



TECHNIQUE III

Current Issues in Technique: The Two-Person Approach

Fall 2020

Michele Baker, MD and Janet Noonan, LICSW

From the beginning of psychoanalysis, there has been a sustained tension between the therapeutic action of insight and interpretation on the one hand, and the analytic relationship itself. In recent decades, this debate has become less either/or and increasingly dialectic. In the course of this class, we will consider how the analyst's unique involvement, as a co-actor in the field, influences technique and colors the ongoing interaction of the analytic dyad, with a focus on contemporary views.

We will start this class with focus on the issue of the analyst's character. Next, we will move on to discuss issues related to the construction of clinical evidence. We will next explore themes of countertransference, enactment, impasse, self-disclosure, and resistance, among other topics. As we proceed, we will consider the evolution and impact of the analyst's participation in the treatment, along with the ethical implications of the various technical choices.

1. September 24: Character

For better and worse, we bring our own selves to our work as therapists and analysts, and this inevitably affects what and how we do, and the resulting treatment process. In our first class, we will read a paper by Bonaminio that provides a clinical example focused on the personal factors of the analyst, which in the author's opinion may have both a therapeutic and anti-therapeutic effect. Bonaminio speaks of the "person of the analyst" and the way in which it influences the analyst's story of the patient, and the process of interpretation. In addition, he explores the ways people from various schools have thought of the influence of their unique analyst.

Bonaminio, V. (2008). The person of the analyst: interpreting, not interpreting, and Countertransference. *Psychoanalytic Q.*, 77:1105-1146. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will identify one way in which the analyst's character, manner of relating, and analytic technique affect the treatment process.

2. October 1: Listening

In this session, we will take a step back to admire the complexities involved in the clinical construction of analytic knowledge. Spezzano describes the gathering of evidence of patient's unconscious mental activity from three different sources: the patient's associations, the analyst's reverie, and the transference-countertransference enactments.

Spezzano, C. (2001). How is the analyst supposed to know? Gathering evidence for interpretations. *Contemp.Psychoanal.*, 37:551-570. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will identify three ways in which he or she gathers clinical data in attempts to understand the patient and to formulate interventions.

3. October 8: Teleanalysis

Though this paper was written before the COVID-19 pandemic, it offers a timely focus on the use of phone or video in analytic treatments. The author reviews material on distance treatments, then offers an extended clinical vignette. We are guessing that the members of our class may have our own examples to explore.

Ehrlich, L.T. (2019). Teleanalysis: Slippery Slope or Rich Opportunity? *JAPA*. 67(2):249-279. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will be able to list two positives and two negatives of teleanalysis.

4. October 15: Countertransference

Countertransference is a particular response of the analyst to a patient. Over the years, the concept of countertransference has been refined and broadened. Larry Brown, a BPSI faculty member, is a contemporary Kleinian/Bionian, who integrates clinical material and high theory. He focuses on the intersubjective unconscious: the co-created narrative springing from the minds of both therapist and patient. In this sweeping paper, he travels through the evolving schools of thought on countertransference, bringing us to a present day focus on Bion's theory of dreaming the analytic situation where, in his words, "countertransference may be likened to dreaming in that the analyst's experience of the patient performs the function of transforming (dreaming) frightening emotions unbearable for the analysand to manage (dream) on her own."

Brown, L. (2012). Countertransference: An Instrument of the Analysis in *Textbook of Psychoanalysis*. Gabbard, G., Litowitz, B., Williams, P., Eds., American Psychiatric Publishing. Washington D.C., pp. 85 - 90. [Available in the library: Check the reading folder or request from library@bpsi.org.]

We also offer a suggested paper by another local analyst, Howard Levine, who uses the term countertransference to refer to "the totality of the analyst's emotional reactions to the patient and the analysis," and contends that the countertransference, "is a fundamental, inevitable, and necessary component of the analytic relationship, one that can be conceived of as potentially helpful or potentially obstructive, according to how that experience becomes manifest and is dealt with by the analyst and analysand within the analytic process."

Levine, H.B. (1997). The Capacity for Countertransference. *Psychoanal. Inq.* 17:44-68. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will be able to define the various meanings of countertransference and to explain how the concept evolved since Freud's use of the term.

5. October 29: Resistance

Resistance has played a central role in psychoanalytic technique from the beginning. We will take a fresh look at the concept, from the perspective of the resistance as reflective of the patient's old and new experience; it is to be appreciated as an element within "the field" and as both intra- and intrapsychic

Civitaresse, G and Foresti, G, (2008). When our words disturb the psychoanalytic process: From resistance as a defense to resistance as an interactive process. *International Forum of Psychoanalysis*. 17: 82-90. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will be able to describe an instance of clinical resistance from a two-person psychology point of view.

6. November 5: Enactment

This week we will focus on enactments, keeping in mind the ethical as well as treatment implications of our technical choices. Margaret Black, a relational theorist, uses a lively clinical example to illustrate the internal work by the analyst while placing the idea of enactment squarely in the interpersonal realm.

Black, Margaret J. (2003). Enactment: Analytic Musings on Energy, Language and Personal Growth. *Psychoanalytic Dialogues*. 13 (5) 633-655. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will be able to analyze two indications that he or she is experiencing pressure towards and susceptibility to enactments, given that participant's particular character and ways of working in analysis.

7. November 12: Self-Disclosure

Our focus this penultimate week will be on the contentious issue of self-disclosure and its impact on the psychoanalytic process. In a paper that captures this tension in an extended clinical example, local analyst Kimberlyn Leary expands on the intertwined aspects of self-disclosure, otherness, and racial difference and racism while positing a psychoanalytic perspective on the meanings of race.

Leary, K. (1997). Race, Self-Disclosure, and "Forbidden Talk": Race and Ethnicity in Contemporary Clinical Practice. *Psychoanalytic Quarterly*. 66, 163-189. [PEP Web Link](#)

Learning Objective: At the conclusion of this session, the participant will describe at least one potential benefit and one hazard in the utilization of disclosures in clinical work.

8. November 19: Impasse

In our final class we will focus on logjams (or *crunches*, or *impasses*) in analyses. We will consider the analyst's contributions to the development and possible resolution of the difficulties. Ferro & Basile discuss gradients of the analyst's functioning, stressing, as do the two suggested papers we include, the importance of self-analysis, especially during periods of stasis and other difficulties in treatment.

Ferro, A. & Basile, R. (2004). The psychoanalyst as individual: self-analysis and gradients of functioning. *Psychoanal Q.*, 73:659-682. [PEP Web Link](#)

Suggested: O'Shaughnessy, E. (1992). Enclaves and Excursions. *Int. J. Psycho-Anal.*, 73:603-611. [PEP Web Link](#)

Suggested: Russell, Paul. (2006): The Theory of the Crunch. *Smith College Studies in Social Work*. 76:1-2. P. 9-21 [Available in the library: Check the reading folder or request from library@bpsl.org.]

Learning Objective: At the conclusion of this session, the participant will be able discuss the analyst's contribution to the development and resolution of impasses in analysis.