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the CANDIDATE

Perspectives from an Evolving Psychoanalytic Community

Beginnings

Volume I

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Welcome to *The Candidate* An Introduction from the Editor

Hilary Rubenstein Hatch, PhD

When I was a doctoral student, I mentioned to another student that I planned to write my dissertation on an aspect of clinical theory. He looked surprised and flatly asserted, “You cannot write a clinical theory paper until you have had at least 10 years of clinical experience.”

The Candidate arose from the belief that not only is it never too soon to write, but more specifically, that valuable contributions can be made from the candidate’s perspective.

Where does the idea come from that one should wait to engage in the written dialogue among psychoanalysts? Perhaps it springs from the same well as other rules that encourage waiting. Candidates should wait to begin a psychoanalytic case until they are prepared by a certain number of hours of personal analysis or classwork. Patients should wait to begin psychoanalysis until they have proven themselves analyzable in preparatory psychotherapy.

Yet, Freud did not wait. He put patients on the couch freely and wrote about ideas as he formulated them, revising and even reversing them as he went along. Why isn’t Freud’s method of learning a preferred model for the study of psychoanalysis?

I love reading Freud’s technique papers, not to learn technique but to observe his process of discovery and, consequently, to reconsider for myself the critical features of the psychoanalytic method. I had the privilege to study these papers with scholars who used them to encourage curiosity about the elements of the analytic method, not rote identification. In most institutes, candidates learn about the well-documented beginning of psychoanalysis, featuring the evolution of Freud’s psychoanalytic method and corresponding changes in his models of the mind. Despite this history of a beginning full of revision and reconsideration, aspects of analytic training may encourage a creation myth of psychoanalysis. Theory and method can be taught as if they need not be questioned, implying that the method and body of psychoanalytic ideas has been passed down through the generations intact and unchangeable, ordained by a deified version of Freud.

This myth is not helpful to the beginning candidate in psychoanalytic training. Nor is it helpful when Freud is debunked in favor of another theorist, as occurs at some institutes. The history of the founders of psychoanalysis can provide an important model for learning during training. Candidates discover that the most important contributors in the field were profoundly human and sometimes deeply troubled. Some were quite destructive in their personal relationships, at odds with one another over theoretical matters, and limited in their dealings with patients. Nevertheless, they could be creative, courageous, admirable in their struggle to alleviate their patients’ suffering, and generous in helping colleagues develop their clinical work. In gaining familiarity with the history of psychoanalysis, candidates can identify with avid explorers of the human mind rather than identifying with rigid followers of Freud or any other school. They can imagine themselves as contributors to a dynamic, evolving body of literature.

It is common for candidates to participate in idealization of psychoanalytic training and psychoanalytic knowledge. In an effort to reduce their anxiety, candidates may long to idealize their teachers, their analysts, and their supervisors as all-knowing, possessing an elusive sense of expertise and certainty. At the same time, they may experience themselves as knowing nothing. In fact, the practice of psychoanalysis and the training of clinicians are full of uncertainty. Psychoanalytic education has been rife with controversy and has evolved. In the journal section titled "Reflections," we invited Roy Schafer to be the first of many senior analysts to discuss his experiences in psychoanalytic training and his thoughts about the dilemmas of psychoanalytic education today.

Inevitably, in an optimal training experience, candidates learn through experience, not simply through idealization and identification. One rediscovers – in one's self and in one's patients – the many psychic phenomena that Freud did: transference and countertransference, the oedipal situation and object relations. One can read Klein, Winnicott and Kohut and still one must discover projective identification, transitional space and self-objects in the clinical situation. These phenomena cannot be understood with conviction except through experience. Such a rich learning process is likely to be painful as well, replete with disturbing experiences in the course of one's own analysis and in work with patients. Virginia Youngren's paper, "Godzilla Meets the Incredible Hulk," recounts this kind of disconcerting experience, as she and her patient struggled to come to terms with what her recommendation of psychoanalysis meant to each of them. Her contribution exemplifies how writing can be one crucial, active part of the learning process.

The corollary to a candidate's tendency toward idealization may be the faculty member's wish to have more control over the candidate's development than is possible or desirable. I once heard two training analysts at my institute reminisce about the days when training analysts reported on their analysands to the progression committee. One commented, "We were able to see when a training analysis wasn't going well and we could intervene and help the candidate get into a better treatment." Although shocked by their nostalgia for what I thought of as a clearly destructive practice, I could not help but be moved by these training analysts' profound wish to nurture each candidate. In this issue of *The Candidate*, five senior analysts who have served as training analysts and institute directors (Lewis Aron, Steven Ellman, Philip Herschenfeld, Robert Michels, and Shelley Orgel) and one senior candidate, Hillery Bosworth, respond to a paper by Leslie Cummins and Peter Sass, "Are There Inherent Impediments to the Therapeutic Outcome of a Training Analysis?" In these contributions, one senses both the intense concern candidates have about their training analyses, and the intense responsibility and concern of these faculty analysts as they propose ways to improve upon the model of training analysis, and especially to move away from the destructive practices of the past. This paper and series of responses encouraged dialogue across generations, institutes and theoretical perspectives.

Origins and Development of *The Candidate*

The idea for *The Candidate* came from a reading and writing seminar at the NYU Psychoanalytic Institute (NYUPI), NYU Medical Center, in which our teachers asked us to imagine ourselves as editors of a journal devoted to topics of special relevance to candidates. We realized that there were papers we would like to see written that did not appear elsewhere in

the field, and we decided to turn the journal into a reality. Support and enthusiasm for *The Candidate* came readily from the institute faculty and administration, particularly from the four faculty advisors. One of our primary goals has been to enrich candidate training by representing the diversity of theoretical perspectives in the field, and we reached out to experienced editors from a wide range of journals for assistance. Each one, without hesitation, agreed to serve on the advisory board of *The Candidate*.

When we publicly announced the creation of *The Candidate* and circulated our Call for Papers, we were curious as to who would write and what they might say. Immediately, it became clear that candidates are not the only people with something to say about psychoanalytic education. Many graduates and senior analysts wanted to write about experiences, both from their own training and as faculty members. Interest in *The Candidate* quickly expanded beyond NYUPI, to the American Psychoanalytic Association (APsaA), to Division 39 of the American Psychological Association, and to local, national and international candidates and graduate analysts.

The existence of our new journal became further known to a large group of candidates and faculty through our editorial board's collaboration with the Affiliate Council of APsaA to develop a panel on "The Development of an Analytic Identity: The Impact of Early Formative Experiences and Theoretical Models in Training." For this panel, and in our Call for Papers for the first issue of *The Candidate*, titled "Beginnings," authors were asked to consider the rites of passage that characterize the early phases of analytic training. We wondered how these initial experiences affect the candidate's development into a psychoanalyst and ultimately affect the resulting psychoanalytic community. We proposed that the beginning of training could be open and welcoming or frightening and mysterious. We questioned whether the psychoanalytic community had adequately addressed some long-standing rituals to determine if they had strong educational underpinnings or were relics of the past requiring further examination. In this issue, you will read papers originally presented at this panel in which three candidates explored the formative contacts in psychoanalytic training: the admissions interview (Elizabeth Groisser), the process of referral to a training analyst (K. Chapman Attwell), and the supervisory relationships (Christopher Bonovitz). Two of the discussions from the original panel are included (Judy Kantrowitz and Elizabeth Fritsch), as well as invited responses to the panel by 10 candidates from around the country who attended the session.

Although the three original papers portray many powerful positive experiences early in psychoanalytic training, which set the stage for a productive educational climate, one finds that the discussions and responses often focus on the negative experiences. More broadly, *The Candidate* stimulated more discussion of destructive or controversial practices in training institutes than discussion of positive practices. From current candidates, graduates and senior analysts, we have heard of grave injuries that occurred in the name of psychoanalytic education. Phoebe Cirio's paper, "To Transform an Identity," proposes that an analyzability seminar, a common practice in psychoanalytic institutes, can be used as a hazing ritual to enforce conformity in candidates. Terri Rieth's paper, "On Switching Analysts," addresses one of the common, although increasingly controversial practices in psychoanalytic training institutes, that of forcing candidates to switch to a training analyst in order to begin psychoanalytic training.

Why is this so? The history of psychoanalytic education can certainly be perceived as destructive to creativity and independent thinking even though many creative psychoanalysts have written in each generation. The most negative aspects of that history often weigh heavily in the minds of many when they sit down to write, especially those who, like candidate writers, still need the approval of authority figures to progress in the field. As Editor-in-Chief, with the responsibility of reviewing all papers and editorial comments, I watched firsthand as writers struggled during the editorial process to deal with their anxieties about who would read their papers and their fantasies about how publishing their ideas could affect them professionally.

Criticism of psychoanalytic training and the high level of interest in *The Candidate* are compelling evidence of how deeply psychoanalysts care about psychoanalytic training. Psychoanalysis is important enough to many of us that it warrants the incredibly long and tedious journey of being in analysis and in psychoanalytic training for so many years. This is concretized in Terri Rieth's paper (cited above): she switched analysts to start training and drives 110 miles every day to her analysis in Atlanta, Georgia. In admittedly more subtle ways, many of us have gone to great lengths for our own pursuit of psychoanalytic treatment for ourselves and our patients.

In my opinion, there has never been a better time to be a candidate. There is a wider spectrum of places to train and more options for training analysis. There is more dialogue between theoretical positions. It is easier than ever (even if it is still complicated) to change analysts or supervisors when things are not going well. The very existence of *The Candidate* indicates this may be the most open era of psychoanalysis to date since Freud. *The Candidate* stands on the shoulders of the many voices that preceded ours, those devoted to writing about psychoanalytic education in an effort to improve the field they love.

Acknowledgments

Rachel L. Blakeman, JD, LCSW

As Managing Editor, I have both the pleasure and the challenge of adequately thanking those individuals without whom *The Candidate* would not exist.

In many ways, the journal publication process feels similar to the stages of an analysis. The transformation of patient to analysand first requires the analyst's conviction about a treatment that the patient – due to his or her lack of experience – cannot share. Likewise, the enthusiastic faculty at NYU Psychoanalytic Institute (NYUPI), NYU Medical Center envisioned what we, as candidates early in our training, could not yet conceive. In a writing course, two faculty members prompted us to imagine a candidates' journal, and subsequently, encouraged us to translate that representation into a reality. We proceeded because of their confidence in our abilities and their belief in the importance of a candidates' journal – a conviction we eventually shared and co-constructed into what is now our mission statement. Four faculty advisors patiently taught without instructing, provided guidance without excessive direction, and accomplished the impossible – simultaneously being visible and invisible. Most importantly, they encouraged us, in our evolution from candidates to journal members, to build upon and transform their general vision into our creation. Throughout this endeavor, we grappled with resistances, including group-shared doubts about successfully completing the first issue, and each individual member's particular insecurities about writing, editing, mentoring, learning, and most of all, starting new – becoming visible within the psychoanalytic community while early in training.

We begin by expressing our gratitude, first and foremost, to the faculty, staff and candidates of NYUPI, NYU Medical Center for their tremendous support. We thank all of the authors and candidate journal members whose hard work is reflected in this first issue. Through *The Candidate*, we shared invaluable experiences, established close relationships with colleagues across the country, learned from one another and developed a sense of ourselves as important members of the psychoanalytic community.

Four faculty members at NYUPI, NYU Medical Center, Donald Moss, MD, Stephen Reisner, PhD, Joseph Reppen, PhD, and Arden Rothstein, PhD, were instrumental in our success. With their support, we created the first of many issues dedicated to candidacy. And now, like the termination of a successful analysis, all involved are proud of our enormous accomplishment.

From the outset, Dr. Moss's enthusiasm was a driving force behind the journal. In his writing class, he fostered our curiosity about the underlying conflicts that impede candidate writing, thereby inhibiting us from participating alongside "the published." With humor, he likened the "non-writers" to window shoppers who are, for whatever reasons, afraid to buy. As we publish our first issue, we thank Dr. Moss for transforming us from window shoppers into shopaholics. Dr. Moss's invaluable contributions included legitimizing the journal in its early stages by presenting the history of its creation, alongside candidates Tanya Weisman, MD, and Leslie Cummins, LCSW, at a forum during the American Psychoanalytic Association's (APsaA) spring 2004 meeting. In addition, Dr. Moss guided us through the process of working with an

author to prepare a paper for publication. The positive feedback received from authors is a testament to Dr. Moss's vision of the review process as a collaborative learning experience between author and editor.

Dr. Reisner served as a mentor, shared his experience in writing and online publishing, and never hesitated to put us in touch with contacts from all corners of the psychoanalytic world. Additionally, he provided extensive comments to the authors of the response papers from the APsaA panel. Dr. Reisner inspired us with his intellectual rigor, often challenging us with more complex ways of thinking. He added an invaluable historical and philosophical perspective to our conceptualization of *The Candidate*, and in doing so, had a great impact on our overall mission, as well as the topic of this first issue.

We were similarly fortunate to benefit from Dr. Reppen's experience as editor of *Psychoanalytic Psychology*. He provided forums for us to consult with many experienced editors, assisted us in procedural issues, generated crucial ideas at journal meetings, and, overall, supplied us with a wealth of information about the world of publishing. In addition, through example, he demonstrated the process of preparing an article for publication, concretized what felt elusive, and thereby instilled in us the confidence to work with other candidates to encourage them to continue through what can be a rigorous process of preparing a paper for publication.

An entire issue would not afford the space required to describe the crucial role Dr. Rothstein served in the publication of our first issue. One of the initial visionaries of the journal, she offered a limitless supply of encouragement and generosity. She worked closely with the author of *The Impact of the Admissions and Training Analysis Referral Processes Upon the Beginning Candidate's Anxiety: What I Wish I Knew When I Started Training But Took Years to Figure Out*, and (in conjunction with Dennis Haseley, LCSW, another NYUPI faculty member) with the authors of *Are There Inherent Impediments to the Outcome of the Training Analysis?*, to prepare their papers, first for their respective panel presentations and later for publication in this issue. Dr. Rothstein advised journal members about procedural issues, quelled fears, managed resistances and sat back and let us take the reins. She flexibly changed roles based on our needs, serving as editor, advisor, mentor, colleague, institute liaison and friend. For this and many other reasons, we are eternally grateful.

We thank the Advisory Board Members for their prompt support and facilitation of submissions from candidate writers at their respective institutes: Jody M. Davies, PhD, Muriel Dimen, PhD, Steven J. Ellman, PhD, Glen O. Gabbard, MD, Steven T. Levy, MD, Owen Renik, MD, Henry F. Smith, MD, and Donnel B. Stern, PhD. We are grateful to our committed faculty readers, Samuel Abrams, MD, Theodore Jacobs, MD, Dennis Haseley, LCSW, Shelley Orgel, MD and Jennifer Stuart, PhD, all prolific writers who afforded each author the opportunity to learn from their skills and experiences through a close one-to-one mentoring relationship.

Samuel Herschkowitz, MD, director of NYUPI, provided significant encouragement. He not only impressed upon us the value of what we were doing, but also provided institute funding for all aspects of this endeavor. He, along with all members of NYUPI's Executive Committee and faculty, consistently reinforced that there were no limits to what we could accomplish, and that despite candidate anxieties (many of them detailed by authors in this issue), there was no

institutional impediment to our creativity and its expression.

The institute's immediate and wide-reaching support included that of our Administrative Director, Deborah Huntington, whose multifaceted contributions included – but were not limited to – imparting invaluable information about publishing that she gained from many years of experience, and her artistic design of the marketing materials we disseminated.

We are grateful to those who provided us with a forum to present our ideas. First, we thank Stephen Bernstein, MD, who, when the journal was barely beyond its imagined stage, allowed us to present at his writing workshop at APsaA's June 2004 meeting in Seattle. We thank Beverly Betz, MSW, and Julio Calderon, MD, program chair and president, respectively, of the Affiliates Council of APsaA, who demonstrated the importance of valuing the work of colleagues by providing us with the forum to present the panel on which we base this first issue. In addition, we appreciate the more than 100 attendees of that panel whose enraptured attention convinced us there was an audience of candidates and senior analysts alike for our journal.

Without the commitments of Robin Deutsch, president of the North American region of the International Psychoanalytical Studies Organization, who ensured our message reached the international community, and [the officers of](#) Division 39 of the American Psychological Association, who invited us to present *The Candidate* at their board meeting and helped disseminate information about our endeavors, among many others, we would not have the multidisciplinary, geographically diverse audience that we now enjoy.

Finally, we are indebted to Marilyn Herleth for her exquisite attention to detail, ensuring our grammatical correctness and improving each and every paper published with her exceptional copyediting skills.

Godzilla Meets The Incredible Hulk: Wrestling with "Resistance" in Analytic Training

Virginia Youngren, PhD

In this paper, the author looks at the interplay between herself as a candidate initiating an analytic training case, her patient and the issues that he brought to treatment, the character, transferences and blind spots that they both brought to their interactions, and the context of the work as analytic training, which played a significant part in shaping the interaction.

And so I came to see that the spot we were in stemmed not merely from her resistance to the awareness of the transference...but also from my resistance to engage that transference. We had both been saying 'No' to each other, frustrating each other, and now someone lay dead under the sheet, the outcome of that battle and the aggression that lay behind it.

-- Henry F. Smith, 1997

When a colleague described me and my patient, Mr. H., as a “good analytic match,” I was reminded of how often clinicians rely on the concept of match; in fact, “good match” seems to be mentioned comfortably by analysts of virtually all schools of thought. Judy Kantowitz has studied match extensively (1986, 1992a,b, 1993a,b,c, 1995, 1996, 1997a,b), bolstering her discussion with empirical outcome research that supports the importance of “match” as a crucial factor (and perhaps *the* crucial factor) in analytic treatment outcomes.

