Helmut Thomä, Horst Kächele Psychoanalytic Therapy Vol. 1: Principles

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### Helmut Thomä, Horst Kächele

# **Psychoanalytic Therapy**

## **Principles and Practice**

**Vol. 1: Principles** 

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## Foreword to the Second English Edition

So much has changed, and yet nothing has changed.

The world that gave birth to psychoanalysis did not have computers which could outperform humans in the speed and complexity of their thought. Freud's discoveries about the terrible destructive impulses encased within the human spirit were made before the uncontrollable proliferation of nuclear weapons and the potential of genetics-informed biological warfare made the destruction of millions of our conspecifics almost inevitable. The understanding of the pleasure principle and the challenge it represents to the delay of gratification was firmly embedded before the convenience of fossil-fuel-driven transportation genuinely threatened irreversible change to the climate of our planet and the flooding of land masses that currently house millions. Classical psychoanalysis established the ubiquity of bisexuality but could not anticipate the reality of gender change, the rejection of the binary distinction between males and females, and the embracing of LGBTQ philosophy.

What is the relevance of a psychology that knew next to nothing about the mechanisms that underpin brain function, a model of mind which was not informed by the mapping of the human genome, single nucleotide polymorphisms, and the process of methylation—their activation (or rather deactivation) as revealed by epigenetics? Or the development of brain networks as exposed by MRI, the connection between dopamine and serotonin signalling and behavioural variables captured by reinforcement learning models using slow (positron emission tomography) or indirect (functional MRI) neural activation measures and new recording methodology for

humans—optically pumped magnetometry (OPM)—which is being developed as a direct and wearable magnetoencephalographic method? Of what relevance is the talking cure to an internet-enabled world of communication, in which many messages are limited to 140 characters but reach millions of readers within minutes, in which the impact of events and ideas is assessed in tens or even hundreds of millions of views, where connecting with others defies the inherent limitations of the human body restricted to a physical location? I could go on, as could we all.

And yet, the complexity of the human psyche that psychoanalysts have aimed to understand, research, and moderate remains the central challenge of all our lives. Self-destructiveness runs across our species—what the authors of this wonderful book refer to as *leitmotif*. At an individual level we easily discern this.

We are troubled by issues that we know rationally should not bother us. Our relationships are rarely what we hope they could be. We do things that we know we should not, and fail to do other things that we know we should. Our limited adaptation to our world is clearest when projected on to the screen of social experience. Our societies are dominated by irrational fears, which generate hatred and drive actions that rightly terrify and nauseate most of us. Why do we elect governments that espouse racial division, deprive millions of adequate healthcare, introduce taxation that will widen the gap between rich and poor, and withdraw resources from supporting mothers and infants at those early stages when brain science tells us we can do the most to remediate adversity?

Knowing what we know about the human capacity for violence, why do we sell assault rifles to individuals with histories of mental health problems? Having economic data that supports the fact of wealth generation associated with immigration, why do we want to build walls and abolish free movement of people? Why can't we do more to resist the need for immediate gratification and take care of the natural world? Why are we so vulnerable to meaningless rhetoric offering easy solutions to complex problems?

Psychoanalysis is the discipline which concerns itself with aspects of the human condition that defy simplistic accounts. It delves into complexity and rejects simplistic explanation. It is based in the intensive and courageous study of phenomenology. Its distinguishing feature is its willingness to go to places from which other disciplines shy away for reasons of methodological limitation, a reluctance to pursue troubling subjects, or the prioritization of answers to immediate problems that require solutions. Because of the close coupling of research and theory where research is the literal search of the deepest recesses of the mind that phenomenology is able to reach—psychoanalysis has constructed a body of knowledge that speaks to what is most difficult to grasp, what is most painful.

I remember going to analysis as an adolescent with the firm commitment at the beginning of each session to talk about that which, consciously, I wished to discuss least. Rightly or wrongly, and counter to the instruction to associate freely, I was determined to share with another mind that which surrounded most shame, most conflict, most disappointment in myself and my relationships. As the analysis went on, and in my second analysis, I discovered that the route to these painful areas was sometimes indirect and that letting my mind wander would help me reach even more painful re-

alizations. But throughout, the need to stare at that which was least palatable was for me the essence of analytic experience if, by contrast, the valued and cherished parts of my inner world were to emerge in clear relief. And this remains so after 40 years of work as a clinician.

