Models of Therapeutic Action
Spring, 2019

Section I: Frances Arnold, Ph.D. and Trude Kleinschmidt, M.D.
Section II: Michele Baker, M.D. and Janet Noonan, LICSW

In this course we will explore the mechanism by which psychotherapy helps people change. It is not obvious why sitting and talking to another person should be helpful in symptom-relief or character transformation. Although psychoanalysis has always emphasized the role of insight in change, it became clear to Freud and his followers that insight alone often did not lead to change. Other aspects of the treatment were no doubt necessary.

In recent decades, theories about therapeutic action have centered on the importance of insight as well as additional therapeutic factors, including the treatment relationship and the field of the entire treatment situation. More recently, the focus on the relationship between the therapist and patient has gained increasing specificity, clarity and importance.

Different theoreticians have engaged with various aspects of this phenomenon. As we read various articles together, we hope that you will try to think about the following questions: What does this author think is helpful to patients? Is this a way that I think I have helped my patients? Can I use this author’s ideas in my clinical work? Does this article bring to mind any clinical vignettes that may either confirm or refute its arguments?

For our first class session, please bring your own vignettes or thoughts about your experiences of movement, shifts, and moments of change, in psychotherapy. What happened, and how?
Session I: March 21.
History and Fundamental Tensions: Relationship vs. Insight; Experience vs. Interpretation

In this session, we will discuss the first person, retrospective account of the analyst Harry Guntrip’s experience in very different personal psychoanalyses with two well-known British object relations theorists: Fairbain and Winnicott. This account brings into focus many of the themes and questions we will be exploring throughout this course: what are the respective roles of insight versus the therapeutic “relationship;” what makes for an effective and “alive” interpretation; what is the impact of the therapist’s life and character; what is the role of mourning in the therapeutic process?


Optional Reading:


At the conclusion of this session, fellows will be able to describe three factors that are important in understanding the concept of therapeutic action, based on Guntrip’s article about his analyses with Fairbairn and Winnicott.

Session II: March 28.
The Nature of Therapeutic Action

In this session, we will discuss two classic articles that consider the essential elements of therapeutic action. “Remembering, Repeating and Working Through” is considered is one of Freud’s best known “technique” papers. In it, he lays out his ideas about the importance of the patient’s communications through remembering and repeating in the transference, as well as ideas about the complex issue of resistance. The Strachey paper is a dense, but classic theoretical work that takes up Freud’s original ideas and elaborates on the role of resistance, considers the analyst’s function as a new good object who can alleviate the patient’s self-criticism, and attempts to define what makes for an effective interpretation that will lead to insight and change.

Freud, S. (1914). Remembering repeating and working through. *S.E., II* (pp.147-165). [PEP Web Link]

After this session, fellows will be able to describe the three technical ideas Freud describes as necessary for therapeutic change. They will also be able to describe two ideas that Strachey introduced about therapeutic action.

**APRIL 4 - ACADEMIC LECTURE (NO CLASS)**

**Session III: April 11.**
**The Therapist as a New Good Object**

In this session, we will discuss articles that will consider the role and function of the analyst/therapist in regard to therapeutic action. Winnicott’s timeless paper takes up the difficulty and importance of tolerating and working with hate in the counter-transference, and the therapeutic action inherent in doing so. Loewald’s paper is a complex, but beautiful paper about the analyst/therapist’s function as a new good object, which presages intersubjective two-person theory, characterizing the analyst/therapist as “a participant observer,” and “a co-creator on the analytic stage.” Drawing from multiple theoretical perspectives - ego psychology, drive theory, developmental theory, object relations - Loewald gives us a modern account of how development resumes and leads to change. His ideas about transference as a life force, in which “ghosts may be brought alive....in order to be laid to rest as ancestors” is one of the more moving accounts in our literature.


After this session, fellows will be able to describe Winnicott’s ideas about countertransference hate and Loewald’s key ideas about therapeutic action.

**Session IV: April 18.**
**Defense Analysis and Self-Psychology**

American Ego Psychology dominated psychoanalytic thinking from the post-World War II era, to the 1980’s. Paul Gray is known as a leading founder of ego psychology’s defense analysis technique and theory of therapeutic action. In this session, we will contrast his model of change action which is focused on drives and resistance, with that of the self-psychologists who approach change from a different direction: empathic immersion in the patient’s affective experience and the therapist’s function as a mirroring self-object.