While “match” in the psychoanalytic literature commonly denotes “fit,” the word “match” is provocative because it can also mean “match” as in an interplay, contest or challenge – in soccer, chess or tennis, for example – a dynamic “matching up” to compete. “Match” is implied in Smith's description of the “spot” that he was in with his patient, as quoted above. We might say “You have met your match” to someone who seems to have found an equal opponent in an implied struggle. The very same word can mean “mate” on the one hand and “rival” on the other. For the clinician making a referral based on intuition that the “match” will be a good one, the implication is that the analyst and patient will be able to partner well, as both collaborators and opponents, in ways that promote the mutual work.

When I first described my clinical work with Mr. H. to a group of fellow candidates in a seminar, another colleague alluded to my patient's “resistance” to the analytic arrangements. On the face of it, the term made sense: Mr. H. clearly was “resisting” in the sense of holding back approval and expressing reluctance to be involved in the arrangements for analysis that we were discussing. In this use of the word, “resistance” was being defined in line with the analyst's expectations of what would be required from the patient to do analytic work.

Yet I was bothered by this concept and the way it was being applied. It is generally recognized nowadays that communications in analysis are not unidirectional (Renik 1993), and that we cannot talk about a theoretical concept like “resistance” as if it were a free-standing entity (Slap and Levine 1978) or a unidirectional process flowing from the patient (Boston Change Process Study Group 2002). I also was bothered by the privileged point of view that a concept like “resistance” could foster in the work. In *Learning from Our Mistakes: Beyond Dogma in Psychoanalysis and Psychotherapy* (2002), Casement points out the self-protective

logic that analysts can use to rationalize their reactions and clinical decisions and privilege their point of view. *Projection, displacement, avoidance, transference, resistance* – these and many other terms seem indispensable in allowing us to talk together about our work, but also are potentially solipsistic and self-serving.

The Institutional Context

“Resistance” also seemed inadequate to describe my patient's reaction to the analytic arrangements because the term skirts around the realistic situation that we were in together. In a customary therapeutic contract, we, as therapists, do not ask our patients – consciously, at least – to take care of us or do us favors. But consider what we ask when we seek to make a patient an analytic control case. In exchange for analysis, usually at a reduced fee, we ask patients to trust us with their most intimate emotional and mental lives while we go about the work of being trained. We talk about them to supervisors and in seminars; we even present their life histories and reactions in papers like this one. Intrinsically, the training situation underscores an interaction in which “I, the analyst, need something from you, the patient” can have a distorting influence on the conduct of the analysis. It is hard to “evenly hover” when one’s urgent motivations are at play.

The relatively sparse literature on the distorting influence of the training situation on analytic process points to some of these difficulties (Ehrlich 2003). The candidate's desire to graduate from analytic training may bias assessments of potential control patients, and shape both clinical technique and ways of talking about the work with colleagues (Cabaniss and Roose 1997). On the candidate's agenda is the need to “prove to the necessary committee” that a potential patient is “analyzable” (Halpert 1981). For the patient, a low fee can promote guilt, unrealistic entitlement, contempt or other “iatrogenic” reactions that remain relatively unexamined because they are intrinsic to the treatment itself (Mayer 1972). The candidate needs the patient to stay in treatment long enough for the case to meet graduation criteria (Cooper 1985). Jaffe (2001) describes the many parties in the consulting room during a control analysis (and in this, we can read potentially conflicting interests): the patient and the candidate, the candidate's training analyst and supervisor, the trainee's institute and its spoken and unspoken expectations, and the trainee's own fantasies about those expectations. Epstein (1990), observing the conflicting pressures on an analyst in training, imagined the trainee issuing a “full disclosure” to his potential control patient:

I wish to do well by you as I do by any other patient...But this is a special situation. I wish to further my career through undertaking and completing your analysis...I may have to experience a conflict between your needs and my own...I hope that you are suitable for analysis so that I can accomplish all this... (p. 959)

Epstein might have added: Don't be surprised if I seem stressed and preoccupied on this account.

In the discussion that follows, I look at the reactions of my patient to the arrangements for being a control case, my reactions to the patient's reactions, and both of our sets of reactions to each other's reactions and to our fantasies about what we were encountering between each other and in the arrangements. Beginning with the concept of “match” as implying “good fit,” I

focus on some moments of differentiation that became, I believe, the moments of learning. I see "match" as going well beyond "good fit" towards "dynamic interaction," which, by definition, implies difference and even conflict. The day-to-day work can, and does here, feel like a power struggle, though the ultimate outcome of this conflict does not have to be winning on one side and losing on the other. Both parties can serve as a well-matched partner to the other, so that both participants in the "match" are enhanced by the engagement (Stern et al. 1998).

In this discussion of patient-candidate match and the effect of the "institutional third," I make no mention of supervision or of my training analysis. I think of them as facilitating partners, making the work possible. To the degree that supervision involves judgment and evaluation, I would assign supervision to the "institutional third," although I actually experienced supervision as helpful rather than judgmental.

Mr. H. was referred by a colleague, who described him, after an initial evaluation, as "chronically disappointed." The patient showed me his disappointment in action when he introduced himself to me in the waiting room: first he rose energetically from the chair and strode with seeming confidence into my office. But then, as he crossed the threshold, he visibly slumped over and moved awkwardly and slowly towards the seat facing me. His movements seemed to communicate that his hopes, like his energy, were fragile and ready to be deflated.

Mr. H. told me that he had always felt outsized, ungainly and awkward – "always breaking things." He illustrated his description of himself by recalling his first day in kindergarten, in a large, noisy room full of kids, where he stood by himself, feeling gawky, awkward and alone. The group noticed him only because he stepped back and inadvertently crushed a papier-mâché building that had been carefully constructed and left to dry in the corner. With repeated experiences of "breaking things," Mr. H. had come to perceive himself as a destructive person. In the course of our work, I learned that he customarily compensated for this perceived destructive quality by withdrawing into a passive, hopeless state. "Don't risk it" was one of his operating principles.

Mr. H. had a jaundiced view of the ways of the world. People in authority invariably turned out to be charlatans, and everywhere you looked, someone was getting away with some outrage or another. The standards for successful combat were impossible to meet; the best you could hope for was to minimize the damage, although this way of seeing the world brought little comfort and was paired with open self-criticism and frequent despair. It was a given that Mr. H. would soldier on – doggedly, unrecognized, unappreciated.

In many important respects, Mr. H. and I were a "good match," in the sense of match as "close resemblance." At the time we met, we both had families and careers, and we had many interests in common, particularly literature, politics and the Internet. We shared important core values; we both embraced honesty, self-reliance, independence, and liberal idealism. We each had become acquainted with disappointment early in life and had adopted, to one degree or another, cantankerous pessimism as a defense against anticipated disappointment. Politics offered us a rich supply of current examples, and Mr. H. often began a session with some piece of world news that left us both shaking our heads.

In our work together, Mr. H. often focused on his outrage with his boss, who he described as a soulless bureaucrat. I found myself taking a particular interest in his problems with his boss, as they resonated with problems that were then current for me, and I suspect, thinking of the interactive process between us, that my interest, in turn, stimulated his interest. Mr. H. complained repeatedly about his boss's capricious attention to details, the performance standards that his boss enforced but never clarified, and his boss's heavy-handed criticism that seemed to come "out of the blue."

My version of these issues centered on the experience of being judged in the course of analytic training, particularly by the "faceless bureaucrats" on the Students' Committee. In my view, criteria for advancement in training seemed capricious and unclear: evaluation of analytic work by the committee took place without the candidate being present; questions or concerns about one's work were then reported only indirectly. These procedural issues, a contemporary variant of long-standing personal issues that I partially recognized, were dramatically resolved for me by the act of graduation. But at the time of this work with Mr. H., the institutional issues were very much alive and made me quite receptive to complaints from Mr. H. about his boss. I, too, was ready to take a stand against bosses and bureaucrats.

When Mr. H. compared himself to the Incredible Hulk, causing destruction with his awkwardness, my associations took me back to the creatures who were popular in the monster movies of the '50s – Godzilla and Rodan, or Mr. Johnson with the X-ray Eyes – who unwittingly became destructive against their will (in those days, it was usually because a nuclear accident or some Cold War equivalent had caused a freak development). Growing up in the early Cold War, my neighborhood friends and I had become very attached to these movies. With these films and other life circumstances, the identification with a well-intentioned monster who became toxic because of his toxic environment was, for me, a strong internal fixture. At the time of my work with Mr. H., I could picture myself as a "fellow monster." Here I was, feeling awkward trying to learn this arcane enterprise, analysis, while practicing some inferior sort of cognitive-behavioral therapy at my hospital day job, while my institute colleagues were "real analysts" working with patients who had more "capacity for analysis." Not only was I in the ungainly role of trainee, but I had an agenda for my work with Mr. H.: for me to graduate, Mr. H. needed to see me four times a week for at least two years, participate in what the Students' Committee would recognize as an analytic process, and even entertain the notion of lying down on my analytic couch. Like Mr. H. on his first day at kindergarten, I knew what it was like to feel gawky, awkward, inept and inferior on the one hand, and aggressively needy on the other.

But in one notable respect, Mr. H. and I were quite different. If "activity in the face of adversity" could be depicted on a continuum, Mr. H. and I approached each other from opposite poles. When confronted by one of the world's many setbacks, Mr. H. frequently became incensed ("I should have known...") and catastrophizing ("This is the worst example yet."), only to then freeze and become immobilized in his pessimism. It was as if Mr. H., having glimpsed what he perceived as his own aggressiveness, retreated to the safety of passivity, even though it was disappointing and left him feeling hopeless. Whereas I, with my own temperament and inclinations shaped by my own experience, found virtually no consolation in the passive role. Pessimism galvanized me into action, as if, were I to hurry fast enough, I could outrun the seemingly hopeless situation. Far from becoming inert or passive, I tended to act and to be in a

rush in doing so. I certainly was in a rush to finish analytic training: I wanted to get in and get out. The stage was thus set for our encounter.

Wanting to Have the Last Word

One day in a session early in our work, which was then a biweekly psychotherapy, Mr. H. began, "I'm completely unwashed today."

"How does that happen?" I asked.

"The heat in the building went off during the night, and you know how extremely cold it was last night. This meant that the pipes froze in both the bathroom and the kitchen because, of course, they're both located on outside walls with no insulation; the landlord does not want to spend any money upgrading or fixing up the building, naturally. And the plumber was scheduled to come early this morning, but, of course, he didn't come when he was supposed to. And the superintendent couldn't say when he was going to get him back. There was a trickle of cold water in the tub, and that was all."

"So how did you manage?"

"I didn't. I gave up."

"You sound as if you had no say in the matter."

"Once you sign the lease, they've got you where they want you."

Mr. H often seemed pleased when I acknowledged his plight, but he seemed even more pleased when he could take in my acknowledgement and then go on to have the last word. Sometimes I would try to make room for other possibilities besides his invariably negative "last word." For example, I once interrupted a predictable complaint about his boss with the question: "Any chance that your boss might be receptive, since you've done all that research?" For Mr. H., this kind of question came as a softball lobbed over the plate, to be easily batted out of the park. "Research is a very low priority for my boss. He likes results and is not interested in how you get them."

With repetition, this kind of exchange began to leave me feeling hopeless and helpless because there didn't seem to be any room for me to contribute anything to what Mr. H. already "knew" with conviction.

As our work continued in this vein, I could see that if I raised the possibility of another way of thinking or a different attitude, even in what I thought was a neutral way, Mr. H.'s negative worldview would always have the upper hand. I sometimes heard myself as a lawyer, looking for loopholes in his case, but there were none; his case was consistently airtight.

I had contradictory reactions to our interactions at this stage. On the one hand, I felt rebuffed and blocked in trying to approach Mr. H. But on the other hand, I also appreciated what

I thought of as his “game effort” to demonstrate independence, even though it seemed more like counter-dependence than independence to me. He acknowledged that he felt isolated from me, which he attributed to something about him and his personality. I silently agreed, given that I was trying to reach him and feeling shut out in the process. In terms of the implicit relational process between us, I was looking for “give and take” and finding instead something more like “fear of getting taken.”

This process eventually shifted when one day Mr. H. mentioned a website that he enjoyed called “Mr. Cranky.” As a well-matched aficionado of the Internet, I immediately recognized Mr. Cranky as the curmudgeonly host of a movie review website, which features an ongoing discussion of movies under the title, “Was It Really That Bad?,” and who consistently is jaundiced and skeptical, particularly about best-selling movies with outrageously paid stars. Mr. H. seemed quite pleased, both that I had seen the website and that I was sharing this information with him; he subsequently referred to this as a connection between us that he appreciated. I, in turn, warmed to the persona of “Mr. Cranky,” which felt to me like a point of common emotional ground for the two of us.

“So,” Mr. H. began one day, with a word that was more of a sigh, “I heard on Friday that I won the office pool. Well, it’s a bummer. It should be called a booby prize. You know, I told you it was supposedly valued at \$2500. It turns out to be a weekend in New York.”

“Hmm,” I said (my “hmm” serving as a verbal partner to his “so”). “You won a prize worth \$2500, and you are already disappointed with it.”

“Well, I can’t just cash it in and take the money, which is what I would want. I don’t want to go to New York, that’s more of a business trip than pleasure. And the prize doesn’t cover all the expenses if you figure meals.”

“Well,” I said, “it sounds like you should fly down, go on a \$2300 shopping spree, and then fly home.”

“Oh,” he sighed, assuming a posture that I had begun to recognize as hopeless and helpless.

“Or just go online,” I added, “order \$2500 worth of merchandise and save on the travel.”

As I reflect back on this exchange between us, I see a combination of explicit and implicit ways in which I was “matching” and challenging him. I knew that I was being a provocateur with Mr. H.; I wanted to get his attention and disrupt the flow of predictable, hopeless disappointment that seemed to block his access to all new information in our work. There was an element of struggle and challenge between recommendation of action (from me) and statement that action is impossible (from him). In terms of the implicit relationship between us, I was picking up on his way of speaking and was joining with him without being conscious of doing so. It was as if I caught onto his rhythm and picked it up for myself to use in return. I occasionally succeeded in surprising Mr. H., catching him off guard, shaking his seemingly unshakable pessimism, and even making him laugh before he moved on to the next lugubrious setback.

His Longing and My Longing

After about four months, I was concerned that our engagement might be in danger of becoming a static ritual, with the two of us in a pattern of “Can you top this?” and me trying, mostly unsuccessfully, to trump his hopeless position with my endorsements of activity. Yet one day Mr. H. said, “I could maybe come more often, if you have the time.” This meek, ostensibly casual request surprised and disarmed me. What was I missing? It seemed I was missing hopes and yearning concealed under Mr. H.’s blanket of manifest disappointment. I had been concluding that he was hopeless and frustrated because I had been feeling hopeless and frustrated, when all along there was something else going on that I had not recognized. Clearly, under the apparent manifest “match” of two “Mr. Cranky’s,” there was a more complex interaction between us.

As we increased the frequency of our meetings to three times a week, I saw more of the complexity of Mr. H. Relaxing his defense of manifest gloom and preemptive disappointment, he revealed more of his mordant and dry wit, playfulness, more of his passionate idealism, his determination and tenacity – and most of all, his yearning for contact and understanding that he had kept hidden and protected from view. I learned for the first time that he had once dreamed of being a television star. “If you can imagine that,” he said. Increasing the frequency of our meetings seemed to give him the room he needed to allow more of his personality, including even dreams and wishes, to come into play.

On my end, I felt that the work with Mr. H. was deepening, and though I was not clear about what this would mean or where it might go, his therapy intersected with my analytic training and my need for control cases. I felt an urgency to make the therapy with Mr. H. into an officially sanctioned analytic training case. It is common these days for candidates to draw control cases from within their own therapy practices. Analysis could make sense for him, given the entrenched nature of his disappointment, and given that he seemed to welcome increased frequency and intensity of meetings. I wanted to do analytic work, and I received a green light from my institute. It remained to broach the subject with Mr. H.

An “Untimely” Proposal

As I prepared to bring up the possibility of analysis to Mr. H., he was in the midst of telling me about a “truly terrible” promotion that he was facing at work. It was enough that he was already putting in overtime; now he had to take on even more responsibilities, and you could bet that the raise that came with them would not even come close to really compensating him. And therapy was just one more burden. “This is impossible,” he said, “I can’t do this. I should just go jump in the lake.”

I quickly stepped in: “What you just said about the slow-going process of figuring all of this out and wanting to jump in the lake makes me wonder if it would make sense to have this treatment become a formal psychoanalysis. You mentioned some time ago knowing that I am in a training program. That program puts me in a position to be able to offer psychoanalysis to you.”

“Actually,” said Mr. H., “one of my old roommates ended up doing analysis, and he said he got a lot out of it.”

Once again I was surprised. Given my experience with Mr. H., I had expected to be rebuffed. Mr. H., on the other hand, seemed relaxed and had a pleased expression on his face, as if he welcomed my invitation. Warming to the subject in response, I described for Mr. H. my understanding of how he could become an analytic control. “There’s an application process involving a nominal fee,” I told him, “and once the application is complete and the process begins, we would be meeting four times a week instead of three. Generally people in analysis use the couch, and, of course, our work is supervised by a senior person.” As I spoke, the slang term *No biggie* flashed through my mind, as if I were implicitly saying to Mr. H., “This is no big deal,” in response to his (also implicit) anticipated objections.