Why am I mentioning this in the foreword to this classic volume from Thomä and Kächele? Very rarely (in fact, in my experience only on a handful of occasions) have theoretical and clinical presentations of psychoanalysis extended the technical principle of confronting the shaming and the unpleasant along with the cherished and valued into a single presentation. I regard this book as unique in its purview of some of psychoanalysis's most cherished findings alongside its most troubling limitations.

Whereas most psychoanalytic texts focus on problems solved but very rarely on the gaps in knowledge and the limitations of understanding that still loom, Thomä and Kächele are able to tolerate a focus on the comfortable and the uncomfortable. The centrality of the concept of conflict is a defining feature of psychoanalysis, as Thomä and Kächele authoritatively argue. Perhaps even more authoritatively, in the practice of their writing, they are able to think about the messy reality of conflict within psychoanalytic discourse in a manner that has been notably absent in a discipline that is supposed to characterized by its capacity to absorb contradictions, lapses, and the unresolved.

There are many books that provide an introduction to psychoanalytic thinking. Such books tend to conveniently set out the various schools, movements, the key thinkers, and the key moments. Unfortunately, what is required in creating a vibrant, living "portrait" of this rich field of thought is not terribly congruent with convenience.

Thomä and Kächele apply an epistemol-

ogy that uses a detailed and comprehensive derivation of ideas. They do not present a cross-sectional snapshot of current psychoanalytic thinking; rather, their "portrait" is better understood as an organic sculpture whose tendrils reach across time, tracing how ideas have evolved and got to where they are today. Their reach is also across theory and practice.

Again, this is unusual: most psychoanalytic texts are conceptual, showing a profound schism between theory and practice. Thomä and Kächele's writing is deeply rooted in and informed by psychoanalytic practice, and how the practice of therapy reveals the theory. In their discussion of Freud at the very outset of the book, they describe the particular richness of psychoanalytic thought that emanates from Freud's conception of "an inseparable bond between cure and research." The practice, the work of psychoanalysis that lies in the recognition of another mind (that it is "impossible to treat a patient without learning something new") must be what drives and makes meaningful any theory. I suggest that the moments at which psychoanalysis has pitched towards its less humane, less tolerant, or less creative side have been the moments when this insight has been lost.

Of course, the recognition of a mind is something that can be achieved only by another mind: accordingly, Thomä and Kächele pay consistent attention to the subjectivity of the analyst. Analysis, in this account, is not a conceptual third-person deployment; rather, the authors reinstate the sense of responsibility, humility, and openness to learning from another mind that should follow on from an emphasis on the subjectivity and agency of the analyst. As they state: "It is therefore not a sign of exaggerated therapeutic ambition on our part when, in agreement with Freud, we affirm that the analyst's task is to structure

the therapeutic situation in such a way that the patient has the best possible conditions for solving his conflicts, recognizing their unconscious roots, and thus ridding himself of his symptoms." I can think of no better description of both the duties and the limitations ("the best possible conditions") of the analyst; it is one in which the agency of both analysand and analyst are recognized and put centre stage.

Thomä and Kächele describe one further element of the work of the analystone that is, for some, still controversial: an engagement with the empirical research that may shape both theory and practice. Perhaps what is most to be admired in this book is the binocularity of the authors: they have one close eye on detailed and forensic studies of theories, and the other looking at the middle distance of empirical studies and relevant investigations, particularly therapeutic outcomes. Accepting empirical findings about where and how a treatment can provide help, and where it may be of limited value, or even contra-indicated, is a demanding and at times humbling process from which psychoanalysis should not be uniquely protected. The book is ultimately about the clinical situation and what theory and research can bring to the understanding of the psychoanalytic process. Thomä and Kächele make a strong case in showing how the rigours of empiricism can benefit this process and protect it from both unthinking orthodoxy and wild vagaries.

