants of the South) will demonstrate. In turn, Scotellaro worked with Rocco Mazzarone, one of the fathers of social medicine in Italy. Our generation’s eagerness for transformation, for intervening on the social level with methods that dealt with predicting behaviours and programming treatments in a non-episodic spontaneistic manner, was also manifested in a tendency to acquire, to welcome tangential influences, technologies coming from other sectors, deciphering systems like social psychology, or sociology, to which we were not accustomed. One of the earliest sociological studies in relation to an urban settlement, the one on the “stones” of Matera, was carried out by a group reporting to Professor Manlio Rossi Doria, director of the *Istituto di Economia Agraria* of Portici (The Institute of Agrarian Economics of Portici). Gilberto Marselli, who had an economic-sociological background, and Aldo Musacchia were part of this group; as well as Lidia De Rita, more closely associated with our subject, one of the first Italian social psychologists, who became Professor at the University of Bari, and who subsequently devoted herself to psychoanalysis. I am actually studying, in relation to an area of southern Italy, these early cultural crossovers of the 1950s, which formed around the recognition of the technological possibilities to which we were unaccustomed in Italy. As for me, in 1955, spurred on by these interests, I moved to Milan, where, at the Institute of Psychology of the *Università Cattolica* (Catholic University), a type of psychology education, almost non-existent elsewhere, was being offered. For many of us, social psychology, the specialty

³ Some would call this method “ego-history”. [editor’s note]

⁴ Marco Levi Bianchini (1875-1961) in 1925, when he was working at the Psychiatric Hospital of Teramo (South Italy), founded the Italian Psychoanalytic Society (*Società Psicoanalitica Italiana* [SPI]), of which he was the first President until 1931, when Edoardo Weiss (1889-1970) became President and moved the SPI to Rome, while Levi Bianchini became the director of the Psychiatric Hospital of Nocera Inferiore. [editor’s note]

of Gustavo Iacono, departmental chair in Naples⁵, and eventually a psychoanalyst as well, was an exceptional tool. It allowed us to predict group behaviours, certain social behaviours, and to program treatment procedures.

This overlap is important because it points to a methodological itinerary beyond my personal history: it is possible to highlight both the intersecting of disciplines and the early development of informal groups in Italy. The question of informal group function was immediately raised by one of us, in relation to specific techniques of intervention. In touch with these new tools of understanding, I decided to apply them to the issue of psychotherapies – namely to examine the impact on psychotherapies, within the framework of the transformation processes in psychiatry occurring in Italy, and therefore in psychiatric services. From a psychological perspective, it was clear to me that it was not possible to be a prophet without any kind of weapon and that a nucleus of technology was a specific kind of weapon to employ in the battle for change. In essence – within this group outside the university (which I left in 1960) and which took the name of “Gruppo Milanese per lo Sviluppo della Psicoterapia” (Milan Group for the Advancement of Psychotherapy) and would later be called *Psicoterapia e Scienze Umane* (Psychotherapy, Humanities, and Social Sciences) – we were well-aware of the necessity of a solid technical training, with the aim of generating interchanges of ideological-political relevance where there was resistance on the technical front. For us this was a working technique programmed on the basis of the use of deciphering systems that we believed were important towards the end of the 1950s.

At this point I can better outline our present theme by taking into consideration some aspects of psychotherapy in Italy in the 1950s as an introduction to its development in the 1960s. The political tone of our work method with regards to a type of social democracy that was beginning to assert itself may also become clear: at the time, solely declarative and ideological programming discussions were being engaged in, without providing for the formation of tools that would have enabled change to be achieved. This exemplified the public sector, while in the private sector there was a tendency to accelerate the acquisition of new relational technologies in order to modernize, as well as utilize or exploit the State for one’s own purposes. These phenomena were even more evident than today and the technique being negated, in comparison with false reformist tendencies, seemed politically relevant to us along with the struggle over principles. The issue is still topical: today’s discussion on the managers in the National Health Service is based on the premise that in Italy there exist 600 managers ready, willing, and capable of running a Local Health Board. This is not true, and the problem of management is still being faced by the Italian industry, arriving late to the problem of manager training. There is a shortage of managerial skills and one could count on one’s fingers the “chiefs” capable of directing the diverse agencies which make up the Local Health Boards, which have vertical and horizontal features that cannot be found in any traditional enterprise. However this ghost of managerial skill, which does not exist so extensively in the private sector, is being stirred up against the “inefficient politicians” who would cripple the Health Service. This kind of reasonings should be criticized at the political level not only re-affirming the role of politics in the health sector, but also negating, on the technical level, the feasibility criteria of the proposals that are being put forward for the re-privatization of the health service. For example, what does the re-evaluation of the role of the technician mean, when a specific skill in any medical sector has nothing to do with skill in terms of work organization or managerial techniques? The discarded and/or non-implemented political choices, at the moment when the issue of the Health Service became a social choice, are being overturned against those who have supported this choice, stirring up this non-existent figure of the manager who would finally resolve the problems of the “Corporatization of Health”⁶. I believe it is extremely important, even today, to assert that the

