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Psychoanalysis in the 21st Century



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Psychoanalysis in the 21st Century



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Response



My Problem with Fred Busch's: THE TROUBLING PROBLEMS OF KNOWLEDGE IN PSYCHOANALYTIC INSTITUTES

Henry Friedman

In reading this paper I cannot help but be sympathetic to its author as he expresses his distress at the past state of things in the Institutes of the American Psychoanalytic Association. However, my response to his negative feelings about the current state of affairs, at least in regard to how he sees the influence of post-modernism and the diminished respect for the knowledge of experts, is quite mixed as it contains some agreement and much disagreement with his arguments. Since we have both been trained in Institutes of the APsaA, he at the Michigan Psychoanalytic Institute and me at the Boston Psychoanalytic Society and Institute we undoubtedly have shared the experience of the authoritarian atmosphere that characterized these Institutes in our own training years. While I am the even older than he is I suspect that neither geography or more informed thinking resulted in either organization being more open to curiousity and questioning of what could only be called the received wisdom of that period. In those days either you went along with what was being presented as true psychoanalysis or you would simply not advance or beyond that be extruded from the local world of psychoanalysis in your city and Institute. Many talented individuals with independent creative thinking were denied training or deemed unworthy of elevation to training analyst status. Furthermore, our Institutes shared in and reflected societal homophobia and adversion to divorce and sexuality outside of marriage in general. It is a fair conclusion, one that I share with Fred Busch, that the 60s-80s were in general very bad times for the Institutes of the American Psychoanalytic Society, not in terms of recruitment for training but because of who was deemed desirable and who was excluded.

But then Busch goes on to describe what for him is a most unfortunate

and unwelcome change from the regrettable authoritarian atmosphere of psychoanalytic training to the even more unfortunate turn against what he sees as legitimate authority. Authority that, in his opinion, and possibly compatible with some of my own views, is the legitimate claim of those who know, who have had experience, who rightfully lay claim to superior knowledge that should be respected and even revered by those who choose to learn psychoanalysis. The candidates have, in his experience and opinion, lost respect or regard for the knowledge that experienced analysts and teachers have acquired over their decades of experience. They lack respect (for him) as well as for their elders who should be respected. If, as beginners, they know next to nothing how dare they question the truth and knowledge that those who have practiced and thought about the human condition present to them as truth. He further asserts that our Institutes have failed to value classes and seminars preferring to have psychoanalytic education rest on the training analysis and supervision with the result that candidates ignore the importance of significant contributions that have come through the literature. These papers, for him, should represent a kind of canon of psychoanalysis, the knowledge everyone who trains in psychoanalysis should and must be expected to learn. He sees education without such stringent emphasis on what we already know and have codified in our literature as degraded and more or less worthless.

I think that the changes Busch is reacting to in Institutes of the APsaA cannot be denied, however, the historical context of change needs to be elucidated in order that they be evaluated in terms different from the ones that Busch enumerates and focuses on. When I began psychoanalytic training the Institutes of the APsaA were maintaining their insistence that only those with medical training could be considered for training in our Institutes. Thus, we as candidates were all graduates of medical school, internships and residencies in psychiatry. Psychoanalysis dominated the psychiatric departments around the country. In Boston, for instance, the heads of psychiatric departments at our three medical schools were all analysts, with several bearing the title of Training Analyst. Psychiatric training was expanding such that a program like the Harvard-Massachusetts Mental Health Center (the Old Boston

Psychopathic Hospital) had 25 residents in each of three years. Most of those going through Mass Mental as it was called then applied for psychoanalytic training at the one Institute in Boston, namely BPSI. A surprising number were rejected on the first application and most were accepted only provisionally. Not only were you expected to be outstanding in your medical and psychiatric training, you were also supposed to be what was deemed to be emotionally stable and mature. Ego psychology reigned supreme and many forms of being were considered evidence of ego deficits. Homosexuals (certainly of the male type if overt), heterosexuals with multiple partners and no sign of settled stability of marriage, divorced individuals all failed to meet the criteria for acceptance into BPSI. Retrospectively, one could equate the standards for acceptance to those current at that time for country clubs with the exception that Jews were welcome! It was highly usual for a candidate to be forced out when he or she clashed with their Training Analyst and there was no appeal process. The excluded individuals were seen as defective; the judgement of the TAs being considered above reproach and countertransference hate was never acknowledged or recognized.

Institute life between the 1960s and 1980s was dominated by powerful TAs who maintained strict control over who advanced as a candidate, who was allowed to teach and who would be "tapped" to be considered for promotion to TA status. The failure to be elevated to TA status meant that you would be a "service" analyst, one, who if favored could teach courses on theory and technique but not be given responsibility for clinical seminars. Furthermore, it was unlikely that such an overlooked analyst would have a full practice of patients in psychoanalysis at a 4-5 x/week frequency. Training analysts on the other hand could expect to have as many as 6 candidates in analysis at any one time because the number of applicants for training was so high. The hierarchical nature of our Institutes resembled a bee hive with a solitary Queen bee being replaced by the many TAs who were like Kings and Queens. Life flowed from them to those below who if they chose to remain connected to the Institute and Society accepted their lesser role and gladly provided services that were below the TAs sense of themselves. The establishment TAs selected new TAs who would join the club, fit in with the overall

zeitgeist of the particular Institute, thus insuring a continuity of theoretical stance and practice of psychoanalysis. The overall effect of the TA system as practiced was to establish only one pathway to power and economic certainty; either you became a TA or you somehow managed to survive on the overage from the TA establishment. The latter fact resulted in the suppression of dissent because to question the system meant to be outside the overflow system of referrals.

All might have been seen as perfect, the natural order of things in the psychoanalytic hierarchy. At our national meetings badges were color coded to indicate where any individual attending fit into the hierarchy. There were, of course, critics who expressed discontent about the status quo. The non-medical psychoanalysts managed to continue to exist and at least in New York had their own Institutes that did well enough for those in clinical practice although their contributions in terms of papers were sequestered from the mainstream psychoanalytic journals like the Psychoanalytic Quarterly and the Journal of the American Psychoanalytic Association. Psychologists like Fred Busch who managed to get through the waiver process were accepted for training thus producing a series of psychologist psychoanalysts whose training was in classical psychoanalysis. The fortress mentality was developed around a fight on several borders. First, the attempt to keep the APsaA entirely medical meant establishing a pathway to accept some PhD psychologists through a complex system of waivers after the initial attempt to do so by having them pledge to train in analysis only for research purposes. Although this pledge was often openly ignored the psychologist psychoanalysts pretty much towed the line and fit in with the goals of the establishment. It was in this atmosphere of holding the line that three non analyst outside psychologists started a lawsuit against the APsaA on the grounds of restraint of trade. This was a costly lawsuit that was seen by the leadership of the APsaA as important to fight; keeping the psychologists out appeared to be necessary for the survival of psychoanalysis as a prestigeous medical sub-speciality of psychiatry. It was feared that openly admitting psychologists with PhD's would in turn result in lower earnings for psychoanalysts and less respect from the public. However, considering the importance of psychologists in Europe and

South America the insistence that psychoanalysis stay in the hands of psychiatrically trained MDs was obviously a difficult argument to win.