I hope that I have revealed that this is one of my favourite psychoanalytic texts, the one to which I would turn for reference but also the one I would turn to because it is written with a clarity, simplicity, and eschewing of ambiguity that is sadly unusual in psychoanalytic writing. If there was a Noah's Ark for psychoanalysis to preserve the discipline from the flood of brief psychosocial and pharmacological intervention,

then Thomä and Kächele have created that refuge. Reading this text is indeed taking a voyage around the psychoanalytic century (and a little more). Its exemplary scholarship and tolerance of what is unknown (without recourse to an idealized unknowable) raise it significantly above the usual psychoanalytic educational fare. But it is its accessibility that accounts for the extraordinary popularity of the previous edition, and it is its democratic spirit and the eschewing of hierarchism that bedevils the profession that I admire most.

Those with the good fortune to have known Dr. Thomä and those who are privileged to be acquainted with Dr. Kächele will recognize that extraordinary personalities have created these volumes. Ultimately, it is their openness and approachability that shines through the pages—intelligence and even wisdom for sure, but also sincere curiosity, the relentless demand for truth, and a spirit of playfulness in its pursuit—which characterizes their phenomenal determination to present a fair but comprehensive account of psychoanalysis. There is a great deal that we can all learn about the subject from this text. There is even more we can admire in following the thinking of two clinical giants opening a window on their understanding of minds.

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#### Introduction

#### **Historical Background**

As German authors of a textbook on psychoanalysis, we believe that some comments on the dissolution of psychoanalysis in our country during the 1930s and its new beginning are appropriate.

Both as a method of treatment and as theory, psychoanalysis thrives off the fact that it directs the cognitive processes at the rediscovery of an object which assumes a new form the instant it is rediscovered, i.e., the instant it reaches consciousness through interpretive illumination.

In personal life history and in the therapeutic process, as well as in the psychosocial sciences in general, Heraclitus' dictum that you cannot step twice into the same river is of great significance: Object-finding is not only a rediscovery, but also a new discovery. The reader familiar with Freud's works will not miss the allusion to Freud's formulation that "the finding of an object is in fact a refinding of it" (1905d, p. 222).

Psychoanalysis has become part of our intellectual history and can thus be rediscovered, even though historical circumstances can lead, and in Germany did lead, to an interruption of this tradition. During the Third Reich, the works of Freud were inaccessible to most Germans, and the science he had founded was outlawed. Jewish psychoanalysts shared the fate of all Jews in Nazi Germany and the occupied territories of Europe. Freud, at his advanced age, was able to save himself and his immediate family by going into exile in England. His sisters, who could not accompany him, died in a concentration camp.

All generations of German psychoanalysts bear the burden of history in a way which goes beyond the general consequences of the holocaust as expressed by the President of the Federal Republic of Germany, R. von Weizsäcker (1985), in his speech marking the 40th anniversary of the end of World War II.

Although modern psychoanalysis is, of course, independent today of its founder, and as a science stands apart from any religious creed (not to speak of racist 'Weltanschauungen'), nevertheless an analyst is necessarily born into a Jewish genealogy and acquires his professional identity through identification with Freud's work. This situation produces numerous difficulties, reaching deep into the cultural unconscious of a nation, which German psychoanalysts have attempted to resolve in one way or another since 1945.

These problems become more comprehensible if we consider the ideas which Klauber presented in 1976 at a symposium on the identity of the psychoanalyst called by the Executive Council of the International Psychoanalytical Association (Joseph & Widlöcher 1983). Klauber (1981) convincingly demonstrated the lasting consequences which the identification with the intellectual father of psychoanalysis has had on his students and thus on the history of psychoanalysis.

Freud himself described the consequences of identificatory acceptance in *Mourning and Melancholia* (1917e) and in *Transience* (1916a). Klauber believes that psychoanalysts have not been able fully to accept Freud's death. The unconscious processes associated with this lead on the one hand to a restriction of our own thinking, and on the other hand to the inability to perceive how transient all scientific, philosophical, and religious ideas are, Freud's theories among them.

Klauber's interpretation provides an explanation for the fact that rigidity and revolt run parallel in the history of psychoanalysis, and also that the question of the psychoanalyst's identity has been the focus of interest for quite some time. The fact that the identity of the psychoanalyst was chosen as the theme for the IPA symposium itself shows that analysts feel they can no longer rely on their identification with Freud.

