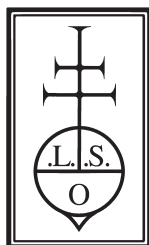


# PHYSIS

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# PHYSIS

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LE RADICI FILOSOFICHE DELLA PSICOLOGIA  
E I PRIMI PSICOLOGI ITALIANI

A cura di  
Guido Cimino e Piero Di Giovanni

Il fascicolo raccoglie le relazioni su alcuni aspetti e momenti di storia del pensiero filosofico-psicologico nel corso del suo cammino dall'età 'pre-scientifica' moderna all'epoca 'scientifica' contemporanea, presentate e discusse in occasione di due giornate di studio organizzate dal Dipartimento di Scienze Psicologiche, Pedagogiche e della Formazione dell'Università di Palermo e dal Dipartimento di Psicologia Dinamica e Clinica dell'Università di Roma "La Sapienza".

Tutti i testi sono stati rivisti e approvati dai curatori del fascicolo dai *reviewers* della rivista.

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## CLINICAL PSYCHOLOGY AND PSYCHOTHERAPY IN ITALY DURING THE SECOND HALF OF THE 20<sup>TH</sup> CENTURY

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**ABSTRACT** – The article describes the most important events that, in the 1960s and 1970s, contributed to the development of modern clinical psychology and psychotherapy in Italy. In a conference organised in Milan in 1952 by the most authoritative Italian psychologist of the time, the Franciscan friar Agostino Gemelli, the methods and limits of clinical psychology were outlined and defined. In this way the discipline was legitimised, although it was placed under the tutelage of psychiatry. Clinical psychology eventually freed itself from this subordination, evolving in line with international trends to become one of the main fields of applied psychology, thanks to the contribution of at least four events: 1) the affirmation of psychoanalysis by the school of Cesare Musatti and as a result of the endeavours of Gemelli's students; 2) the acceptance, on the part of the Catholic Church, of psychoanalysis as a therapeutic treatment in the face of distress and mental disturbance; 3) the scientific-cultural and political activity of Adriano Ossicini and Pier Francesco Galli, which opened the door to new psychotherapeutic theories and techniques; and 4) the closure of mental institutions (Basaglia Law, 1978) encouraged by anti-institutional psychiatry, and the new forms of treatment of mental illness practiced in therapeutic communities. This article reconstructs the vicissitudes of regulating the clinical psychologist and psychotherapist professions in relation to the diverse psychotherapeutic practices exercised in Italy since the 1970s.

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## INTRODUCTION

Although clinical psychology had been spoken of and discussed in the international sphere since the beginning of the 20th century,<sup>1</sup> in Italy this applied discipline only acquired full academic and professional recognition among psychiatrists and psychologists in the second half of the 20th century. In the first half of the century, even though its area of competence was undetermined and unclear, methods of a psychological type had begun to be applied in Italy to both diagnoses of and therapies for mental retardation and disorders.

With the origin of ‘scientific’ psychology at the end of the 19th and beginning of the 20th centuries,<sup>2</sup> ‘pathological psychology’, as it was called during the Fifth International Congress of Psychology held in Rome in 1905, had also emerged.<sup>3</sup> In addition, scholars with a medical-psychiatric training who were considered among the founders of Italian experimental psychology, including for example Sante De Sanctis (1862-1935) and Giulio Cesare Ferrari (1867-1932), had begun to create tests for the diagnosis of mental disturbances and mental retardation in children. More generally, they were proposing therapeutic methods for the mentally ill that were founded primarily on the physician-patient relationship, such as ‘hypno-suggestion’ or ‘psychosynthesis’, as proposed by Roberto Assagioli (1888-1974). These methods were different from the traditional techniques of ‘physical’ and ‘moral’ intervention used in mental institutions.

In particular, an early form of psychoanalysis began to be practiced by several ‘pioneers’ who were familiar with Freudian doctrine and who began to write articles about it. After the first translations of Freud’s writings by Assagioli, in 1925 Marco Levi Bianchini (1875-1971), the director of the psychiatric hospital of Teramo and Nocera Inferiore, founded the Italian Psychoanalytic Society. It was relaunched in 1932 by Edoardo Weiss (1889-1971), one of Freud’s followers. Weiss moved the Society to Rome, founding the «*Rivista Italiana di Psicoanalisi*» and a psychoanalytic school with Emilio Servadio (1904-1995), Nicola Perrotti (1897-1970) and Cesare Musatti (1897-1989), who in the post-war period would train the new generations of Italian psychoanalysts. In the 1930s rare handbooks on Freudian thought were published, including in 1931, *Elementi di psicoanalisi* by Weiss, with a preface by Sigmund Freud; and in 1938, *La psicoanalisi* by

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<sup>1</sup> WITMER, 1907.

<sup>2</sup> CIMINO, FOSCHI, 2012.

<sup>3</sup> DE SANCTIS, 1905.



Enzo Bonaventura (1891-1948), an experimental psychologist at the Laboratory of Psychology in Florence.

Freudian theory was, however, opposed by both the neo-idealist culture – established by the philosopher Giovanni Gentile (1875-1944) and dominant in the fascist era – and the Catholic one. Moreover, opposition of traditional psychiatry on account of the racial laws of the 1938 fascist regime, and the consequent emigration of Jewish psychologists and psychoanalysts had, by the end of the Second World War, triggered the near disappearance of psychoanalysis from the Italian cultural landscape.<sup>4</sup>

During the 1940s, both experimental psychology and the applied branch of clinical psychology and psychotherapy became scientifically and institutionally impoverished. They would return only after the Second World War, when the Cold War period would represent a new epiphany for psychological sciences in Italy. After the Second World War, the subject of clinical psychology and psychotherapy was spoken of once again for the first time at a conference in Milan on 28-29 September 1952 organised by Agostino Gemelli (1878-1959). It was raised with the purpose of clarifying this psychological specialisation that was already widespread abroad, but which had received no clarification or disciplinary legitimisation in Italy.

