When I was in training to become a psychoanalyst, I was taught to look always for the unconscious meaning of a patient's wish to give me a gift. A patient's wish to take care of or to help me was to be understood as really something else, for example, an attempt to conceal the patient's hostility, or placate mine. All possibilities were considered, except one. No one suggested that the patient might simply and primarily have wanted to give something to me, that the patient's core desire might have been irreducibly altruistic.

Psychoanalysis always looks behind altruism for something more primary, powerful, or primitive, or bigger, deeper, broader, sexier, angrier, or scarier than a simple need to give. In other words, psychoanalysis is always looking a gift horse in the mouth.

That's the psychoanalytic method. We question the obvious, look for what's not being said, deconstruct manifest content into latent meaning. However, when we look under one feeling and discover another, we eventually arrive at a set of foundational needs and desires that defines what we think it means to be human. We must inevitably confront our basic assumptions about human nature. And for psychoanalysts, altruism is rarely one of those assumptions. Traditional analysts always found sex and aggression at the bedrock of human motivation. Contemporary analysts have added needs for attachment, personal efficacy, individuation, recognition, and mutuality to our psychological foundations. But even as it has acknowledged these "higher" motivations, psychoanalysis has been reluctant to consider a wish to improve the welfare of the other as a primary human striving. In a sense, the reason for this is obvious. Psychoanalysis mirrors society, and altruistic love isn't exactly our dominant ethos.

As the Politics of Meaning has argued, our culture reflects the values of an alienated, market-based economy in which selfishness is rewarded and pleasure repressed, a society in which it's adaptive to be cynical and foolish to be altruistic. When Freud argued for the centrality of sex and aggression in the human psyche, he was ontologizing the symptoms of the aggressive competitiveness and self-denial that characterized the attitudes of his day. In such a system, altruism could only be seen as an attempt to paper-over and civilize the fundamentally destructive passions that seemed to animate human behavior. Later analysts rejected Freud's grim view of human nature and emphasized the primarily relational and social nature of human beings. Aggression, for instance, was no longer seen as a primary instinct; instead, human destructiveness was viewed as a symptom of the failure and breakdown of healthy relatedness. Sex was seen as a form of connectedness, not an irreducible and mechanistic drive. Such progressive developments in psychoanalytic theories of motivation are no less reflective of the broader zeitgeist than were Freud's. These modern notions of human nature in psychoanalysis mirror various humanist traditions that arose as responses to the damaging effects of our market-based individualism, responses that found expression in liberalism, feminism, environmentalism, and other communitarian movements.

Yet, even progressive psychoanalytic theorists have tended to view altruistic love as theoretically subordinate to other wishes. This subordination is often subtle. For instance, altruistic love might be described as an essential ingredient of normal human reciprocity. Reciprocity, then, and not altruism per se, is viewed as the primary characteristic. Or a child's wish to care for the mother and attend to her needs will be understood as a
form of attunement, mirroring the mother's attunement to the child; the main story is attunement, not the wish to give. Analysts might agree that the child sometimes acts altruistically in pursuit of a safe attachment, but safety and attachment are seen as the primary goals with altruism as merely a means to this end. It's not that safety, attachment, attunement, and reciprocity aren't primary strivings. It's just that the wish to help others is, by putting it in some other context, subtly discredited as a foundational motivation. It's never left alone, so to speak, to be understood as a fundamental affect, a primary need in and of itself.

A similar bias can be seen in the place assigned to altruism in the versions of evolutionary theory currently in vogue in the behavioral sciences. In these theories, we are supposed to appreciate the adaptive function of altruism, the fact that one's long-term survival and the replicability of one's DNA is enhanced by tending to the welfare of others. So far, so good: we see here the beginnings of an explanation of how the desire and capacity to help others is hard-wired into our brains and psyches. But the hook turns out to be that the real plan of evolution is selfish. We help others because it is in our selfish interest to do so. Natural selection favors altruism because its real purpose-survival-is served by it. The Darwinian need to reproduce the gene pool is the ultimate logic behind the wish to give. So something bigger is at work here, too. There's always something bigger than altruism.

In some sense, all of these theorists are correct. Human motivation can be understood as deriving from multiple primary sources; it depends on your vantage point. It depends on which meaning one is interested in highlighting, which language one is using, and which line of research and inquiry one wishes to pursue. The choice, though, is a meaningful one and often contains hidden biases that are both social and psychological in nature. Socially, the bias against seeing altruism as a primary human need derives from the prevailing cynicism about whether people are motivated by anything other than selfish interests. On a psychological level, I think there is an embarrassment about publicly acknowledging the do-gooder in all of us. The wish to help others, like feelings of love and concern in general, is something we tend to hide from public view. We relegate it to our most intimate relationships—if, that is, we disclose it at all. We fear being vulnerable to the scorn and exploitation of others should we reveal too much generosity. We also vicariously feel this sense of embarrassing self-disclosure in others should they show similar feelings. If we can describe altruistic feelings as really something else, we protect ourselves. If altruism is a means to some other, more fundamental end, then we don't have to seem naive in our view of human nature. The psychoanalytic approach to altruism is a theoretical expression of this kind of defense.