Not the least of the reasons why psychoanalysis undergoes changes is that original contributions by psychoanalysts themselves have demonstrated the transient nature of some of Freud's ideas. Klauber's fundamental reflections, which we have summarized here, make it clear why the psychoanalytic profession, more than any other, is concerned with its identity.

The concept of identity introduced by Erikson (1959), with its social psychological implications, sheds light on the insecurity of German psychoanalysts from 1933 to the present. Their dilemma, when thought through to its conclusion at the level of the unconscious, amounts to the fact that they seek to identify with the ideas of a man whose fellow Jews were murdered by Germans.

We shall return to the question of formulating some aspects of this conflict in specifically Eriksonian terms, but first, in order to be able to grasp other, comparatively superficial aspects of the problems German analysts experience with identification, it is necessary to take a short look at the dismantling of psychoanalytic institutions in Germany in the 1930s.

After the closure of the distinguished Berlin Psychoanalytic Institute and of the German Psychoanalytic Society, along with its study groups in the southwest, in Leipzig, and in Hamburg, the few remaining, non-Jewish psychoanalysts sought ways to maintain their professional existence. On the one hand, they turned to private prac-

tice; on the other, they retained a measure of independence within the German Institute for Psychological Research and Psychotherapy (Deutsches Institut für psychologische Forschung und Psychotherapie), founded in 1936, which was led by M. H. Göring (a cousin of Hermann Göring) and called, for short, the Göring Institute.

The training of young psychoanalysts continued there, although the Institute's goals exerted considerable pressure on them. The aim of bringing all schools of depth psychology (Freudians, Adlerians, Jungians) under one roof, namely an institute located in Berlin with branches in other cities (e.g., Munich, Stuttgart and, later, Vienna) was to promote "Aryan" psychotherapy (Deutsche Seelenheilkunde; Göring 1934) and create a standard psychotherapy. The testimony of Dräger (1971), Baumeyer (1971), Kemper (1973), Riemann (1973), Bräutigam (1984), and Scheunert (1984) as well as the study by Lockot (1985) illuminate various aspects of the influence of the historical circumstances on the working conditions at the Institute.

Cocks (1983, 1984), in his historical studies, reaches the conclusion that the gathering of the different schools at one institute had long-term consequences and side effects which, in his estimation, are on the whole positive.

Yet it cannot be pointed out too strongly that these completely unintended effects can in principle be judged as positive only if they are absolutely independent of the *ideologically* determined psychotherapy which was the official aim. Even though evil may be the father of good, doubts remain about the offspring; we may think, in the words of the prophets Jeremiah (31, 29) and Ezekiel (18, 2),<sup>1</sup> "The fathers have eaten sour grapes,

<sup>1</sup> It is important to say a word about the context of this quotation. The prophets refer to the new covenant between the Lord and the houses of Israel

# Psychoanalysis: The Current State

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#### 1.1 Our Position

In the course of this book we will refer to Freud's writings frequently and at length. We would therefore like to begin by outlining our understanding of his work and our general position within psychoanalysis. Extensive quotation from Freud serves several purposes. The most important is that, despite some outstanding efforts at systematization, it remains true today that "the best way of understanding psycho-analysis is still by tracing its origin and development" (Freud 1923a, p. 235). The assimilation of the classic texts is the prerequisite for understanding the present problems in psycho-analysis and finding modern solutions.

Our aim with this volume is to create a historically oriented systematic description of psychoanalysis. We seek the springs which have fed the psychoanalytic stream, employing quotations to demonstrate lines of development which have led to current views. The passages we cite therefore serve as a means to an end: we ground and defend our opinions in a process of discursive interaction with Freud's positions. The contradictions which appear in Freud's work and have been repeated in various forms over the decades bear witness to the openness of psychoanalysis: "it ... gropes its way forward by the help of experience, is always incomplete and always ready to correct or modify its theories" (Freud 1923a, p. 253). Its firm foundation is laid in the following three passages:

> In psychoanalysis there has existed from the very first an *inseparable bond between* cure and research. Knowledge brought therapeutic success. It was impossible to treat a patient without learning something new; it was impossible to gain fresh insight without perceiving its beneficent results. Our analytic procedure is the only one in

which this precious conjunction is assured. It is only by carrying on our analytic *pastoral work* that we can deepen our dawning *comprehension* of the human mind. This prospect of scientific gain has been the proudest and happiest feature of analytic work (1927a, p. 256, emphasis added).