But Mr. H. had his own reaction. “Whoa! Wait just a minute! I know my friend benefited. But he also told me it was four times a week for two years – and that is impossible. I’ll lose my job! And an application – what am I applying for, who knows about it, who reads it? And you say there is supervision! Who are the supervisors anyway and what are they doing?” Mr. H. then described his fantasy of a supervisor as a judgmental and inaccessible bureaucrat, peering over my shoulder and listening critically to what he heard about Mr. H. from me.

I immediately pictured the supervisor, although the one I pictured was criticizing *me*, not Mr. H. Joining forces with my internal critic, I wondered if I were being aggressive and trying to hurry Mr. H. and minimize the inherent difficulties – all because of my longing to be an analyst. Surely Mr. H.’s fears were exaggerated – why would he have to lose his job? Yet I had been precipitous in jumping right into the details. His reservations were not so different from the reservations I had about a committee, seated around a table and peering critically at my work. “I can see why you would feel that way,” I told him, “though from their point of view, of course, they want things to be done right.” Even as I spoke, I realized that the institute had become a “they” and Mr. H. and I were a “we” – rebels together against a bureaucracy of harshly judgmental bureaucrats, seeking to enforce their standards.

In response, Mr. H. described a project at work for which his boss was demanding that he produce a report on an impossibly tight deadline.

Pondering Mr. H.’s reluctance, I became increasingly aware of feeling guilt about possibly “hustling” Mr. H. into analysis. To need a patient to perform for you and to aggressively pursue the need – that is not a therapeutic stance. Yet my experience of the training requirements seemed to pull me in that direction. Of course, Mr. H. would be getting treatment at a reduced fee, and as a colleague of mine pointed out, reduced-fee analysis at our institute is an excellent service at a bargain. Nonetheless, I was conflicted about the arrangements and my own reaction to them; and yet my overriding uneasiness – that if I didn’t hurry, I could “lose” Mr. H. as an analytic control – made it hard for me to sit with the discomfort and uncertainty, and to hear and work with his reservations. I kept anticipating my own loss and disappointment and wanting to make a preemptive, diversionary strike to head them off. At the same time, I also shared Mr. H.’s reluctance to give up privacy and to be judged in an unknown process by critical authorities. The result of this bind was that, for me, “analytic attitude” – understanding and

exploring his reaction with him – competed with my need to manage my own internal conflict. I kept thinking that if Mr. H. would just agree, we could get on with the analysis and solve the problem; I was not recognizing that this discussion of the terms of analysis *was* the analysis.

At our next meeting, Mr. H. came into the office and dropped a coat and several heavily loaded bags on the couch. His implicit, procedural, nonverbal “announcement” about analysis seemed clear and emphatic; he was “dumping” on the idea [Alexandra Harrison, MD, personal communication]. I tried to size it up from his point of view. My couch is what some furniture stores call a “Ladies’ Fainting Couch,” and it has a flowered fabric cover. Maybe it wasn’t a “real” analytic couch? Maybe it was too “feminine”? The Institute expected me to have my controls use the couch, and although, of course, reluctance to use the couch is like everything else – grist for the analytic mill – I could hear the Students’ Committee murmuring in the background that I wasn’t ready to be an analyst and my patient was not “analyzable.” How, I wondered, could I get Mr. H. to cooperate? I was not aware of it at the time, but here I was equating “analyzable” with “cooperative” – an equation that I also unconsciously applied to myself as a “cooperative” analytic trainee. To Mr. H. I opted to say, “It’s important to be comfortable.” I was treading softly, in deference to Mr. H.’s vulnerabilities; but I also was applying the brakes of reaction formation to my own urge to say, “Hurry up and get on the couch and get me graduated!” I did not then have enough experience to know what proportion of his uneasiness belonged to him, to me, and to the situation of almost any analysis at its self-conscious beginning. Nor did I know how to fully engage him on the question while keeping my needs in the background and his in the foreground where they belonged.

When I finally said to him, “It’s important to be comfortable,” I felt like I was equivocating and buying time – I was not sure what to do with his reaction or my own. I knew I was afraid of losing him as an analytic patient; perhaps I was also afraid of hearing his objections, and afraid of overtaking him with my own ambition and analytic zeal. I was also thinking in a “product” rather than a “process” way – as if this conversation about the couch was just a practical preamble to analytic work rather than an intrinsic part of the analysis.

As the session proceeded, Mr. H. complained about being “hounded” by his boss. “I need to work at my own pace,” he finally said, “and I’m more effective when I can do that. But no, I have to produce and perform, and, of course, that comes before anything else! But I can’t afford to lose my job, whatever else happens.”

As I listened, it dawned on me that he probably was talking about our relationship and perceiving me as the one “hounding” him. In fact, Mr. H.’s words were a useful caution not to become too invested in a particular outcome. But what had I actually done? I had raised the idea of psychoanalysis and had shown him that I was interested and even enthusiastic about the idea of working with him. Was this really such an aggressive act? I knew I had a tendency to be self-critical. Was I not overreacting myself to the fear of wanting something and being aggressive to get it? Whatever I might be bringing to the table, this reaction of his belonged to him and needed to be recognized and understood as such; therefore, I renewed my focus on his experience of my invitation for analysis.

New Learning and Midcourse Correction

Mr. H. was occupied with a presentation at a national meeting. “I dread this presentation,” he said, “because I’m stuck with all these bits and pieces of information that I’m supposed to weave together. Other people would be able to do it; not me.”

Once again, I was brought up short. Mr. H. was talking about his presentation, yet it felt to me that he was referring to the analysis in displacement. Should I ask him? What if I challenged him and he took me up on the challenge, and we got into a big argument? Or what if I hurt his feelings or alienated him, and he left treatment? So I kept my conjectures to myself, saying only, “They want *you* to make it work.”

“I can’t tell whether the bits and pieces are really incomprehensible and stupid or whether I just don’t feel like working that hard to make sense of them.”

“And are you being too hard on yourself in the meantime?”

“I should be writing more and surfing the net less.”

“I wonder if you’re dreading the exposure in front of all those people.”

“Everyone assumes that I know what I’m talking about. My boss quickly passed this assignment off to me, even though he hasn’t kept me in the loop; there’s a lot he hasn’t told me. I get pressured to present, even though I don’t know the material well. Then I get grilled on what I don’t know.”

“You’re put on the spot; you’re supposed to perform.”

“But what if that is just my bad mood talking?”

“Mr. Cranky,” I added.

But Mr. H. wasn’t laughing. “I am so stuck. I could just jump in the lake, but I don’t even want to do that.”

“You used to feel that the lake was where you belonged.”

“Now not even,” said Mr. H. And he began to cry.

“You sound sad and scared,” I said to him.

“I wish I could disappear. This is where people figure out that I can’t do what I say I can, that I’m an impostor.”

I would like to be able to say that I knew with confidence how Mr. H. and I sorted ourselves out in this interchange. I was conscious of wanting to put myself in his shoes, but what

if I were putting him in my shoes instead? The emotional tone had changed, and that seemed like a change for the better: Mr. H. sounded plaintive, wistful and was confiding his own sadness, and I felt more directly attuned to him. It also seemed as though our perspectives had shifted. Mr. H. seemed introspective rather than defensive, and I was aware of a feeling that we were more closely aligned with each other than before. But how much could I trust my own judgment?

Taking Stock

I worked with Mr. H. three times a week sitting up, until his company transferred him to another part of the country, and he moved. The work at the time we stopped felt interrupted rather than complete, and when he left, he still seemed ornery and cantankerous. But he also expressed other feelings as well, including regret at our interruption. Almost a year after our last meeting, I got an email from him, and he told me that he had been promoted; he was now the “boss” of his local branch office, and he said he enjoyed being in charge. I like to think of him as being in charge.

When I reviewed my interactions with Mr. H. about the procedures involved in his becoming an analytic control patient, I noticed that the interactions repeated a certain pattern. I would state an institute procedure or requirement, Mr. H. would raise an objection, and then I would make some statement aimed at a practical solution to reassure him about the objection that he had just raised. For example, after Mr. H. described his fear of the supervisor watching over my shoulder, I went on to describe for him the usefulness of supervision as a resource to the treatment. When he complained about the couch, I tried to reassure him that I was interested in his comfort. In effect, it seemed that, for reasons of anxiety and need for resolution, I was skipping over the analytic step of asking him about his reactions in favor of trying to fix the problems. If we were to diagram this pattern, it would be A-C instead of A-B-C. The “B” that is missing here is the analytic work! I think that I unconsciously dreaded knowing about Mr. H.’s reaction – as if, were I to understand it with him, it would automatically result in loss of the analysis. That assumption also is countertransference, of course. I was trying to fix my problem in the act of fixing his: “Let’s get beyond this business of being evaluated by unseen committees and unknown supervisors. Let’s prove together that we have the capacity for analysis. Let’s reverse the negative by having a positive enactment in which we master this trauma together.” We had been operating, I could see, in what many analysts would recognize as a mutual blind spot. As I imagined “analyzing” his hopelessness at our first meetings, there was no way to predict what was going to catch and hold our attention together, and create our engagement. It was only in the experience of working with him that I came to feel that his “fortress of gloom” was not impregnable but that I needed to storm the fortress to get his attention. I think my activity and persistence there helped to convince him that I really did want to make contact, so that he could eventually lower the drawbridge and allow me to approach.

It enlarged my perspective eventually to realize that the immediate parameters of the candidate’s needs in the training situation are not that far removed from every practitioner’s needs at every step along the way: to be chosen as an analyst, to have a basic agreement with the patient about the work at hand. For all its iatrogenic difficulties, the training situation, like any other treatment medium, offers a backdrop against which to see individual differences and so to

conduct treatment. A colleague, hearing my fretful worries about my short, flower-covered couch, commented to me, “Not every patient has a problem with his mother.” In fact, any context, including the training situation, means different things to different patients. For Mr. H. (and for me), it brought out fears of being judged and found wanting, and what turned out to be a form of performance anxiety and avoidance on Mr. H.’s part, which was, in fact, a “resistance” to going along with a process that he feared and mistrusted. For another patient of mine, it meant that, finally, someone was taking her problems seriously and was trying to respond in a serious way. Ultimately, and particularly in comparison with other control cases, I could see that Mr. H.’s reluctance to engage in the process in fact belonged to him and was integral to what brought him into treatment in the first place.

It seems as though the role of psychoanalyst requires that the analyst find the patient and try to meet him on common ground, in order to build an alliance. I know that was my manifest intention when I tried to make contact with Mr. H. during the early stages of our work. Mr. H. actually did warm to my effort to get to know him, and he let me know this finally when he asked if we could meet more often. But, of course, I am struck by the notion that just at the time when I thought I “knew” Mr. H., I was missing something crucial about him, and thus did not really “know” him after all. My process in that early stage of the work was limited by an effort to engage him by “matching wits” with him.

My way of needing to push past depression to get to activity may have been partially helpful to Mr. H. in the sense that it led me to persist in pushing past his manifest depression and his persistent way of closing out another person, and it offered him a relationship in which someone was paying close attention to him beyond just accepting the depression as the bulk of who he was at the time. There was some advantage of complementary “fit” in having an active person with whom he could engage. But, at the same time, I failed to register his yearning; I was so focused on the kind of activity that matched my temperament that I missed the passive longings that matched his. It is obviously possible, in the ongoing work, to have one piece of common ground next to another piece of difference, and to miss the one for the other. This is implied in the notion of a blind spot – where, because of similarities between analyst and patient, the analyst assumes that understanding exists and misses an important difference. Learning about the difference between us, that Mr. H.’s longings tended to be passive and mine not, was immensely valuable to me because otherwise I might have written him off as “depressed” and missed most of what he kept so carefully and protectively hidden about himself.

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Address correspondence to:

Virginia Youngren, PhD

1105 Massachusetts Avenue, Suite I-C

Cambridge, MA 02138

youngren@viriniayoungren.net

Virginia Youngren has PhD's in both English literature and Counseling Psychology. She is in private practice as an analyst and psychotherapist in Cambridge, MA, and is an Attending Psychologist at Beth Israel Deaconess Medical Center in Brookline, MA. She graduated from the Boston Psychoanalytic Society and Institute, where she is editor of the newsletter, Focus.

On Switching Analysts

Terri L. Rieth, PhD

One of the main requirements when beginning psychoanalytic training is that the candidate be in psychoanalysis with a training analyst (TA). This means that some candidates will need to switch from their current analyst to a TA. In this paper, the author provides a review of the literature, explores her personal experience of switching analysts, and concludes with a summary comparing the two analytic situations, including some of the advantages and disadvantages she experienced when switching analysts.

Introduction

The guidelines of the American Psychoanalytic Association regarding the requirement of a training analysis are specified in the *Principles and Standards for Education in Psychoanalysis*, as delineated by the Board on Professional Standards. These guidelines state that “The candidate must be in analysis with a Training Analyst...” (Board on Professional Standards 2005, p. 11), and that “Training Analysts are analysts certified by the Board on Professional Standards, with a demonstrated commitment to education, with extensive clinical experience and skill, with a high level of personal and professional ethicality, and whose work has been subjected to extensive peer review (p. 24).” The training analysis aspect of psychoanalytic education clearly represents one of the key elements in a candidate’s ongoing development.

This change of analysts was, perhaps, the biggest issue I faced when considering analytic training. I was already in analysis with someone who was not a training analyst (TA); if I wanted to pursue analytic training before completing my first analysis, I would, indeed, need to switch analysts.

A review of the literature about changing analysts, and training analysis in general, is provided below, followed by an account of my personal experience of changing analysts.

Literature Review

While the training analysis is currently considered to be a cornerstone of the tripartite model of psychoanalytic training, this requirement has been the source of many controversies and debates over the years. For example, it has been argued that the training analysis should be voluntary rather than mandatory (Lipton 1988), that the training analysis is valuable but should not create a monolithic position for TAs within institutes (Auchincloss and Michels 2003), that training analysts should use a reporting format that reveals progress without being too specific (Calef and Weinshel 1973), that TAs should use a non-reporting format (McLaughlin 1973), and that TAs should follow a strictly therapeutic format and not be used at all in the service of a training institute (Brazil 1975).

The nature of a training analysis introduces conflicts not just for candidates, but for TAs as well. For example, the TA may feel conflicted about his loyalty to the institute and his loyalty to the candidate who is his analysand (Brazil 1975), or the TA may feel that the candidate’s analysis should be a “supertherapy,” possibly even becoming interminable (Thomä 1993, p. 28).

The demands of a training analysis also may involve conflicts for institutes, such as

determining the requirements and expectations in the selection of TAs (Weinshel 1982). Currently, institutes are faced with difficulties in acknowledging that there is more than one way to practice psychoanalysis while avoiding an “anything goes” approach to training candidates (Tuckett 2005).

Sachs (1992) suggests the idea of a “good enough” training analysis, which would include a transfer of convictions about the profession of psychoanalysis and the art of how to analyze, along with the more traditional view of ensuring that certain types of issues, such as oedipal or pre-oedipal conflicts, are sufficiently resolved.

Although dilemmas regarding the training analysis portion of psychoanalytic education, including confidentiality, institute guidelines, and assessments of success, have been debated, discussed and summarized at length by various authors (Thomä 1993; Wallerstein 1978, 1985; Schecter 1979; Fleming and Weiss 1978), the specific problem of *switching analysts*, from a non-TA to a TA as part of psychoanalytic education, has not been explored in detail in the literature.

Several articles have considered the topic of second analyses and changing analysts in general. The findings of these articles may be relevant to switching analysts for the purposes of psychoanalytic training. These articles indicate that switching analysts for any reason is typically met with resistance and a wide range of intense reactions.

For example, Galatzer-Levy reported on the second analysis after the death of the first analyst, rather than with a planned termination. When switching analysts following the death of the analyst, analysands often experienced feelings of anger, denial, and grief, and expected the new analyst to behave like the previous analyst (Galatzer-Levy 2004). On the other hand, Galatzer-Levy also discovered that, in some cases, the termination and resulting switch felt like a liberation. Patients who appeared “stuck in interminable analyses...whose idealizing transferences had led them to continue unrewarding analytic processes for decades, felt a liberation that could be fully owned and worked through only after mourning the loss of the idealized analyst and addressing the anxiety associated with recognizing these feelings” (p. 1014).

Likewise, Lord et al. (1978) found that after changing analysts, some analysands struggled while others felt tremendous relief. Even when faced with an extreme situation, such as a terminal illness in the analyst, Lord et al. found tremendous resistance by analysands to changing analysts. Most analysands in their study did not seek or accept a referral to a new analyst when their analyst became ill. Of the 27 analysands in the Lord et al. study, reactions to the forced termination ranged from complicated prolonged mourning to normal mourning to minimal or absence of mourning. Sixteen of the analysands felt “rage at abandonment and at the betrayal of trust. They felt bitter about the breaking of a contract and deprived by the shattering of hoped-for benefits” (p. 194). In contrast, four of the analysands felt a sense of relief for one of the following reasons: “(a) relief from the impact of an analyst whose illness pervades or distorts the analytic situation; (b) relief from an impossible analytic situation, in which the analyst is perceived as incompetent; [or] (c) relief from an unresolved negative transference or from intractable resistance” (p. 194).

Simon (1989) also wrote about the second analysis after the first analyst's death. Specifically, he found that the splitting of the transference (first analyst good, second analyst bad, or the reverse) is an issue to be dealt with in any second analysis, not just in situations involving a death. Changing analysts as part of candidate training might presumably involve similar types of splitting.

