

# The refused interpretation in Freud, Jung and beyond: what if the patient says “no”

## *La interpretación rechazada en Freud, Jung y más allá: ¿y si el paciente dice “no”?*

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### Abstract

The paper attempts to illustrate how refusing an interpretation can lead to very different consequences within Freudian, Jungian, and other psychotherapeutic models. In some cases, a “no” may refute the model of reference, while in others it may have less radical meanings. Refusing an interpretation (if it is consistent with the model and the patient’s history) within a Freudian environment can also challenge the validity of the model. From a Jungian perspective, a refusal may simply lead the therapist to change the model of reference, since no single model is considered universally valid. Other examples are also provided from the psychoanalytic, cognitive-behavior, and family therapy research traditions.

Keywords: psychotherapy; psychoanalysis; analytical psychology; negation.

### Resumen

*Este artículo intenta ilustrar cómo rechazar una interpretación puede tener consecuencias muy diferentes dentro de los modelos psicoterapéuticos de Freud, Jung y otros. En algunos casos, un “no” puede refutar el modelo de referencia, mientras que en otros puede tener significados menos radicales. Rechazar una interpretación (si es consistente con el modelo y la historia del paciente) dentro de un entorno freudiano también puede cuestionar la validez del modelo. Desde una perspectiva de Jung, una negativa puede llevar simplemente al terapeuta a cambiar el modelo de referencia, ya que ningún modelo único se considera universalmente válido. También se muestran otros ejemplos de las tradiciones de investigación psicoanalítica, cognitivo-conductual y de terapia familiar.*

*Palabras clave: psicoterapia; psicoanálisis; psicología analítica; negación.*



The meanings of saying “no” can be philosophically and psychologically interpreted in very different ways. The philosopher Martin Heidegger (1929) considered a negative judgement to be tied to an original experience of nothing. The psychologist René Spitz attributed the acquired capacity to say “no” to acquisition of the so-called third psychic organizer, since it implies having learned the meaning of prohibition from parents and having lived a first manifestation of identification with them (Spitz, Cobliner, 1965). These two examples are related to opposite experiences of a “no,” the former summons nihilist anxiety, while the latter conveys a very important stage in the formation of the Self. Clearly, defining and classifying the various attitudes involved in producing and receiving refusals requires an entire treatise of its own; these examples are only simple suggestions to introduce the main object of this paper, namely what it means to receive a “no” from a patient in a psychotherapeutic setting.

One possible point of view from the historical evolution of psychotherapy concerns the therapist’s attitude when a patient refuses an interpretation or, more generally, a specific therapeutic intervention. Conversely, the diversity of meanings ascribed to negations from a patient’s perspective should be considered an important feature of psychotherapy. This historiographical and epistemological approach has not yet been used and could form the foundation for a different attitude towards historical study of the relationship between different theories in the field of psychotherapy, especially with regard to Freud and Jung. It could also help illuminate an aspect of historiography which Sonu Shamdasani (in press) has already emphasized for its importance: the active role of the patient in the development of psychotherapy.

The fundamental thesis of this paper is that a “no” may take on completely different meanings in different theoretical and clinical contexts, implying different relationships to the metaphysical vision, the epistemological approach, and the conception of truth that are appended to the psychotherapeutic model. This should make sense regardless of whether the author of the model specifies its metaphysics, epistemology, and meaning of truth. Actually, such conceptions usually remain implicit, but this does not mean they cannot be considered foundations. This thesis is tied to Shamdasani’s ideas about the relationships between each psychotherapeutic model and its metaphysics. Shamdasani (2017) may have been the first to highlight the paramount importance of the theorist’s ontology in psychotherapy, even affirming that offering the patient an ontology is somehow part of the therapeutic process.

Here we do not address the meaning of denial when it is the result of an intentional lie. This topic has been discussed by Forrester (2000), albeit from an exclusively Freudian perspective. In any case, the theme is irrelevant in this context, because while an insincere denial may cause problems for the analyst, it certainly does not invalidate their theoretical model.