Gemelli, Franciscan friar, trained physician and powerful promoter of neo-Thomism and Catholicism, had become the principal Italian psychologist during the years of fascism. He had succeeded in preserving Italian psychology, albeit on thin ice, through an ambiguous relationship with the regime.<sup>5</sup> At the conference of 1952, in collaboration with the psychiatrist of the University of Rome, Mario Gozzano (1898-1986) and with the sponsorship of the 'Società Italiana di Psicologia', Gemelli succeeded in bringing Italy's most authoritative university professors of psychology to Milan, along with prominent directors of psychiatric hospitals and some illustrious foreign psychologists and psychiatrists who were invited along for the occasion [among them, Ludwig Binswanger (1881-1966), André Rey (1906-1965) and René Zazzo (1910-1995)].

In the proceedings of the conference, published in a special issue of the «Archivio di Psicologia, Neurologia e Psichiatria» in 1953, Gemelli had written in the introduction that the meeting proposed to «clarify the concept of clinical psychology, determine the limits of the clinical psychologist's role,

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<sup>4</sup> DAVID, 1990; GUARNIERI, 2016; for more on the fascist persecution of the first psychoanalysts, see BELLANOVA, BELLANOVA, 1982.

<sup>5</sup> FOSCHI, GIANNONE, GIULIANI, 2013; for the importance of Father Gemelli in the international psychological research of the 1930s, see GREEN, 2017.

examine whoever is called upon to exercise this new branch of psychology and establish the value of the methods that clinical psychology employs».<sup>6</sup> Hence the principal topic of the conference was essentially what the relationship between psychologists and psychiatrists should be, and how their competencies and interventions should be diversified.

The majority of assembled speakers had a medical-psychiatric training and displayed, albeit with varying undertones, substantial convergence on the definition, as well as the competencies and methods, of clinical psychology. With regard to the tasks and responsibilities of clinical psychologists and the procedures of psychotherapy, suggestions were made on how to set precise limits on the discipline, such as placing it under the direction of psychiatry and limiting the psychotherapeutic activity of those who had not completed their medical training. Gemelli shared this view, to the point that in the mid-1950s he wrote:

[...] it would be very useful if there were a psychologist in psychiatric clinics [...]. But in these cases the relationship that there must be between the two [psychiatrist and psychologist] must be one of subordination. [...]. This is one of the reasons for which I maintain that the psychologist must be a physician, and actually a psychiatrist, since combining the due functions, or rather making use of his psychological knowledge, he can formulate more exactly the conclusions that will be necessary for the diagnosis and for indicating the therapeutic treatment.<sup>7</sup>

Having such an opinion, Gemelli subsequently demanded that his students held a degree in medicine, whether they dedicated themselves to research or took up the profession of psychotherapist.

As far as the formation and training of clinical psychologists was concerned, Gozzano put forward a proposal that envisaged university courses with a specialisation in clinical psychology for both those with a degree in medicine and those with a degree in other humanistic disciplines with a psychological orientation. But he also maintained that, while the former could run a professional practice offering diagnosis and therapy and with full rights to practise, the latter would have to collaborate with psychiatrists in order to administer tests.<sup>8</sup> Gemelli and the majority of Italian psychologists, in agreement with the psychiatrists, accepted this difference for doctors and non-doctors, sharing the view that psychotherapy was a task exclusively for specialists with a degree in medicine.

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<sup>6</sup> GEMELLI, 1953b, p. 7.

<sup>7</sup> GEMELLI, 1956, p. 705.

<sup>8</sup> GOZZANO, 1953.

From the prevailing opinions displayed by the psychiatrists and psychologists at the conference, Cesare Musatti – a philosopher by training, experimental psychologist of Gestaltist orientation, pupil of Vittorio Benussi (1878-1927) and one of the most important Italian followers of Freud – distanced himself. For him, clinical psychology was essentially psychoanalysis. Paradoxically, however, Musatti contradicted himself, contending not only that psychoanalysis had to be prescribed by a psychiatrist, but also that it had to be practiced by a ‘physician’.<sup>9</sup>

Musatti maintained this point of view for several years, becoming one of the most important advocates in Italy of a notion of psychology that clearly separated the experimental from the clinical, the latter for him being the exclusive prerogative of physicians with traditional psychoanalytical training.<sup>10</sup> In line with this position, he trained two types of students: on the one hand, experimentalist psychologists, and on the other, physician psychoanalysts.

Ultimately, and for the first time in Italy, there emerged from the conference of 1952 a clear definition of the area of competence of clinical psychology which, in line with international trends, concerned the knowledge and use of a combination of psychological theories and methods for the diagnosis of certain forms of mental disturbance and psychotherapeutic treatment. But at the same time there were limits to the tasks that clinical psychologists could perform: the application of psychological methods (experimental, clinical-observational and psychotherapeutic) must be practiced by a doctor with a university specialisation in clinical psychology; while a ‘mere’ non-medical psychologist with the same specialisation could not be a psychotherapist and could only participate in diagnosis testing under the guidance of a doctor.

In essence here, at the centre of the conference, was once again the problem of the relationship between psychology and psychiatry which, under fascism, was resolved in favour of the latter. In this way the Italian situation differed from the international one where, especially in the United States, the autonomy of clinical psychology from psychiatry had been established by the end of the Second World War. Since the 1950s in particular, this autonomy had seen clinical psychology gradually come to be legally recognised as an activity conducted by psychologists independent of psychiatrists.<sup>11</sup>

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<sup>9</sup> MUSATTI, 1953; on Musatti see REICHMANN, 1996, 1997, 1999.

<sup>10</sup> MUSATTI, 1982.

<sup>11</sup> REISMAN, 1991.

This process of liberation would eventually reach Italy during the 1980s, with the promulgation of a law on the profession of psychologist and psychotherapist (1989) that came about – according to our interpretation – thanks to the impetus of four tightly interwoven events that took place at around the same time, in the 1960s and 1970s. These events could be considered the key causal factors, or the most important stages, in the affirmation in Italy of modern clinical psychology and psychotherapy as practiced autonomously by clinical psychologists.

The intention of this study is thus to pinpoint each of these events which, in our opinion, can be identified as:

1) the reorganisation and affirmation of the psychoanalytic movement, primarily by Musatti, Perrotti and Servadio, but also helped by the work of Gemelli's pupils such as Leonardo Ancona;

2) the acceptance, on the part of the Catholic Church, of psychotherapy and psychoanalysis as a therapeutic treatment;

3) the work and activity of two psychologist-psychiatrists, Adriano Ossicini and Pier Francesco Galli, who were at the centre of numerous initiatives aimed at opening the door to new theories and techniques of psychological-clinical analysis and psychotherapeutic treatment; and

4) the 'crisis' of traditional Italian psychiatry and the birth of the 'anti-institutional psychiatry' movement, with the consequent closure of mental institutions (Basaglia Law of 1978) and the incentive to renew doctrines, therapies and institutions for the care of the mentally ill.