In 1999, the Columbia Center for Psychoanalytic Training & Research reported results from a study about supervision, which involved questions about switching supervisors. The results showed tremendous resistance to switching, mainly on the part of the supervisees (candidates). The research committee discovered that "while many supervisees had considered switching supervisors, very few had, for fear of 'rocking the boat' and not receiving credit for their case. Several candidates even reported that their training analysts had advised them not to switch and to 'not make waves'" (Olds 1999, p. 288). It is worth noting that while 75% of supervisees in the study felt that switching supervisors was frowned upon, 75% of supervisors felt that it was not frowned upon by the center (p. 288). Apparently, the idea of switching supervisors was viewed much more favorably by the supervising analysts than the supervisee candidates. These findings may be relevant for psychoanalytic candidates. Candidates switching analysts will not likely fear institutional criticism of the switch; however, they may fear rocking the boat with the non-TA by initiating the switch. They may anticipate the non-TA's disapproval or anticipate the loss of the analyst.

In his research, Waldhorn (1968) found that second analyses are sometimes more successful than first analyses for three reasons: 1) the analyst's technical and theoretical limitations, 2) an unwillingness by the analysand to recognize the limitations of analysis as a therapy, and 3) developments in the life situation, including personal maturation and relationships with others. Waldhorn also is careful to acknowledge that a second analysis may be necessary, not because the first analysis was inadequate, but because of subsequent changes in the analysand's life situations, such as the arising of new conflicts.

Wagner (1963) wrote of second analyses like second marriages. He suggested that analysands may enter the second analysis with hope for a different outcome, only to be plagued by similar problems and patterns. The change in analysts may offer the opportunity for the analysand to more deeply appreciate what s/he brings to the relationship. The second analyst should be aware that he will inevitably be compared with the first analyst in this process. Interestingly, Wagner's research found that analysands typically expressed a form of amnesia, in which they appeared not to remember details of the first analysis, as if nothing happened, even if the analysis was quite long before reaching the termination phase.

Glick (1987) differentiated between types of termination as forced or unforced, and planned or unplanned, but emphasized that termination for any reason is a choice. He wrote that "all terminations demand facing the limitations of an effective therapy, the acceptance by both patient and therapist that it is not possible to understand everything, to analyze and resolve all conflicts, to fully tame instincts, to completely eradicate neuroses, to repair all damages, to right all wrongs, and to fulfill all hopes and promises" (p. 450). Any termination will involve difficult complex processes. However, according to Glick, if the choice to terminate is not natural (such

as choosing to end an analysis in order to pursue life goals like candidate training with a different analyst), the processes and contradictory feelings involved will most likely be intensified.

In *Analysis Terminable and Interminable*, Freud (1937) pondered the question of whether or not there is ever a natural end to an analysis or if termination is always unresolved in some way. He seemed to conclude that it was, in fact, possible for an analysis to end naturally, and that this was the most desirable outcome. He wrote that an analysis could be considered complete or having reached an end if the patient was “no longer suffering from his symptoms and shall have overcome his anxieties and inhibitions; ...that so much repressed material has been made conscious, so much that was unintelligible has been explained, and so much internal resistance conquered that there is no need to fear a repetition of the pathological processes concerned... [or] if no further change could be expected to take place if the analysis continued” (p. 219). He preferred to call analyses that did not meet these goals and ended prematurely – due to circumstances resulting in a premature termination – incomplete rather than unfinished. An incomplete analysis implies that there is still more analytic work to do with the analyst, and that further progress could be made for the analysand within the analytic framework. An unfinished analysis, however, implies that one’s analytic work could somehow reach a point where it is finished once and for all if allowed to continue with the analyst. Freud did not seem to think that analysis is ever finished in terms of conflicts disappearing once and for all. A complete analysis would mean that one continues along with self-analysis, but has completed the work to be done within the analytic framework with the analyst.

Regarding the practicing psychoanalyst, however, Freud, in the same paper, clearly emphasized the importance of ongoing treatment, and recommended more than one formal analysis of one’s own. “Every analyst should periodically – at intervals of five years or so – submit himself to analysis once more, without feeling ashamed of taking this step. This would mean, then, that not only the therapeutic analysis of patients but his own analysis would change from a terminable into an interminable task” (1937, p. 249). Freud did not specify whether he felt this analysis should be with the same analyst or if one should switch to a different analyst every five years (neither did he indicate if he considered self-analysis to be a formidable substitute).

Personal Experience

Considering the preceding review of the literature, the decision to change analysts may result in either positive or negative outcomes for the analysand, but will most likely be met with intense contradictory reactions. What follows is an historical account of my own experience of switching analysts as part of candidate training.

The Decision to Apply for Training

I was in a personal analysis for approximately two years, and psychotherapy for nearly five years, prior to psychoanalysis with an analyst (a non-TA) in my hometown. Because of geographical logistics, family considerations, and the fact that I do not live in a city that has a training institute or a TA, I considered applying to an institute that was within driving distance of my home. The closest training institute and the closest TA were still a two-hour commute in

each direction (110 miles each way). Trying to accommodate candidate training while maintaining a job and a family would be difficult, but I felt that I really wanted to pursue analytic training despite the potential difficulties. Having a young child in the school system, friends, clients, and an existing social network, I decided not to move to a new city, and opted for commuting instead (should I be accepted as a candidate). I decided to apply.

Acceptance

Upon learning of my acceptance to the institute, my great excitement was quickly followed by panic about the impending switching of analysts. The opportunity to train as a psychoanalyst was something I had thought about many times throughout my adult career. Now with acceptance to the institute, this career path might have a chance to become a reality. I also think I was looking forward to working with an analyst other than the one I had been with for so many years. I think I sensed the possibility that I may have achieved as much insight as I could with my current analyst, though this realization may not have been entirely conscious at the time.

My next reaction to the impending switch was quite negative. I began to have many negative transference feelings and reactions towards the institute regarding my upcoming training (Jaffe 2001). In retrospect, it appears that I was viewing myself as one of Freud's (1916) exceptions and denying the aspect of choice in my decision to terminate (Glick 1987) and switch analysts. However, the idea to apply for analytic training now, rather than wait three more years for the next class, also affected my decision. Even though the termination would be somewhat abrupt, it was mutually agreed upon by my first analyst and me. My non-TA seemed supportive of my decision to pursue analytic training and, therefore, to switch analysts.

My reactions to the impending change seemed to follow Elisabeth K_bler-Ross's (1997) ideas on death and dying. I went into denial for a while, then proceeded along the bargaining path of trying to go around the guidelines of the American. I argued my case for staying with my first analyst, but I knew that the training analysis needed to begin as soon as possible. It was important to allow time between termination with my first analyst and commencement of the new training analysis. The reality of termination began to surface.

Termination of the Personal Analysis

Once the termination date was set, my first analyst and I talked mostly about the conflicts involved with my transition to the new analytic situation, including my search to find a TA and my upcoming training as a candidate. Due to the time constraints around beginning coursework and the requirement for being in a training analysis, we had about three months for the termination phase. We discussed what was possible to analyze during that time, such as my concerns about leaving, my desire to change and my dread of the change at the same time, and my worries about preferring the new analyst or preferring my original analyst. In the end, there seemed to be many issues that had not been resolved.

I recall wanting to avoid the reality of termination and requesting a phase-out approach, reducing the number of sessions per week to three, then two, then one. My first analyst strongly recommended against approaching termination this way; it was more appropriate to simply end

rather than taper off. I fantasized that I could secretly still meet with my first analyst while simultaneously participating in my new training analysis. Another fantasy was that I could send letters to my first analyst, periodically communicating updates about what was going on in the new analysis. I also imagined that I would never be able to find a TA affiliated with my new institute and, therefore, I would have to stay with my first analyst. I obviously needed to face the reality of termination, but I might have benefited from more time to process the complicated feelings and conflicts involved.

I distinctly remember the last time I left my first analyst's office. I recall closing the outside door, walking down the stairs, getting into my car, and driving away. I had a very long history with this analyst, including many years of psychotherapy prior to the analysis. I could not imagine what it would be like to be in treatment with someone else.

My first analyst had told me the door was always open if I ever needed to come back. I stayed in touch by dragging out my payments owed for several months. I once included a short post-it note along with my check, saying that things were going well. But this communication dwindled to just sending the checks, and finally to nothing. Once the balance was paid off, the termination involved no contact at all.

There was a break of about two months between the two analyses. This was probably not sufficiently long enough before beginning a second analysis, but the necessity of moving forward with the training analysis prior to coursework was a driving factor in my decision. I remember imagining that I would end on Friday with my first analyst and begin on Monday with my second analyst. Again, this was a fantasized way of avoiding the pain of termination and the feelings of being alone during the interim.

After approximately two months, I began my second analysis with my second analyst.

Beginning the Training Analysis

I vividly recall my first day on the couch with my new analyst. Everything seemed different. I felt a sense of unease, and I missed the comfort and familiarity of my first analyst's office.

In many instances, I preferred the way things were handled with my first analyst, but in many others, *much to my surprise*, I preferred the technique of my second analyst. There are probably strengths and weaknesses to both styles and techniques, and each one evokes different specific reactions in me.

For example, my second analyst did not have a clock placed in clear view from the couch. I resented this initially. But it turns out that not having a clock to view triggered a new set of experiences and associations regarding time than the ones I had with my first analyst. In both cases, my reactions to the clock, whether I could see it from the couch or not, were all part of the analytic material to be explored. The value of having two analysts whose styles are very different gave me an opportunity to experience different ways of practicing the art and science of psychoanalysis.

Currently, one of the most difficult issues to work through is the feeling of guilt I have whenever I am able to make changes in my life that I was unable to make while in my first analysis. At times, the differences in technique with my second analyst have enabled me to move beyond issues that were at somewhat of an impasse with my first analyst. Perhaps it is the experience of a TA, perhaps it is the many differences in style and technique, or perhaps it is just a change in environment; whatever the reasons are, I have been able to use the training analysis in a very beneficial way so far.

Because I am still in my training analysis, I am reluctant to disclose too much detail about the experience of either analysis. The reality of publishing my experience while both of my analysts are still practicing brought up a lot more resistance than I had anticipated when I first started writing this paper. It has been much more difficult to engage in self-disclosure than I thought it would be. Fear of how I will be perceived by both analysts, as well as the perceptions of my peers and colleagues at the training institute, fuel the greatest resistance on my part to disclosing more details of my personal experience. Given this limitation, I will try to convey some of the differences between my two analyses in general.

Differences in Technique

Some of the important differences in style and technique that I experienced involved degrees of self-disclosure and neutrality. For example, one analyst, when asked direct questions, would often provide answers. The other analyst, when asked direct questions, would respond with comments like “What do you imagine?” or “What comes to mind about that?” I experienced these two ways of responding very differently, and both opened up very different analytic material.

As another example of technical differences, one analyst would sometimes share information and suggest options, while the other would not share information and would merely try to clarify the underlying conflicts I may have been expressing. These two different ways of working evoked very different experiences and reactions in me regarding my treatment. I was able to experience firsthand the contrast between two different types of analytic attitudes or positions, such as those described by Rangell (1954): one in which the analyst was like a referee in a tennis match and on the periphery of my magnetic field, and one in which the analyst was more generally on the court with me and that our magnetic fields were interlocked (p. 741-742).

Differences in the Frame

I also experienced differences in how each analyst set the basic analytic frame, such as phone calls between sessions, beginning and ending sessions, and the structure of the office. These differences may seem trivial, but they all influence the way I have used my analysis in my life and the experiences that have come up for me in each analysis.

Comparison of Two Analyses

In general terms, being in more than one analysis with different analysts allows me to experience how various techniques and approaches affect the analytic process in a unique way.

An exception might be if an analyst drastically alters the way he or she practices during the course of a treatment, as Kohut (1979) claims to have done in his two analyses of Mr. Z. (despite suggestions that Mr. Z. may actually represent Kohut's own self-analytic work). But even with an analyst who changes style or technique, it is still the same analyst involved in the treatment process.

Based on my own experiences, having two different analyses with two different people seems to deepen my theoretical understanding in a way that brings didactic material to life. In assessing debates around technique, such as whether or not to intentionally use self-disclosure and to what extent, I can draw on my own reactions to working with both my analysts. When reading theory papers, for example, I can recall my own personal reactions to differences in theoretical approaches (e.g., Pine 1988) and assess what worked and what did not in my own case.

Summary of Advantages and Disadvantages

Regarding both technical approaches and the logistics of the frame, I have at least two different experiences to draw from as guides. These two analyses have helped me explore which approaches have worked well, which I would alter, and which I would synthesize in some fashion. I have outlined the advantages and disadvantages of switching analysts, as I have experienced them so far. This list reflects a summary for myself alone and is not meant to be generalized or overly simplistic.

Advantages

1. One of the positive aspects of switching analysts, in my case, includes the fact that I had no previous relationship or history with my second analyst. I was able to start without any contaminating variables or dual relationships that, in the more traditional view, could complicate an analysis (Gill 1954).

2. I was able to start immediately with psychoanalysis proper with my second analyst. There was no need for extended conversion time or preparatory psychotherapy.

3. The switch allowed me to transcend, or move past, impasses with my first analyst regarding several core conflicts.

4. The opportunity to experience and compare different techniques and styles seems to be beneficial, both clinically and theoretically, for me as a candidate.

Disadvantages

1. The decision to switch may have involved a premature termination with my first analyst, without sufficient time to process this ending phase.

2. Prior to beginning the treatment, my second analyst requested permission to consult with my first analyst, which introduced additional resistance and confidentiality concerns on my

part.

3. As with any training analysis, the situation is, by definition, confounded by the training institute. This does not necessarily have to be negative, but it did introduce an additional level of logistical difficulties for me (McLaughlin 1973; Wallerstein 1978).

4. Lastly, the switch created a situation in which it was – and still is – often easy to split issues between my first analyst and my second analyst, to make one all good and the other all bad, fluctuating, of course, between who is in which role at any given time (Simon 1989).

Future Research

Psychoanalysis is a unique field in that each case can be quite lengthy, and analysts consequently do not have as many opportunities as other professionals (i.e., lawyers, accountants, engineers) to observe, research, and experience different approaches to practice. This limitation in the number of available sample cases makes it important to share our experiences with each other.

Given this importance of sharing information, it might be interesting to interview other analysts and candidates who have had the unique experience of switching analysts as part of their training, and to explore further the benefits and concerns involved in such a decision. Informally, I have heard stories from people who have switched analysts as part of training that range from very positive experiences to very negative reactions. Comments have varied from “Changing analysts was terrible!” and “Once this training analysis is over I plan to go back to my ‘real’ analyst,” to “Changing analysts was painful but it’s something that many of us go through as part of training.”

More scientific research regarding the impact of switching analysts, from a non-TA to a TA, might be worthwhile.

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Address correspondence to:
Terri L. Rieth, PhD
Emory University Psychoanalytic Institute
Tufts House, Suite 300
2004 Ridgewood Drive
Atlanta, GA 30322
tlrieth@comcast.net

Terri L. Rieth is a second-year candidate at Emory University's Psychoanalytic Institute.

Transforming Identity: An Experience of Being a Candidate

Phoebe A. Cirio, MSW

The process of becoming a psychoanalyst requires a transformation from the candidate's previous professional identity. The author uses her own experience to discuss whether rituals in psychoanalytic training – in this case, the “hazing” ritual of humiliating candidates in case conference – are necessary to create the novice psychoanalyst's identification with the new profession.

Introduction

About six months into my first year as a candidate, I presented my first case at my institute's analyzability seminar. I had seen the faculty attack one another in this seminar – subtly, but attack, nonetheless – and I dreaded presenting. I made a detailed presentation of my case, a female patient with a history of acting out. I gave as complete a picture of the case as possible. The patient, in psychotherapy three times per week, continued to act out in the therapy, but in subtler and less destructive ways. We had discussed analysis, because she and her parents thought she would benefit from an additional session. I was unwilling to add it unless we looked at the implications of the fourth weekly session for her treatment.

Not surprisingly, the response of the faculty members present was critical. What disturbed me was the conclusion they reached: “There is no treatment here.” That particular statement struck me as absurd. It took me several days to really begin to comprehend what had happened. “There is no treatment here.” What does that mean? No patient? No therapist? I felt demeaned as a therapist. What was the purpose of this proclamation? It certainly did not help me or my classmates learn how to develop analytic cases. It would have been helpful if the faculty had elaborated on what the problems were, and what would need to happen in order to bring this case into analysis. Or they might have recommended that analysis not be attempted at this time because of her acting out. “There is no treatment here” functioned only to demean me and undermine my sense of professional identity and competence. I learned from the experience that it was important to present very selectively in this conference, and to choose only aspects of the case that appeared to be progressing well. The risk of not being selective is that the candidate will seem to have no control of the case. However, exercising such careful forethought about case material means that the learning potential of the conference is limited. The correlate of “There is no treatment here” is “There is no training here.”

I experienced the analyzability conference as a degradation ceremony, a public denunciation. The subtext communicated by the faculty was “We have power and you do not.” I find it valuable to be challenged to look at my own work critically, but does this process have to be so brutal?

Degradation as a Tool to Transform Identity

Over twenty years ago, while a doctoral student, I read a paper by Harold Garfinkel (1956) entitled “Conditions of Successful Degradation Ceremonies.” Garfinkel, a sociologist, was interested in the procedures for effecting transformation of someone's “total” identity. Total identity has to do with the motivation for behavior -- not just how one acts, but why. The

objective of the degradation ceremony is to transform someone's identity to a lower status within the group. The person whose identity is being degraded is denounced before witnesses from the group. "Degradation ceremonies fall within the scope of the sociology of moral indignation" (p. 421). The transformation of identity remakes the individual. One is not changed, one is "reconstituted." A new identity replaces the old. "One declares, 'Now, it was otherwise in the first place'" (p. 421).