It is well known that Freud considered refusing the analyst’s interpretations in therapy to be related to an unconscious process, which he called resistance (e.g., Freud, 1959a). In his opinion, an entire cultural environment even might present resistance if it could not accept psychoanalytic theories (Freud, 1961a); consequently, the only reason to not adhere to Freudianism was psychological, rather than epistemic. People only rejected

psychoanalysis because they were threatened by truth; there was no room for different theories in the field of depth psychology. Even Adler's and Jung's ideas were considered by Freud to be a form of resistance towards his fundamental finding: sexuality was the central motivation of human beings (Freud, 1957b). Freud also considered another possibility: psychoanalysis could be refused because it was the work of a Jew (Freud, 1959b), which was not entirely paranoid considering psychoanalysis was banned from Nazi Germany for exactly this reason.

Nevertheless, the problem of the meaning of negation (interpreted as *Verneinung*)<sup>1</sup> was first specifically addressed in detail by Freud in 1925, in an essay of the same title (Freud, 1961b), but its final and most important discussion appears in one of his last and more meaningful writings, "Constructions in analysis" (Freud, 1964b).

In the first essay, Freud fundamentally explains how a patient's "no" could often be considered a confirmation of an interpretation provided by the analyst, rather than a denial. This confirmation is more valuable when the content of the interpretation is anticipated by the patient, through the defense mechanism of projection. In "Constructions in analysis," Freud responds to a potential criticism of his attitude towards the patient's answers: if "yes" is a direct confirmation and "no" is possible evidence of resistance from the patient, the analyst embodies the old saying, "Heads I win, tails you lose" (Freud, 1964b, p.257).

Indeed, at the end of his theoretical path Freud understood the need to attribute an objective meaning to the patient's refusal, which led him to build a dual criterion. First, the tone of the response to the interpretation acquired more importance than its overt meaning: an uncomfortable or indignant "no" could be considered confirmation, while an indifferent "no" could not; meanwhile, an indifferent "yes" could paradoxically cause serious doubts about the interpretation. Second, the actual value of the interpretation was to be judged after the "confluence" of the interpretation with other facts and elements encountered afterwards, during the course of an analysis.<sup>2</sup> Unlike Freud, Jung did not offer any criteria to judge the possible refusal of an interpretation by a patient. He only affirmed that both patient and analyst should agree on an interpretation for it to maintain its value. Prior from completely separating himself from Freud, Jung had maintained since a 1913 conference that imposing an interpretation is impossible anyway:

We [Freud and I] have often been accused of forcing interpretations that are often quite arbitrary. I wish one of these critics would try forcing arbitrary interpretations on my patients, who are very often persons of great intelligence and highly cultured – indeed, not infrequently my own colleagues (Jung, 1961a, p.230).

Jung repeats this notion several times, for example when stating that "I speak of understanding only when the patient can agree with the interpretation offered: [going] over your patient's head is an unsafe business for both" (Jung, 1954, p.93) or "[t]he analyst who wishes to rule out conscious suggestion must consider every dream interpretation invalid until such time as a formula is found which wins the assent of the patient" (Jung, 1966, p.147).

These different stances towards the possibility of negation reflect a deep diversity of attitudes in Freud and Jung with regard to the validity of their own model, their "influential

metaphysics” (as defined by Watkins, 1958) and the meaning of truth, as anticipated. Recall that Freud proposed an epistemology (which could be considered constructivist from a methodological point of view) on the only occasion when he explicitly declared his position (Freud, 1975). Nonetheless, this epistemology referred to the method Freud employed to reach his results, rather than the perceived value of these results from his point of view. At the end of his life, Freud explicitly stated that psychology could not be defined as science before the advent of psychoanalysis, because it could not understand the reasons behind psychic phenomena. Still, the concept of the unconscious had opened the gates of science to Freudian theories, because it meant that psychoanalysis was grounded on something definitely certain, and for this reason could be considered a natural science like all the others (Freud, 1964e). In this way, it aspired to be a unique and univocal model of its object of investigation.