#### THE DEVELOPMENT OF PSYCHOANALYSIS AND THE ROLE OF MUSATTI AND GEMELLI

The image of clinical psychology depicted at the conference – as an applied branch of general psychology located at the periphery of psychiatry to which it is subordinated – would in part be modified over the following decades. During the 1950s in particular, its detachment from psychiatry began to take hold as a result of developments in psychoanalysis made possible initially by the work of Musatti and his students, and subsequently by the dynamism of the school of Gemelli who, along with his followers, would succeed in having psychoanalytic treatment accepted by the dominant Catholic culture.

By the end of the Second World War, Italian psychology was in crisis and psychological research and teaching in the universities diminished. The only academic positions to survive were the psychology chairs of Mario Ponso (1882-1960) at the 'Sapienza' University of Rome, and that of Ge-

melli at the Catholic University of Milan; Musatti at the State University of Milan would be added in 1948.

In the post-war period it would be Gemelli and Musatti who would relaunch psychology in Italy and train a new generation of psychologists. Thanks to their numerous students this was a wholly successful operation, as demonstrated by the increase in university chairs of psychology in the 1950s and 1960s in the Faculties of Medicine and of Educational Sciences, and by the formation in the academic year 1970-71 of the first two degree courses in psychology at the universities of Rome and Padua.<sup>12</sup>

Gemelli and Musatti were

[...] two personalities culturally at the antipodes, [...] united by their interest in psychological science, divided on all the rest: the former a Franciscan friar, the latter a misbeliever; in philosophy, the former neo-scholastic, the latter Kantian; [...] the former not totally hostile to the Fascist regime, the latter a socialist and then sympathizer with the Communist countries'.<sup>13</sup>

And yet despite their many differences, between these two 'friends-enemies' as they were called there was sincere esteem and continual dialogue, and both played a fundamental role in the development of psychology and clinical psychology in Italy during the second half of the 20th century.

Despite their common academic interests, Gemelli and Musatti also held different attitudes towards psychology and psychotherapy. Musatti was closer to international developments and defended conservative positions of Freudian doctrine and the Society of Psychoanalysis.<sup>14</sup> He was also editor of the Italian translation of the *Complete Psychological Works of Sigmund Freud*, which was more similar to the German Standard Edition than to Stracheys' translation. In contrast, Gemelli – as Pier Francesco Galli recalls – encouraged his students to read international articles and urged them to plan educational trips abroad, in spite of his reluctance towards Freud and any psychological theories that challenged his neo-Thomistic approach.<sup>15</sup> Doing so enabled many of these scholars to deal with innovations in psychotherapy as well as experimental psychology. During the 1950s the Catholic University of Milan had, moreover, become a place where students from various parts of Italy (particularly from the Campania, such as Pier Francesco Galli and Gustavo Iacono) came together; many of them

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<sup>12</sup> CIMINO, FOSCHI, 2012.

<sup>13</sup> FORNARO, 2009, p. 492.

<sup>14</sup> GALLI, 1999.

<sup>15</sup> GALLI, 2016a.

subsequently took part in the progressive protest movements of the 1960s, influenced at that time by Marxist ideology.<sup>16</sup>

In parallel with the growth of academic psychology, after the Second World War there was also a reorganisation and affirmation of the psychoanalytic movement, especially with reference to the names of Musatti, Perrotti and Servadio. Both the Italian Psychoanalytical Society (initially with the participation of Ferruccio Banissoni, Joachim Flescher, Raffaele Merloni, Claudio Modigliani and Alessandra Tomasi di Palma), and the «Rivista di Psicoanalisi» were relaunched. Musatti, with his *Trattato di Psicoanalisi* of 1949, had established the foundations of psychoanalytic doctrine in Italy, and it was from his teaching that most Italian psychoanalysts drew their inspiration.

Towards the end of the 1950s, an attempt to apply psychoanalytic ideas in the most diverse contexts of clinical intervention, especially on the part of Perrotti, began. For example, Perrotti held a series of theoretical-practical lessons for the 'Centro per l'Educazione Professionale degli Assistenti Sociali', aimed at propagating the theory and technique of 'casework'.<sup>17</sup> By the 1930s Servadio, for his part, was already the best-known Italian psychoanalyst internationally, especially for his innovative ideas regarding countertransference and telepathy.<sup>18</sup> The urge to promulgate psychoanalysis, considered throughout the 1950s and 1960s to be the therapeutic instrument of choice for clinical psychology, came from pupils of Musatti such as Franco Fornari (1921-1985), Tommaso Senise (1917-1996) and Giovanni Carlo Zapparoli (1924-2009), as well as psychologists who had trained initially with Gemelli at the Catholic University of Milan such as Leonardo Ancona (1922-2008), Gustavo Iacono (1926-1988), Enzo Spaltro, Marcello Cesa-Bianchi, Pier Francesco Galli, Mario Bertini and Renzo Carli.<sup>19</sup>

In the 1960s, therefore, psychoanalysis became the principal psychotherapy available to Italian clinical psychologists, and as it spread it began to interest cultural environments that were usually hostile, such as Marxist and Catholic ones. In the mid-1960s, the Chilean psychoanalyst Ignacio Matte Blanco (1908-1995) attracted many students, forming several groups of psychotherapists in Rome and Naples. In reality, during this decade the Italian centres for psychoanalytic training recognised by the International

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<sup>16</sup> AGOSTI, PASSERINI, TRANFAGLIA, 1991.

<sup>17</sup> PERROTTI, 1957.

<sup>18</sup> SERVADIO, 1935.

<sup>19</sup> In 1964 an important Specialisation School of Psychology at the Catholic University was also founded, where early pupils of Gemelli formed a new generation of Italian Psychologists. See RIGGI, 2017.