The social function of the degradation ceremony is to promote the solidarity of the group by shaming the individual. This is aptly illustrated in Stanley Kubrick's 1987 film, *Full Metal Jacket*. The film opens with Marine Corps recruits meeting their drill instructor. One by one, the instructor sizes up the men, learning just a little about each of them and bestowing a new identity, a Marine Corps identity, on them. One of the recruits, from Texas, is told "Ain't but two things from Texas, steers and queers. Which one are you, boy?" There is no suitable response to that question. That recruit becomes Private Cowboy. A black recruit is Private Snowball, and a wiseacre is Private Joker. These identities are carried with the troops to Vietnam and are sustained throughout the film. The drill instructor praises one of the men, who finally learns to march in formation and assemble his rifle. "Boy, you are born again hard. I may just let you be a part of my beloved Corps."

Garfinkel was writing about initiations into groups like religious orders, the military, prisons, gangs, and organized criminal enterprises. I do not believe he had in mind doctoral programs or psychoanalytic institutes, but I think his idea has applicability in those settings.

For example, as a doctoral student, I spent several years working on a large research project, and learned research methodology firsthand. This was an excellent learning opportunity for me, but for the principal investigator (PI), the research came first. It was more important to the PI that I perform my tasks correctly than that I feel good about myself, or even that I learn anything. The focus on the research as being primary left me feeling demeaned and with self-doubts.

I never finished my doctorate. I spent four or five years taking classes and working on the research grant, but finally left the program with my MSW. I began doing clinical work, and became a psychotherapist. Now I am a candidate in a psychoanalytic institute. I was accepted at the institute about ten months before I began classes, and wondered whether the experience of being a candidate would be like my experience as a doctoral student. Would devotion to psychoanalysis, and a rigid idea of how it should be conducted, lead some on the faculty to use whatever means necessary, even shame, to make the candidates do things the faculty's way? Would psychoanalytic training cause the same kind of self-doubt and feelings of being demeaned as being a PhD student did?

Not everyone would ask themselves these questions. If I analyze and critique the culture of the institute and the atmosphere of psychoanalytic education, I need to also ask myself whether some of this is just about me. Do I have a proclivity to experience not knowing as much as others as evidence of lack of personal value? It seems so; however, I think that proclivity allows me to be sensitive to some of the dynamics of psychoanalytic education that all candidates experience in some measure.

I re-read Garfinkel, and was surprised to realize that he was describing something narrower, and more brutal, than I recalled. Garfinkel (1956) is talking about transformation through denunciation:

In the social calculus of reality representations...the former identity stands as accidental; the new identity is the 'basic reality'. ... Through interpretative work that respects this rule, the denounced person becomes in the eyes of the witnesses a different person (p. 422).

Degradation ceremonies are a form of hazing. Garfinkel says that status degradation ceremonies are structurally similar to "ceremonies of investiture and elevation." Both transform the subject of the ceremony. Hazing changes the individual's status in the group. The hazer delivers the message about group values to the individual being denounced, before the assembled witnesses, and he speaks in the name of the group. This occurs for the benefit of the group, not the individual.

What is common to degradation ceremonies, hazing rituals, and my experiences in the PhD program and the analyzability conference is the use of shame. Degradation ceremonies are ritualized shaming. Garfinkel observed how shaming is used for the furtherance of group cohesion. Perhaps that is the purpose of the use of shame in higher education. The one who uses the shame is powerful and the one who is shamed is weak. This establishes a hierarchy in the group that may further the collective goals, such as achieving orthodoxy in practice or maintaining standards.

If shame is used in hazing rituals and psychoanalytic education to pursue the transformation of identity, it must be used in the presence of others. Hazing rituals, whether they are initiations into sororities, fraternities or gangs, may be done *in secret*, but are effective because they are not done *in private*. In the case of the analyzability seminar, the statement, "There is no treatment here," was made publicly, at my expense. There was no concern as to how I would feel about it; the purpose of the statement was to use me to inform the group that this work, my work, was not an example of psychoanalysis. This was not to help me, but to define the boundaries of the group. By proclaiming that something I did is not psychoanalysis excludes me from the group until I get it right. It also warns the others assembled that they should avoid this mistake if they hope for inclusion.

Garfinkel reifies the behavior he observes when he terms it a "ceremony." He is describing the use of bullying behavior by a dominant group member against a "newbie." This bullying may acquire a socially desirable cast when it furthers a social goal. The drill sergeant in *Full Metal Jacket* bullies his men into submission with the goal of establishing group cohesion, maybe all they can count on to save their lives.

Seniority provides insulation from scrutiny of one's clinical work. Candidates have the least seniority and the most need for feedback on their clinical work. Yet, by presenting their cases, their work is often held up to ridicule as an example of poor interpretation, poor timing or any of the other offences against psychoanalysis. They are vulnerable to "bullying" by faculty

members.

Why would faculty members bully candidates? I believe, in part, it is because they love psychoanalysis and want to preserve it, at whatever the cost. However, while bullying is effective, it is ultimately self-defeating. It may produce compliance in the candidate's behavior, but not true understanding. The risk is that the candidate may come to not trust his/her own clinical judgment.

Whatever value derives from using candidates as exemplars of less than satisfactory clinical work, there are also liabilities. The experience of being demeaned is not soon forgotten. It colors subsequent interactions with faculty members, and can undermine trust in those faculty members. Perhaps worst of all, it can lead to overly cautious clinical work, where candidates are afraid to make interpretations or trust themselves behind the couch for fear of making a mistake.

Candidates make mistakes, and any mistake can provide fodder for an attack. The crucial issue here is whether the institute is the sort of place where psychoanalytic training makes use of shaming, or if a more humane approach is utilized. Embarking on advanced training, whether it be a doctoral program, medical school or psychoanalytic training, makes us vulnerable. The question is whether the faculty members abuse that vulnerability, or if candidates are supported and not subjected to humiliation.

Reconstituting Identity

There is something exquisite about candidacy. Learning takes place in a variety of ways within the psychoanalytic institute, e.g., whenever candidates are presenting clinical material or discussing theory. At the same time, candidates are being evaluated as to whether they are psychoanalytic. They enter training to improve their theoretical knowledge and clinical acumen, and hope to know and understand more by the end. There is also the discomfort of apprehending our current level of development in those areas.

Inevitably, we compare ourselves to the faculty.

The joke among my class of first-year candidates was about penises. When finding that we did not know enough about the readings for that day, or did not understand the theory well enough, we joked about being shown how small our penises were. We also joked about who of the faculty had the biggest penis. Of course, it was a woman. What we understood and communicated among ourselves this way was how it felt to see the gap between where we were today, and where we wanted to be.

The first step in reconstituting our identity was losing the former identity we had outside the psychoanalytic institute. The new identity is a diminished one: We are neophytes and initiates.

To be educated and socialized into the new profession, we submitted to a loss of status. This is particularly true for those of us already established in private practice in our communities. We felt successful and respected in the community of psychotherapists, but, to become

psychoanalysts, we had to accept our new role as neophytes. We accepted our diminished status voluntarily. Our status within the institute is lower than our status outside.

Garfinkel talks about total institutions, i.e., the military, religious orders and criminal societies. Psychoanalytic institutes are not total institutions, in the sense that one dispatches all previous tethers of identity in the family or community. The candidate does not have to leave family and community behind; but psychoanalysis is a profession, and in general, members of a profession identify with that profession.

Identification is one way we become members of the class of psychoanalysts. Identification also involves internalizing the ideals of the class, what Arlow (1972) refers to below as the inculcation of a professional attitude. He recognized that identification is a part of professional formation, but seemed uneasy with some of the ways identification is fostered. Arlow showed how both intimidation and idealization are used to cultivate identification in candidates. Ultimately, though, Arlow's ideal psychoanalyst has greater personal autonomy than brutal initiation rites or idealizations of psychoanalysts can engender. Even so, Arlow specifically described the ways that candidates are often initiated, and, in so doing, achieved a convergence with Garfinkel's description of the effects of degradation ceremonies.

Identification is the central mechanism in all programs of education. Organized groups that have an acknowledged history, a continuity of ideology, and a body of knowledge to transmit to future generations strive to create a psychological climate that will develop in the students the ideals, the attitudes, and the personal qualities essential for the profession. These goals cannot be achieved by cognitive teaching alone. In any discipline there is more to training than the transmission of information. The professional attitude has to be inculcated. An emotional dynamism is required; an identification with leading figures who correspond to the collective ego ideal is the principal instrumentality employed (p. 560).

This identification may be accomplished through an ordeal of socialization similar to that used by primitive tribes, differing primarily in duration.

During a long course of tests which the initiates undergo (personal analysis, admission to courses, first case, second case, etc., graduation), the training analysts serve the double function characteristic of all initiators. Some intimidate the candidates; others act as sponsors and guides. ...The end result is the same: anxiety propels the candidate into effecting an identification with the aggressor; the initiate remodels himself after the image the community holds up as the ideal.

The transition rituals of primitives are painful but short. The training analysis and the curriculum is a much longer process because the goals of psychoanalytic training are more sophisticated. The terror that the training experience arouses is not quite as severe as among the savages, but the results...seem to be just as reliable (p. 562).

Psychoanalytic education requires the acquisition of clinical skills and theoretical knowledge of psychoanalysis. Candidates also internalize the motives of the profession. This can be achieved through fear and intimidation or idealization. Arlow regarded both approaches as deficient. He warned that, too often, candidates develop identifications with or idealizations of their own analysts, the profession of psychoanalysis, or Freud, which are never completely analyzed.

Such identifications and idealizations may be a part of the process of development for candidates, but cannot be the endpoint of successful candidate preparation. Becoming a psychoanalyst is a significant developmental stage for candidates. Arlow (1982) warned that one can fail to complete the process. Failure is more likely if the transformation is facilitated by intimidation or idealization. Intimidation furthers educational goals through identification with the aggressor. Candidates may identify with the profession and with individuals within the profession, but never achieve autonomy as psychoanalysts. Transforming one's professional identity from identification with another profession, such as social work, psychology or medicine, to identification with the profession of psychoanalysis is only a way station in that process, the successful culmination of which is autonomous functioning.

Our society utilizes the major affect-arousing situations in life at the nodal points in development and education to consolidate its pedagogic goals. ...There are two aspects of this operation: a conscious component which is rationalized in terms of religious and educational goals, and an unconscious component which employs the mechanism of identification with the aggressor. In effect, the initiate is frightened into unconsciously remodeling himself after the image which the community holds up as the ideal. The institutionalized experiences which are connected with the major in the individual's personal and academic life are unconsciously patterned to arouse anxiety and to foster resolution of the conflict by way of desirable identifications (p. 12).

Arlow (1972, 1982) delineated what he regarded as the perils of the system of candidate education at that time. He was also concerned about power being concentrated in the hands of a few training analysts, and the use of texts some 50 years old that kept the profession looking backwards, which ultimately stifled creativity and imagination. Intimidation was used in these institutes to foster adherence to the views of those with the most power.

When intimidation is used in the educational setting, candidates are not so much taught as inculcated, and do not develop the capacity to think about psychoanalysis independently. Arlow (1972) ultimately objected to the use of intimidation, regardless of how effective it might be at instilling a point of view. He believed that psychoanalysis required greater autonomous functioning than could be achieved through intimidation. He worried, as well, about unanalyzed transferences that were unrecognized as transference because they were so consistent with the analyst's view of the profession.

Psychoanalysis serves as the family romance of psychoanalysts. This is an

aspect of the transference which I am certain I must have missed several times until it was called to my attention by a candidate whose life situation and childhood neurosis were so closely interwoven with a family romance pattern as to emerge in the analysis with striking clarity (p. 563).

Here, Arlow is talking about how he did not initially see the way he and his profession were idealized by his patient, who was himself joining that profession. He could not see it as transference, because he was so comfortable with the idealization.

Candidates are vulnerable to intimidation and seduction. Faculty members who wish to be idealized may be prone to cultivating that in candidates who are eager to idealize. Both groups bring to the educational enterprise tendencies and proclivities of which they are not fully aware. Arlow offered an alert to all involved that there will be hazards. Intimidation is effective. If a candidate does not seem to understand something, then a change in tone of voice, choice of words or just going silent can effectively convey disapproval of what the candidate is doing. All of these techniques are intimidating. As well, Arlow warned that the desire of faculty to be admired for clinical acumen or theoretical brilliance is a hazard when candidates are searching for someone to idealize for their own reasons.

Garfinkel and Arlow both illustrated how the process of facilitating identification can be accomplished. Both provided examples, Arlow from psychoanalysis and Garfinkel from initiation rites, of how the use of brutality produces identification with the aggressor. Arlow (1982) questioned this process:

It is unfortunate that, educationally speaking, the most reliable method for achieving identification is to treat the individual cruelly. It is easiest to frighten an individual into identifying with the aggressor (p. 13).

Arlow argued against too close an identification with any part of psychoanalysis, whether with a theory, a person or a school of thought. When identification with the profession replaces critical understanding of the strengths and weaknesses of the profession, not only is the candidate, and eventually the psychoanalyst, stunted, but the entire profession of psychoanalysis suffers. Psychoanalysts, who wish to participate in the development of social science, need to be able to couch their contributions in a common language. Too close an identification with psychoanalysis may handicap the psychoanalyst in academic discourse with the larger community.

While the most effective way to produce an identification is by scaring the initiate, it is not really the type of identification that will serve the candidate or the profession well once they are faced with the rigors of practice. Arlow (1982) clearly stated that blind identification with the profession of psychoanalysis serves no one well:

Because the demands made upon the analyst in his professional work require a greater degree of insight and objectivity, the type of identification which is achieved by means of anxiety-ridden initiations is not desirable. In fact, it may prove to be an encumbrance leading to

stultification of individual initiative, to inhibition of curiosity, and to suppression of open-mindedness (p. 13).

Arlow (1982) also warned of hazards in the training analysis. An identification with one's own analyst that is never resolved handicaps the candidate. "The educational goal should be an identification which is stable, secure, and resistant to regressive reinvolvement in conflict" (p. 13). Here, Arlow was concerned with the outcome of the analysis. His clearly stated goal, for candidate preparation, is that we graduate from training able to function autonomously. "In fact, it would seem most desirable that the scientific and professional role of the analyst should reflect autonomous ego functioning" (p. 13).

Arlow's concern was with the outcome of the training analysis. During the early stages of training, a solid working alliance with one's analyst is essential in navigating the hazards of training. If, as I have maintained, psychoanalytic education is fraught with risk to one's sense of self-esteem, then in order to navigate training, one needs a safe harbor, a place to talk freely and understand one's own feelings about the experiences in the institute and one's reactions to them. A solid alliance in the training analysis can help the candidate feel understood, even if the experience of case presentations and classroom discussion is not favorable. The experience of being a candidate will inevitably infuse the material explored in the analysis. Surviving the socialization into the institute will be greatly enhanced by an analyst who can help the candidate understand the way that these trials of training interface with his/her own dynamics.

Conclusions

It seems to me that Jacob Arlow had great faith in psychoanalysis. In the two papers he wrote specifically on psychoanalytic education, he articulated concerns about tactics that intimidate and analysts who wish too much to be admired. But throughout, he maintained that psychoanalysis, well conducted, is the best preparation for candidates. The difficulty lies in defining what "well conducted" means. I believe what he was saying is that the result of good psychoanalysis is clinical and intellectual nimbleness, having both agility and dexterity in the theoretical and applied realms of psychoanalysis.

The analyzability conference took a significant turn shortly after I presented. The curriculum committee asked for feedback after the second trimester, and we gave it to them. We were very critical of the analyzability conference, particularly with the way the faculty seemed to feel it was their province to make pronouncements on our cases. The faculty who regularly attended the analyzability seminar suggested that we talk openly about the things that bothered us, and we took most of one hour to candidly discuss our feelings with the faculty. Since that discussion, things have been different. There has been less talking back and forth among the faculty. Contributions from the candidates are listened to, and there are fewer pronouncements. The atmosphere is more collegial.

Psychoanalytic education should not be a passive experience. The practice of psychoanalysis is not passive, and the education should not be either. Preparing for good practice means that the new identity of psychoanalyst has to be chosen, and defined, by the candidate. Psychoanalysis will benefit from the input of candidates who can help define the

structure of case conference, analyzability conference, and the selection of courses and readings for the curriculum. It is no longer sufficient, if it ever was, for the faculty of a psychoanalytic institute to include readings because they have always been used.

We are aware that candidates are not equals of the faculty, but psychoanalytic education is the co-creation of the faculty and the candidates. Neither party can carry on the enterprise without the other. In fact, the current economic climate means that the faculty needs the candidates now more than ever. What is needed is mutual respect for the unique contributions of the other. From such an environment, creative possibilities and creative processes have a chance to emerge.

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Address correspondence to:
Phoebe A. Cirio, MSW
141 No. Meramec Ave., Suite 304
Clayton, MO 63105
Phoebe777@aol.com

Phoebe A. Cirio is currently a second-year candidate at the St. Louis Psychoanalytic Institute.

The Impact of the Admissions and Training Analysis Referral Processes Upon the Beginning Candidate's Anxiety: What I Wish I Knew When I Started Training But Took Years to Figure Out

Khleber Chapman Attwell, MD, MPH

Candidates begin analytic training with a series of interviews for admission and, often, with a referral for personal training analysis. The author explores the impact of these two formative experiences upon the generation of the beginning candidate's anxiety. He does so via a review of the literature; synthesized interviews with clinician educators; and personal reflection upon his own experiences as a candidate. In short, the author writes the paper he wishes he could have read as a beginning candidate.