Freudian metaphysics was clearly realist, since he affirmed that his theory “only” presupposed scientific realism (Freud, 1964a). The modifier “only” could be disputed, since realism cannot be qualified as a widely accepted ontological assumption. However, such an affirmation in itself indicates that Freud considered his model highly objective. He conceded that his metapsychology could be changed, just as the roof of a house could be modified without compromising its foundation. Once, for example, he defined his metapsychology as a “witch,” meaning a superstructure compared to clinics (Freud, 1964c), but he did not believe that his clinical views would require correction. Quite to the contrary, Freud maintained that the psychoanalytic method could lead to the “material” truth of facts, and in fact, he distinguished between “historical” and “material” truth (Freud, 1959c, p.72, 1964d, p.127-132). He considered historical truth to be a doctrine that holds value for a specific time. The classical example was religion: its evolution towards monotheism showed a progressive intuition that the divine person is a substitute for the father. In totemic religions gods were animals, resulting from a process of displacement; gods then became a fusion of animals and men (in Egypt, for example), and then took on a human form (as in the Greek pantheon). Eventually there was only one male god (Freud, 1964d), and it could be said that the only thing lacking was the psychoanalytic interpretation. Freud did not directly define material truth, but it seems clear from the context that he meant absolute truth, a truth which was not relative in any way. As mentioned, the analyst can completely reach such a truth about the patient: “It depends only upon analytic technique whether we shall succeed in bringing what is concealed completely to light” (Freud, 1964b, p.260).

Consequently, Freud can be said to have considered “truth as correspondence.” This indicates a correspondence between reality and the reality model we adopt throughout the logic-philosophical tradition starting with the Socratic and post-Socratic era, namely with Aristotle, who provided the basic definition that “to say of what is that it is, and of what is not that it is not, is true” (Tredennick, 1975, p.201).

Specifically, Freud probably would adhere to a “prodigal fact/correspondence” theory since he stated a “one-one correspondence between truth and facts” in the definition by Künne (2002, p.212). In fact, Freud maintained that every single phenomenon has specific causes, which could be theoretically understandable in an objective manner. The practical impossibility was indirectly established by the principle of over-determination, which Freud

proposed very early (Breuer, Freud, 1955): every single psychic fact is caused by a number of unconscious determinants. In this way, for example, the only reason why a person could not completely understand the complete meaning of a dream was that relationships may exist with so many individual contents of the unconscious that they could not all possibly be reconstructed through analysis (Freud, 1958).

Even if it has been mainstream throughout most of the history of philosophy, the concept of truth as correspondence is not the only option, and in fact even presenting the various theories about truth could hardly be objective. Here we shall use the synthesis proposed by Paul Horwich (1998) in his book entitled *Truth*. Very synthetically, four general conceptions of truth have been adopted.<sup>3</sup> The first is truth as correspondence, while the others are truth as coherence, truth as utility (the pragmatic conception), and a group of theories that are difficult to unite under a single label: they often qualify as minimalist or deflationist (and refer to relativist or even extremely relativist ideas).<sup>4</sup> According to the conception of truth as coherence,

a system of beliefs is said to be coherent when its elements are consistent with one another and when it displays a certain overall simplicity. In that case, according to the coherence theory, the whole system and each of its elements are true. Thus truth is the property of belonging to a harmonious system of beliefs (Horwich, 1998, p.8-9).

A coherentist epistemology considers a theory to be true as long as it explains the maximum number of facts, not conflicting with its own propositions (“internal coherence”) or other theories accepted by the community of researchers (“external coherence”) (Strenger, 1991).

The pragmatist conception of truth accepts a theory (or a proposition), starting from its consequences: “Here truth is utility: true assumptions are those that work best – those which provoke actions with desirable results” (Horwich, 1998, p.9). Regarding truth as utility means that epistemologically a theory is considered true if it works, which means if it builds effective models that can provide a preview of events or be applied in a practical way.

Freud, however, did not think psychoanalysis was true because it worked, but rather that it worked because it was true. While he adhered to the conception of truth as correspondence, Jung did not (or at least never aspired to) reach absolute truth, but instead most likely maintained the validity of the “intuition of correspondence”, i.e., assuming that, even if an absolute truth is unreachable, it must exist (Künne, 2002). One illustration is his statement that he did not need to “believe” in God, because he “knew” (Jung, 1977, p.429).

Jung, as we shall see, oscillated between truth as coherence and truth as utility. He appears closer to the conception of truth as coherence when he tries to explain the highest number of facts (even if they seem to contradict each other). He appears to share the idea of truth as utility, when he (quite often) forms his judgments on results, especially on a therapeutic level. This stance was related to a completely different understanding of the relationships between psychology and science than Freud’s. Jung (1971b, p.59) wrote, for example: “If psychology remains for us only a science, we do not penetrate into life,” meaning that science cannot understand the human world completely and/or that a scientific psychology based on the experimental method cannot provide psychotherapeutic

insight. Significantly, a meaningful definition of what could be considered truthful in psychology can be found in an essay contrasting Freud and Jung:

For the purposes of psychology, I think it best to abandon the notion that we are today in anything like a position to make statements about the nature of the psyche that are 'true' or 'correct.' The best that we can achieve is a true expression. By true expression I mean an open avowal and detailed presentation of everything that is subjectively observed (Jung, 1961b, p.334).