Psychoanalytical Association were in conflict with one another. In addition, up until 1967 they did not have a sufficient number of didactic psychoanalysts to train new therapists, to the point that by the end of the 1960s three members of the Swiss Psychoanalytic Society helped the Italians to establish three internationally recognised, independent training centres (two in Rome and one in Milan).<sup>20</sup>

At the same time, however, a very important phenomenon of Italian psychotherapy appeared: the tendency of many young people to go abroad for their training and return with new psychotherapeutic competencies. New competencies were thus appearing in Italy having arrived by very different channels from the typical academic ones. On their return home these young people, who were often perceived as a threat to traditional psychological and psychiatric academic training,<sup>21</sup> contributed, for example, to introducing the psychoanalysis of Jung (Ernst Bernhard, Mario Moreno, Gianfranco Tedeschi, Mario Trevisani), Lacan (Giacomo Contri) and Klein (Franco Fornari, Francesco Corrao), in addition to family psychotherapy (Mara Selvini Palazzoli). Moreover, with them also came an extension of what were considered innovative techniques for the treatment not only of neuroses but of psychoses too.

#### THE EVOLUTION OF CATHOLIC THOUGHT REGARDING PSYCHOTHERAPY

The influence of Catholic culture on the whole landscape of Italian psychology and psychotherapy has been much more important than historians have brought to light up until now. In the first half of the last century the Church's attitude, defined as one of 'duplicité', was to be very cautious with regard to psychotherapeutic theories and practices.<sup>22</sup> On the one hand it was wary of them, to the point that they were circulated 'in Latin' for the study of theologians, and were therefore of limited use to confessors. On the other, the Church considered them potentially useful, especially regarding the emotional and sexual life of the faithful, the seminarians and the priests themselves.

For the psychological and pedagogical sciences, Gemelli was the principal point of reference for the Catholic Church. For him, clinical psychology and psychoanalysis were necessary to help priests understand mental and

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<sup>20</sup> GALLI, 2009.

<sup>21</sup> GALLI, 1999.

<sup>22</sup> MECACCI, 1998.

sexual dynamics in order to evaluate the biological, moral and spiritual aspects of their daily practice. When in the 1920s psychoanalysis began to be recognised in Italy, Gemelli and the Church condemned it as a theory of mental apparatus (i.e., as metapsychology); they considered it a dangerous doctrine, incompatible with theology and contrary to ecclesiastical teaching because it was fundamentally materialist, determinist and pansexualist.<sup>23</sup> In psychoanalytic theory – according to Gemelli – there was no room for the ‘soul’ or for free will; instead, there was a materialistic reduction of the mental to the world of ‘instincts’; all human actions were basically guided in a deterministic way by drives, for the most part of a sexual nature and which, if removed, acted by means of the unconscious. With his typical impetuosity and *vis polemica*, Gemelli in the post-war period continued to consider psychoanalysis «an enchanting siren, [...] an illness of our time [...] like communism, like other forms that have inebriated the youth».<sup>24</sup>

Despite being rejected from a theoretical point of view, psychoanalysis did, however, draw Gemelli’s attention as a therapeutic method. Thus the psychoanalytic setting might be a useful therapeutic instrument for clinical psychology, even though Gemelli preferred interventions of an existential kind that did not make use of practices that violated personal freedom and manipulated the patient’s personality, which he believed psychoanalysis did.<sup>25</sup>

This dual, ambivalent attitude towards Freud’s theories resulted in the ‘removal’ of parts that were contrary to the doctrine of the Catholic Church (atheism, pansexualism, determinism and the irresponsibility of the unconscious) in order to make it acceptable to the Catholic world in at least some aspects; for example, in preferring the psychoanalysis of object relations or group analysis to the theory of the *libido*.<sup>26</sup> Furthermore, Gemelli had ambiguous but cordial relations with psychoanalysts – such as, Gregory Zilboorg (1890-1959) in addition to Musatti – to the point of encouraging some of his students to pursue a psychoanalytic education.<sup>27</sup> Among them the principal ‘Gemellian psychoanalyst’ was Leonardo Ancona, who introduced group psychoanalysis to Italy and who, in his later years, recalled the ‘double’ disposition of his professor towards Freudian doctrine.<sup>28</sup> The

<sup>23</sup> GEMELLI, 1950, 1953a.

<sup>24</sup> GEMELLI, 1950, pp. 245-246; see also FOSCHI, GIANNONE, GIULIANI, 2013.

<sup>25</sup> GEMELLI, 1953b; cf. COLOMBO, 2003; FORNARO, 2010; FOSCHI, INNAMORATI, TARADEL, 2018.

<sup>26</sup> ANCONA, 2006; cf. HERZOG, 2017.

<sup>27</sup> FOSCHI, INNAMORATI, TARADEL, 2018.

<sup>28</sup> ANCONA, 2006



other important psychoanalyst, Pier Francesco Galli, a medical doctor who trained first at the Catholic University of Milan and then in Basel with the psychiatrist Gaetano Benedetti (1920-2013), also recalled the way in which Gemelli's students approached psychoanalysis without his explicit consent, even though – as recently confirmed by Galli himself – in reality the unrefined Franciscan friar was aware of and tolerated, whilst not openly approving of, the psychoanalytic research and practice of his students.<sup>29</sup>

Gemelli, moreover, had in 1957 urged Ancona to study psychology in Canada with the Dominican priest Noël Mailloux (1909-1997), a psychologist and psychoanalyst, founder of the Department of Psychology at the Montreal University and one of the promoters of the 'Société Canadienne de Psychanalyse'. Although in the Catholic University of Milan even projective tests were prohibited, Gemelli's students trained covertly as psychoanalysts, their training provided by the students of Musatti (Fornari, Senise, Zapparoli) in confirmation of the close relationship between these two pivotal players in Italian psychology in the second half of the 20th century.<sup>30</sup>

During the Cold War, with all its ups and downs the hostile attitude of the Italian Catholic Church towards psychoanalysis began to change as a result of the influence of churches in other countries such as France, England and the Netherlands, which were more secularised and liberal compared with Italy.<sup>31</sup> Principally it was the activity of Maryse Choisy (1903-1979), avant-garde writer converted to Catholicism, admirer of Freud and friend of Jacques Lacan (1901-1981), who helped to open the doors of the Church to psychoanalysis. Together with the Oxford Jesuit John E. Leycester King (1896-1952), she founded the 'Association Internationale Catholique de Psychothérapie et de Psychologie Clinique' in 1949, which became the principal vehicle of propaganda for psychoanalytic and psychotherapeutic culture within the Church.<sup>32</sup> Gemelli was nominated honorary president of the association.<sup>33</sup> It was this circumstance that may perhaps have induced Pope Pius XII to address participants at the Fifth International Congress of Psychotherapy and Clinical Psychology, a Catholic meeting organised annually by Choisy, with a talk published in 16 April 1953 by the daily newspaper of the Vatican City State, «L'Osservatore Romano». He blessed the Congress's participants, appearing to legitimise them even while reiterat-

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<sup>29</sup> GALLI, 2016a.