As cost of the lawsuit mounted the leadership decided rather precipitously to settle the lawsuit, granting the psychologists full entry into the Institutes of the APsaA as well as giving them financial assistance in starting their own Institutes. To many members of the APsaA this appeared to be a serious defeat, a capitulation to those whose presence in our ranks would lessen the prestige and standing of psychoanalysis with the public but to others, the settlement by avoiding a trial that would have been expensive and tarnish our reputation, was the best possible alternative. The administration that settled the lawsuit was seen as effective in saving the organization from financial ruin when we all knew that psychologists lawsuit was likely to be lost if for no other reason than that psychoanalysis was being practiced by non-medical psychoanalysts around the world and in the United States by psychologists trained in non APsaA Institutes. What followed the settlement of the psychologists legal victory wasn't predicted by many if any members of the APsaA whether or not they favored opening training to non-medically trained individuals. Because of factors that hadn't been considered the number of medically trained applicants for training dropped off precipitously because of a confluence of factors. First and most important residency programs in psychiatry began to turn away from teaching dynamically based psychotherapy as part of the basic curriculum. Unlike earlier times when many graduates of psychiatric residencies could be assumed to have been exposed to at least 2x/week psychotherapy with suitable patients there no longer was such a group of potential candidates. Psychiatry programs had turned away from teaching dynamic psychotherapy based upon psychoanalytic ideas of development and therapeutic approach to a biological orientation that aimed at utilizing the increasing number of psychopharmacological possibilites for treating psychosis and depression.

If psychoanalysis was to survive in the institutes of the APsaA it would have to have sufficient numbers of candidates able to be in training analyses and in turn able to maintain practices to generate their own cases

for analytic supervision. Ironically, the lawsuit provided an immediate solution although it required the broadening of non medical candidates to include social workers. Including these two disciplines rescued our Institutes from a slow death by attrition but it also changed the nature of institute life by providing candidates totally unused to the hierarchical nature of medical training. Psychologists, in general, applied for psychoanalytic training at a much older age, many of them having practiced dynamic therapy for many years if not decades before applying. They saw this training as something they had been wrongfully denied and as such entered training with a sense that they were going to take what they saw as helpful to their current practice of treatment. Social workers were often younger and less interested in the economic issues involved in training or practice because they were mainly female, married and able to afford the training because of their spouses economic success.

In Fred Busch's description of his experience in leading a current clinical seminar for candidates his sense of injury and offense at the candidate who liked it better when they all just sat around and said what they thought about the case (then when Fred led and monitored the discussion) is central to his argument against the new atmosphere in our institutes. The unfortunately outspoken candidate seems to represent, for Busch, all that is wrong with those who are dominated by post-modernism, the dominance of individual subjectivity (Owen Renik) and the inevitability of countertransference and its use by the analyst in crafting his or her interventions. I don't doubt that any experienced psychoanalyst might be offended by a candidate indicating that it would be best if he or she left their seniority at home and simply associated in response to the clinical material in the same way that each of the candidates were expected to; spontaneity and individuality were now being given preference over authority and its claim to superior knowledge. However, it is likely that an appreciation of the changes in the world of psychoanalysis that had taken place over the decades that followed the dominance of an authoritarian atmosphere in our institutes would have lessened the discomfort at encountering the new democratic approach to learning that Fred Busch encountered.

The position stated by Roy Schaefer as quoted by Busch describes quite accurately how psychoanalysts like Schaefer saw the role of the training analysis in providing all graduates with the capacity to monitor and filter out their own subjectivity to prevent it from intruding on the analysis. A well analyzed analyst, according to Schaefer need not worry that his or her objectivity will be overshadowed by their subjectivity, nor will countertransference be uncontrolled and enter into the analytic field. Busch finds Renik's assertion that we never, as analyst, know anything about our patients objectively but that what we are always talking about comes from ourselves. In this view of Renik, a view that is clearly in opposition to Renik's actual perspective, Busch sees an avatar of all he finds as proof of the deteriorating appreciation of truth. Here, he is definitely wrong because Renik isn't denying the existence of truth but merely insisting that the truth the analyst can actually "know" is about himself and not some absolute representation of the patient's inner reality. Renik in the 90s represented a unique critic of psychoanalytic practice in the United States. His was a voice that carried great weight and as Editor of the Psychoanalytic Quarterly and Chair of the Program Committee of the APsaA he was able to recognize the importance of the interpersonal relational perspective. He not only introduced relational psychoanalysts like Stephen Mitchell, Jay Greenberg and Jody Mesler Davies to the meetings of the APsaA he also brought their papers into the Quarterly at great risk to his status with classical psychoanalysts who largely dominated the Psychoanalytic Quarterly. As revisionist as Renik was at that time he avoided addressing any issues that he had with classical psychoanalytic theory. He was steadfast in his respect for the importance of the drives i.e. a psycho-biological orientation and for the primary importance of the pleasure principle in determining defenses and choices that any individual makes in the course of their development.

In contrast with his conservative position regarding basic classical psychoanalytic theory Renik virtually attacked the traditionally received wisdom about technique. Most famously he wrote about "playing with your cards up". The analyst's insistence on Maintaining anonymity was seen by Renik as a kind of willful mystification of the analyst that served only to intensify transference distortions. The analyst in his view had to

be a real person simply because it was his or her subjectivity that entered into all aspects of communication between analyst and patient. Because Renik's revisionist approach to technique led the way to change in how psychoanalysis could be practiced by those who were uncomfortable with working from behind the safety of a "professionally constructed self" his papers and presentations meshed with the interpersonal-relational perspective. This alliance and his insistently open and inviting position to members of the William Alanson White Institute resulted in a greater receptiveness among classical training psychoanalysts to the work of the relational school. Papers published in Psychoanalytic Dialogues began to appear on the curriculum of APsaA Institutes which in turn helped derail the control of those who represented the classical contemporary conflict theory model that had dominated the APsaA Institutes.