Introduction

This paper explores two topics of vital relevance to beginning candidates' anxiety – the selection of candidates for admission to train and the impact of one's referral for training analysis. All candidates are initiated into training with a series of interviews, and many with the beginning of a training analysis – sometimes after leaving another analysis with a non-training analyst. Typically, candidates know very little about the rationale for the clinical interview process, admissions decisions, and/or the reasoning behind referral to a particular training analyst. Rarely do candidates appreciate that there is a lively history to these matters, and that an easy consensus has never been reached. This absence of information may implicitly bolster fantasies that rigid standards exist regarding who is eligible to train, and with whom one ought to have a personal analysis. Though candidates might also entertain fantasies that well-considered, objective standards apply, I believe that experience that tempers powerful rigid fantasies can be crucial in reducing the generation of candidate anxiety, or even paranoia.

Inasmuch as these early experiences shape the beginning candidate's thoughts and feelings while at their most malleable, the anxiety that results may contribute to candidate inhibition – in both the formation and expression of opinions and questions in general, and of writing in particular. Likewise, positive interventions at the institute level can alleviate profound anxiety, with the aim of bringing it into a more manageable range – a range necessary for the mental freedom to learn well. During the six years of my training, I often wondered how psychoanalysts become less anxious. What happens along the way? In a word, how do candidates become candid?

At early staff meetings of *The Candidate*, we brainstormed about issues central to candidates' experience. The ideas of fear, anxiety, paranoia, inhibition in general, and writing inhibition in particular, consistently emerged. We assumed that, as candidates, we bring to analytic training fantasies that are expressions of our internal worlds; from this perspective, candidate anxiety is less an institutional issue than a process with which each candidate must wrestle in his or her own analysis and own life.

But what about the institutes that receive us and take responsibility for our professional development? Inasmuch as they are molded by the history of psychoanalytic training – a history filled with tales of exclusion of certain applicants and of pressure to conform to particular theoretical schools of thought – might their stances on the admissions process and referral to a

training analyst contribute to the generation of candidate anxiety?

A personal vignette from the beginning of my candidacy illustrates the profound shaping influence of early experience on the development of a psychoanalytic attitude. It also underscores how the candidate's lack of knowledge can provide fertile soil for paranoid fantasies to flourish. During the first hour with my first interviewer for admission to the institute – a man I would later learn was one of our senior training analysts – I was asked what was on my mind. I told him I was quite nervous. I had never been in a situation quite like this one; it felt simultaneously like a job interview and a potentially personally-revealing encounter. He asked where my mind went after that. With sweat drenching the armpits of the blue shirt under my best suit, I said something like “rejection, unacceptable, find somewhere else to do your training, thanks but no thanks....” He responded, “It doesn't cross your mind that it might go well?” “Actually, no.” Frankly, it had not crossed my mind at all. I was so nervous about the interview and wanted so badly to be accepted. Ashamed of aspects of my own history, I assumed if I were candid with him in the interview, I would be rejected. By contrast, his reframing – one that I have used countless times with patients over the years – provided a tone of trust. I went on to have three wonderful interviews with this man, to whom I will forever be grateful. His suggestive interpretation permitted positive fantasies to flourish. Taking progressive leaps of faith during the subsequent interviews – and being accepted for training – sent a life-affirming ring of acceptance about the work I had done up to then. I now wanted even more to become an analyst, and hoped that the timbre of my initial interview would be sustained during my years of training. This was largely the case, and I have subsequently aimed to take this interviewer's stance toward my own patients, friends and myself. Thus, it, and he, had a profound impact.

Exploring our history in a fashion that mirrors the psychoanalytic process can provide a deeper awareness of and sensitivity to several critical issues: the student's trust, his/her relationship to authority, the nature of knowledge, and open- versus close-mindedness. Specifically, listening for common themes and affects that emerge in the literature and in interviews – and following the associations that come to mind in response – yields a tentative working historic reconstruction of candidate anxiety. This search can better help us address issues central to our psychoanalytic lives, be they as student, teacher, analyst, or administrator; in turn, these issues serve as windows into broader themes that characterize our profession's history of training. Have our institutes taken definitive steps to reduce candidate anxiety? We might begin this process by focusing on aspects of the history of psychoanalytic training and by taking an open look at how our systems work.

Methods

These subjects were explored in two ways: 1) a review of trends in the pertinent psychoanalytic literature and, more importantly, 2) interviews with clinician educators and/or psychoanalytic historians.

Review of the Literature

To explore the history of these aspects of candidate experience, I “googled” the terms *psychoanalytic training*, *candidate*, *anxiety*, *paranoia*, *fear*, *inhibition*, and *writing inhibition*.

This search yielded numerous articles, and a PsycINFO search yielded still more, documenting examples of candidates – both current and past – who have experienced candidate anxiety or paranoia. This search also yielded contributions by faculty members who have written about the generation of candidate anxiety, paranoia, and inhibition as a function of the conflicts inherent in the training structures of psychoanalytic institutes.

That candidates and faculty alike would write about the same phenomenon strikes me as significant. At the least, writing about candidate anxiety, paranoia, and/or inhibition, or about power structures in psychoanalytic education today, signifies the presence of distress and/or conflict. Perhaps the asymmetric balance of power between institutes and their candidates reflected in the admissions and referral processes is sufficient to generate anxiety. After all, the candidate has a wish for admission and treatment in order to obtain the knowledge and experience needed to become an analyst; the institute/training analyst has the experience and authority to grant this wish. But perhaps both candidates and faculty struggle with a larger, more elusive issue that employs the language of candidate anxiety and paranoia.

General Background

Psychoanalytic education has received much attention of late. Several books, some recently published, capture the spirit of inquiry endorsed by this paper. Martin Bergmann (2004) explores the role of the dissident in psychoanalytic history in *Understanding Dissidence and Controversy in the History of Psychoanalysis*. Emanuel Berman (2004) grapples with the complex emotional and organizational dynamics of psychoanalytic training and history in *Impossible Training: A Relational View of Psychoanalytic Training*. Jurgen Reeder's (2004) *Hate and Love in Psychoanalytic Institutions: The Dilemma of a Profession* delves into the history and impact of the professional super-ego of psychoanalysis upon our peer relationships and inhibited creativity. These recent publications add to the earlier significant contributions of Douglas Kirsner's (2000) *Unfree Associations: Inside Psychoanalytic Institutes* and Robert Wallerstein's (1998) *Lay Analysis: Life Inside the Controversy*.

Recent articles by Auchincloss and Michels (2003), Casement (2005), Garza-Guerrero (2002a,b, 2004, 2006), Kernberg (1996, 2000), Korner (2002), Mandlebaum (2003), Ross (1997), Tuckett (2005), Wallerstein (1991), and Zimmer (2003) represent a sample of contemporary psychoanalytic educators' views towards the present structure of psychoanalytic education. These authors address a wide spectrum of issues: an essential conservatism in some psychoanalytic education; the unique role of education in a field where control of educational structures plays a major role in views of professional success; the power differentials between training analyst and candidate; the conflicts between academic, scientific pursuits of knowledge and the missionary mandates of a movement or cause; the infantilization of candidates; inhibition of candidate creativity; lack of attempts to define or operationalize professional qualifications for psychoanalysis; the transmission of psychoanalytic knowledge; and the impact of pluralism on our institutions and training schemes. The above books and articles frame the general educational context of this paper.

Specific to the emphasis of this paper – the selection of candidates for admission to train and the impact of one's referral for training analysis – are three particular areas of the literature:

1) the vulnerability of the candidate; 2) inclusion in/exclusion from psychoanalytic training; and 3) the impact of the referral process upon one's training analysis.

The Vulnerability of the Candidate

Several contributors attempt to understand and to paint the picture of candidate vulnerability. Hebbrecht (2001) writes of his own fear of being too passive as a candidate. The Psychoanalytic Association of New York's (PANY) annual candidate meeting in January, 2000 addressed "The Influence of Candidate Status on Analytic Process" (NYU Psychoanalytic Institute 2005). Vignettes from candidates describe abundant feelings of inadequacy, including fear of humiliation, limited knowledge of technique, relative clinical inexperience, identification with one's own analyst, identification with one's own first patient, comparison with one's candidate colleagues, transference to one's institute, anticipation of a more strict and rigid experience than actually exists, feelings of shame, and a fear that facets of the analysts' experience should not be discussed. These accounts also illustrate the impact of such anxieties on aspects of candidates' training and provide specific examples of the particular contexts in which candidate anxiety might emerge.

Bruzzone et al. (1985) eloquently describe feelings of worthlessness, helplessness, and paranoia that marked their experience as candidates. They link these feelings with their tendency to seem outwardly passive and submissive, while, at a deeper level, they were becoming inhibited by alternating states of dependence and competitiveness:

In the crises we experienced feelings of worthlessness and helplessness mixed with paranoid anxieties of greater or lesser intensity. At these times the training institute seemed to us to be a formless body rather than a group of individuals performing a didactic function. Some of us felt we were joining a dogmatic religious sect which would attack any manifestation of spontaneous thought as if it were a heresy. Then we felt like a group of patients that had given the diagnostic skill of seasoned training analysts the slip, rather than a selected group of students who had been chosen for their potential to undertake analytic training. We believe we were outwardly passive and submissive to the teaching authority, and that this gave rise to an alternation between dependence and competitiveness which impinged on the learning process (p. 411).

This group of candidates conceptualizes these fantasies of persecution primarily as a product of projective identification – from their personal analyses onto their teachers at the institute. They also understand problematic aspects of their teachers' characteristics as the result of the teachers' confusion between analytic neutrality and the proper active role of an educator – thus, as counter-identifications. More specifically, they cite their teachers' difficulties explaining aspects of training, their inability to take a firm stand on pedagogical issues, and their seemingly excessive wish to protect the candidates from feelings of persecution as students. Hence, Bruzzone et al. frankly illustrate manifestations of candidate anxiety in their own training and sketch one avenue for the generation and transmission of such anxiety.

Two faculty members highlight this same candidate anxiety. Jacob Arlow (1982) describes an essential conservatism in psychoanalytic education, which he links to a clinging to the past, a “mostly unconscious mythos that serves to bind the analytic community together ... (and) ... exert(s) a disproportionately powerful influence on psychoanalytic education” (p. 6). Arlow describes a number of rites of passage (“trials to which the analytic candidate must submit”) for the candidate analyst, beginning with the admissions process. He believes the creation of a master-apprentice model of analytic training activates “unconscious conflicts over succession of the generations and rivalry with the master as part of the fantasy of identifying with him in order to get his magical power” (p. 11). He goes on to explain the origin of candidate anxiety as, ultimately, stemming from “a ceremony of ritualized submission in order to achieve equality with the elders” (p. 11). He also cautions against the use of unconscious idealization or identification with one’s analyst (with the aggressor) as a defense against the anxieties of this submission. Arlow links this anxiety of training to a stultification of desire, an inhibition of curiosity, and a suppression of open-mindedness in our field.

Patrick Casement (2005) deals with candidates’ fear of failing by looking at the power differential between training analysts and students in training. Casement uses the word “student” in lieu of “candidate” intentionally, as he believes the word better captures how candidates are actually regarded. In addition to an extensive bibliography that reviews the literature on problems in psychoanalytic training, Casement cites examples in which candidates edit sessions for supervision out of fear that institute supervisors might disagree with their technique; by contrast, they take the unedited sessions for private supervision. He sees these problems as stemming from an institute’s expectation that students learn “within a context in which a particular way of thinking, and of working, is often given priority over intellectual freedom and honesty” (p. 1145). Casement also addresses the phenomenon of candidates’ providing anonymous group feedback at the end of a course to a selected delegate. Even if quietly and privately communicated among instructor analysts, candidates fear silent retribution for what has not been written:

In such ways, much of the healthy challenge and debate, which is an essential part in deeply engaging with any subject, may largely be absent during analytic training. And what a loss that is for *all* concerned – trainers and students alike (p. 1147).

Furthermore, Casement documents the slippery slope of a training analyst’s interpreting a student’s healthy persistence as a manifestation of “being difficult,” “wishing to be treated as special,” or as acting out in some other way (p. 1148). He demonstrates how much easier it is to get rid of a student who challenges the system than to address the underlying defects of the system. He even wonders if he will be shot down as the “messenger” for his attempts to caution against the analyst’s pathological narcissism or the breakdown of self-analysis.

The above examples – be they from a candidate or a faculty member perspective – provide past and present descriptions of many faces of candidate anxiety. They also offer a background useful for framing the particular anxiety experienced by a potential candidate applying for psychoanalytic training or seeking a referral for training analysis.

Inclusion in / Exclusion from Psychoanalytic Training

Exploring the qualities psychoanalysts seek in the candidates they wish to accept for training is complicated. First, our field has an extensive history of excluding members from its discipline. Bergmann (1993, 1997, 2004), Eisold (1994, 1997, 1998, 2003), Gifford (2005), Mosher and Richards (2004), Reed and Levine (2004), Richards (1999), and Wallerstein (1989) all speak directly to some version of the linkage between political forces in our field and exclusion of certain members based on theoretical differences. These papers document a remarkable and undeniable history of exclusion of members, whether illustrating the extensive history of institutional schisms or attempting to understand the psychological and/or institutional motivations for rejection from membership.

Most relevant to this paper are questions about which of these forces drive admissions criteria for a potential candidate, both now and in our history. Bernfeld (1962), Bird (1968), Eisendorfer (1959), Greenacre (1961), Holt and Luborsky (1955), Kappelle (1996), and Van Der Leeuw (1962, 1968) have all made essential contributions to the question of selection criteria. Reeder (2004) summarizes the essence of this literature in his chapter, "Central Functions in Psychoanalytic Training" (pp. 85-94).

Reeder begins with timeless questions, such as who makes a "good enough" analyst, and who will make an exceptional analyst. And how might we be able to reliably predict from the admissions process which applicants will fall into which category? Reeder demonstrates that these questions were not asked formally in the earliest days of analysis, and became answerable in the 1930s and 1940s only through a trial of analysis, which could also be costly. Reeder compellingly documents how since the 1940s:

... [T]he selection of candidates is the most difficult part of the training system to organize. And that is something no one seems to agree on, while at the same time, seemingly no one ever gives up attempts at bettering the system or at least entertaining the hope of one day having better methods (p. 86).

He describes the numbers and types of lists that catalogue the ideal traits of the analyst, from common to obscure: from the capacity for empathy and identification to the capacity to capture the essence of any given moment. Reeder distills the question down to:

[D]o we believe that we are sorting out the most gifted and suitable individuals, or do we restrict ourselves and avoid those we think are unsuitable or even detrimental to our patients... (such as those with psychosis, severe neurosis, perversions, or sociopathy) (pp. 88-89)?

Reeder struggles with this historical tension, as he considers several key questions. Will the truly gifted be excluded? Are average psychoanalysts of mediocre company or clinical talent? Do "normopaths" pass through the selection system only subsequently to display a deeper inability to relate emotionally with the depth required of analytic work? Reeder concludes that when the final assessment bases its conclusions on psychological characteristics and character traits, the admissions process becomes a study of psychopathology. Psychoanalyst

admissions committee members naturally resort to their clinical language and diagnostic apparatus, creating a climate of evaluation that Reeder feels might be the seed of later institutionalized paranoia.

Add to this the issue of the degree of psychic pain and insight that enables the applicant to handle the depth of analytic treatment, and the question of selection becomes even more complex. Reeder concludes with the idea that as uncertain, poorly studied, and without objective merit as the selection system is, we still would not do without it. We want to know as much about the candidate's "prognosis" as his "diagnosis," information that would come only from the subjectivity of an interview.

The Impact of the Referral Process Upon One's Training Analysis

A review of the literature resulted in the surprise discovery that, despite the centrality of beginning a training analysis to a candidate's experience of psychoanalytic training, almost no mention is made of the process of referral. An extensive literature on the training analysis exists, including contributors such as Thomä (1993) and Van der Sterren and Seidenberg (1975). Recently, Cabaniss and Bosworth (2006) summarized this literature in their exploration of the aim of the training analysis. It is noteworthy that they do not mention the potential impact of one's referral. In fact, in all of the literature reviewed, only six references to this referral process emerged.

Ernst Falzeder (1994, 1998) speaks generally about the ultimate impact over many years of one's referral in his explorations of the psychoanalytic "family tree." He posits that the scientific and personal relationships of psychoanalysis intertwine closely with the transmission of theory and technique, especially given the priority assigned to the experiential learning of the candidate's personal/training analysis. Falzeder hypothesizes that one cannot separate the history of ideas in psychoanalysis from the family trees of who analyzed whom. His illustrations of family trees suggest that much of what analysts theorize and/or write about stems from the school of thought espoused by their analysts. Whether through examples of "apostolic succession" (Falzeder 1994, p. 73) or illustrations of the close correlations between the emotional impact of analysis on one's use of identification with his or her analyst, Falzeder powerfully documents the ultimate impact of one's original referral for analysis on one's career.

Maxwell Gitelson (1954) provides an early example of the conflicts surrounding choice of analyst by referring to Clara Thompson (1938):

To the extent that freedom of choice exists, we see decisions tending to be based on the impression the candidate has had of the analyst in terms of his own neurotic needs. For example, these may be based on the unconscious recognition of a prospect of gratifying unconscious wishes; or the person of the analyst does not threaten the character defen(c)es, or even promises to sustain them (Thompson, C.). However, "choice of analyst" is largely an academic consideration. In most instances, this is not feasible... (p. 178).