⁵ Gustavo Iacono (1925-1988) died two years after the writing of this paper (the *Dipartimento di Scienze Relazionali “Gustavo Iacono”* of the Università Federico II of Naples is dedicated to him). [editor’s note]

⁶ A propos of this, see the article “L’aziendalizzazione nei Dipartimenti di Salute Mentale” (Corporatization in Mental Health Departments) in the column “Traces” on pp. 87-94 of the issue no. 1/2006 of *Psicoterapia e Scienze Umane*. [editor’s note]

fusion of the issues concerning both technique and politics must originate from a nucleus of irrefutable technical knowledge.

Italian psychiatry, for instance, was created by neurologists. The few true psychiatrists of the 1950s were marginalized. In fact, academic scientific psychiatry in Italy came into existence through the attacks on psychiatry itself. At the moment when many of these attacks were being conducted in the name of scientific repudiation, even if formulated from valid positions on the theoretical and epistemological levels, those people that were authorized to represent psychiatric science had very little to do with it. As for psychoanalysis and psychotherapy in the 1950s, we have to consider the subject within an international framework. Immediately after World War Two, there was an expansion of psychoanalysis – an invasion in a certain sense – into the psychiatric domain. It represented the winning side in the psychiatric debate. Both in England and the United States, a connection was created between psychoanalysts, who, like psychiatrists, had been enrolled into the army, and psychiatric groups with more traditional training. The proposition for a new way of working engendered enthusiasm for innovations not so much in terms of traditional procedures for treating neurosis, but rather in terms of the possibilities in confronting psychoses. Some of the participants in this debate throughout the 1950s were Frieda Fromm-Reichmann, Silvano Arieti (an Italian who immigrated to the United States because of racial discrimination), representing a direction taking its lead from Harry Stack Sullivan's interpersonal theory of psychiatry (Sullivan had already written in 1924 an article on modifications to the technique for treating psychosis⁷). The accumulated experiences in this field were fragmentary, and they possess a heroic pioneering quality. The 1950s in Europe are characterized by the collision of the European descriptive psychiatric tradition and the psycho-dynamic approach originating mostly from the United States. In Switzerland, Margherita Sechehaye (1950) published the "case of Renée", a young psychotic whom she treated according to the "symbolic realization"⁸ technique, in which the psychoanalytic configuration of the technique achieved considerable results on a patient diagnosed as severely schizophrenic (the *Diario di una schizofrenica* [*Autobiography of a Schizophrenic Girl: The True Story of "Renee"*], was published in Italy in 1955⁹). The famous "case of Renée" alarmed traditional psychopathologists, who declared themselves defenders of the descriptive psychiatric orientation, which had no interest for the younger psychiatrists. The enthusiasm surrounding the psychotherapeutic results, to which were added the results of pharmacology that allowed certain forms of containment which, in turn, fostered and made psychological techniques more applicable, formed the foundation of psychotherapy for psychosis. The exponents of descriptive psychopathology, with, for instance, the plenary address of Rümke at the Second World Congress of Psychiatry held in 1957 in Zurich essentially expressed the position that everything that is reducible to something else is not "true schizophrenia". Rümke spoke of "Sechehaye-type schizophrenia" placing it among pseudo-schizophrenias. They were seeking to find a nucleus with which to legitimize a psychopathology that was not reducible on the social or psychological level. Within this framework must be interjected today's revival of classical nosography on the basis of DSM-III – and later editions – philosophy, the diagnostic tool of American import. Today descriptive psychiatry, at one time ousted from the foreground by the arrival of psychodynamic psychiatry in the United States, is on the rise again and coming from the same source, the United States. This circular phenomenon, developing over a span of thirty years, is quite remarkable.

One could pessimistically predict that the introduction of psychoanalysis into Italy is about to be parenthetically sandwiched between the collusion of corporate interests and the regurgitation of institutional rigidity as a control system. In my opinion, psychoanalysis in Italy has had a measurable impact on psychiatry. I will try to provide some details for the measuring of this impact.