Analyses which lead to a favourable conclusion in a short time are of value in ministering to the therapeutist's self-esteem and substantiate the medical importance of psycho-analysis; but they remain for the most part insignificant as regards the advancement of scientific knowledge. Nothing new is learnt from them. In fact they only succeed so quickly because everything that was necessary for their accomplishment was already known. Something new can only be gained from analyses that present special difficulties, and to the overcoming of these a great deal of time has to be devoted. Only in such cases do we succeed in descending into the deepest and most primitive strata of mental development and in gaining from there solutions for the problems of the later formations. And we feel afterwards that, strictly speaking, only an analysis which has penetrated so far deserves the name (1918b, p. 10, emphasis added).

I have told you that psycho-analysis began as a method of treatment; but I did not want to commend it to your interest as a method of treatment but on account of the *truths it contains*, on account of the information it gives us about what concerns human beings most of all—their own nature—and on account of the connections it discloses between the most different of their activities. As a method of treatment it is one among many, though, to be sure, *primus inter pares*. If it was without therapeutic value it would not have been

discovered, as it was, in connection with sick people and would not have gone on developing for more than thirty years (1933a, pp. 156–157, emphasis added).

As these passages show, Freud drew up the blueprint for a classical building, which will, however, never reach completion—and not merely because every analyst finds building material in each analysis, even if it has been used before, but as a matter of principle.

#### Therapy and Science

The three fundamental theses expressed in these passages contain the essential components of a causal understanding of therapy. Freud countenances no loosening of the inseparable bond. The analyst cannot be satisfied with therapeutic success alone. He wants to elucidate the genesis of psychic disorders and, above all, find out how they change in the course of therapy—or why they do not. The failures always represent the biggest challenges (Caspar & Kächele 2008). The assertion that there is an inseparable bond between cure and research requires that both the determinants of genesis and change and those of failure in therapy be made the object of scientific investigation. Granted that for Freud it was quite acceptable to content himself with the patient's assessment as well as the analyst's as to the beneficial effect of therapy, in the light of the structural crisis of psychoanalytic therapy we must now however call for this effect to be measured objectively.

In our opinion this is not just a question of a current trend that could be discounted with the catchword "evidence-based medicine" (Sackett et al. 1996), but rather a fundamental problem of the interconnection between theory and practice. In contrast with the popular restriction to an intersubjective extreme, which without any further

justification is often based on the narrative truth, the issue is the validity of claims about the psychoanalytical theory of the treatment. If this is not taken into account, then every analytical therapy could be said to be research in itself. Online-research—to use the term coined by Ulrich Moser (1991)—has to take up the problem of appropriate presentation (Thomä & Kächele 1992, Chap. 1).

Psychoanalysis has advanced beyond symptom-oriented suggestion therapy. Freud's (1933a) position was clear: making no attempt at explanation and no effort to draw general conclusions from the specific material gained would be equivalent to a relapse into mere pragmatism or "a boundless course of experimentation" (p. 153). He expressed the concern that "the therapy will ... destroy the science" (1927a, p. 254). Strict (impartial) rules of investigation and treatment produce the best scientific conditions for the reconstruction of the patient's earliest memories, and that uncovering the amnesia created the optimal conditions for therapy (1919e, p. 183).

We know today that realization of the inseparable bond demands more than the abandonment of crude suggestion and adherence to standardized rules of treatment. Even Freud insisted on the creation of the most favorable circumstances for change in each individual analytic situation, i.e., he recognized the need for patient-oriented flexibility (1910d, p. 145). This strained relationship between non-tendentious, scientific and therapeutic psychoanalysis has been there since the beginning. For nearly a century non-tendentiousness intimately associated with aimlessness has virtually been the litmus test, or the shibboleth, of orthodox thinking.