Shelley Orgel (1982) surveyed American and Canadian institutes with the aim of better understanding the selection and function of training analysts (hereafter referred to as TAs). This study included reviews of the referral process to TAs. Orgel asked if it is common for applicants for candidacy to have started their analyses before applying to the institute. At that time, many applicants were in analytic treatment before applying, and most of these applicants were allowed to stay with their TAs. At institutes where it was less common for an applicant to be in prior analysis, several methods of referral were used: free choice by the candidate, assignment of the TA with a degree of choice or right to refuse, or the institute's right (if the applicant were accepted for training) to reassign the applicant to a new TA based on factors such as the TA's old age or a belief that some TAs are "more equal than others" (p. 426). Finally, one institute required that *any* institute TA and psychiatrist-patient clarify intentions to pursue analytic training – even if analytic training seems unlikely at best – as a requirement of *any* treatment at the outset of *any* consultation for treatment. Orgel encourages "careful analytic and self-analytic attention by both patient and analyst respectively within the analytic situation" (p. 426) to motives that may arise in the not-yet candidate analyst other than the wish to choose the best possible analyst. These may include the wish to convoy upon the TA's reputation in training or to garner favor with the admissions committee by being in treatment with a politically well-placed TA. Orgel concludes with incisive, synthesizing questions: "How would these 'free' choices compare with those the administration would select if it made assignments? Viewed retrospectively, how much and in what ways does 'free' choice v. assignment influence the total educational experience of candidates?" (p. 433).

Erich Simenauer (1983) cites the experience of the German Psychoanalytical Association. He states that free choice by the trainee has become the rule, but that assignment must occur when the number of trainees is great. Simenauer cautions against two hazards that he believes arise from assignment to the TA. First, he cites an occasional incompatibility of fit. He also details a trainee's potential regret if s/he were assigned a TA of his/her second or third choice but still had a successful analysis (perhaps believing that the analysis was limited by being conducted by a seemingly lesser analyst). Simenauer states that either of these situations will have an obvious negative impact upon the transference from the beginning, perhaps triggering subsequent acting out behaviors. He cites examples of sibling rivalry between candidates, where one candidate resents another for gaining access to the first-choice TA. In another example, a candidate sought supervision with a TA who had initially rejected him as an analysand. Likewise, Simenauer cautions the candidate who is successful in obtaining the TA of first choice against developing pathological identifications that might conceal negative aspects of the transference.

Emanuel Berman (2004) also cautions against assignment of analyst. He believes this procedure discredits the analyst-analysand match and its vital contribution to the success of the analysis. He characterizes the belief that administrators can achieve a better match than the trainee as "paternalistic, grandiose, and unrealistic" (p. 179).

Daniel Shapiro (1974) took a retrospective look at the training analyses of 123 analysts. Curiously, he found that only two of his respondents had a problem with assignment. Thus, as much as we may hear educators state today that they *believe* it is critical for candidates to seek their own TA (see this paper's survey data), these results demand that we consider the data.

When we look at larger numbers of candidates referred to TAs, might the outcome of the analysis be independent of the referral source, if all is dealt with analytically?

Survey

Participants and Survey Instrument

Questionnaires were mailed to 25 analysts whose scholarly writing conveys an interest in the history of psychoanalytic education. The sample also was based on diversity of: training time periods (1950s to 1990s), training analyst status, American Psychoanalytic Association (APsaA) membership, gender, and geography (domestic and international). Respondents were given the option of filling out the questionnaire anonymously or calling me to schedule a phone interview.

The questionnaire comprised two pairs of questions. The first pair concerned admission to/rejection from psychoanalytic training:

1. Tell me your thoughts about acceptance to versus rejection from psychoanalytic training, both today and in the history of psychoanalytic education.
2. In your opinion, how might this history of acceptance or rejection affect the psychological expectations, conscious and unconscious, of the beginning candidate today?

The second pair of questions focused on the process of referral to a training analyst:

3. Tell me your thoughts about the referral processes for a candidate (to his or her training analyst for training analysis), both today and in the history of psychoanalytic training.
4. In your opinion, how does this referral process affect the psychological expectations, conscious and unconscious, of the beginning candidate?

Basic demographics of the 11 analysts (44%) who responded are as follows: Five did the majority of their training from 1950-1959; two each trained from 1960-1969 and 1980-1989; and one each trained from 1970-1979 and 1990-1999. Nine work in the northeast U.S., while two work west of the Mississippi. Eight of the eleven are training analysts. Ten are members of APsaA.

Survey Results

General Observations

In the course of their interviews, participants often moved seamlessly between the paired questions (that is, #1 and 2, and #3 and 4), making a division between them artificial. Therefore, I blended participants' quotations regarding both topics (admission to/rejection from

psychoanalytic training and referral to a training analyst) into a single THEN category and quotations about the present into a single NOW category.

In addition, there was a surprising degree of convergence among those interviewed. I expected to find that older, more traditional members of the field (e.g., training analysts who trained decades ago) would be more protective of the older generation's history. Likewise, I expected that younger members might be more vocal in their opposition to our history of psychoanalytic training, being on the receiving end of the older generation's teaching style or mindset. Instead, interviewees for this project seemed to be, more or less, in agreement. Each spoke with a sense of seriousness about the damage experienced by applicants or candidates along the way. Each took seriously the potential connections between our history of close-mindedness and the creation of candidate anxiety. For these reasons, instead of presenting interviewees' ideas individually, I have created a composite, narrative response to each question from the highlights of many hours of interviews. This approach also provides greater clarity, coherence, and anonymity. The result is listening to one voice speaking about the oral psychoanalytic history of generation of candidate anxiety.

Naturally, one potential bias exists in the self-selection of interviewees who chose to participate in this study. It may be that those who responded most identified with candidate anxiety or with feelings of injustice regarding their own experiences as candidates. However, these anecdotes are those from which we stand to learn the most, as they may reflect mistakes our profession has made collectively.

While these interviews do not provide a comprehensive history, they do serve as a useful point of departure for sampling the major issues that emerge when experienced members of our field reflect upon the impact of admissions and referral processes upon their anxiety as beginning candidates.

Participants' Responses (in blended quotation) and Author's Reflections

Admission to/Rejection from Psychoanalytic Training

Interestingly, seven common themes emerged in participants' spontaneous replies: 1) exclusionary criteria; 2) validity of the admissions process; 3) paternalistic attitude/authoritarian thinking; 4) admissions committees as clinical study groups; 5) rejection from psychoanalytic training as a rejection of self; 6) candidates' sense of being stripped of autonomy; and 7) institutional composition.

Exclusionary Criteria

THEN

Institutes of the American were very competitive; being accepted to an institute had a major impact on one's career – not just to which institute one was admitted, but whether one was admitted to an institute at all. Multiple exclusionary criteria existed. One was an institute's policy of only accepting candidates from the residency program attached to a nearby hospital. Others were homosexuality, pregnant women, candidates with psychosomatic illness, or scholarly, intellectual borderlines. The question of lay analysis

always comes to mind [when] thinking about exclusionary criteria. My assumption – not based on hard fact – has been that prior to 1940 it was pretty easy to get into analytic training, and that the rise of the fortunes of psychoanalysis and psychoanalysts at the end of World War II and the reorganization of APsaA created a seller's market that lasted pretty much up to the time of the lawsuit that forced APsaA to accept large numbers of non-physicians.

NOW

Today, it is a buyer's market, but some criteria still seem desirable – for example, not accepting psychotic or psychopathic personalities. What we really look for is motivation, analyzability, and health. Institutes today seek healthy, competent, reasonable people, and if they are passionate about analysis, then that is an extra. The need for applicants is intense, and the competition amongst institutes has increased. The joke is, "If the applicant has a blood gas greater than 60 and English is a second language, then bring him on board!" Today more candidates are accepted, perhaps being dropped later if it turns out that they are not suitable to do the work. The fear of being rejected or dropped after acceptance is much reduced. Historically, the issue of non-MDs being discriminated against is still present today. The experience of institutes has been that the presence of non-MDs – especially PhD psychologists – has enriched the classroom experience.

PERSONAL REFLECTIONS

I wish I had known that there had been a history of exclusion from training, whether along the lines of non-medical background or homosexuality, as examples. I also wish I knew that these differences had been expressed along political lines over the decades of our history. Familiarity with this history of exclusion would have helped me to appreciate the depth of linkage – historically speaking – between psychoanalytic politics and theory. In turn, I would have been better able to de-link these two in my mind. When I heard an idea that didn't make sense, I might have been more able to ask myself, is this politics or is this theory?

Hearing of today's buyer's market prompts me to wonder if our history has set up the mindset to deprecate contemporary analysts by suggesting that we don't "have what it takes." If only the best of the best were accepted then, and if mere warm bodies are taken today, then might today's candidates feel inferior? Perhaps this stance contributes to the feeling that we, as candidates, are not qualified to comment on a matter, or are not knowledgeable enough to "really" react to material in a meaningful way. If there exists a sense that contemporary analysts are not as skilled or bright as those of the prior generation, might this belief contribute to the intensity of debate over certification?

Validity of the Admissions Process

THEN

I doubt the validity of the admissions criteria. You would have to wonder, given some of the great analysts that were trained in the field but were rejected from one institute – but who went on to have wonderful careers at other institutes and to genuinely contribute to the field of psychoanalysis – how much the judgment of acceptance was accurate at that

time. The admissions process of yesteryear was insensitive and inconsistent. For example, one interviewer used a “1A, 1B, 1C” outline form questionnaire over two sessions to gather my history. Another used an elaborate clinical assessment involving Rorschach inkblots and stress interviews. Another interviewer told me, “Ah! Now I understand your case.” This came as good news because it meant I had an analyzable neurosis and was, therefore, “analyzable.”

NOW

We like to think we are better at evaluating applicants now. The interview that I would do today is more sophisticated than the one I had as a candidate. We know more, but other factors may interfere with the use of that knowledge, like competition among institutes for candidates. Still, interviews for analytic training today are anxiety provoking – like those of going to graduate school but even more so. There are the occasional rumors of invasive interviews. But as it turns out, the stereotype of being asked to report masturbatory fantasies may be just that. We cannot predict who will be a successful analyst. The whole process is a lot more arbitrary than I think we would like to admit. I am not sure how asking someone about their sexual fantasy three nights ago when they were making love is going to help in terms of figuring out if someone is either a sociopath or a destructive character.

PERSONAL REFLECTIONS

This passage invited my curiosity about the “admissions contradiction.” If, in retrospect, we say that the admissions process was – and perhaps still may be – invalid, then how do we understand the intensity of psychoanalysts’ convictions of the “truth” about who would make a good candidate? Knowing that senior members in the field believe the process of admissions might be arbitrary would have helped me to unseat the sense of authority I attributed to the field. It would have helped me to de-idealize convictions of truth, and to see them more as another voice to consider as I attempted to tune in to my own internal reaction to teachings. If we believed historically that we were so right about this matter and turned out to be wrong, then what other examples might there be (e.g., formerly held beliefs that we should not convert cases, that TAs should report on the progress of a candidate’s analysis, or that neither medication nor the telephone should be used)?

Paternalistic Attitude / Orthodox, Authoritarian Thinking

THEN

An attitude of paternalism prevailed. Historically, institutionalized training involved a one- to two-year analysis – not the nine-, ten-, or eleven-year things until 50 years of age while still taking classes that we see today. Our rejections have reflected a well-meaning but unfortunate paternalism more than either politics or theoretical differences. There are good and bad consequences in both directions. Some candidates do not find satisfaction in analytic work. It may well be that some applicants whose applications were rejected may have been spared suffering and loss of opportunity. Historically, this was not true for the psychologist rejected in the 1950s. Those who found bootleg training developed intense resentment to APsA and its societies and institutes. The power of transference still makes for high anxiety. Those responsible for decision making must do everything

they can to protect those they do not accept.

As an example, we were prescribed a set of papers to read from several journals, with only a few from the *International Journal*. We were discouraged from reading anything from the Kleinians because they were thought to be crazy. These trends would impact the candidate because, in that day, one theoretical school did prevail. There was a real sense that there was *one* way to do analysis. I recall trying to figure out if de-neutralized aggression or deinstitutionalized libido was in the room at any given moment and how to work with it. My understanding was that one could figure out in the moment what would be theoretically useful to the patient.

NOW

In today's world, there is much less conviction about a particular theoretical school. Candidates are much less compliant with authority today, and this reflects a real change in the sociology of the field. Candidates wrestle with whether it is worth it to spend the money, the time, and the time away from his or her family and kids to do all of this reading – to gain what? There has been a greater involvement of the American Psychoanalytic in the International Psychoanalytic Association (IPA). Nobody in the '70s paid much attention to the IPA, and now there is much greater willingness to accept people from different perspectives. Overall, I think applicants are more sophisticated about what it is okay to be open and honest about in admissions interviews. Maybe there is less of a need to be a "normopath?"

PERSONAL REFLECTIONS

Though the "then" quotations above are more about the former conviction of psychoanalytic institutes regarding their preferred theoretical schools (and rejection of those who differ theoretically), I believe the close-minded attitudes of the day would also characterize attitudes about the "then" admissions process. These interviewees illustrate how genuinely we believed we could be objectively right about subjective experience.

The "now" group shows the opening of our field to new ideas, suggesting that we are admittedly more pluralistic and subscribe to a post-modern theory of mind where no one subjective idea can be inherently more correct than another. Applying this stance to the admissions process would help to reframe the question of "Will I be accepted?" to "Why would the institute not accept me?"

However, I wonder if this trend towards pluralism and open-mindedness corresponds with an actual decrease in candidate anxiety. Might candidates: 1) not be taught openly a spirit of pluralism and hence still fear an authoritarian force in education, 2) experience even greater anxiety in the freedoms of open-mindedness and uncertainty, or 3) have to pass through an irreducible anxiety candidacy?

Admissions Committees as Clinical Study Groups

THEN

Institute admissions committees became, in turn, kinds of clinical study groups, which

might not always have the applicant's interest in mind. In earlier times, politics played – or allegedly played – a much larger role than in the past decade or so.

NOW

There are a lot of ways in which institutes could be more responsible to their applicants. For example, there may be a parallel pressure felt by the analytic interviewer to do an outstanding presentation to his or her admissions committee. I wonder if the analyst is anxious to strut his analytic stuff in an analytic interview. If he were treating the person, he would not push so far. If this were another kind of interview, that kind of questioning would be altogether out of place. So people overstep their bounds. I wonder if it is a kind of a countertransference enactment for the analyst interviewer to think that he is being analytic.

PERSONAL REFLECTIONS

This perspective on the admissions committee as a clinical study group fascinates me because it opens my mind to consider that the analyst interviewer might likewise be anxious about the process. It is so normal for the applicant to be preoccupied with his own anxiety that he has little mental space to consider the interviewer's anxiety. Knowing that one's interviewer might be anxious or feel he had something to prove to his committee might help one to better understand the roots of a question that feels too intrusive for the frame of an interview. In short, this passage opens the interview field to two people and illustrates the reasons an interviewer might be anxious. It also makes me wonder how the interviewer's anxiety might shape the architecture or tone of any given interview. In parallel, it opens the door to wonder how much the group dynamics or theoretical perspective of any given admissions committee (now turned advanced clinical study group) impacts the interview/admissions process of any given applicant.

Rejection from Analytic Training as a Rejection of Self

THEN

Naturally, as analysts we consider a host of possible conscious and unconscious effects. Some of these may be summarized in the idea that individuals feel it is not just an application; they themselves stand to be rejected or accepted, with inevitable and powerful transferences contributing to the field and creating high stakes. In the '60s, becoming an analyst was still prestigious. Everybody studied and felt lucky to get into analysis. There was pressure to become an analyst in order to have a successful practice or to become a department chair. Rejection from the institute did not seem to feel like a competition as much as a judgment of a person's worth as a human being. If someone was rejected at that time, it felt like a real blow. Often, the exclusionary criteria at that time were things like "sociopath" or "borderline." A close friend of mine was rejected from the institute; this was felt to be a shameful and demoralizing event that impacted him for the rest of his life. Others might become either disillusioned with the field or ardent, vocal critics of psychoanalysis. The joke is that if Freud himself applied during this time period, he would have been rejected.

NOW

But analytic training interviews are still ultimately about one's self; and that, in and of

itself, generates anxiety. Every interviewee tries to contain the anxiety of potential rejection. Even in today's climate, rejection can be crushing and scarring, if not more so. This humiliation can leave the applicant feeling ashamed and stigmatized; there are terrible repercussions in any community that is quick to reject an applicant for training.

PERSONAL REFLECTIONS

These words capture what I believe to be the essence of candidate anxiety. We are anxious as candidates because we sense that more than our ideas are at stake; we worry that our entire sense of self might be on trial. These interviewees tell us that we use ourselves in this field, and, therefore, the interview in its essence is still about that sense of self. Hence, the rejection can be intensely injurious. This response highlights precisely how sensitive and precarious one's sense of self is at the interview for admission. I believe the sensitive, effective interviewer needs to have this core notion in the back of his mind at every stage of the interview process.

Candidates' Sense of Being Stripped of Autonomy

THEN

A candidate's sense of autonomy can be stripped by virtue of his interview being a measure of his worthiness. If your worth has been judged as being so positive by your acceptance for training, then it would seem that this stance would perpetuate a candidate's feeling subordinate or inferior. If it is your worth as a person that you sense is being judged, then you would be anxious about any kind of future mistake. I believe the admissions process reinforces this feeling of hierarchical indoctrination.