⁷ See pp. 70-72 of Marco Conci's & Lucio Pinkus' (1989) article "I primi pionieristici scritti di H.S. Sullivan sulla psicoterapia della schizofrenia" (The First Pioneering Writings of H.S. Sullivan on the Psychotherapy of Schizophrenia), in issue no. 2/1989 of *Psicoterapia e Scienze Umane*. [editor's note]

⁸ See also Sechehaye, 1951, 1954, 1956. [editor's note]

⁹ The movie of the same title by Nelo Risi came out in 1968. [editor's note]

One of the chief aspects of psychoanalytic psychotherapy is that it does not entail the treating of the patient on an individual level, adopting one method instead of another, but it is about the interpersonal relationship and teamwork. The transformation that is achieved in the more sensitive psychiatrists by means of teamwork with a psychoanalytic basis has increased the value of a crucial discourse in community psychology, and expands the discussion around the figure of the professional, who does not directly implement the treatment procedure regarding the patient, but strengthens both the technique of doing this and the “therapeutic personality” factor of the other team members. This is how the team potential is delivered to the user, through the member who in this instance has the best contact with the patient. In that particular moment, the psychotherapy professional, with all his skill, functions as a member of the team, while the therapeutic relationship is conducted by the person who, at this juncture in time, can best exploit the connection with the patient, the overall delivery of service thereby becoming enhanced. The contribution of psychoanalysis in this matter can be verified by whoever has experience of psychiatric work. One can also better understand the basic stupidity of the current formulation of laws in Italy relating to psychotherapies¹⁰, discussed purely in specialistic terms. The annulment through law of the cross-disciplinary nature of psychotherapy is absurd. The principal impact on work organization is due to the change in the relationship between medical practitioners, when it is understood that the service linked to the individual role is not dependent on the potential of delivery, but that the total functional role of the team must predominate. This is the basic concern of the psychiatric-social or the psychological-social system. The reason why, out of the United States, there is an attempt to create a consensus around DSM-III, seeing as it is a rather weighty clinical tool, is that it helps the psychiatrist to recover a role that is disappearing at a time when psychological service can be dispensed by other practitioners. The shift of the psychiatric axis towards the psychological made the psychiatrist feel less and less qualified compared to other physicians, the so-called “real doctors”. Consequently, attempts have been made to restore the descriptive-psychiatric culture in order to merge the medical component into the diagnosis. In such a way the link between epidemiological research and the pharmacological one is re-established, and more importantly, the recovery of the medical role is also achieved. Herein lies the true indicator of the danger of this tool. It is also possible to explain why a technical tool was introduced into Europe with the help of such a huge propaganda machine, something which has never before happened in the psychiatric field: a simultaneous presentation of its translation in many countries, this manoeuvre happening concurrently with the World Congress of Psychiatry taking place in Vienna, a strategy driven to take maximum advantage of the divide between propaganda and the day-to-day reality of psychiatric practice, providing ideological-scientific reassurance in order to manage the very wide-ranging halo effect in our sector.

An unsigned article appeared in issue no. 4/1975 of *Psicoterapia e Scienze Umane*. It dealt with a study made in 1973 on the state of psychoanalysis. It was called “Psicoanalisi e psicoanalisti” (Psychoanalysis and Psychoanalysts), and clearly showed how the issue of psychoanalysis may be situated within the gap between the huge halo effect, and the actual dispensing of service which is minimal. Within this definition of domain, one can easily recognize how an extremely high percentage of treatment being dispensed is put in the “training” sphere, while the percentage of service really delivered to the patient is extremely low. In the case of serious psychiatric pathology, service is administered by intermediary personnel, who however are reputed to be insufficiently prepared. The example of the law currently under discussion¹¹ clearly demonstrates this phenomenon of discrediting these intermediaries, who, in fact, treat patients with psychotherapeutic methods. Basically, it is the destiny of informal culture, when demands of formalization predominate, to get instantly crushed. In these moments, rather than gathering the results of informal structures which introduced the psychological into psychiatry, what prevails is the retrieval

¹⁰ See Footnote 1, above. [editor's note]

¹¹ The reference is again to the Italian Law no. 56/1989; see Footnote 1, above. [editor's note]

of the formalized role and the bureaucratic cover-up of choices not made for the benefit of personnel training. Now we try to control the “wild” psychotherapists accompanied by the police. Thus we have a situation in which, through non-formalized roles, a workable informal culture is invented, especially in the public services. This then gets discredited. A bureaucratic role is superimposed. A new specialization branches off and the cross-disciplinary nature of psychotherapy is lost. This suits traditional psychiatrists and also physicians, who are well-aware of how nothing gets taken away from them, and of how ultimately this intruder in their midst, recognized by having to take into consideration the psychological element, can be delegated to the “specialist”. Thus one can cure the body part, allowing for a technological investment in the advanced specialization. One can engage in the correlation between medication and epidemiology, and look for the “right drug”, with a clear conscience. The introduction into the market of *Haloperidol depot*, which is long-acting drug, will give a new jolt to the doctor-patient relationship. The triumph of medication control will relegate so many problems to pure maintenance, expelling them from the health sector. This explains the position of important representatives of Italian academic psychiatry, favouring the idea that the problem of psychotherapies only concerns psychologists, and that it is only about finding the best system for keeping them under control, perhaps by formalizing the “State’s unconscious”. In the United States the tendency to push psychoanalysis into the semantic area is clearly noticeable, welcoming certain European developments, so as to turn psychoanalysis into a matter for the “scholarly”, leaving “Science” to the physicians.