In Busch's concern and critique about the status of "true (or valid) authority" and knowledge in the Institutes of the APsaA he points to the erosion of respect for psychoanalytic theory and beyond this with accepted models of clinical psychoanalysis. Both have, in his perspective, the right to claim ownership of psychoanalysis. The challenges to classical conflict theory, the stuctural hypothesis and its dominant expression as ego psychology however have undermined the assertion, so basic to Busch's argument, that there is a core of knowledge that stands for our psychoanalytic heritage and against the post modern stance that knowledge is always a construct that changes based upon the subjectivity of the individual attempting to be a psychoanalyst. The existence of competing psychoanalytic theoretical schools has to be acknowledged as does our inability to prove that any particular approach results in superior clinical outcomes. The theoretical contributions of Melanie Klein represented the first serious challenge to Freudian psychoanalytic theory that proved too resilient to be silenced as the theoretical challenges from Adler, Jung and Ferenczi had been. Klein and her thinking simply overwhelmed Anna Freud and the Freudians in London and while a compromise within the London psychoanalytic preserved a Freudian track the robust track has remained clearly Kleinian in orientation. Klein as a non-medical psychoanalyst assumed a degree of freedom in her assumption of a complex mental life of an infant in the first year of life.

She and her followers endorsed a theory that was meant to explain all aspects of mental life ranging from generalized concepts like envy, hate, restoration, repair, guilt and depression as well as the etiology of major mental illnesses like schizophrenia and manic-depression.

In the United States with its medically trained psychoanalysts the impact of Klein's theory between 1960 and 2000 was not only minimal but was greeted with total rejection precisely because it posited a fantasy life tied to nursing, excreting and parental intercourse that exceeded the biological capacity of the infant's brain development. The Kleinians while ignored in this country captured the majority of analysts in Great Britain and most of South America. With the publication of Roy Schaefer's "The Kleinians of London" there began to be a greater appreciation of how modern Kleinians used her theory in approaching or finding a deeper inner psychotic core in all patients regardless of what problem they initially brought to their analyst. Since 2000 there have been increasing inroads of Kleinian thinking on psychoanalysts in the United States. This is particularly true when it comes to adopting parts of Klein's system into the conflict model through the pathway of the defense mechanism of projective identification. Klein's followers in Great Britain have made this concept central to their work with all patients in analysis. The power of projective identification rests in its enhancement of the analyst's use of countertransference feeling states to make attribution to the patient about what the patient is actually wanting to rid themselves of by insistently putting that content into the analyst. The shift to an enhanced use of the analyst's countertransference has contributed to the trend in our institutes that Busch finds so distressing. If countertransference is the analyst's guide to the inner unconscious life of his or her patient then there are no generalities that can be taught to candidates; rather they can only learn psychoanalysis from consulting with their own countertransference! Under such an assumption it isn't surprising to find candidates questioning authority even when it is free from an authoritarian bent.

The existence of competing schools of psychoanalytic theory is an additional source that encourages scepticism among those currently in

training at our institutes. Relational analysts may see themselves as quite distinct from Self Psychologically oriented analysts but both can be experienced by candidates as in opposition to classical contemporary conflict oriented analysts. The prescribed technical stance of abstinence, anonymity and neutrality that have reigned supreme in classical ego psychology technique are quite inappropriate for those analysts whose focus isn't on infantile drives sequested in the unconscious. Such a theoretical set of assumptions that reduces the aim of psychoanalysis to an uncovering of repressed and suppressed drive derivatives inevitably results in an analyst who is more an objective observer and interpreter of the patient's unconscious drives and the resistance to these drive-wishes being revealed. Once analytic theory is freed from total dependence on drives and the unconscious there follows a shift in technique away from psychoanalysis as a treatment with a specific goal of reaching unconscious drive derivatives and interpreting their existence to an unsuspecting patient. Once there is a shift to a two person vision of psychoanalysis we enter a form of psychoanalysis where there is no certainty, no clear causalities and no explanations of behavior that can be considered to be anything more than co-created fantasies of the analytic couple.

What we have reached is the very point about knowledge that so distresses Fred Busch when he reflects on the current status of knowledge in institutes of the APsaA. In so far as he is correct we would have to acknowledge that post modernism combined with an increased emphasis on the analyst's subjectivity and countertransference intuition has resulted in a kind of anti-intellectualism and an "authoritarian anti-authority". In a word, not only has nothing good happened but quite the opposite, essentially the decline and fall of psychoanalytic greatness, a greatness that rested on the establishment of an unquestioned body of psychoanalytic knowledge. In the context that I have described a very different interpretation of these changes that Busch deplores is not only possible but mandatory. The practice of psychoanalysis has taught many analysts to be sceptical of the received wisdom coming from our esteemed predecessors. The tradition of analysts following one "master" followed by another continues to dominate in many quarters. In Italian Psychoanalysis Winnicott and/or Bion seem to be the dominant

intellectual powers in the work of Ferro and other prominent Italian contributors to the literature. Of course tribute is always paid to Freud before the contributions of others are seen as superceeding his earlier and clearer view of psychoanalysis as a theory and a therapy. While Bion has admonished all those who would be analysts to approach each hour "without memory or desire" in an attempt to allow analysts to make new observations and discoveries in each hour with each patient there is little evidence that even his followers are able to free themselves from the influence of his broader ideas. For some analysts who practice utilizing multiple theories it is a matter of matching a particular clinical moment with a specific theory in order to explain the intervention that they make. Such analysts are able to hold all theories and use them in accordance with how they see fit, how well a particular theory utilized at the moment will move the analysis forward. In doing so they successfully avoid dealing with contradictions between theories, contradictions that a strong critical position such as the one taken by Rachael Blass regarding the totality of Kleinian theory making it unsuitable for partial adoption, finds inevitable.

Is it possible to completely turn Busch's problem with knowledge in our Institutes on its head and in doing so conclude that the very changes he deplores are possibly both positive and useful if we are to develop an approach to psychoanalysis that makes it viable and adapted to the demands of the current marketplace of psychotherapies. Busch's argument rests on our past history of authoritarian teaching at our Institutes but, while he and I agree about the deplorable nature of authoritarian teaching in the past, he sees the erosion of respect for authority, particularly for those who teach in seminars, as most unfortunate while I, to the contrary understand and approve of questioning authority itself. The result is a leveling of the hierarchy and the establishment of a more democratic individualistic approach to teaching in which each participant in any seminar or supervision should see their own subjective response to a patient or a paper in a seminar as of equal importance to that of the experienced teacher or supervisor. This isn't the anti-intellectualism that Busch claims it represents. Rather, it acknowledges that if psychoanalysis is a clinical discipline it has to change with the experience of

those who practice it as clinicians who are open to learning new things from those individuals they analyze. The rules of technique and the limits imposed on thinking by theory need always to be held in abeyance, always considered as potentially limiting the therapeutic effectiveness of a particular patient's analysis, and sometimes rejected as belonging to a different period when social norms were constricting and harmful to many individuals.