<sup>30</sup> *Ivi*.

<sup>31</sup> DAVID, 1990.

<sup>32</sup> DAVID, 1990; see also OHAYON, 1999.

<sup>33</sup> DAVID, 1990, p. 122.

ing his opinion of the dangers and responsibilities that psychotherapists undertake in the course of their practice.

In the Catholic Church, therefore, various stances confronted each other on the slippery slope of psychoanalysis; the latter was generally described by the Jungian term ‘depth psychology’, perhaps in acknowledgement of the fact that Jung seemed more favourable than Freud when it came to faith. But antagonism towards psychoanalytical theory, expressed once again in a *Monitum* (admonishment) against psychoanalysis published on 16 July 1961 in «L’Osservatore Romano», persisted, even though the preference among Catholics was for conciliation.<sup>34</sup>

Over the course of the 1960s, contact between psychoanalysis and the Catholic world – a contact guided by Leonardo Ancona, who had acquired his psychoanalytic training with Mailloux in a semi-clandestine way – gradually grew closer. With a scientific-cultural background that contrasted with Gemelli’s ideas, and benefitting from a favourable period of doctrinal and social renewal of the Church supported by the Vatican Council II (1962-1965), Ancona had begun to work on a reconciliation between Freudian doctrine and Catholicism. After Gemelli’s death, Ancona felt free to publish a booklet on psychoanalysis that was destined to proliferate rapidly in the Catholic milieu. In this book, psychiatrists and psychologists were invited to accept whatever was important in Freud’s work, abandon their prejudices and treat his work with due respect.<sup>35</sup> In this way Ancona eventually succeeded in the difficult task of gaining the pontiff’s acceptance of psychoanalysis.

In fact a decade after its publication, his book was recognised by Pope Paul VI who, in his general Audience of Wednesday, 7 November 1973, in preparation for the Holy Year of 1975, made an appeal precisely to psychoanalysis and Ancona’s book to invite believers «to come down to the centre of personal consciousness», stimulated by the «importance that is given today [...] to this vivisection of the unconscious process»; he concluded by affirming that, «we have esteem for this by now well-known trend of anthropological studies».<sup>36</sup> Paul VI, moreover, in his encyclical *Sacerdotalis coelibatus* of 1967, had recognised the centrality of psychology and clinical psychology in comprehending genuine motivations and affections for the sacerdotal vocation.<sup>37</sup>

<sup>34</sup> DESMAZIÈRES, 2011.

<sup>35</sup> ANCONA, 1963.

<sup>36</sup> PAUL VI, 1973.

<sup>37</sup> ANCONA, 2003; on Catholicism and psychoanalysis see FOSCHI, INNAMORATI, TARADEL, 2018.

Furthermore, between the 1950s and 1960s several scholars from the Catholic University of Milan organised interdisciplinary conferences that established contact between the Catholic and secular worlds on topics related to psychology, psychiatry and psychotherapy. These conferences, held at Passo della Mendola (Trento) in a cultural centre tied to the Catholic University,<sup>38</sup> anticipated the meetings of the 'Gruppo Milanese per lo Sviluppo della Psicoterapia', promoted afterwards by Pier Francesco Galli. In the 1960s, therefore, psychoanalysis, accepted by the Catholic world, became established as the principal psychotherapeutic treatment available to clinical psychologists.

#### THE OPENING UP TO DIFFERENTIATED FORMS OF PSYCHOTHERAPY BY OSSICINI AND GALLI

During the 1960s, the psychoanalysis of Musatti, Perrotti, Servadio and their followers, as well as that practiced by followers of the school of Gemelli, were progressively overtaken by other psychodynamic therapies, as well as group and family psychotherapies, which adapted well to the new social realities of the so-called Italian economic miracle. An initial break away from a psychiatric model of clinical psychology took place in Italy, initiated by Adriano Ossicini with his book *Problemi di Psicologia Clinica* (1957), one of the first works to be dedicated to themes inherent to the discipline.<sup>39</sup>

In his book, Ossicini – professor of psychology at the University of Rome with a degree in medicine, anti-fascist partisan, left-wing Catholic intellectual and several times senator in the Italian parliament – had developed a conception of clinical psychology that proved to be new in the realm of Italian psychology. Inspired by the views of Daniel Lagache (1903-1972) concerning the notion that psychology had to be unified,<sup>40</sup> he conceived the discipline as a theoretical-methodological construct that integrated the personality theories of Freud and Kurt Lewin (1890-1947) with experimental psychology. According to Ossicini, psychological techniques such as tests, questionnaires and interviews, together with psychotherapeutic practice and Freudian and Lewinian theories, were the basis for developing

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<sup>38</sup> The best known of these meetings was the *Symposium* on relations between psychology and psychiatry (11-15 September 1960). The proceedings were published in a monograph of the journal «Archivio di Psicologia Neurologia e Psichiatria», 1961, XXII, 3/4 (cf. ANCONA, 1962; GALLI, 2016a).

<sup>39</sup> Ossicini also participated as young scholar in the conference organised in Milan in 1952.

<sup>40</sup> LAGACHE, 1949.

a ‘revolutionary’ clinical psychology able to open psychiatric hospitals and renew organicistic psychiatry which, following the Second World War, was the dominant model in Italy.<sup>41</sup>

Ultimately, Ossicini considered clinical psychology to be an autonomous science that brought together the contributions of various research fields, and which could be used for the diagnosis of mental disturbance and planning of psychological counselling or psychotherapy without the use of drugs. In this sense, clinical psychology and psychotherapy – as would be recognised by the law of 1989 and promoted by Ossicini himself – could be practiced by someone who had psychological or medical training.