In the mid-1950s, the psychology that was operational in Italy, and therefore many activities of the psychotherapeutic variety, was part of the training of social workers. The social work schools had a didactic organization that presupposed a considerable quantity of psychological knowledge. Case-work, work conducted on a case by means of psychological techniques, and group-work, the work conducted in groups, represented the cornerstone of their teaching. When, in the early years, this new professional figure appeared in the Mental Health Services and in the psychiatric hospitals, someone who knew psychology and psychological treatment techniques, which the psychiatrist did not possess not even in terms of culture, an original situation developed in which the first informal nuclei of practitioners provided psychotherapeutic services to the seriously ill. If one wants to consider who conducted psychotherapy in Italy, rather than who talked or is talking about it, it is essential to take into account this phenomenon. The so-called “specialists” dedicated themselves above all to the work of supervising. In our profession, as opposed to others where the most specialized person deals with the most difficult case, the reverse is true: the one, who in theory would be the best, because of age, greater experience, higher level of training, does not have contact with the “case” except through the supervision of those who conduct treatment, in general young people relatively “lacking in preparation” and who have enough enthusiasm to confront serious situations. At the Mental Health Center for Milan, one of the first mental health centers set up in Italy by the Provincial Government in 1959, I remember well which workers treated psychotics psychotherapeutically. I worked there as a psychologist in 1960, introducing group techniques (I was trained in Basle by Raymond Bategay in the Psychiatric Clinic of Friedmatt University), as much into teamwork as into therapy groups. It was not my primary interest, so this activity was taken up, with great success, by Diego Napolitani¹², a psychiatrist with psychoanalytic training, who was the assistant in my time. This is the origin of one of the first group technique experiments applied in a public institution in Italy in the psychiatric sphere. During the time I worked at that Center together with Napolitani, we had to deal with an internal conflict within psychoanalysis itself. On one side there were the advocates of a school of thought that believed that the treatments of psychotics, like the treatment of children, were not to be considered psychoanalysis and they were only examples of deviation from technique (we have seen how history has repudiated this position and it would be interesting to see, someday, how pathetically this stance was upheld in

¹² For more information on Diego Napolitani (1927-2013), see the column “Traces” of issue no. 3/2013 of *Psicoterapia e Scienze Umane*. [editor’s note.]

those years); on the other, there were those, within the institutional settings of psychoanalysis, who were leaning towards the subject area of countertransference, which, for those dealing in psychosis, represented the obvious, the day-to-day reality. Our references were not to classical literature, but to that literature published by those who had real experience with this kind of treatment. The theme of countertransference had already been present in Jung (the idea on psychic infection was his), and there was, as well, the complex discussion that emerged from the clinical experience of the Sullivanians and from the Kleinian position. It is about a debt of recognition that begins to emerge in official literature later on. It is only recently that certain contributions are beginning to be recognized as important to existent forms of institutionalized psychoanalysis then (and now). As far as I am concerned, I was trained in Switzerland where Gaetano Benedetti¹³, an Italian, held the chair of Mental Health and Psychotherapy at the University of Basle, previously held by Jung and then by Heinrich Meng. The work group that assembled around him had become a magnet on the international level for psychotherapy specialists in psychoses. This nucleus was important for its subsequent presence in Italy. Benedetti in Zurich had worked with Manfred Bleuler and, where psychotherapy is concerned, with Gustav Bally and Medard Boss. Bally had a more strictly psychoanalytic orientation. Boss, even though he was a member of the Psychoanalytic Society and had psychoanalytic training, had developed the aspect of therapeutic procedure of Ludwig Binswanger's phenomenology, and had founded the "Dasein-analytic" therapeutic school. These influences, alongside the considerable influence of the Jungians in Zurich, characterized an emerging European nucleus of specialists in the psychotherapy of psychoses in Basle.