When we as psychoanalysts insist not so much that we be without memory or desire but rather that we be without preconceived notions that result in our operating from behind a professional self that suppresses our ability to be a true participant observer we will have evolved beyond the limits imposed by the legacy of our beginnings. The technical triad of anonymity, neutrality and abstinence has historically served the purpose of supporting psychoanalysis as the only pathway to uncovering the destructiveness of the infantile drives that are purportedly sequestered in the safety of the unconscious but always capable of driving our lives into pathological actions and decisions. The role of the relationship between analyst and patient in achieving a therapeutic outcome was historically denigrated thus depriving patients of what they needed to understand themselves, their conscious and unconscious selves and their character structure, conscious and unconscious. While many in analysis were able by force of character to extract the relationship they needed from even a technically excellent analyst this element has continued to be downplayed or ignored by many in the world of psychoanalysis. The changes in how authority is viewed and the resistance to the idea of authority possessing knowledge may well be our salvation rather than the ruination that Busch believes it to be.

Response



Response to Henry Friedman's Fred Busch Problem

Fred Busch

enry Friedman keeps repeating his fantasy of my views, although I've tried to correct him before, and he is aware (or should be) of contradictory evidence in my book, *Creating a Psychoanalytic Mind* (2013), which he chose, as Chair, to be part of a Panel at the meetings of American Psychoanalytic Association, where recent books were discussed.

- * Over the last 30 years I've devoted myself to trying to understand how a *contemporary* view of the Ego can be useful in psychoanalytic treatment. It has found resonance in psychoanalytic cultures throughout the world (e.g., see references). My views have nothing to do with the Ego Psychology Friedman presents, which seems based on what he learned as a candidate (i.e., When Friedman describes Ego Psychology as a *drive-defense model* he is actually describing the basis of the Topographic Model). In fact, the Ego Psychology I've been writing has little to do with what I was taught.
- * Friedman tries to portray me as dismissing all points of view except my own. How does he understand this quote from Stefano Bolignini praising my work from the aforementioned book? "In my view Fred Busch is an authentic international psychoanalyst not only because of his wide and brilliant culture, but more specifically because of his capacity for dialogue and in his special skill in understanding the other's mentality and position: an attitude that creates new spaces, new encounters, new shared visions both in the clinical work and in the scientific interchange".
- * In my opening talk to the 2015 meetings of International Psychoanalytic Association (Busch, 2015) I pointed to a common ground between my perspective and those of Marilia Aisenstein, Bion, Betty Joseph, Nino Ferro, Andre Green, M. Baranger, etc. I

spent three years immersed in the writings of Bion, Ogden, Ferro, and Elizabeth and Elias de Rochas Barros resulting in my most recent book, *The Analyst's Reveries* (2018, 2019). I have been invited to give papers, clinical workshops, and dialogue with colleagues in Brazil, Argentina, Italy, France, Russia, Greece, and my work has been translated into 10 languages (see references below).

- * If Friedman weren't presenting his fantasy of my views, he would know that I've written a fair amount about countertransference and have not rejected its importance.
- * Friedman's interpretive *leap* (i.e., I don't like being questioned) from my reflections on the candidate who said she liked everyone just saying what they thought, rather than being taught, is worthy of Jackie Joyner-Kersee (a former Olympic champion in the long jump). I find it important to questioned by candidates if they are interested in learning. What this candidate indicated was that she had nothing to learn.
- * I don't believe one can teach candidates by what I understand as democratic principles...i.e., where decisions on validity, value and meaning are *equally* decided. While candidates come to us with a different degrees of therapeutic experience, and there is an increasing tendency to minimize the difference between psychotherapy and psychoanalysis, significant differences remain (Busch, 2010). As Friedman doesn't seem to believe in the significance of the unconscious in mental life (as I noted in response to his article), I can see why he might think anyone entering psychoanalytic training can have equal say in defining concepts. I was a questioner of ideas as a trainee, expecting my teachers to understand the reason for my questions and to explain the basis for their ideas. I was rarely satisfied with the answers I received, and I've spent much of my professional life trying to find answers to these questions.

Friedman's Comments on Training

* While I recognize aspects of the atmosphere Freidman describes in his training, *our experiences weren't similar*. I did notice when I first

came to Boston that older analysts at the Boston Psychoanalytic Institute would talk about how mean their Training Analysts and most other analyst were. This is no longer the case.

- * The Michigan Psychoanalytic Institute was way ahead of its time in training Psychologists. Starting in the early 1970's many Psychologists were trained. *In my class of seven there were 3 Psychologists and one Philosopher*. We were never asked to sign a pledge that we would only treat patients for research purposes.
- * I didn't mind being taught a particular point of view. I was in psychoanalytic training to learn how to be a psychoanalyst. It's true there was little taught about European and Latin American perspectives, but neither was American psychoanalysis welcomed in these places. In fact, when Kohut's first book was published, our class petitioned to have a class to study his work, and it was approved.
- * My problem was with the way that I was taught. Seminar leaders were not knowledgeable about the text they were teaching, and thus the meaning of what we were reading never became clear. Clinical seminars became supervision, and larger clinical/theoretical issues weren't introduced. For some seminar leaders our class became known as the one that asked too many questions.
- * The atmosphere in my Institute was different than what Friedman describes in his. Training Analysts had no say in the advancement of candidates they had in analysis. Ours was a non-reporting Institute, and one's personal analyst was not allowed to participate in any educational discussion that pertained to a candidate in analysis with him/her. While Training Analysts often had full analytic practices, most of us had 4-6 patient's in analysis shortly after being approved to treat cases without supervision (most often before graduation). I taught a clinical course before I was a Training Analyst, and important Institute committees had many non-Training Analysts on them (e.g., Education, Admission, Curriculum, etc.).

* The place where issues of power became most evident were in the selection of Training Analysts. I was the first person to become a Training Analyst in 8 years, and only after I had been turned down. It was and still is difficult to understand why this was, but I have one speculation. I think it was in the early 1950's that the Michigan Psychoanalytic Institute was discredited as a training institute by the American Psychoanalytic Association because, in part—surprise—they were not approving new training analyst. Candidates had to continue their training in New York or Chicago, and these people became the leaders of the Institute when it was reinstated. I think it's very well possible that the trauma they experienced was unconsciously repeated. There were many other factors involved, I'm sure.

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Response



Further Response to Fred Busch

Jane Hall

As this journal is about controversy I took the chance to offer my thoughts with the hope that Fred Busch might consider them. Different points of view are often growth promoting. My paper was a critique and not an attack.

I was responding to the problem Fred so clearly elucidated, believing that he was mystified about it. My effort was to suggest a way to handle such situations where a student chooses not to cooperate. I also mentioned the displaced transference reaction from analyst to class room teacher, and commiserated with Fred about the way teachers are not treated with respect by some progression committees. I think that Mark Leffert's article in this journal is most apposite here.