Even though Ossicini was active as a psychologist and politician in the post-war period, his ideas only began to be shared by the end of the 1960s in a period of great transformation in Italian culture and society. The years that followed the Second World War were marked first by post-war reconstruction, and subsequently by formidable economic expansion defined as ‘the Italian economic miracle’. The new social-economic condition favoured the affirmation and diffusion of psychotherapy from a ‘private’ intervention practiced by few people and directed towards a narrow number of upper middle class patients, to a practice that extended to all social classes. Furthermore, psychoanalysis became overtaken by other psychotherapeutic techniques of various configurations that were less costly and not simply for the *élite*.

The rejuvenation of psychotherapy was also promoted by research groups engaging in critical dialogue with both the psychoanalytic tradition and psychiatry, as well as experimental and academic psychology. The most significant of these groups was that organised in Milan by Pier Francesco Galli.<sup>42</sup>

His ‘Gruppo Milanese per lo Sviluppo della Psicoterapia’<sup>43</sup> aimed to introduce new theories and techniques of psychotherapy to Italian psychological culture, such as the phenomenological-existential approach linked to Freudian theory, group psychoanalysis, the Balint Groups and the psychotherapy of psychosis.<sup>44</sup> Also favouring these new therapeutic orienta-

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<sup>41</sup> OSSICINI, 2002.

<sup>42</sup> Among his many activities, Galli also collaborated with his fellow citizen Sergio Piro (1927-2009), a psychiatrist who, in the psychiatric hospital of Nocera Superiore (Salerno), introduced an innovative therapeutic community—a unique case in the south of Italy.

<sup>43</sup> Besides Galli, founding members of the ‘Group’ included Berta Neumann, Mara Selvini Palazzoli (1916-1999) and Enzo Spaltro.

<sup>44</sup> Psychotherapy of psychoses included some emigrated Italians among its pioneers, such as Silvano Arieti (1914-1981) in the United States and Gaetano Benedetti, professor of Pier Francesco Galli, in Switzerland. See GRUPPO MILANESE, 1964a, 1964b, 1967

tions was the translation into Italian, promoted by Galli, of the works of important foreign authors (Anna Freud, Michael Balint, Harry Stack Sullivan, Ludwig Binswanger, Silvano Arieti, etc.) and the founding in 1967 of the periodical «Psicoterapia e Scienze Umane». The purpose of this periodical, which was one of the longest lasting in its field, was to promote interdisciplinary dialogue and expand on new ideas in the psychotherapeutic sphere. It should also be noted that the Milanese group, co-ordinated by Galli, organised and financed the Eighth International Congress of Psychotherapy of the 'Federation Internationale de Psychothérapie Médicale'.<sup>45</sup>

With such initiatives, the Milanese group laid the foundations of a critical psychotherapy, detached not only from the influence of the Catholic culture but more so from the conditioning by traditional institutions of Italian psychology, as represented by scientific societies such as the 'Società Italiana di Psicologia Scientifica', the 'Società Psicoanalitica Italiana' and the 'Società Italiana di Psichiatria'. These societies were roundly criticised in the 1960s and 1970s, especially by youth movements, for their traditional methods of co-opting, their authoritarian dismissal of the new needs of mental health and their academic detachment from social reality. Young psychologists demanded of scientific societies and universities their greater attention and commitment to the world of professional psychology, which in the 1960s was fairly dynamic and, most importantly, attempted to modernise institutional psychology and psychiatry from the outside.<sup>46</sup>

For Italian psychology the year of the protests, 1968, also meant the opening up of new areas of exploration for practices considered *avant-garde*, which used group and family therapy as instruments for psychotherapy. Among the many pioneers of such changes, Mara Selvini Palazzoli (psychotherapy of the family) and the brothers Diego (1927-2013) and Fabrizio (1925-1996) Napolitani (therapeutic groups and communities) deserve to be remembered.

#### PSYCHIATRIC REFORM AND THE EMERGENCE OF NEW CLINICAL MODELS

After the liberation of Rome from the nazi-fascists at the end of 1944, Adriano Ossicini, working with young psychologists, attempted an experiment on the 'de-institutionalisation' of mental illness by opening the Psychiatric Hospital of Santa Maria della Pietà in Rome and in particular the

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<sup>45</sup> GALLI, 1973.

<sup>46</sup> GALLI, 2005, 2016b.

wards containing children.<sup>47</sup> This pioneering initiative did not last, however, and only resumed in 1968 with the introduction of the Mariotti Law (Law 431 of 1968), under which the old mental institutions were reformed and psychiatric assistance was entrusted to new outpatient facilities and smaller wards with at least one psychologist.

This ‘de-institutionalisation’ of mental illness was gradually achieved in Italy, thanks also to new perspectives in psychotherapy that were promoted during the 1960s. These ultimately recognised that traditional Italian psychiatry was undergoing a crisis and acknowledged the incentive to renew doctrines, therapies and institutions. Encouraged by the initiatives of Galli’s Milanese Group several psychiatrists, including Franco Basaglia (1924-1980), Giovanni Jervis (1933-2009) and Agostino Pirella (1931-2017), who radicalised the debate on mental health, participated in laying the foundations for the abolition of asylums.

Inspired in part by the phenomenological-existential approach of Jaspers and Binswanger, and displaying diffidence towards invasive medical therapies and excessive use of drugs – but also towards clinical psychology and psychotherapy – the new Italian anti-institutional or ‘radical’ psychiatry maintained that mental disturbances were profoundly influenced by environmental and social conditioning and pressures. In order to ‘rehumanise’ the treatment of mental illnesses, it would first of all be necessary to reverse the relationship between doctor and patient, removing power over the patient from the former and promoting the co-management of wards, while favouring new contexts for psychiatric therapy. Ultimately, it would be necessary to dismantle the old psychiatric hospitals and the criminalisation of patients, and to replace them with social-health centres whose objective was the well-being and freedom of patients.

Around this anti-institutional psychiatry movement, political, cultural and social forces came together to approve mental health reform law (law 180 of 1978, the so-called Basaglia Law),<sup>48</sup> later adopted during the reform of the entire Italian health service (law 833 of 1978). The Basaglia Law abolished asylums as a treatment model and replaced them with innova-

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<sup>47</sup> Ossicini, 1944-1945; 2002, pp. 90-91.