It was already evident that the intention was not to treat all psychotics, but to learn lessons from prolonged treatments, lessons that could have bearing on any method of care, psychologically speaking, with any psychiatric patient. At that time, Michael Balint's book (1956) *The Doctor, his Patient, and the Illness*, was published in England. It was a work that brought to light the technical possibility of strengthening the "therapeutic personality" of the physician. It is pertinent to our subject that the task of organizing psychological training for social work schools was delegated to Balint and his wife, and it is within this context that they developed their technique. With the institution of the National Health Service in England, there was an awareness of the huge quantity of persons (statistics showed percentages between 60% and 70%) that required services on the somatic level, extremely expensive laboratory examinations, for psychological problems. So Balint was asked to adapt the technique developed for social workers for the training of physicians. It was on the basis of this "psychological"-type pressure on the health organization that the discussion around the issue of psychology in medicine took shape. I was constantly in contact with Italy, and through Nino Andreatta¹⁴ I came to know Michele Ranchetti¹⁵, once personal secretary for Adriano Olivetti¹⁶, and later working with the Feltrinelli publisher. In a meeting with Giampiero Brega, I presented a proposal package, based on the reasoning of psychosocial treatment procedure, and developed along these lines: a) in Italy there was a problem in progressing from the old to the new;

¹³ For more information on Gaetano Benedetti (1920-2013), see the column "Traces" of issue no. 1/2014 of *Psicoterapia e Scienze Umane*. [editor's note.]

¹⁴ Beniamino ("Nino") Andreatta (1928-2007) was an Italian economist and politician; he was a member of the Parliament and a Senator, and in his career he was, among other things, Commissioner of Economic Affairs, of Foreign Affairs, and of Defense. [editor's note.]

¹⁵ Michele Ranchetti (1925-2008) was a poet, an essay writer, a translator from German to Italian, and a painter. He studied the history of Catholic Church and of religions, a discipline he taught at the University of Florence from 1973 to 1998. In particular, Ranchetti studied, among others, Sigmund Freud, Ludwig Wittgenstein, Walter Benjamin, Rainer Maria Rilke, Paul Celan, and edited and translated many of their works (he also worked at the Italian edition of Freud's *Collected Works*). For more information on Michele Ranchetti, see the column "Traces" of issue no. 1/2013 of *Psicoterapia e Scienze Umane*, and also pp. 311-328 of issue no. 3/2006; on p. 12 of issue no. 1/2008 there is a list of his publications in *Psicoterapia e Scienze Umane*. [editor's note.]

¹⁶ Adriano Olivetti (1901-1960), was an Italian engineer, politician and industrialist whose entrepreneurial activity thrived on the idea that profit should be reinvested for the benefits of the whole society. He was known worldwide during his lifetime as the Italian manufacturer of *Olivetti* typewriters, calculators, and computers. For more information see the web site <http://www.fondazioneadrianolivetti.it>. [editor's note.]

b) Italy's academic structure could not absorb such a transformation quickly because it would have taken it a long time to react and because the academic career structure could not have absorbed this cultural recycling, since a neurological-type orientation prevailed; c) academic logic, however, would have dealt with psychiatry using this type of framework, and so a rather unique opportunity was being presented, not just one of cultural transmission, but that of teaching directly through the publishing houses. The plan consisted of the first thirty titles (whoever received at that time the first of Feltrinelli's brochures will remember) published as the "Biblioteca di Psichiatria e di Psicologia Clinica"¹⁷ ("Library of Psychiatry and Clinical Psychology"). It was decided to announce the entire publishing programme at once, in order to lock in the trademark, whereas most publishers at the time thought it more useful to keep it secret. The schedule for the first four years was clearly laid out and it envisaged ten titles a year. Whoever knows the collection will also remember the cultural strategy expressed on the last two pages of each volume up until a few years ago. The project's psychiatric conception was accepted in its entirety by Giangiacomo Feltrinelli who instantly realized the problem, set out in the following terms: in Italy there were 800 registered members of the *Società Italiana di Psichiatria* (SIP) (the Italian Association of Psychiatry), and there were little more than one thousand working psychiatrists, who were, on the average, rather advanced in age; to progress from the old to the new a turnover would be necessary and a restructuring as well, requiring content that the university system would not be capable of providing for structural reasons, due to its internal logic; the operation could provide for the stabilization of the sale of around three thousand annual copies (a very high number, at the time, for works of a scientific nature: the previous year, the publisher Astrolabio had been in difficulty, even though it had been a pioneer for psychoanalytic works and had benefitted from the huge cultural contribution of Roberto [Bobi] Bazlen; Einaudi had not yet published the *Opere (Works)* of Freud, for which it had already acquired the contract, subsequently passed on to Boringhieri). Feltrinelli accepted the operation in its entirety, not just a single book on psychiatry, but the whole package that included: classical texts, texts presenting the subject of the interpersonal theory of psychiatry, which we considered closer to the clinical aspect than classical psychoanalytic literature. These texts also seemed to us more legible from the point of view of the psychiatrist, who would have found in them more comprehensible clinical descriptions of the interpretative psychoanalytic categories. There were writings by Harry Stack Sullivan, the *Principi di Psicoterapia (Principles of Intensive Psychotherapy)* by Frieda Fromm-Reichmann (1950), alongside the *Trattato di psichiatria (Textbook of Psychiatry)* by Eugen Bleuler (1916). With a certain mischief, an attempt was made to anticipate some themes, such as in relation to the volume on endogenous psychosis by Karl Leonhard (1957), to prevent Italian academic psychiatrists from rebuilding their image, by taking advantage of generalized ignorance, and copying from these classics. The book series had immediate success and provided us with a measure of receptivity in terms of a younger audience but even with older psychiatrists who had never been taught this approach. In 1964 a collaboration was also initiated with the publisher Boringhieri, with the on-going series entitled "Programma di Psicologia, Psichiatria, Psicoterapia" (Book Series of Psychology, Psychiatry, and Psychotherapy), alongside the publication by the same publisher of the *Opere (Collected Works)* of Freud, Jung and the classics of psychoanalysis.

