



B P S I

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Resistance

Instructor: Susan Kattlove, MD

What do we mean when we talk about resistance in psychotherapy? Some might argue that we don't actually talk about resistance enough, that somehow we forget about this powerful unconscious force, or that we are misled by its various disguises. For Freud, resistance was the force acting against progress in treatment, residing in the patient alone and accompanying the treatment from the first session to the last. As early as 1895, Freud defined resistance as the force that prevented the hysterical patient from knowing what they didn't want to know, setting up a struggle between the analyst and the patient's unconscious. As psychoanalytic theory has developed over the past 125 years, the concept of resistance has also evolved, although I think we can still roughly define resistance as the force leading to impasses in therapy. In this course, we are going to follow the fate of the concept of resistance as we move from the topographical model to the structural model and then on to object relations, self-psychology, and intersubjectivity. Most weeks we will be reading papers that contain clinical illustrations of the theory in action. I hope that we'll also be able to talk about our own cases and how we manage the impediments to awareness that arise in the course of the work.

Week 1. December 12, 2019: Classical Concept of Resistance

We're going to start where Freud started, with the topographical model. For Freud, resistance accompanied the treatment every step of the way. And, as with most of the impediments to free association that Freud encountered, he turned this "problem" into an understanding about the formation of symptoms and the workings of the mind.

Readings: Freud, S. (1914). Remembering, repeating and working-through. *SE XII (1911-1913): The case of Schreber, papers on technique and other works* (pp. 145-156). [PEP Web Link](#)

Freud, S. (1917). Resistance and Repression. *SE XVI (1916-1917): Introductory lectures on psycho-analysis* (Lecture XIX, pp. 286-302). [PEP Web Link](#)

Learning Objective: Students will be able to explain the relationship between resistance, repression, and symptom formation.

Week 2. December 19, 2019: Ego Psychological Approach to Resistance

This week we are going to look at how contemporary ego psychologists notice and work with resistance. Fred Busch presents an historical overview of the vicissitudes of the concept of resistance, starting with Freud, and he wonders what our resistance is to fully embracing resistance analysis. It's a long paper but I think it's worth it. Unfortunately, Busch does not present any clinical examples, which is why I am also assigning the Paul Gray paper. Gray outlines his working theory and then demonstrates with a lengthy clinical example his way of using the concept of resistance in his clinical work.

Readings: Busch, F. (1992). Recurring thoughts on unconscious ego resistances. *JAPA*, 40, 1089-1115. [PEP Web Link](#)

Gray, P. (1990). The nature of therapeutic action in psychoanalysis. *JAPA*, 38, 1083-1096. [PEP Web Link](#)

Learning Objective: Students will be able to describe how pointing out the resistance can help to deepen the patient's understanding of themselves.

Week 3. January 2, 2020: Resistance from an Object Relations Perspective

How do we think about resistance when we are no longer dealing with conflict between agencies of the mind? From an object relations perspective, the relevant components of the mind are the internalized objects and the self. Frank Summers argues that analysis threatens previously established internalized object relationships and thereby threatens the patient's sense of self. Resistance in his model is related to the patient's annihilation anxiety.

Readings: Summers, F. (1997). An object-relations model of the therapeutic action of psychoanalysis. *Contemp. Psychoanalysis*, 33, 411-428. [PEP Web Link](#)

Learning Objectives: Students will be able to explain the reason patients resist change from an object relations perspective.

Week 4 January 9, 2020: Resistance as adaptation in self-psychology

What if we view resistance as the patient's attempt to protect his enfeebled sense of self, not as an attempt to thwart the treatment? This changes the feel of the term "resistance" from one that implies a clash of enemies to one that inspires more empathy and respect—the patient is doing the best he can do to preserve his self so that the self can resume development at some point in the future. Arthur Malin presents an extensive case report which details his transition from a more conflictual approach to the resistance to an empathic approach as the author embraces a self-psychological approach.

Readings: Malin, A. (1993). A self-psychological approach to the analysis of resistance: A case report. *Int. J. Psycho-Analysis*, 74, 505-518. [PEP Web Link](#)

Learning Objective: Students will be able to describe how resistance can be understood as an adaptation and how that understanding would change one's treatment approach.

Week 5 January 23, 2020: The Two-person Perspective of Resistance

Analysts have increasingly recognized the role that we play in the way a treatment unfolds, and it has become commonplace to discuss the countertransference. Just as patients' transference can function as resistance, so too can our countertransference (or just transference, as McLaughlin writes) impact the development of insight. In this paper, James McLaughlin illustrates how an impasse in treatment was resolved through his own reverie.

Readings: McLaughlin, J. (1988). The analyst's insights. *Psychoanalytic Q.*, 57, 370-389. [PEP Web Link](#)

Learning Objective: Students will be able to articulate two ways that countertransference can play a role in resistance.