<sup>48</sup> Law 180, which abolished psychiatric hospitals, was eventually approved thanks to the intervention of senator Adriano Ossicini in the Health Commission of the Italian Senate. In recent historiography there is no reference to the role played by Ossicini in the reform of the Italian psychiatric system (Corbellini & Jervis, 2008; Foot, 2015). Yet from 1947 he undertook initiatives aimed at closing asylums, which he believed ought to be ‘open places’ furnished with clinical-psychological services, while also hoping for an end to the registration of the mentally ill in court records (Ossicini, 1992, 2002).

tive, National Health Service interventions, such as forms of controlled reintroduction into the community, socio-educational practices and group therapies in therapeutic communities.

The psychiatric reform movement in Italy was very broad, varied and involved the commitment of a multitude of scholars (psychiatrists, psychologists, sociologists and intellectuals of various kinds) who advanced diverse proposals for change from the creation of new curative contexts (Basaglia and his collaborators) to the rejection of psychiatric diagnoses. In general, the new Italian psychiatry was influenced by various international trends, such as European phenomenological-existential psychiatry, English and American anti-psychiatry, and the movement of therapeutic communities in England, Switzerland and France.<sup>49</sup>

Both anti-institutional psychiatry, and the more radical anti-psychiatry, which rejected mental illness and asylums in the name of safeguarding the needs of the alienated, favoured a generic social worker as part of the mental health services team over the clinical psychologist.<sup>50</sup> Nevertheless, in Italy in the 1970s, with the approval of the Basaglia reform, new possibilities emerged for the development of clinical psychology and psychotherapies in the associations and therapeutic communities that replaced mental hospitals.

Thus, even if the radical psychiatrists, and in particular Basaglia, were opposed to psychotherapy, which they viewed as simply a new form of patient enslavement to replace the mental hospital, the process of de-institutionalisation, with its proposals for alternative kinds of care for mental illness, opened the doors of mental health services to both the therapeutic community and psychotherapy managed by psychologists. In this way, the models of psychotherapy emerging in the international arena eventually prevailed, and family psychotherapy and various forms of group psychotherapy came to Italy.<sup>51</sup>

## CONCLUSIONS

Clinical psychology and psychotherapy have been practiced in Italy in the 1960s and 1970s, driven by the four principal historical events discussed above. So too have diagnoses and therapies for mental problems in fields

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<sup>49</sup> On the new Italian psychiatry, see BABINI, 2009; BARTOLOMEI, LOMBARDO, 1977; FOOT, 2015; MANACORDA, MONTELLA, 1978.

<sup>50</sup> LOMBARDO, 1994.

<sup>51</sup> OSSICINI 2002, 2012; DARIO, DEL MISSIER, STOCO, TESTA, 2016.

other than psychopathology. For example, in the area of social psychology another of Gemelli's students, Enzo Spaltro, favoured clinical applications in organisations and initiated an Italian tradition of psycho-sociological analysis connected to the tradition of the Tavistock Institute of Human Relations (TIHR). Clinical psychology also found its place in the academic sphere, particularly in degree courses in psychology at the University of Rome and the University of Palermo in the 1970s.<sup>52</sup>

Over this same period, clinical psychology and psychotherapy gained their autonomy from psychiatry thanks to the ideas of Ossicini and Galli, the founding of a university degree in psychology and the law on the abolition of asylums in 1978 which had stimulated the search for alternative therapies; an autonomy and an affirmation attained by virtue of new kinds of psychotherapy that were gradually imposed on the Italian psychological-cultural landscape from the 1970s onwards, such as behavioural, cognitive, Rogersian, family and group psychotherapies, and which competed with those of a psychoanalytic (especially Freudian and Jungian) orientation (Fig. 1). It must also be emphasised that this progressive diversity of psychotherapies ran parallel to improvements in the financial situation of Italians.

Italian psychology, after the Second World War, had been managed mainly by university professors who were indifferent to professional practices; in this regard, it was emblematic that in the Italian Society of Scientific Psychology (SIPS) the entire decision-making power was entrusted by statute to university faculty members. This situation lasted until the end of the 1960s when, as discussed, the critical wave of 1968 collided with the fragile structures that Italian psychologists had created. According to the slogans of the time, many of the younger participants of the 16th Convention of the SIPS, held in Rome in January 1969, considered the psychological models they had encountered up until then to be the fruits of 'dominant class ideology'. In response to this challenge, participants at the convention ordered the termination of the society itself.

In spite of the protests, Italian psychology grew during the 1960s, gaining full scientific, social and academic recognition and developing in universities and other research centres. The teaching of psychology was most prevalent in departments of education, philosophy and medicine which might also include schools of post-graduate specialisation in psychological, psycho-pedagogical or clinical-psychological disciplines for future professionals. The growing social demand for such specialists went on to create the conditions for establishing Italy's first degree courses in psychology. A fundamental

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<sup>52</sup> CARLI, PANICCIA, LANCIA, 1988; KANEKLIN, OLIVETTI, MANOUKIAN, 1990.