In "The psychology of the unconscious," when Jung compares Adler's individual psychology and Freud's psychoanalysis he shows how both can consistently explain the same phenomena. At the end of this comparison, Jung (1953, p.39) writes,

I fear the reader must feel like the *cadi* who, having heard the counsel for the one party, said: 'Thou hast well spoken. I perceive that thou art right.' Then came the other party, and when he had finished, the *cadi* scratched himself behind the ear and said: 'Thou art well spoken. I perceive that thou also art right.'

In his 1913 "A contribution to the study of psychological types," Jung (1971a) affirmed on the one hand that Adler could better explain the psychology of the introverted and Freud the psychology of the extroverted, but on the other hand hypothesized a future psychology that could account for both attitudes. In "Psychological types," Jung (1971b) instead foresaw the potential birth of other depth psychologies, since the number of types he described had increased from two to at least 24. Every psychological type could be the foundation of a different psychology. He also hypothesized that his description of psychological types might not be the only possible one, creating a perspectival fugue towards a potentially indefinite number of psychological theories (which can actually be seen today).

Jung (1963) also used to say that he employed different models as a reference for different cases. The choice was assumedly based on neither chance nor the simple predicted effectiveness for the specific case; instead, consistency with the patient's belief system (their metaphysics) was probably paramount. Jung does not specifically address this, but two things should be considered: first, he clearly thought (1963) that during the second part of everyone's life the "religious" (referring to the spiritual world and transcendence) problem is most important. Second, in "Yoga and the West," Jung (1958) wrote that this Indian discipline should not be practiced outside its cultural context, mainly since westerners did not share the relevant philosophy or could not even understand the meaning of *prana* (universal breathing), and thus the simple movements would have no meaning.

This returns us to the meaning of a patient's refusal of interpretations in a Freudian or Jungian perspective. From Freud's point of view, refusing an interpretation has a stronger valence. From the viewpoint of truth as correspondence, denying the value of an interpretation that is in tune with both the theory and the "material" truth of the events (that can be ascertained) actually means putting the reference model up for discussion. From the Jungian point of view, a reference model that does not exhibit consistency in a single case this could mean nothing more than shifting to a different model that which might be more consistent.

Freud's metaphysical background might explain why he would seem so disinclined to abandon interpretations that were convincing for him in cases like Dora (Freud, 1953) and the Rat Man (Freud, 1957a), even if these interpretations sounded debatable to his interlocutors (Borch-Jacobsen, Shamdasani, 2012; Mahony, 1986, 1996). The patient known as Wolf Man (Freud, 1955) once declared in an interview many years after his analysis with Freud that the beasts in his famous dream were not wolves but actually dogs, an observation that Freud simply did not consider (Obholzer, Pankejeff, 1982).

Jung's attitude was different. He even recognized in at least one case that a patient would benefit more from an analysis with Freud than with himself. He consequently wrote to Freud to introduce the patient, even though his relationship with the patriarch in Vienna had ended many years earlier (McGuire, 1974).

Psychoanalysts have admittedly lost any original beliefs that the Freudian model would be objective and unique. After what came to be known as the "Controversial discussions" (King, Steiner, 2005), the notion that different models coexist was established within the British Psychoanalytic Association (and afterwards in the entire International Psychoanalytic Association) for once and for all. The "Controversial discussions" should have overcome any controversy about the "legitimate heir" of Freud (namely between Melanie Klein and Anna Freud, especially within the precincts of developmental theories), but in fact created different groups, each with the right to train analysts according to different principles. This controversy between two fields notably led to the formation of three groups from the beginning, and by its end the "Independents" included the most important British analysts. Moreover, the epistemological crisis caused by the attack from logical positivism at the famous New York symposium of 1958 (Hook, 1959) definitively demonstrated that Freud's claim about the scientific status of psychoanalysis was overrated, and may have accelerated the multiplication of psychoanalytic models. Some decades later it was no longer certain if "common ground" still existed between the various post-Freudian models (Wallerstein, 1992). Most psychoanalysts consequently abandoned any reference to an epistemology guided by the conception of truth as correspondence; the various visions of psychoanalysis related to hermeneutics are the consequence of this loss of faith. The two best-known hermeneutic interpretations of Freudian psychoanalysis proposed by philosophers were deeply involved in such a change. Both Habermas (1971) and Ricoeur (1970) thought that Freud, important as he was in the history of philosophy, failed precisely in defining philosophy as a natural science, and instead maintained that psychoanalysis was a human science. The concept of human science is not unambiguous, however. Wilhelm Dilthey was the first to introduce a clear distinction between natural and human sciences; his definition of science is clearly grounded on truth as coherence:

