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WHAT IS EFFECTIVE IN PSYCHOANALYTIC PSYCHOTHERAPY? A HISTORICAL REPRISE

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Guest Editor

An apt endeavor for this 75th Anniversary of the *American Journal of Psychoanalysis* is to re-experience the thinking in 1956 (Van Bark, 1957) and again in 1964 (Boigon, 1965)² via representing two historic Roundtables, 10 years apart, by a group of psychoanalysts, addressing the related but not identical questions, what is effective, what leads to basic change in psychoanalytic psychotherapy? The Roundtable format is very different from a single article or even focused collection in that it expresses the entire Gestalt of the participants everyday clinical thinking in the context of their social matrix and the subject here draws to the slippery slope of the psychoanalytic project, that is, the concept of psychological health. Participating in our contemporary Roundtable discussion, more than half a century after the original, constitutes a trip through a time tunnel, bringing the sensibilities of today's context to an earlier historical era where implicit assumptions lurk in the background and the established authorities are articulating, in condensed form, their bedrock ideas that define the prevailing climate. Our first question should be: What is the experience of going back in time? Going back in time to the generation of our teachers, to world views that were generative but also fomented our rebellion, and may have inspired us to start our own quest, to try to go further and make judgments about our progress.

Then, much as today, psychoanalysis was characterized by competing points of view. The contributors to the original two Roundtables had varying degrees of fealty to Freudian orthodoxy, in fact many of them were graduates

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of the American Institute for Psychoanalysis (founded by Karen Horney and others in 1941 after her resignation from the NY Psychoanalytic Society), and several of the Roundtable presenters were founders of the American Academy of Psychoanalysis—that had arisen in reaction to the perceived inhospitality of the American Psychoanalytic Association—and were “open not only to intrapsychic but also to interpersonal, family, group, and cultural dynamics, as well as biological factors, all of which interacted to shape personality functioning” (Slipp, 1999, p. 503). What was breathing the air then like, compared with now, were differences in ideas reflected in differences in the culture of having differences? What was the tolerance for disagreement, what were differences in temperature and air quality? On the one hand, the 12 statements made by the original contributors seem to cover a broad and inclusive range but vehemence is in evidence in the background. Wolberg (1957, p. 8) addresses the zeal with which “the self appointed disciples of a transcendental wisdom who espouse their cherished theories ... as they denounced the contributions of other schools.” One of the virtues of time travel is that it has the potential for creating an emotional distance from the vehemence that characterized so many of the controversies. Do dogmas and heresies that fueled intense hostilities then seem of little importance, or are we locked into analogous battlegrounds, which on the Journal’s 150th anniversary will seem to be of little moment?

For me, the experience of reading the original two Roundtables was something like watching a vintage science fiction movie, at times dated and at others new, at times simple or naive, at others sophisticated, integrative and presciently inspirational. At times, I had the experience of reading a textbook with clichés while at others it seemed like being reminded of basics that are so ingrained and automatic that reading them explicitly stated becomes vital and energizing. Sometimes I could not be sure if the words were something I would understand and use today or had different meanings in the cultural context of the time. At moments I had the experience of seminal ideas that progressively unfolded and other moments of the time going around the same circle to return to the same place as if it had never moved. For example, we struggle just as the original contributors did, whether to integrate psychoanalysis as an objective science and technology, founded on generalizable and discoverable laws of human nature, versus psychoanalysis as defined by subjectivity and intuition, its basis in affects, the human relationship and an appreciation of singularity.

A feature of the original Roundtables worth mentioning is, precisely because it could be so easy to overlook so many years later, that all the contributors were physicians. Are there implications of contemporary psychoanalysis having largely passed out of medicine, for our definitions of our role and assumptions about authority? I think it is an important

consideration, less because when the Roundtables took place non-physicians had to fight to become analysts, although today the future of American psychoanalysis arguably depends on “lay” analysts, and more because it emphasizes the evolution of values embedded in medicine and culture that are components of the goals of psychoanalysis.