Optional Reading:


At the conclusion of this session, fellows will be able to define defense analysis and list two differences between Ego Psychology and Self Psychology concepts of therapeutic action.

Session V: April 25. Listening to Process

In this session, we will compare Schwaber’s approach, which privileges the leading affective edge and the patient’s vantage point, with Roth’s approach of listening for deep unconscious impulses, particularly aggression, as well as the ways the patient may resist the therapist’s analyzing capacities. We hope to think together about the following questions: What do we listen for when we listen to clinical process? What is the leading edge or lens we try to hear?


Optional Readings:


At the conclusion of this session, fellows will be able to describe two differences between how Schwaber and a neo-Kleinian analyst would listen to process, particularly feelings and emerging material from the patients’ unconscious.
Session VI: May 2.
Something More than Interpretation: Contributions from Child Analysis

Child analysts have much to teach all of us about therapeutic action. In this session, we will discuss two papers in which two wonderful clinicians and writers offer very different descriptions of analytic process. We will explore their different ideas about what brings about change. Herzog’s paper demonstrates his talent as a complex theorist, who draws on multiple perspectives through which he contemplates the role of intergenerational trauma, object relations and ego psychology, in his moving account of his work with a precocious young girl. Harrison, also describing work with a traumatized child, shows us how a non-linear dynamic systems theory perspective might account for therapeutic change.


At the conclusion of this session, fellows will be able to explain several of Herzog and Tronick/Harrison’s contributions from their work with children on therapeutic action of their adult and child patients.

Session VII: May 9.
The Use of the Analyst's and the Patient's Subjectivities

In this session, we will consider therapeutic action in light of the use of the analyst’s subjectivity and it’s mutative interaction with that of the patient’s own experience and point of view. We will look at a seminal paper by Lew Aron, a founding relational theorist, in which he considers the importance and centrality of the patient’s exploration of the analyst’s subjectivity. We will also read a paper by James McLaughlin, a British Independent theorist, who explores the mutative impact of the analyst/therapist’s insights into his own subjectivity, his experiences, thoughts and feelings, to effect the treatment.


Optional Reading:

At the conclusion of this session, fellows will be able to describe two ways in which working with the analyst’s subjectivity is an important part of therapeutic action.

**Session VIII: May 16.**

**Therapeutic Field Theory**

Field theory is a relatively new area of interest in North American Psychoanalysis. This week we will look at some basic concepts such as “the field,” the jointly created narrative, the shared unconscious fantasy of the therapist/patient dyad, as well as the idea that both therapist and patient are attempting to come to terms with a shared emotional experience. In doing so, we will think about how these ideas may reshape our notions of therapeutic action. Drawing from the original work of Baranger & Baranger, and Hoffman, we will think about the therapist’s tensions from the field, and the dialectic between theory and analytic freedom.


Optional Readings:

Ferro, A. (2002). The analytic dialogue: Possible worlds and transformation in the analytic field. In *The analyst’s consulting room* (Chapter 3, pp.46-65). East Essex: Brunner-Routledge. [Available in the library: check reading folder or request from library@bpsi.org](mailto:library@bpsi.org)


At the conclusion of this session, fellows will be able to describe two ideas about therapeutic action and Field Theory, and about the tensions between theory and practice for the therapist.

**Session IX: May 23.**

**The Challenge of Mourning**

During this penultimate session, we will explore the nature and transformative role of mourning in the therapeutic process. We will consider the perspectives of two object relations theorists as they contrast mourning with melancholia, and acceptance versus manic denial of loss. Finally, we will think about the relationship between these ideas and the sense of aliveness and deadness in psychoanalytic process, as well as in life.


Optional Reading:


At the conclusion of this session, fellows will be able to define Freud’s and Ogden’s ideas about the role of mourning in therapeutic action.

**Session X: May 30.**

**Therapeutic Action: A Reprise**

In our last week together, we will think about what happens between an analyst and patient that makes for an “alive” experience, transformative for both parties, and to the relationship between them. We will read Al Margulies’s account of an analysis that began during his training and spanned the arc of his analytic development and maturity. Margulies explores the topic of how patient and analyst impact each other, and are both changed by the clinical experience.


At the conclusion of this session, fellows will be able to describe three ideas about what is mutative and transformative for patient and analyst in an intensive psychodynamic treatment.