On the other hand, if one were to proceed from the perspective that we all have an innate wish to enhance the welfare of others, various phenomena could be explained. First of all, we would better understand what psychologists call pro-social behavior, in which the subject appears to want to help others without immediate gain for him/herself. This behavior is clearly seen in very young children, who solicitously comfort their caretakers when they are distressed. Rather than understand this simply as a wish for a secure attachment, one might see the child expressing a primary longing to comfort his or her love object. The child wishes to touch the parent's experience and enhance it. This behavior is frequently observed in the child's expressions of concern, generosity, and empathy toward other family members and, later, toward other children. All parents can tell you of moments in which their child offered them help, comfort, or care and seemed to be motivated by a genuine wish to help. Why can't experts on human behavior see the same thing?

Furthermore, a belief in primary altruism can help account for the pain frequently seen in children who can't give to their parents. In the families of many of my patients, for instance, the parents couldn't allow their children to contribute, to give something of value to them. The child grew up with a sense of uselessness, of having nothing important to give, and of feeling that there was something wrong with him or her because of this. True, the opposite is also seen in many families with parents who narcissistically exploit their children's need to take care of them. But the problem of frustrated altruism is an important-and neglected-one. In many modern families, for instance, parents are so motivated to take care of their child's every need that they neglect the child's need to give something to them. Sometimes the parents seem so perfect and self-contained, so much above the child, that the child can't imagine that his or her own offering would matter. The result is a sense of deflation, resignation, and personal inadequacy. Just as surely as needs for love and protection might be neglected in other families, here, too, the child's needs are being frustrated; in these cases, the deprivation involves being cheated of the opportunity to give.

But psychoanalysts can't easily see these meanings, not only because we're imbued with the cynicism about helping that pervades our society, but also because many, if not most, therapists see themselves as, first and foremost, helpers. We want to help our patients and don't often feel comfortable being helped by them. Being given to not only feels too selfish, but it also makes us vulnerable. If we accept our patient's wish to care for us, it puts us in a potentially dependent, grateful, embarrassing position. If we're the helpers all the time, we're safe. We're not only the altruists, we're also in control.

On a clinical level, I've repeatedly found that a patient can benefit if I can gracefully accept his or her wish to give to or take care of me. People need to feel that they can influence others and, in this case, influence them
in a positive way. This includes helping their therapist. The problem is that there is also so much exploitation that takes place in the therapy relationship, exploitation in which the patient's dependency and transference is manipulated to benefit the sexual, financial, and ego needs of the therapist, that the helping professions and society at large increasingly frown on therapists taking too much of anything from their patients. But these prohibitions can have the untoward effect of sanctioning our blindness to the altruistic needs of patients. The roles are made rigidly clear—we give, the patient takes, and we collect a fee. Unfortunately, the patient can suffer in the process.

These needs are not only frustrated in therapy and in families, but in society at large. We have few opportunities in our public lives to give to others in ways that feel nourishing and are appreciated. Often, we feel ripped off, that we're helping others at our own expense. We admire humanitarians, but can't justify the time and energy such activity requires. We see it as selfish because we see altruistic giving as the depletion, rather than the fulfillment of a self. So the problem is also a social one. When we felt part of a vibrant community based on altruistic ideals such as the New Deal or liberatory movements such as feminism or the civil rights movement which opposed cynicism in various forms, our normal and healthy wish to give to and take care of others was sanctioned, reinforced, and could safely flower. In the context of an enervated Left and a cynical political climate dominated by greed and pessimism, our altruistic longings are repressed and come to feel dangerously foolish and self-defeating.

In addition, much as therapists often fail to appreciate patients' frustrated desires to help and comfort others, tending instead to focus on patients' frustrated needs to get emotional supplies, a similar bias can be seen in liberal and progressive approaches to social forms of suffering. We often understand the pain of oppressed groups in terms of the deprivation of economic help and opportunity. We think in terms of what we can do for them because they need a wide range of supportive services and protection from psychological, cultural, and economic assaults of various kinds. We all tend to have a one-dimensional view of the psychological damage done by social oppression because we don't appreciate the centrality of altruism in all of our psychological lives. This can lead to an inordinate emphasis on entitlement as our primary political virtue. We need to expand our notions of what we're entitled to have in full and healthy lives, and include the opportunity to contribute to the welfare of others.

In simple but important ways, conflicts over healthy altruism can, on an individual level, be directly addressed in therapy, provided the therapist is sensitive to their importance. On a broader societal level, however, the problem is greater. Here we need a politics of meaning which posits altruism as a central human need that our current system distorts and crushes. We need to critique the ways that our social order hurts us by denying us opportunities to give to others. A central aspect of our program for social change must sanction acts of kindness as acts of strength, not weakness. We need to validate our higher selves in whatever ways we can, including in political discourse and initiatives. We need to welcome the exchange of gifts of care and kindness, and stop looking them in the mouth.

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