By 'science' we commonly mean a complex of propositions: (1) whose concepts are completely defined, i.e. permanently and universally valid within the overall logical system; (2) whose connections are well grounded, and (3) in which the parts are well connected into a whole for the purposes of communication (Dilthey, 1989, p.57).

This idea is held by theorists who share an attitude that has been labeled "hermeneuticist" (Strenger, 1991) or "hermeneutics/1" (Phillips, 1991). The clearest example is the work of

George Klein (1976), who claimed that psychoanalysis should build a clinical theory that could be compatible with the results of experimental science.

Other attitudes from psychoanalysts can be better defined as “hermeneutic” (Strenger, 1991) or hermeneutics/2” (Phillips, 1991), which means flirting with a more deflationist conception of truth. Spence (1984) stated that it was necessary to shift from the idea of “historical truth” to “narrative truth,” meaning from truth as correspondence<sup>5</sup> to truth as what could be convincing for the patient in a particular session. Since there is no way to objectively assess a patient’s short-term sensation of effectiveness, such a conception of truth risks being a tautology. Aron (2013) reconstructed the evolution of relational models in psychoanalysis which clearly stated that such evolution was founded in the shift from traditional to post-modern epistemology (which seems to mean clear opening towards a minimalist conception of truth).

Note that the truth value of an interpretation has progressively lost its importance, since most analysts have increasingly emphasized the importance of the therapeutic value of the relationship between analyst and patient over the correctness of the interpretation (an initial discussion on this topic appeared in Mitchell, Black, 1995). On the other hand, the relatively recent claim for the construction of a neuro-psychoanalysis – which would mean objective foundations – could be a symptom of a sort of nostalgia towards truth as correspondence.

In other psychotherapeutic contexts, the truth value of an interpretation can change deeply, reflecting other epistemological variations. The following section considers cases that are extreme from such a perspective; in these cases, only utility is a criterion for evaluating the work of the therapist.

The focus of intervention in the technique known as rational emotive behavior therapy (REBT) is on the patient’s convictions, which are considered damaging to his or her life. Specifically, “disputing” consists of discussing the thoughts of the patient that the therapist considers irrational (Ellis, 1958, 1991). Ellis (2002) also applied the term “negative disputing,” which meant offering the patient a chance to discuss the convictions proposed as rational. This means that patients were allowed to test whether their own ideas would work better than the therapist’s. In this context, Ellis openly considered the case of the “yes, but” patient, the patient who resists changing ideas that apparently damage his or her relational and working life. Ellis did not focus on disproving these ideas, but instead on asking the patient how they could seem useful. He tried to show how altering judgments could have more useful practical consequences for the patient. But even if Ellis’s practical attitude is pragmatist, his underlying ontology is realist and leads to a conception of truth as correspondence. His idea of disputing is actually based on the possibility of objectively understanding what is good for the patient and what is not. This is easier to understand, considering the constructivist attitude of cognitive therapists like Guidano (1991). Ellis’s technique was based on letting the patient understand the origin of their problems, for example using action-belief-consequences (ABC). Noteably, he did not employ disputing effects (DE), in other words exploring the negative consequences of a false belief; this is precisely because of his constructivist approach, which did not consider a belief false in absolute terms.

In family therapy, several techniques center on paradoxical interventions. For example, the symptom is literally prescribed: instead of interpreting a certain conduct as pathogenic and certain judgments as wrong, the therapist asks the family to repeat the same conduct and reinforce previous judgments. The Milan group particularly enhanced the benefits of such techniques that should lead people to change their minds without an initial direct approach (e.g., Palazzoli, Boscolo, 1994). Here it is useful to recall how Whitaker approached families, often saying after a few minutes that working with him would absolutely not be useful for them (Simon, 1992). These kinds of interventions circumvented refusals from family members, taking for granted that a “no” would eventually emerge. This was tied to the fact that the level of confrontation within the family was already so tense that a dialog between the family members starting from shared assumptions would initially be impossible.