Freud uses the term "shibboleth" in other contexts (1914d, p. 55; 1923b, p. 13;

1933a, p. 189). We want to remind you of the original biblical meaning. Judges 12, verse 5, describes how 42,000 Ephramites were drowned in the River Jordan because owing to their local dialect they were not able to pronounce the word "shibboleth" correctly, saying "sibboleth" instead, and in so doing gave themselves away as enemies of the besiegers when they tried to leave the territory.

This attitude was debunked by Sandler and Dreher (1996) and shown to be a self-delusion. This did not only have a negative impact on the effectiveness of therapy. Psychoanalysts who do not yield to this self-delusion were regarded in the movement as mavericks and were not welcome in the IPA.

Only in the 1970s when the then Mr. Psychoanalysis, Heinz Kohut, established the Psychology of the Self, which was a radical reformulation, as an alternative school of thought in the middle of North-American psychoanalysis, did the already long existing theoretical and therapeutic pluralism find acceptance.

In 1985 at the IPA Congress in Montreal, Wallerstein opened the debate with his paper "One psychoanalysis or many?" (1988) and two years later in Rome expressed his belief in a "common ground" amidst much protest (Wallerstein 1990).

Since then a yearning for some form of consensus can be sensed everywhere. Rather than examining the conspicuous frictions and divergences by means of empirical investigations, instead a virtual consensus of harmony is inferred by citing Freud, the founder father.

The creation of a therapeutic situation is a prerequisite for gaining insight into unconscious psychic connections. Freud (1909b) underestimated the scientific value of demonstrating therapeutic change and

clarifying the curative factors. At one point he wrote:

a psycho-analysis is not an impartial scientific investigation, but a therapeutic measure. Its essence is not to prove anything, but merely to alter something (p. 104).

From the very beginning aetiologically oriented research and therapy oriented research have been inextricably linked. We hold the rather strong opinion that *this venture has failed*. Too many questions about the cause of disorders (aetiology) remain unanswered in therapeutic processes. This is not contradicted by the fact that clarifying the autobiographical background can have a beneficial therapeutic effect.

By taking the past into account, temporality is taken seriously without which there can be no concept of the present or the future. This connection deepens the understanding of the debate between Fonagy (1999a) and Blum (1999) about the role of memory recovery as a therapeutic factor. Fonagy's remark that "the recovery of memory is incidental to the process of psychic change" has not been sufficiently resolved in our opinion:

If this is right, then a significant revision of our implicit and explicit models of therapeutic action is called for. The removal of repression is no longer to be considered a key to therapeutic action. Psychic change is a function of a shift of emphasis between different mental models of object relationships. Change occurs in implicit memory leading to a change of the procedures the person uses in living with himself and with others (1999a, p. 217).

Since the congress in Marienbad in 1936 the research of therapy has been about the differentiation between the process and the

result and the relationship between the two (Bibring 1937). A large number of factors that do have an effect in the therapeutic process have been identified by researchers and have been integrated into a generic model which also incorporates elements which are crucial for psychoanalytic therapy (Orlinsky et al. 2004, p. 316). Evidence of changes which take place between the beginning and the end of a psychoanalytic treatment and their relationship to the perpetuating factors should be considered individually.

As already mentioned, Freud's priority was the proof of *causality*; however we have to criticize Freud for not adequately differentiating between *short-run and long-run causality*. By long-run causality we mean the principle which psychoanalysis is based upon and which sets it apart from the suggestive therapies.

The main concern of modern research into therapy is to show that how changes occur in the course of psychoanalytic treatment and to clarify the relationship between these changes and the theories adhered to by the analyst. Many problems have to be solved if this is to be achieved. For Freud the establishment of *causal* connections had priority; this is the principle on which classical psychoanalysis was founded and which assumedly distinguished it from other therapies.

Freud (1931d) discussed this principle in his commentary on the expert opinion prepared by the Innsbruck Faculty of Medicine in the Halsmann case. Philipp Halsmann was charged with the murder of his father, and the defense pleaded that he was not responsible, referring to the Oedipus complex as a mitigating factor. The issue to be clarified was thus the causal relationship between the Oedipus complex and the alleged patricide. Freud stated that

it is a far cry from [the Oedipus complex] to the causation of such a deed. Precisely

because it is *always present*, the Oedipus complex is not suited to provide a decision on the question of guilt (p. 252, emphasis added).