The Milan Provincial Government, that had opened the first Mental Health Center, agreed, simultaneously with the University, on the first Chair of Psychiatry which was entrusted to Professor Carlo Lorenzo Cazzullo, whose background was neurological. On a less public level, Berta Neumann, Mara Selvini Palazzoli, Enzo Spaltro, and I decided to attack the psychotherapeutic issue on two fronts: on the one hand, as an issue of the cross-disciplinary nature of psychotherapy,

¹⁷ This book series includes 87 volumes. See, in reference to this, Pier Francesco Galli's article "In viaggio con i libri: 1959-2006" (Traveling with Books: 1959-2006) on pp. 719-736 of the special issue no. 3/2006 on the occasion of the fortieth anniversary of the journal *Psicoterapia e Scienze Umane*, and as well the paragraph entitled "L'università dei libri" (The University of Books) on pp. 229-240 of Valeria P. Babini's volume *Liberi tutti. Manicomi e psichiatri in Italia: una storia del Novecento* (Bologna: Il Mulino, 2009). [editor's note]

starting with the doctor-patient relationship, on the other, for the fine-tuning of tools for a psychotherapy of psychoses. At the beginning (from 1962) we organized some continuing education courses that took place in Milan¹⁸. At that time Enzo Codignola¹⁹, Emanuele Gualandri, Giambattista Muraro, Silvia Montefoschi, Severino Rusconi, among others, also joined the original group. We predicted resistance from the old academic ranks. The first disputes were set in motion with certain elements of Italian psychoanalysis, a side not well-represented in these arguments, not because of the quality of the people involved, who were actually of high quality and those who have survived still are, but because there was fear on the part of these psychoanalysts. This was a fear not only towards the outside, where psychoanalysis was actually socially accepted, as much as a fear in relation to identity, originating from the inadequate educational environment in which the first Italian analysts had developed, and because these analysts had been alienated from international cultural and professional circles for years. It was more a fear of themselves than of others. This fear manifested itself in ferocious in-fighting which had even provoked the educational downfall. Fear prevented an understanding of what was happening, and this caused many to occupy defensive positions. It took years before the legitimacy of specific techniques, innovations, and training methods was acknowledged. The Convention at the *Passo della Mendola* (in the Province of Trento, Italy), organized by the *Università Cattolica* of Milan in 1960²⁰, contributed to unblock Catholic resistance to psychoanalysis. In 1956, there took place in Milan the Eleventh National Congress of Italian Psychologists, in which Franco Fornari gave an address for the celebration of the centennial anniversary of Freud's birth. Fornari's speech was not presented at the *Università Cattolica*, official premises of the Congress, but at the State University. Fornari spoke about psychoanalysis of psychoses, and was afraid of not being considered orthodox because of what he was saying: at the time, it constituted a challenge to propose the early principles of Kleinian orientation, in this psychoanalytic community that was then being organized in Italy and that was so frightened of itself. In the meantime, some colleagues went abroad for their education, acquiring a culture that subsequently was returned and transmitted on an informal level. We began to organize this culture to create nuclei of mental health professionals that would influence and effect a transformation on the psychiatric scene. A link was established with the Psychiatric Hospital of Varese, where I began my work of psychotherapeutic supervision in 1962. In Rome, Gianfranco Tedeschi, Isidoro Tolentino, Luigi Frighi, and Mario Moreno began to set up groups based on the Balint method in the university clinic; Franco Giberti together with Romolo Rossi did the same in Genoa. When we organized the first continuing education course, in which Silvano Arieti and Gaetano Benedetti participated as lecturers²¹, the first registration form we received was from