Even clear ideas are just that—ideas. Such ideas need questioning. 'Received wisdom' has not always been helpful—and oft times wrong, leading many to impose theory on patients rather than having an open mind and respecting differences.

In discussing a vignette from Fred's book, I merely shared another possible way to think about the material you presented in what I'm sure is an interesting book. I did this to promote the open mind.



The Death Drive is Alive and Well

David Jachim

"So do the shadows of our own desires stand between us and our better angels, and thus their brightness is ellipsed"

-Dickens

In 1920 Freud delivered his landmark work "Beyond the Pleasure Principle." In this work he formulated the concept of an additional human instinct, the Death Drive. Since that time his concept has been contested, criticized and, in other circles, extolled as a useful, valid psychoanalytic concept. Whether you ascribe to Freud's version of a Death Drive or its varied theoretical permutations (e.g. DiMasi, Feldman, Joseph, Rosenfeld etc.), one cannot deny the presence of destructiveness in the array of human existence.

Fueled by biological-instinctual and/or sociocultural factors the Death Drive clearly manifests itself in clinical phenomena as negative therapeutic reactions, vagaries of envy, addiction behaviors, sadism/masochism, dimensions of severe primitive superego, repetition compulsions etc. These aspects have gained consensual validity across many psychoanalytic schools. What is more is that there seems to be no evidence to show that these pernicious issues are waning amongst psychoanalytic practices.

Even more concerning is the increase in socio-cultural manifestations of human destructiveness. In this vein we see the proliferation of mass shootings, intolerance of religious orientation, prejudices towards immigrants, genocidal trends, growing elitism and suicide. Politically, we see the dismantling of democratic structures in the United States, destruction of unification processes in Europe via Brexit (Lackinger) and the rise in authoritarianism and populism in many countries such as Italy, Turkey and Poland.

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One of the most serious reflections of the Death Drive is the rapid destruction of the planet Earth itself, evidenced by climate change. We are at (some say beyond) a tipping point of unrepairable damage to our planet, a crime emanating from a psychotic dimension of the human psyche (Moss et al, IPA Congress 2019) that denies reality (scientific evidence) and resorts to omnipotence (more money, more territory and "JOBS, JOBS, JOBS"). Nowhere is this better evidenced than within the current United States Presidential administration (abetted by the US Senate) that labels climate change as "fake", withdraws from international alliances to fight climate change and dismantles the Environmental Protection Agency. These chants have become "the new normal", dulling popular consciousness as only the Death Drive can do.

In so many aspects the Death Drive is alive and well and not so silent. Nonetheless, what can we, as psychoanalysts, do in the face of such powerful forces? Clinically, I believe we can re-dedicate ourselves to the democratic process that true psychoanalysis promotes. Psychoanalysis can ensure that all voices within our patients' psyches are heard and that unfettered primitive superegos are captured or at least contained. Within our own psychoanalytic institutions, we can confront theoretical "isms" and promote good work group functions. We can also bring these egalitarian principles to the public by making our work more accessible and by supporting healthy sublimation of dangerous aggressions via the arts, media, sports etc.

We will never totally defeat the Death Drive but by accessing Eros these acts of love can alter its malignant valency. I do believe Dr. Freud and Ms. Klein would agree. What other alternative do we have?

Response



Response to David Jachim

Jeffrey Eaton

Over the years I have become increasingly more sensitive to and curious about the fate of good experience early in life. Clinical experience suggests that at least in some circumstances "where catastrophe was, evil shall be." Why should this be so? Bion explored the complexity of interactions between innate vulnerabilities (like intense intolerance of frustration, excess of envy, and hypersensitivity to pain) and environmental insults (like a projective identification rejecting object that is felt to be willfully misunderstanding and becomes internalized as ego destructive).

For some infants and children distress is never reliably transformed into comfort. Attention becomes captured by pain. Early omnipotent defenses arise to organize a fragile self that may come to live unconsciously inside a malignant grandiosity that functions as a barrier to intolerable anxiety. A cult of hardness and illusory invincibility functions as a substitute for learning to negotiate the complexity of relationship, dependence, limits, and intimacy. Life becomes ever more frustrating and alienating. Isolation is a cure and a curse.

Emotional contact is equated with emotional catastrophe and so is violently recoiled from. Narcissistic and psychotic solutions predominate and gain intensity and momentum. Some patients believe that evil is the strongest force in the universe. The Faustian bargain they make casts Evil as a Caretaker. I sell my soul in order to survive. Only after it is too late can I begin to calculate the consequences. Love is just a fragile rumor. To the extent it seems to exist, it ignites my envy.

Let's face it: destructiveness is fast. It is far easier to tear down than to build. And destruction can be exciting, contagious, and it is often glorified in many forms in our time. Among the many teenage boys I've seen in the last two decades, the figure of The Joker (from Batman) reigns

supreme as an idealized figure of unconstrained potency, pathos, and mayhem. For many people nihilism, as both an internal and an external experience, corrodes their picture of the world.

To really begin to investigate destructiveness we must treat it like a function. Bion's alpha function is a concept designed to help identify those factors that combine to create meaning. Destructiveness, too, can be viewed as a function. One element fo the analytic task can be to investigate the way numerous factors combine to create a spectrum of destructiveness.

There is no one answer for any patient's destructiveness. Psychoanalysis can help us appreciate the experience dependent realizations that make a destructive function flourish in the idiosyncratic life history of any patient. Our job is to observe, describe, and communicate, not to explain. As psychoanalysts we try to create a space where violent thoughts and emotions can have a voice, rather than become violent actions. A deeper appreciation of the complexity of violence, both in its psychic and external manifestations, is one of the paramount tasks for our next century. Bion's example provides a searchlight to make myriad paths forward into an echoing darkness.



The Learned Analyst (or Everything an Analyst Should Know)

David Jachim

The answer is relatively simple. If one wants to be a true analyst...he must be interested in sociology, in religion, in history, in literature...because otherwise his vision and comprehension of the patient will be incomplete.

-Anna Freud

In a recent essay (Jachim, 2017) I referred to the term "Analytic Personality", an amalgam of factors that include the personal and technical dimensions needed within the analyst to provide optimal, analytic effectiveness. I am certainly not the first to suggest that the analyst's personality in particular is a critical component in promoting quality work with patients. Schafer (1979) alluded to the significant impact of the analyst's personal attributes upon the analytic process. Rieman and Cheney (1968) went even further in categorizing analyst personality types and their influence on the course of treatment. Indeed, one could even make the case for comparing Winnicott's (1971) "good enough mother" concept to those of the "good enough" personal qualities in the analyst or therapist.