A half a century ago, perhaps also reflecting the optimism of an expanding economy and a Manichean world in which totalitarianism dueled with democracy, this group of analysts was expansive and ambitious in its aspirations. Interest in symptom alleviation was secondary to a vision of a basic, fundamental and perhaps idealized revision of the person’s inner structure. Anxiety, from the theoretical perspective of its interpersonal origin and role in human development, was a target to the extent that it inhibited growth. Some of these analysts put more emphasis on pulling weeds, others on growing flowers, their technical aspirations somewhere on the continuum of enhancing “constructive”³ and decreasing the “destructive” forces in the service of promoting richness of experience and the emergence of what not too much later would be more prominently described as the “true self.”⁴

I wonder if other readers would find some assertions as expected but others unanticipated. I was surprised by ideas, some of which I was in enthusiastic agreement with, which even though they had deep and controversial historical roots, had only recently become generally embraced. For example, I had always assumed “corrective emotional experience” was a battered concept only to find in these presentations a strong emphasis on it though not always in those exact words. Further, it was facilitated through qualities of the analyst, particularly warmth, friendliness, and the creation of a particular *atmosphere* (Kilpatrick, 1957). It seemed that the “real” relationship was privileged throughout as a particular source of effectiveness, even more so than an examination of interpersonal patterns or analysis of transference. I was also impressed that these contributions were cordial to countertransference as a source of knowledge and intuition about the patient. And I was surprised by the frequent, positive references to Ferenczi, who today is in vogue as “rediscovered” but apparently was very well known and important to this group of psychoanalysts. I also could not help noting that there were relatively few references to the importance of the frame, though I couldn’t be sure if this was because it was not important or because it was just taken for granted.

There is no end of questions our contemporary Roundtable can address. To begin, what do we regard as effective, to whom and for what, and in what layering of the necessary and sufficient? How have the ideas of what is effective held up or evolved over these years of added collective clinical and research experience? Have any of them proved counterproductive? To what extent have the new developments over time been pouring old wine into

new bottles and that have radically expanded the vision of basic change and effectiveness in achieving it? What critiques do we have, based on new sources of knowledge, two that come to mind immediately are infant observation and developmental and brain research. The third would be the broadening of cultural experiences and the introduction of multi-cultural competence and sensitivities.⁵ Has there been a change in the conception of the good life that has led to a corresponding change in the goals of therapy and how to achieve them? Would the original panelists integrate other dramatic cultural changes, not only changes in the family and work but also in technologies of communication, the Internet, big data, medical care, and economics? Are some contemporary ideas, such as the concept of multiple self-states and the constructivist stance, fundamental transformations? How does a widening range of therapeutic possibilities influence implicit assumptions about psychoanalytic therapy activity, the non-directive stance and a basic treatment model? At the very least, this trip back to the salient ideas of another era, heightened my awareness in the present, primed by time travel, I find myself interrogating myself about what I am doing in each clinical encounter, asking myself what am I trying to accomplish by what means and to what ends.

NOTES

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2. The archival articles of the two Roundtable Discussions are republished in this Special Issue, in the "From Our Archives" section.
3. Although introduced into Freudian metapsychology in the 1920s, constructive forces of healthy growth were meagerly explored initially. The notion of constructive forces was later elaborated in the works of Horney and other analysts of the Horneyan school (e.g., Horney, 1953; Boigon, 1966) in the *American Journal of Psychoanalysis* and other publications.
4. The Horneyan participants in the roundtable discussions called it the "real" self, a concept Horney introduced into her theory in 1950.
5. Our greater sensitivity to cultural experiences is in fact the result of the interpersonal school's emphasis on the role of the environment in development and pathology, and the ground-breaking expansion of the so-called 'culturalist' theoreticians (e.g., Horney, 1939).

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