¹⁸ Nine "Corsi di aggiornamento su problemi di psicoterapia" ("Continuing Education Courses on Problems of Psychotherapy") were organized (two per year, four days each, some in residence) and two days of study (see Milan Group for the Advancement of Psychotherapy, 1962, 1963, 1965-66). The courses ended in 1967 because, on the part of the *International Federation of Psychotherapy* (IFP), the Group was entrusted, under the presidency of Pier Francesco Galli, with the organization of the VIII International Congress of Psychotherapy, held in Milan from August 25 to 29, 1970, and whose proceedings were later published in the Feltrinelli book series under the title of *Psicoterapia e Scienze Umane* (*Psychotherapy, Humanities, and Social Sciences*) (Galli, 1970). For more detailed information, see the web site <http://www.psicoterapiaescienzeumane.it/presentaz-engl.htm>. [editor's note]

¹⁹ Enzo Codignola (1930-1977) had been co-editor of *Psicoterapia e Scienze Umane* and an important member of the group of *Psicoterapia e Scienze Umane* from its origins. For more information on Enzo Codignola, see the column "Traces" of issue no. 2/2009 of *Psicoterapia e Scienze Umane*, and pp. 1-3 of issue no. 1/1978. [editor's note.]

²⁰ The proceedings of the "Symposium sui rapporti fra psicologia e psichiatria" ("Symposium on the relationship between psychology and psychiatry") at the "Maria Immacolata" Cultural Centre of the *Università Cattolica del Sacro Cuore* (Catholic University of the Sacred Heart), Passo della Mendola (Trento, Italy), from the September 11 to 15, 1960, edited by Leonardo Ancona (1960), were published, under the title of *Dinamismi mentali normali e patologici* (Normal and Pathological Mental Dynamisms) (Milan: Vita e Pensiero, 1962). Same lectures of that meeting have been reprinted in the column "Traces" of issue no. 2/2014 of *Psicoterapia e Scienze Umane*. [editor's note]

²¹ See the column "Traces" of issue no. 1/2014 of *Psicoterapia e Scienze Umane*. [editor's note.]

Franco Basaglia²², recently appointed director of the Mental Hospital of Gorizia. Together with Antonio Slavich, he found himself managing, with explosive effectiveness, the tragic situation of a psychiatric hospital. Basaglia was one of the few Italian psychiatrists known abroad, something I was able to ascertain when I was in Basle speaking with Swiss and German colleagues about Italian psychiatry. The group, of which I was a part, organized in Milan, in 1966, a day of study on the problem of psychiatric training. On this day a training project was presented through a teaching hospital²³. The Provincial Government of Sondrio sponsored the project and it was successfully completed. In that time, it was important to place the physical clinical location at the center of teaching, and Gorizia and Varese were designated as the first places where a different kind of psychiatry was being devised. The proceedings of a study day on psychotherapy in Italy, occurring in 1965, and those of a day on the training of psychiatrists in 1966, was published by us in 1967, with a brief preface explaining the positioning of the issue in this period of time (Milan group for the Advancement of Psychotherapy, 1965-66; see also Footnote 23).

At the time, various conflicts were being resolved in the psychoanalytic community. The *Società Psicoanalitica Italiana* (SPI) (the Italian Psychoanalytic Association) had been able to resume its educational path under the auspices of the *International Psychoanalytic Association* (IPA), through the Swiss Association. A commission came into Italy, verified certain situations and tried to pacify the community, holding the SPI under its guardianship from 1962 to 1967²⁴, up until the International Congress in Amsterdam, after which autonomy was able to be re-instituted. Fears were dissolved then that today on the whole are considered remote.

It is evident that I have not written a history, but I have tried to provide the thread linking a series of events. We have arrived at a point in time in which we envisage what would become the intersection between the movements of 1968 and the Basaglia group later known as *Psichiatria Democratica* (Democratic Psychiatry)²⁵. In the political debate of that time, it did not seem valid to us to call “praxis” that which we considered a social practice. In our opinion we were dealing with a social practice and not “praxis”, and it was not possible to circumvent the technical issue. Then again it was the time of Rudy Dutschke²⁶, of the “long march through the institutions”, often theorized about, but without taking into consideration the real mediations between structure and superstructure. The concept of public employment became for a time synonymous with “public” as opposed to “private”. A considerable hostility developed towards psychoanalysis, which has been recently rescued, perhaps indicating an even excessive rebound phenomenon.