Nonetheless, I would like to suggest an additional Analytic Personality factor, an element that has to do with **the analyst's awareness of the world**, particularly its social and cultural dimensions. Eisold (1994) has written about the unacknowledged aspects of psychoanalytic culture, a culture that tends to devalue the larger world, to which it sees itself as opposed and superior. He refers to this opposition as a defense against the analyst's own ambition, envy, competition and turbulence in the world. He even mentions Freud as an icon who himself repeatedly described his isolated opposition to the world. Taking Eisold's concepts in mind, I would propose an additional, if not critically needed component of the analyst's personal competence, a factor I will call Socio-Cultural Acumen (SCA).

SCA includes the analyst's awareness, if not emersion and participation in social and cultural life (e.g. politics, art, social trends, sports etc.) and integration of these vagaries into analytic work. After all, our patients bring the effect of these aspect on their lives to us every day. It make sense to me then for us to not only to understand the significance of these effects for our patients but also to be actively involved as analysts in the real world outside of our consulting rooms.

SCA also includes, in my mind, "action along with analysis." Our work primarily focuses on our patients' inner world, eschewing premature action. While cautioning our patients from "acting out" we can perhaps at times fall into "analysis paralysis" and not sufficiently support effective self-agency in their lives. Here I am reminded of an incident many years ago when I was consulting with a senior analyst regarding an important business decision I was wrestling with. Together we reflected on the conscious and unconscious determinants in my decision or, in my case, the delay in making one. After a time of proper exploration, the consulting analyst finally said, "analysis and action should go hand in hand". I am often reminded of that encounter (or confrontation) and think it particularly relevant for the analyst within the political atmosphere of our day.

Benveniste (2018) has recorded the history socio/political consciousness and action of many past analytic icons such as Jones, Erickson, and Bettelheim etc. However, I believe that this interest and effort in political climate has not carried over into the collective conscious of analysts today. There are many causes of this deficit as a component of SCA. Eisold (1994) has illuminated some of the causes of this absence, including the analyst's sense of immunity to instinctual influences, the destructiveness of "analytic pairing" promoted in many institutes and the intolerance of differences in analytic organizations. Jacques (1955) has referred to the "social system defenses" within analytic training organizations that promote the analyst's isolation. Certainly individual defenses against a fear of the world enter here as well.

The effect of SCA deficit can be seen in many psychoanalytic institutes where group/organizational/cultural/political seminars/classes are

glaringly absent. This omission fostered by the reasons cited earlier promote a "head in the sand" motif and implicitly suggests that we, as analysts, do not need to deal with issues outside of our consulting rooms. An attempt to break this attitude is highlighted in Lee's (2017) recent publication calling for mental health professionals to become involved and alert the public of the perils of a destructive president. However, this alert is an anomaly in the literature and within analytic training programs. Most of us go on in the privacy of our consultation rooms, avoiding the impact of external society on our patients and the analytic work with the excuse that this is not within the analytic domain. This is a defense against our own arrogance. When this occurs we do a disservice to our patients.

The issue of SCA is highly relevant with regard to the political/cultural waves stirred in America today. The dangerous dismantling of democratic processes and structures by a presidential figure has created dividedness and distrust of our government like never before. This destructive behavior has created a negative modeling motif for most Americans, particularly for our children. The spewing, blatant denial of reality and "untruths" has created increased malaise in our society and is manifested in a sense of helplessness in many of our patients. Such an atmosphere can certainly be an anathema to the mission of psychoanalysis which is to promote tolerance of differences and the attainment of truth. The eroding aberrations of those "in charge" are rapidly becoming "normalized" and smell alarmingly familiar to what Albright (2018) recalls of Mussolini's tactics of fertilizing autocracy, "To pluck a chicken, one feather at a time...." so the public will not notice.

All this is to say that a robust SCA might include not only the analyst's commitment to and honing of fundamental psychoanalytic principles but also action within the socio-culture (partucularly political), speaking out and even becoming involved in theses vertices of outer world. Training institutes can fertilize this behavior by building training programs that include organizational/group dynamics seminars as well as community efforts to heighten the public's awareness of psychoanalytic understanding of "worldly business" such as politics, business, sports,

popular music etc.; all components of the the real world. Furthermore, the promotion of diversity of thought, avoidance of "demagoguery" of theoretical positions and having routine "organizational" health examinations within analytic organizations by outside consultants could only help analysts be even more sensitive their patients' social, political and cultural realities.

Finally, the additional benefit of increasing each analyst's SCA would be to heighten the integrity of our profession. After all there is a popular adage that reads, "If we don't stand for something we'll fall for anything." I believe a high SCA is important because, to borrow a phrase from the current American administration, "It's a matter of national security."

"Chase dem!
Run dem politicians!
When I see dem I get cold
And they say it's a part of it
So they buying and selling your soul..."

-from Mind Control by Stephen Marley

Response



Response to "The Learned Analyst"

Judith Eekhoff

was taught that as a Christian I should be "in the world but not of the world." Dr Jachim's essay reminds me of that charge. I believe, with him, that as an analyst, I must be in the world. And in fact, we all are. In these days of COVID-19 and heightened awareness of racial inequality, we are all collectively suffering trauma. We are no different from our patients in some of the realities we face daily. Again, quoting my mother, "Judy, it is not only what happens to you, it is how you respond." No two of us are responding to our society and our culture and the challenges of 2020 in the same way. Also, no matter the facts of the collective trauma of COVID-19 and the reality of racial injustice, we are not in this together. Ultimately, we are alone with ourselves.

Since as analysts we are alone with ourselves, what we know and do not know are both important. We must learn a lot in order to ride a bicycle. But when we are riding, we need to forget the details of what we learned and ride paying attention to the path and its surroundings. We need to be in the world in order to understand ourselves and others. We cannot forget the psychic reality of the unconscious world nor should we minimize the reality of the actual world. Using Bion's model of binocular vision, I believe each is always informing the other.

Our impossible profession requires much of us. I am grateful to Dr. Jachim for the reminder of just how much we need to acknowledge about both the real and the imaginary.



To Three or Not to Three: That is Not the Question

David Jachim

Controversial psychoanalytic training relic regarding the adequate (or required) frequency of analytic sessions has recently been exhumed, culminating in the International Psychoanalytical Association (IPA) making a policy change in its recommendation to component societies. This change gives each society the individual prerogative of establishing a three session minimum and a five session maximum per week for psychoanalytic training. This change (not the first of its kind in psychoanalytic history) has fueled tensions between various sections of the international psychoanalytic community and the steam that this movement has created is not yet run out.