We should remember that the birth of the systemic model is tied to a peculiar declination of truth as coherence. Bateson et al. (1956) created the concept of the double bind, meaning a contradictory communication from the emitter which the receiver can neither objectively decode nor define as impossible to decode without blame from the emitter. In this sense, psychopathological problems were related to the impossibility of receiving communications from parents and relevant people in one’s life that could be clearly understood (when truth was indeed the coherence of the message).

The discussion above involving Freud, Jung, and a few more examples is by no means a complete exploration of this topic, which certainly requires more time and depth. Instead, it merely proposes some suggestions on a topic that may be undervalued considering its historical and theoretical relevance.

The reactions of Freud and Jung comprise a perfect counterbalance, for historical as well as theoretical reasons. Historically, they are at the origin of modern psychotherapy, along with the work of Alfred Adler. But the founder of individual psychology never discussed the issue, and it is difficult to surmise from his writings what position he might have taken had he been asked for his opinion on the topic. On the one hand, Adler (2003) argued that all the patient’s resistance must be eliminated for the therapy to work, which seems to mean that the therapist has an objective point of view about the patient’s life; on the other hand, he defined individual psychology as an art and the therapist as an artist (Adler, 2002), a rather subjectivistic attitude.

We can now return to the contrast between the definitions of “no” by Heidegger and Spitz that were mentioned at the opening of this paper. Freud’s attitude can be considered in line with Heidegger: the patient’s “no” is destabilizing and constitutes a serious problem, provided that the interpretation is consistent with the patient’s own memories and associations. It means questioning the theoretical model and the underlying metaphysics. Of course, this is not true of every denial. Analysts can always make mistakes, and Freud (1964b) even goes so far as to say that a certain amount of error does not compromise the analysis. Jung’s attitude can be called Spitzian, since the patient’s “no” is not destabilizing in itself and opens up new opportunities that may include the application of different models. It also means that the patient is not completely under the authority of the analyst.

Although the issue may deserve a different investigation just from the historical/epistemological angle, we can hypothesize that a Spitzian therapeutic attitude may lead to a

more favorable outcome for the treatment precisely because it should generate less anxiety in the therapist. Since the empathic bond between patient and therapist is considered by contemporary depth psychology (from Kohut, 1971 on) to be an important aspect of therapy (as by Jung, 1953), an increase in the therapist's anxiety is likely to correspond to more anxiety in the patient.

Another way to define the opposition between the Freudian and Jungian views on refusal is provided by the lens of contextualism and pluralism in relation to models that differ from their own. From the perspective of contextualism, therapeutic concepts and techniques can only be applied within the theoretical frameworks where they are embedded (Safran, Messer, 1997) and for this reason we cannot disregard the reference to a single theory and therapeutic model. Instead, pluralism advocates a dialog between different theories and models. This attitude, originally proposed by Jung (1971a, 1971b), was rediscovered in the 1980s by psychoanalysis (e.g., Atwood, Stolorow, 1979; Greenberg, Mitchell, 1983) and since the 1990s by the movement to integrate psychotherapies (e.g., Norcross, Goldfried, 1992). But Jung's thematization has not been remembered, nor has there been any recourse to his fundamental proposal: a criterion for selecting the model and technique to be adopted in each individual case.

## NOTES

<sup>1</sup> Freud specifically distinguishes *Verneinung* (negation) from *Verleugnung* (disavowal).

<sup>2</sup> A fierce controversy was opened on this theme by Grünbaum (1984, 1993).

<sup>3</sup> There is actually a fifth conception: truth is impossible to define.

<sup>4</sup> In other words, according to Strawson (1971), the truth of a proposition is a performative attribute of the proposition. According to Horwich, truth is simply redundancy: if I say A is true, I am (1) saying A, (2) saying I'm saying A, and so on. In other words, saying "A is true" is true if and only if "saying A" is true and "saying to say A" is true, and so on. Affirming the truth of a proposition means, according to Horwich, only avoiding the infinite fugue of "saying to say ..." that would be necessary, hence the expression "truth as redundancy."

<sup>5</sup> Spence uses the expression "historical truth" to mean what Freud calls "material truth," while he writes "narrative truth" to mean something similar to Freud's "historical truth," which can be slightly confusing.

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