²² Franco Basaglia (1924-1980) was an Italian psychiatrist and neurologist who proposed the dismantling of psychiatric hospitals; he was the founder of the group *Psichiatria Democratica* (Democratic Psychiatry) and the leader of a movement for the psychiatric reform that later led to the Italian Law no. 180/1978 which abolished mental hospitals. [editor's note.]

²³ This day of study on “The training of psychiatrists” took place on December 11, 1966, with lectures given by: Gaetano Benedetti, Christian Müller, Johannes Cremerius (with the participation of Renzo Canestrari, Gianfranco Garavaglia, Christian Müller, Diego Napolitani); Michael Balint (whose address, along with the debate, is republished on pp. 341-400 of the column “Traces” of the issue no. 3/2005 of *Psicoterapia e Scienze Umane*); Milan Group for the Advancement of Psychotherapy (with the participation of Pier Francesco Galli, Virginio Porta, Angelo Majorana, Leonardo Ancona, Giorgio Abraham, Montanari, Gianfranco Garavaglia, Giuseppe Mastrangelo, Franco Fornari, Mario Barucci, Diego Napolitani). The proceedings were published and edited by the Milan Group for the Advancement of Psychotherapy (1965-66, pp. 5-136), and the cover and contents can be found at the web page <http://www.psicoterapiaescienzeumane.it/giornate1965-66.htm> (the teaching hospital project, which was carried out at the Psychiatric Hospital of Sondrio [Italy] in 1967, is on pp. 101-115, and was republished on pp. 10-14 of issue no. 1/1967 of *Psicoterapia e Scienze Umane*). [editor's note.]

²⁴ The three analysts appointed by the IPA to hold the SPI under guardianship were Raymond de Saussure, Paul Parin and Fritz Morgenthaler (two of them, Parin and Morgenthaler, were members of the group of *Psicoterapia e Scienze Umane*), and the details of that experience were then reported by Parin (1984) in an article published in the German journal *Psyche* (see also p. 102 of issue no. 1/2009 of *Psicoterapia e Scienze Umane*). [editor's note.]

²⁵ A propos of this see, in the column “Traces” of *Psicoterapia e Scienze Umane*, pp. 99-104 of issue no. 1/2005 (Galli, 2000) and pp. 511-519 of issue no. 4/2005 (Galli, 2005b). [editor's note.]

²⁶ Rudi Dutschke (1940-1979) was the most prominent spokesperson of the German student movement of the 1960s. [editor's note.]

Abstract. Historical notes on psychotherapy, psychoanalysis and psychiatry in Italy in the early 1960s. Pier Francesco Galli, M.D., describes some developments of psychotherapy, psychoanalysis, and psychiatry in Italy in the 1960s, particularly concerning the cultural project of the “Milan Group for the Advancement of Psychotherapy” (since 1978 named *Psicoterapia e Scienze Umane*, from the title of the journal he founded in 1967). The following topics, among others, are discussed: the introduction of new technologies and disciplines (such as psychology and sociology) in Italy after World War Two, role of the intellectuals, training of mental health professionals and the diffusion of psychoanalysis, team-work, role of publishing houses, the continuing education courses organized since 1962 by this Group, the culture of descriptive psychiatry imported in the 1980s from the US with DSM-III, the transformation of Italian community psychiatry into institutions operated under the principles of a private company, and so on. [KEY WORDS: history of psychotherapy in Italy, history of psychoanalysis in Italy, history of psychiatry in Italy, psychoanalytic training]

Riassunto. Psicoterapia, psicoanalisi e psichiatria nei primi anni 1960. Appunti per una storia. Pier Francesco Galli descrive alcuni sviluppi della psicoterapia, della psicoanalisi e della psichiatria in Italia nei primi anni 1960, in particolare riguardo al progetto culturale del Gruppo Milanese per lo Sviluppo della Psicoterapia da lui fondato (che nel 1978 prenderà il nome di *Psicoterapia e Scienze Umane*). Vengono discussi, tra gli altri, i seguenti temi: l’inserimento di nuove tecnologie e discipline (come la psicologia e la sociologia) nella cultura italiana del dopoguerra, il ruolo degli intellettuali, la formazione alle professioni di aiuto e la diffusione della psicoanalisi, il lavoro di *équipe* nei servizi psichiatrici, il ruolo delle case editrici, i corsi di aggiornamento organizzati a partire dal 1962, la cultura della psichiatria descrittiva importata nei primi anni 1980 dagli Stati Uniti col DSM-III, la aziendalizzazione della Sanità, e così via. [PAROLE CHIAVE: storia della psicoterapia in Italia, storia della psicoanalisi in Italia, storia della psichiatria in Italia, formazione psicoanalitica]

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