To understand the tenacity of this continued steaming one needs to consider several factors. First we start with Freud who never endorsed a mandate of four or five sessions but realized that three sessions were perfectly fine for many people. It was only for more disturbed patients that he felt a higher frequency was necessary. For various historical reasons (e.g. American models vs. European models) that go beyond the scope of this essay Freud's flexible thinking in this regard was lost and a higher frequency became concretized, creating an analytic moat that, for some, could not be crossed.

Second, the defense of high frequency philosophy has been supported by some legitimate clinical concerns regarding the potential re-hardening of defenses (e.g. "Monday Crust", "thread loss") that can occur between widely spaced, infrequent sessions. Others, like Kernberg (2001), even warned of a "slippery slope" of decreasing traditional frequency ("If three then why not two or one?"). In addition, there is perhaps the less often mentioned and less conscious fear for some analysts regarding the economic loss in a reduced frequency scenario.

There is little doubt that more frequent intervention between analyst

and analysand bodes much better for improvement over time as recent research has shown (Shedler, 2010). This having been said there has been general agreement among some of the warring factions (e.g. British vs., French) that three sessions per week is an effective minimum. Yet some are still wedded to insisting "one size fits all" and that the highest frequency standard should be applied everyone. We forget that Freud never said that frequency was the sine qua non of psychoanalytic work. It is one important factor to be considered but perhaps not unalterable. I might suggest other factors as well that may be at least as important as session frequency for establishing a good, effective psychoanalytic process.

If, for a moment, we entertain the idea that three to five sessions per week helps to maintain the analytic frame and encourages an analytic process to occur, let us move to another vertex and look at other process enhancing variables, i.e. analyst factors. These characteristics would include the analyst's ability to engage the unconscious, interpret the transference (and countertransference) and analyze defenses. Extending these analyst factors even further we might see other, critically important aspects of the analyst's personality that lend particularly well to effective analysis. Controtto (2011) has written about this matrix of personality variables, including the analyst's emotional inheritance (or character), his/her identification with a use of a psychoanalytic theory and sensitivity to cultural factors, including the public's perception of analysis and, I might add, awareness of socio-economic factors in his/her community (e.g. mobility, income etc.). This last factor has often been particularly overlooked but has been a significant point of argument for a more flexible standard of session frequency by many analytic societies in South America and parts of Europe. I believe that societal and economic changes in the American culture now require analysts to reckon with this issue.

We might think of amalgamating those aspects of the analyst's personality with the deft ability to apply a flexible, containing frame of frequency into a constellation we might call the **analytic personality or therapeutic personality.** The factors mentioned (there might be others that

I cannot think of right now) that constitute such a personality would surely heighten the probability of a successful analytic endeavor. Such a model could put excessive turf quibbles about how often someone is seen per week in perspective.

While thinking about the **analytic personality** I was reminded of an encounter with a fellow doctoral candidate I trained with in the mid 1970's. We were discussing various analytic theories and the training requirements to be met in order to become a psychoanalytic therapist. As we talked my colleague suddenly stopped the discussion and said, "I'm not interested in being a therapist. I'm more interested in becoming a therapeutic person." His statement felt, at the time, somewhat revolutionary and has always stuck with me.

Another psychoanalytic topic continues to re-emerge on the controversy horizon, the designated term of and complementary status of "Training Analyst" (TA). It is beyond the scope of this essay to investigate this topic thoroughly. However, it can be said that the long accepted role of the TA has steadily come into question to a point where certain psychoanalytic factions believe that this traditional status should be eliminated. The reasons for this movement are many and include the belief that the TA designation has created collegial rifts in many analytic institutes, that it promotes differential political power in training programs and that it has achieved some sort of elevated, undeserved, overvalued invincibility. Some prominent analysts (e.g. Kernberg 2004) have even stated that exclusivity that TAs enjoy in providing training analyses should be erased and that candidate analyses should be totally free of institutional influence.

Whatever side of the debate one may fall on it seems best to carefully re-examining this topic with the understanding that psychoanalytic societies and institutes are human organizations and not immune to all the dangerous vagaries of organizational dynamics. Moreover, there may be some destructive aspects to be considered regarding the "anointed" position that TAs may hold in a particular institute. Kirsner has written on the phenomenon of this elevation whereby the TA is held up to be the holder of true psychoanalytic knowledge and is therefore the only

one truly qualified to provide a proper analysis for analytic candidates (and perhaps the public as well). Interestingly, Freud was somewhat equivocal on this issue of privileged position whereby on the one hand he advocated the inclusion of non-medical professionals in psychoanalytic training but then tightly held quite an elitist group (even distributing secret rings to members) of his most dedicated and "knowledgeable" followers.

There is no sure fire process of vetting that guarantees that one is a "qualified" analyst (just as there is no error proof method of determining any other professional ability). However, it does strike me that the intense adhesion to high frequency sessions (4-5) by some may be mirrored in the often concretized, but perhaps not justified knowledge and power sometimes implicitly awarded to TA status. Nonetheless, we need to have some method for assessing whether one is really capable of delivering a "proper analysis", whether that is a training analysis or not. I do not know the answer for this. However, I would again suggest including wider consideration of the personality factors mentioned earlier in this essay as we make our determinations. To this list of factors we might prioritize other necessary ingredients such as the analyst's experience in providing successful analyses over some time period as well as additional assets like those mentioned by Kirsner (2000), including the capability of high level cognitive functioning and abstract thinking ability, the analyst's "person intelligence" (publicly coined as "emotional intelligence") and his/her facility in the use of psychoanalytic theory. Whether that constellation is termed Training Analyst, Personal Analyst or something else does not matter. It is whether the analyst has an "analytic personality" or as my dear graduate school colleague keeps reminding me it is whether the analyst is a "therapeutic person."

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Response



Response to David Jachim's To Three or Not to Three

Gunther Perdigao

want to thank Dr. Jachim for a stimulating essay on this very controversial topic in psychoanalysis. It raises the question as to whether the insistence on a certain frequency has less to do with the need of the patient than with some fixed rule decreed by the powers that be for extra-analytic reasons.

Psychoanalytic training has always been a contentious subject. The most recent upheaval was precipitated by the action of the IPA Board at the Buenos Aires Congress in 2017. By an overwhelming majority, the Board voted to allow societies to have training analysis at three times a week if they so desired. It added a measure of flexibility, giving more autonomy to local societies. At the same time societies who wanted to continue with the old frequency requirements were perfectly free to do so. Both North America and Latin America voted in favor of the change. In Europe there was a split where the societies of Northern Europe vehemently opposed the change. It should be noted that the vote explicitly did not make the change mandatory. Each society is free to choose, according to local conditions, which frequency it would require. This makes the vehement objections more interesting.