The place of patricide in this example could be taken by another action or a symptom. Moreover, there is only a minimal increase in the discriminatory (specific) power of explanation if the system of pathology based on such a unitary perspective is replaced by a two-class system (oedipal vs preoedipal). Freud illustrates his point with the following anecdote:

There was a burglary. A man who had a jemmy in his possession was found guilty of the crime. After the verdict had been given and he had been asked if he had anything to say, he begged to be sentenced for adultery at the same time—since he was carrying the tool for that on him as well (p. 252).

Such distant-causalities say no more than does the myth of man's fall from grace in theology. Just as with all claims that the world's ills can be cured by making changes in one or two areas, a strong fascination is exerted by the idea that psychic disturbances have a standard oedipal or preoedipal etiology and that there is a corresponding two-class therapy with a polarization between relationship and interpretation (Cremerius 1979a). This idea equates the deepest strata with the earliest and most powerful pathogenic factors, which appear to explain everything.

The factors which contribute to sustaining a disorder, what we call *short-run causality*, have not sufficiently been taken into consideration. The psychoanalytic meaning of the therapeutic relationship as a mutation from a long-run causality (subconscious conflicts based in the past) to a short-run causality of the here and now represents a

psychoanalytic operationalization. That is why many different schools of modern psychoanalysis are right in focussing on the here and now. Only in psychoanalysis is the link between the past and the present addressed so intensively. In comparison, the talk about socialisation in behavioural therapy is just paying lip-service.

Various schools violate the central idea of the classical approach, in the name of their respective standardizations, when they fail to produce or even to attempt to produce the necessary evidence, or alternatively regard it as already provided.

Psychoanalysis is constantly under construction if the attempt is made to translate the principles contained in the three passages we cite above into practice. Previously gained knowledge must continually be tested. The descent to the deepest, pathogenic strata must be justified by the solution of those present problems which in turn depend on deep-rooted pathogenic factors.

# The Relationship of Duration of Treatment and Success

It can be inferred from Freud's theses that analyses which remain on familiar territory proceed more rapidly than those which break new ground. The analyst's mastery of his craft the meaningful communication of his knowledge, ability, and experience must even lead to an acceleration of therapy. The self-esteem of both analyst and patient grows when success is forecast and achieved. Indeed, many short therapies whether in terms of duration or number of sessions achieve lasting change, and thus cannot be dismissed as mere symptomatic cures of transference cures. Analyses which lead to a favorable conclusion in a short time do not, however, count for much today, and are hardly calculated to raise the analyst's professional prestige.

Considering the positive results of short-term psychodynamic psychotherapies (up to approximately 50 sessions) as documented by Leichsenring et al. (2004), Leichsenring et al. (2014) and Steinert et al. (2017) in prestigious professional journals, this is very unsatisfactory. The tendency is rather to relate the quality of an analysis to its duration, although it is quite another matter whether the knowledge gained fulfills therapeutic and theoretical criteria.

#### **Purist Interpretation**

Freud's work can be cited in support of different approaches. It cannot be overlooked that Freud was led, in his therapeutic and scientific thinking, by the idea of one day being able to eliminate all other influences and arrive at pure interpretation. The utopian vision of pure interpretation pleaded for by Eissler (1958), in his dispute with Loewenstein (1958), would solve enormous practical and theoretical problems, and it is hard to resist its fascination. We would also gladly go along with it, if experience had not taught us better. In this context, Freud (1919a) asked whether it suffices to make the repressed material conscious and to uncover the resistances:

Are we to leave it to the patient to deal alone with the resistances we have pointed out to him? Can we give him no other help in this besides the stimulus he gets from the transference? (p. 162).

We could easily add to these questions but we feel that the need to do so is eliminated by Freud's own next question:

> Does it not seem natural that we should help him in another way as well, by putting him into the mental situation most favourable to the solution of the conflict which is our aim?