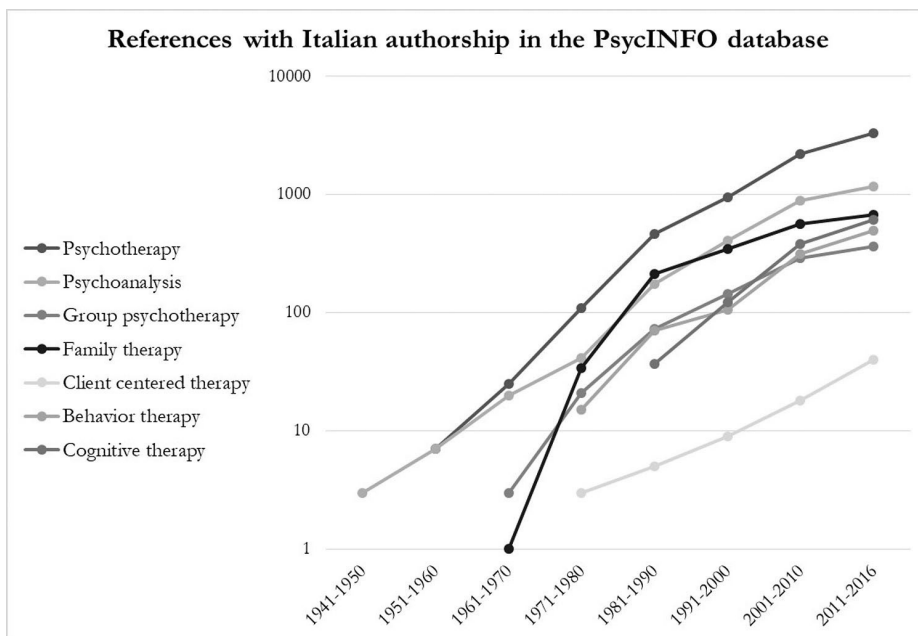


Fig. 1 – Number of contributions by Italian authors to the various psychotherapeutic traditions and catalogued in PsycINFO. The terms were researched in the catalogue (title, abstract and subjects) and cross-referenced with the Italian origin of at least one of the authors. The psychotherapy category is used as a general term of comparison. The chart has been updated to the first months of 2016.

The curves of the graph, from top to bottom of their arrival point, refer to: Psychotherapy, Psychoanalysis, Family therapy, Cognitive therapy, Behavior therapy, Group psychotherapy, Cognitive therapy, Client-centered therapy.

stage that led to their creation was the conference held in Milan in 1967, on *Human Sciences and the Reform of the University*, co-ordinated by Musatti and Marcello Cesa-Bianchi, a student of Gemelli and professor at the State University of Milan. At the conference various papers were presented, including a detailed programme of a degree course in psychology designed by a commission presided over by Ernesto Valentini (1907-1987), a Jesuit psychologist of the University of Rome. Lastly, in the academic year 1971-1972, having navigated a difficult institutional pathway, efforts to institutionalise the discipline in universities succeeded with the first two degree courses in psychology at the University of Rome and the University of Padua.

The debate concerning the professional role and recognition of Italian psychologists influenced the debate concerning their university training. In an article written in 1982, Musatti had maintained – as mentioned else-

where – that there was no room in Italy for psychology as a profession; instead, young philosophers and doctors should dedicate themselves to experimental research on the functions of the mind and to psychoanalysis, respectively. In fact, his students were the living representations of two stances in Italian psychology of the 20th century: that of ‘pure’ research (Gaetano Kanizsa, Fabio Metelli) and that of psychoanalysis (Fornari, Senise, Zapparoli). The latter was, for Musatti, the only legitimate psychotherapy.

It was this limited conception of the role of the psychologist, however, in contrast with the tumultuous and disorderly scientific, professional and institutional developments of the discipline, that intensified the discussion on the role of the professional psychologist. Moreover, numerous problems appeared on the horizon that looked to the approval of law to regulate the psychologist profession in relation to psychotherapy. Specifically, without the professional recognition that comes with a national examination and enrolment on a public register, conflicts between doctor and non-doctor psychotherapists continued. The latter even risked being accused of abusing the medical profession. The moment had therefore arrived for a law for the profession of psychologist, and from the 1970s onwards there followed numerous legislative proposals to define a professional role for clinical psychology and psychotherapy. From 1985, a proposal by Senator Adriano Ossicini (who had become minister and vice president of the Italian Senate) established specific training for both the psychologist and psychotherapist.

This law was obstructed, however, by various ideological-cultural opponents whose opposition could be characterised as being: a) of an old-Marxist type that, in the name of a conception of psychology as a ‘bourgeois science’, hindered its legitimacy; b) of anti-institutional psychiatry, which, for efficacious interventions able to satisfy the needs of the mentally ill, preferred the ‘social worker’ who was capable of intervening merely on the social and family environment, over the psychologist; c) of conservative academic, which denied the existence of a specific psychological profession, misrepresented psychology as merely a basic field of research, and confused clinical psychology with psychoanalysis; d) of psychoanalysts, who worried about the possible limitations that a legislative order might impose on the private and obligation-free management of psychotherapy.<sup>53</sup>

In 1989, Ossicini’s proposal was finally approved and made permanent law (L. 56/1989).<sup>54</sup> Article 1 summarises the competencies of the psycholo-

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<sup>53</sup> LOMBARDO, 1990.

<sup>54</sup> The year 1989 was also the year in which a historic anti-trust lawsuit was concluded (Bryant Welch et al. against the American Psychoanalytic Association et al., which concluded with agreement on 17 April 1989) that put an end to the interdict prohibiting non-physicians

gist «in the use of cognitive and operative instruments for the prevention, diagnosis, and activities of rehabilitation and support in the psychological sphere directed at the person, group, social organisms, and communities»; it also established a diploma for psychotherapists awarded by a post-graduate School of Specialisation recognised by the Ministry of the University. Thus today in Italy, after completing an internship and passing a state examination, psychologists and doctors are enrolled on public registers that certify their psychotherapeutic training. Italy currently has tens of thousands of licensed psychotherapists.<sup>55</sup>

In conclusion, in Italy clinical psychology, representing the totality of psychological theories, methods and techniques for the diagnosis and therapy of mental disorders, was initially placed under the tutelage of psychiatry and then gradually freed from this guardianship, becoming widespread and, in part, modified during the 1960s and 1970s, thanks to the combination – in our opinion – of at least four principal sets of events that we believe acted as propulsive factors in these developments and which have been little investigated in a historiographical context until now. Clinical psychologists and psychotherapists identified and recognised by the law of 1989 (Ossicini law) have become almost completely autonomous from psychiatrists, operating in a wide range of mental disorders, borderline conditions and simple cases of disadaptation. Thus clinical psychology would no longer be for collaborative intervention only in terms of diagnosis and treatment, but would be entrusted with the much broader task of mental support, prevention and rehabilitation in normal situations, while psychotherapy would become its principal ‘tool of the trade’.

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from pursuing psychoanalytical training at traditional psychoanalytical institutions. And so it was that during the same period in which psychotherapeutic practice in Italy became regulated, the American Psychoanalytical Association and the International Psychoanalytical Association were forced to eliminate explicit interdictions for non-physicians from their statutes (WALLERSTEIN, 1998).

<sup>55</sup> CIMINO, FOSCHI 2012; see also CARLI, CECCHINI, LOMBARDO, STAMPA, 1995; CIMINO, FERRERI, 2003; PONZIO, 2008.

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