This vote by the IPA Board had both political and theoretical reverberations. The president of the British Society, in a letter this year to the president of the IPA, questioned what the core IPA function was and what was the main contribution the IPA can offer the psychoanalytic community. In addition, she wondered whether the IPA was still responding to European concerns and interests. Another member of the British Society wrote a blistering letter questioning the legality of APsaA's regional status and its independence in training matters from the IPA. In parts of Europe, there is a fear that the officially sanctioned times per a week frequency will fatally blur the distinction between psychoanalysis

and psychotherapy. The quandary of the Europeans was best expressed by one of their society presidents: "If we keep the standards as they are, psychoanalysis will marginalize even further, but if we change the standards, psychoanalysis will dilute; the borders with psychotherapy will disappear."

In my experience (some 50 years of it) there is no procrustean bed into which one fits all patients. There is nothing sacrosanct about frequency, be it either three, four or five times a week. It should be noted that originally Freud saw patients six times a week. Freud practiced analysis at that frequency for decades. Ultimately, what should really guide one's approach is the need of the patient. Some patients do very well at three times a week but for more severe pathologies higher frequency generally produces better outcomes.

Having lost the frequency debate, the Europeans then resorted to another strategy. Presently Europe pays slightly over 50% of IPA dues, more than North and South America combined. Their argument is that since they pay a disproportionate amount, they should have greater representation on the IPA Board. With greater representation they would have greater power and steer IPA policies according to their wishes. There is also a feeling among some Europeans that the three regions are so different that each region should decide how to manage their affairs. This would result in a dramatic weakening of the IPA as a worldwide organization.

Another reverberation resulting from the vote on frequency has been a heated argument as to how the IPA should vet German societies that practice training analysis three times per weekand now want to join the IPA. To complicate matters, in the DPV (German Psychoanalytic Association) several of its branches favor 3x three times per week training analysis already. Both British and some Germans fear that if a mandatory 4-5x a week is not rigidly enforced many members will opt for the lower frequency.

It seems evident to me that the present cultural milieu is one where there is much less acceptance of analysis at high frequency. A rigid set of rules

set forth by some authority is not very likely to be followed obediently.

As can be seen from the above observations, none of these objections addresses the theoretical issue as to whether there is a difference in the psychoanalytic process in analyses conducted at different frequencies. Nevertheless, the British are rigid in their belief that higher frequency facilitates access to more primitive material regardless of the character structure of the patient.

The issue of frequency inevitably raises the question of whether there is a difference between psychoanalysis and psychoanalytic psychotherapy. Some insist that frequency alone is responsible for the difference, but others feel that there is a difference in the management of the transference. Wallerstein (1991), however, warned that "the complacent certainties about the distinct compartmentalization of psychoanalysis and psychoanalytic psychotherapies no longer exist. The borders between them are now blurred, and they shift constantly, depending on one's theoretical predilections." Argentinian analysts feel what characterizes psychoanalysis depends on the internal setting of the analysts. In my understanding, this means that the analyst's focus is on the internal life of the patient viewing day to day conflicts as derivatives on unconscious conflicts.

Brunet (2019), in his paper "Psychoanalysis and Psychotherapy: Continuum or Rupture?" emphasizes that the essential difference lies in the handling of the transference and that frequency per se is not the defining feature of psychoanalysis.

Brunet's position brings us back to Jachim's view that since frequency is not the sine qua non condition of analytic therapy we should turn to characteristics of the analyst. He raises the question, what makes an individual a therapeutic person? There has been a longstanding argument regarding how to identify and certify someone as a competent analyst, especially when they are given the responsibility of analyzing candidates.

The old solution was the training analyst system, which leads to the old conundrum of how does one vet such an individual. From the very

beginning of institutional teaching of psychoanalysis, the issue of training analyst status has been a source of controversy. Both Eitingon and Ferenczi favored it, but for different reasons. Eitingon felt that instructional or didactic analysis differs from therapeutic analysis in having an additional aim which supersedes the therapeutic aim.

Ferenczi felt that Eitingon's approach was too pedagogical and political. Instead, Ferenczi advocated a "super analysis" to achieve the depth that a thorough psychoanalysis hopes to achieve because the destiny of a number of people depend on the analyst's competence. The "super analysis" implied a much longer analysis at much greater depth than was generally practiced at that time. It should be remembered that analyses at that time generally lasted only a few months.

Michael Balint (1948) criticized the training analyst system for authoritarian dogmatism and the obligatory submissiveness expected of the candidates.

Rangell (2004 p.127) stated: "I had long felt that too much importance was attached to the status of training analyst... I always had doubts about giving such prominence to training analysts, many of whom were quite passive and uncreative in scientific affairs, and inhibitory of the works of others."

Cremerius (1990), in his article "Psychoanalysis and Power," argues that the IPA was organized as a quasi-religious community where there was uncritical acceptance of everything the authorities say and do. In his opinion, echoing Balint, didactic analysis was set up as an instrument of power and as a ritual of submission and indoctrination. What was originally conceived as a method to help the individual learn about the functioning of his unconscious and the work of repression quickly became a way of indoctrination and a bulwark against heresy. He quotes Hans Sachs's (1930) statement that "psychoanalysis requires something similar to the novitiate in the church."

In my opinion, there is no fool proof way to determine who is a "therapeutic person" or a superior analyst Frequently, the decision on appointment is made less on therapeutic competence than the politics of the

Institute. Independent thinkers are frowned upon because their heretical ideas could upset "the way things are done." All of us older analysts have witnessed corruption and collusion usually at the expense of the candidate. In a manner similar to the Catholic Church, there is more emphasis on preserving the psychoanalytic institution than in protecting the candidate. This started with Freud. Knowing of Jung's affair with Sabina Spielrein, he sided with Jung against her. Freud protected Jung because he felt that a psychiatrist and non-Jew should be his successor as the head of the movement. The institution mattered more than the welfare of the patient. (Cremerius 1990).

The French seemed to have devised a solution to the TA system. The candidate's analysis is completely outside psychoanalytic training and it is the supervisor who assesses the analytic competence of the candidate.

An unfortunate consequence of the TA system is that it creates a group of powerful people who too often want to perpetuate their prestige and power. Freud (1937) used a quote of Anatole France: "When a man is endowed with power, it is hard for him not to misuse it." The power differential risks creating a tiered system where some are the anointed superiors. We have all witnessed the arrogance of those in power. Looking outside our borders, non-analysts have too often been treated patronizingly as unenlightened individuals, generating a great deal of hostility toward psychoanalysis. The endemic power corruption has a lot to do with the institutional stalemate and controversies in psychoanalysis.

To end, I want to thank Dr. Jachim for highlighting some serious difficulties in our field and I want to join him in finding ways of addressing some of these unending disputes that beset out field.

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