The intensity of competition of earlier times restricted analytic thinking and feeling. In the 1960s, there were plenty of candidates and plenty of analysts, and this directly impacted the nature of training. The candidate had the feeling that if he did not fly right, there were three others in the wings waiting for his spot. Hence, the "classic analyses" and stories of candidates whose analysts would remain silent for weeks but would still tolerate it for fear of rejection. There was such anxiety that the candidate could be replaced; this could really color the experience of your analysis.

There seems to be a pecking order in organized analysis. The first year you are accepted; and then you graduate; and then you get certified; and then you become a training analyst; and then you become eligible for the Board on Professional Standards. Because this system went on to create pressure and theoretical and political conformity, it seems to run counter to creativity and other forces of innovation. I believe that there is stagnation in our field today, and that much of that is accounted for by this very pecking order. Those that need the organization feel they cannot afford to speak out.

NOW

Admission anxiety may still contribute to candidate inhibition, aggression, and ensuing conformity or rebellion. It seems that the admissions process could lead to resentment and anger about the system and a feeling that the profession was both arrogant and aloof

at an institutional level. An unhelpful chemistry of fear is one result that inhibits discussion, play, and creativity.

If one is accepted for training, there seems to be a perverse sense of narcissistic gratification and a kind of smugness that could develop in analytic candidates. While this could also be analyzed, it might also confer on the candidate a type of feeling that he or she is superior to others as a function of acceptance. Acceptance unconsciously means anointment, which can pose a problem for those who like their narcissism on the sunny side and prefer to avoid their own aggression.

PERSONAL REFLECTIONS

These responses directly concern the admissions process as the gateway to candidate anxiety and address the potential impact the admissions process might have. If the process of analytic training begins with a fear of acceptance potentially reinforced at an institutional level, then it makes sense to wonder about the fate of this fear as time moves on. If we feel our autonomy has been stripped, we will be anxious about to whom we belong. I speculate that this climate of anxiety might be alive and well today in institutes. Inasmuch as it begins with the admissions process, I believe institutes would do well to examine their contribution to this anxiety, particularly where candidates are concerned.

Furthermore, these passages highlight how crucial safety is to analytic work and learning. If a generation of analysts felt they had to “fly right” in their analyses or else be replaced, then what impact might that experience have upon the analyses this generation has conducted on today’s candidates? What attitudes towards authority in psychoanalysis might this generation of analysts transmit to the potential candidates interviewed for training?

Institutional Composition

THEN

Looking back, it is clear that smart people were doing the best they could and truly believed in what they were doing; there was a real thrill and excitement about being an analyst. For example, the 1920s and 1930s were a hugely productive decade in analytic thinking. There were all kinds of wild theories; it was a very creative time in our history, and in a sense, intellectually or theoretically, we have been running on the fumes of that period for decades.

NOW

Built-in assumptions about institutes’ own unconscious choices about whom they would like to train might compromise the work. These assumptions are not examined; I have a hunch that things are better now because people are being “nicer” about the process. A good institution balances homeostasis and change. I think we weed out a particular character type that, in the name of non-pathological notions of conformity, can kill an institution. When the training process graduates people at fifty years of age, you remove a certain developmental stage and motivation for change from the community.

PERSONAL REFLECTIONS

This response compels us to ask which unconscious assumptions we make about those we would like to train when we invite them for admission, and how we arrive at those assumptions. Do we seek conformity or diversity of thought? Do we want to train candidates who mirror our beliefs, or do we wish to inspire creativity and evolution of theory? For example, when we interview an applicant who we feel has an intuitive knack for the field, have we selected a candidate who mirrors our own beliefs about psychoanalysis, or have we chosen an independent thinker who might further the field (these need not be mutually exclusive)?

Process of Referral for Training Analysis

Participants' answers about the referral process and its contribution to candidate anxiety spontaneously organized around four themes: 1) an orthodox versus more open-minded attitude toward the TA's role; 2) assignment versus a "free agent" model of referral for training analysis; 3) political implications of one's training analysis; and 4) the impact of these decisions on the candidate's life.

Orthodox Versus More Open-Minded Attitude Toward the TA's Role

THEN

Reporting criteria were standard. One's TA had a veto over when the candidate started classes and cases, and that function could create all kinds of anxiety inasmuch as it blended treatment and academic progress under one roof. In the old days, people just accepted that in order to enroll at a particular institute, one said goodbye to one's treating doctor and began anew with a TA at that institute.

When analytic treatments went from resolving neurotic symptoms to treating character structure, questions of indoctrination in the training analysis arose. A huge seller's market developed; add to that a charismatic, narcissistic analyst, long analyses, and one prevailing theory of mind. That would leave the candidate with the sense that he had to say the right thing.

NOW

The pressure today is to scoop up candidates as soon as possible. There is pressure to afford people the opportunity to get into treatment early with TAs if they have any inclination that they might be interested in analysis, either personally for their own treatment, or professionally, as students of the field. Some institutes have de-linked the need to be in treatment with one of their TAs from the training criteria. In spite of competition between institutes, the agreement in New York City (of the 3 institutes certified by APsaA) is to accept each other's TAs who are in good standing. Many favor this step and look forward to seeing what the outcome may be over the years ahead.

PERSONAL REFLECTIONS

This shift in focus from analyst to candidate illustrates a basic trend in our history. Where we used to mandate reporting and encourage monolithic thinking, we now find ourselves

going after any possible candidate, welcoming his or her potential admission/contribution to the field. While we used to insist on using our own TAs as gatekeepers to, arguably, the most valuable component of our training, we now consider trusting other institute's TAs enough with this task. Implicitly, the TA position has become less authoritative. I wonder if that trend allows the analysis, potentially, to be more for the candidate's individual growth.

Assignment Versus a "Free Agent" Model of Referral for Training Analysis

THEN

Assignment of one's TA occurred regularly. Perhaps one was given a list of TAs and told to go shop, or perhaps one was assigned an analyst with a stipulation that one could always withdraw if the analysis did not seem to work out. Perhaps you would be told that "so and so" has time and to go see that person. Those candidates that were assigned ended up with the luck of the draw. It was almost like having it be decided at birth which nursery school one might attend. If you were lucky, then you could advance. But if you were naïve and wondered why you were not progressing within the hierarchy of the institute, then this assignment was unfair. The assignment of an analyst, much like reporting, seems like a vestige of orthodoxy.

NOW

Referrals for analysis take place via many channels now. Some consult trusted teachers or mentors. If a candidate-to-be were to have to leave his or her existing treatment in order to commence with a TA, then that prior treater might also be a valuable source of input into the referral. Many institutes believe strongly in not assigning TAs. Many more candidates come today to analysis by choice rather than by having an analyst assigned. Now almost always, there is more of a free agent model in place. Non-binding referral (or discussion of alternatives) seems fine and helpful. Assignment does not. I would expect assignment to have an adverse effect for a significant number of candidates, tending to promote reaction formation, submission, and excessive idealization in some, and in others, helplessness, paranoid or suspicious attitudes, anger, and self-defeat.

It is hard for me to imagine that a system [that] short-circuits individual decision making is ever a good idea. Since I do not believe I could competently assign anyone (though I am happy to make non-binding referrals), my narcissism will not permit me to believe that anyone else (let alone a committee) can do it competently, either. Infantilization of the candidate, assertion of an undue power structure, or problems of popularity, short or easy analyses, conveying, protecting or patronizing a subgroup, etc. are all evidence of difficulties with assignment. It would seem to undermine the basis of authentic relationships, which are necessary for analytic relationships. As long as a candidate always knows that he or she has a choice, then the policy today is much more for the candidate's benefit. Telling the candidate that it is okay to refuse his assignment is not good enough. It is too hard for candidates to really believe that this would be true. The institute needs to encourage candidates to shop around for the right fit. The list of available TAs in the hands of an adult (and candidates are very competent, effective adults) is quite sufficient restriction on choice.

Still, the process seems mysterious. It seems to me that not a lot of light has been shed on this topic, and that when people are left in the dark, they can make up what they want. Some people at the institute might have an intuitive feeling about which candidate might fit with which particular TA, but I think that most of the direct referral process for applicants is about favors.

PERSONAL REFLECTIONS

First, this response provides initial answers to a question difficult to answer: How are candidate referrals for training analysis made? It seems that, almost without exception, assignment of one's TA is less common today than before. Is this statistically consistent with candidates' experience?

Second, this response also underscores that the *means* by which one arrives at the training analysis is perhaps as important as with whom one has his or her training analysis. I understand this concept emotionally and was frankly surprised to hear so much active advocacy for the free agent model. I presumed that many candidates today were still assigned and that they trusted that if their analyses were good enough, then their feelings about that assignment could be understood.

Numerous complex factors converge in the theme of assignment. For instance, if assignment left a candidate feeling paranoid or suspicious but these reactions were understood analytically and worked through meaningfully, might not the fact of the assignment become virtually irrelevant? Or, if a candidate chose a TA out of an intuitive feeling – one that mirrored a sadistic streak reminiscent of significant family history – might that free agency prove more complicated? With so many variables in play, these examples call for significant individual attention to each case.

Political Implications of One's Training Analysis

THEN

Some residents applied for analytic training already having selected analysts whom they knew were in the hierarchy structure at the particular institute where they wished to train. This process was very different than for those who were not already in analysis. Assignment ended up creating a culture of "ins" and "outs," where the "ins" trained with a particular group of analysts involved with the education of the institute and the "outs" trained with the more politically outside group. The phenomenon of convoying – where a candidate might piggyback on the shoulders of his TA and use his affiliation as a way to garner status – occurred.

NOW

In today's culture, it feels like a big deal to change analysts. There is a real toggle between quality control versus saying goodbye to an analyst with whom you have bonded. That freedom of choice might one day allow a candidate to stick with a non-training analyst *or* to get a referral to a TA. Deprivation of choice for all candidates promotes regression and pseudo-conformity; it detracts from mature, independent thought and judgment. I feel sorry for the person who is assigned an analyst and has a negative

transference reaction. They then have to sort out if they are in the context of a bad fit, or if they are just having really strong negative feelings as a function of the treatment's working. The institute could do a lot in that situation by creating a consultant that was available for exactly those types of situations.

This debate questions the very boundaries of our field, not only for the candidate but for the analyst, too. For example, when a candidate chooses to train at an institution different from the analyst's, questions of loyalty, betrayal, and family systems all arise. Interpreting of the dynamics of the candidate in question – why s/he may wish to train elsewhere in response to the transference or his/her life history – requires work. And when the security of one's decision to join one family (an institute and a TA from that institute) dissolves, destabilization occurs. There is a departure from ideas of compliance, conventionality, acceptance, and of there being one right way to do things. Now, a candidate would have to tend to the anxiety of not feeling the security of belonging to one home. This example illustrates the essential dialectic in analytic training today between authority (meaning a knowledge base and a quality control) and a sense of the boundaries of the profession (opening TA status to those less formally certified).

PERSONAL REFLECTIONS

This question invites consideration of the choice to allow oneself to be referred for personal training analysis by one's institute versus seeking a referral by shopping around at the beginning. If the stakes – cast in political or personal terms – are so high, when does one allow for the luck of the draw? I had never heard of convoying until starting this project, so learning that candidates might choose an analyst based on political status struck me as both novel and transparently ambitious. If one is worried about finding the right personality fit, does one accept the assignment and spend years discerning whether his/her anxiety is about fit or about transference? I suppose this response helps raise the question of how one wrestles with whether one had the “right” analyst and what constitutes a “right-enough” analysis. Inasmuch as one's analysis is vital to one's change as a person and growth as a clinician, the method of referral is a central hinge of the entire process.

Impact of These Decisions on the Candidate's Life

THEN

Second analyses commonly took place after one's training. I did have a second analysis, and this idea, based on a supervisor's and mentor's suggestion, came as a real blow at that time. However, this experience ended up being extremely positive; that analysis opened me towards change and keeping my mind open for the rest of my life. But it was not part of my training. The most important thing is the match between the TA and the candidate. If this fit is good, any resistance or any of these anxieties could be understood and analyzed.

NOW

Analysis is an awesome life and training decision. Candidates could be left wondering whether they made the right choice in choosing their TA. Without a lot of help from the institute, this uncertainty might really grow over the course of a lifetime. I wonder about

the idea of candidates being encouraged to interview with multiple TAs, so that they would have a chance to see what fit might be best for them.

There is still a pull to identify with the aggressor in our training and, if that were to happen, something is truly wrong. The switching of analyst[s] is still required as a part of acceptance to a particular institute, and this behavior seems like a judgment that comes from on high and creates a lot of resentment. Perhaps this is a life event that some candidates never really get over.

PERSONAL REFLECTIONS

This response calls attention to perhaps the single most important emotional factor in all of training. In this day and age, candidates enter this field because we want to. We want to help patients and we want help for ourselves. We are taught to think about ourselves in the context of our patients' lives and to learn that we, as analysts, will be the most important person in the intrapsychic world of our patients for a decade or so. The person we enter analysis with will become that for us. In order for this to go well, and to avoid unnecessary second analyses or unnecessary switching from one analyst to another, I believe careful attention must be paid to every aspect of this process. Mistakes will occur, of course; but the more institutes think aloud about these matters, the higher the probability that good ideas will flourish to create good outcomes.

Perhaps we have to risk all not going well. For example, what if a candidate applicant was given the choice of an institute TA versus staying in pre-existing treatment with a more recent graduate? The candidate would have a different experience, to be sure; but would this experience be any less valid in conveying the conviction that analysis is a deep, meaningful treatment? The candidate could always pursue a second analysis after training, if desired; perhaps the wish or need for a second analysis should not be seen as shameful, but as an extension of one's psychic development. It does seem to me that if one wondered over the course of a lifetime whether s/he had the "right" analysis, then maybe that worry alone would be an indication for further treatment.

Discussion

For all candidates, an earlier appreciation of historical aspects of psychoanalytic education, such as those reviewed here, might facilitate the search for corresponding intrapsychic issues. This exploration could help minimize the generation of candidate anxiety. For example, while I felt that I could begin to ask these questions towards the end of my candidacy, I was too intimidated to do so earlier on. In contrast, I found the senior analysts I interviewed for this project quite candid and willing to talk, with seemingly little fear of consequences. This evolution from fear to comfort – in correlation with one's experience and level of training – is striking. It makes me wonder what, in particular, allowed that transformation to occur.

The participants in this survey elaborated several recurrent, poignant themes. In response, I will reflect on the process of writing this paper as a window into candidate anxiety and inhibition in general, and candidate writing inhibition in particular. These reflections are followed by a summary of what I most wish I knew at the beginning of my candidacy with regard to the issues that emerged in the course of preparing this paper.

Reflections on the Writing Process

At its best, I believe that analytic training encourages curiosity, open-mindedness, and the belief that difficult, complex, conflictual themes may be spoken on the record without redress. When fostered from the beginning, this wish to learn more develops into a way of being and thinking that can occur more naturally and spontaneously. Despite the fact that I regard my process of training as a largely positive one, I nevertheless have genuinely worried about the impact on my career of presenting and publishing this work. I view this concern as a vivid example of candidate anxiety.

Many questions occur to me. To what degree do my own anxiety and fear about this project reflect my own internal need to create a fantasized punishment for speaking aloud – imagined authoritarian ogres to keep my own oedipal strivings in check? And how much are “they” actually out there? For example, do members of the Committee on Certification truly wish to keep the process closed? Do they resent the democratization of the field and wish to keep the discussion of matters like admission or orthodoxy more contained, especially at the candidate level? When I entertain the fantasy that I will no longer be eligible for certification as a function of this publication – because I have spoken out and not simply gone along with the straight and narrow, doing the right thing by being quiet – have I exposed merely my own inhibiting fear? Or have I accurately perceived a point of view embodied by this “resistant old guard,” the proverbial old demons of this new debate? How much does this very fear mirror the anxiety a child has about having a voice at the dinner table in the midst of a family fight? Am I acting out something at play in the larger family system of APsaA?

It would be a significant oversight not to consider whether this paper also reflects an enactment in the context of terminating my own analysis. This inquiry proves confusing. I can readily identify several possibilities: my own concerns with inclusion/exclusion; anxieties about my own referral for training analysis as a potential candidate; or my own wish to prove to my analyst that he is part of the old guard and that I can take him on, competitively, via the careful exposé of his generation’s rigidity. By suffusing our psychoanalytic work with fantasized or actual tales of abuse from psychoanalytic history, I keep us from feeling closer, or like two men who have been intimately involved for years in intense, personal conversations. Or maybe it is some of all of the above. But in what other field would writing about these topics interface as directly with questions of transference? Perhaps this section will be experienced as “too personal,” but I also wonder how much that very concern embodies, recreates and echoes the candidate’s experience of speaking in admissions interviews, analysis, class, supervision, or in public at the institute?

What I Wish I Knew When I Began Training but Required Years to Learn

- I wish I knew that psychoanalysis today operated in a contemporary, pluralistic world where no one school could legitimately claim to own the truth; in fact, the state of knowledge with which we work could not carry that type of authority. A lecture given years ago at the New York Psychoanalytic Institute by Judy Kantrowitz (ironically, a discussant of a shortened version of this paper, presented at the APsaA Affiliates Forum, January 19, 2006; her discussion appears

in this issue) did wonders to assist my own analytic open-mindedness. As I struggled with the anxiety and frustration of not knowing with which theory to ally myself, she spoke on “What Theory Choosest Thou?” She revealed that she resorted to different theories at different times with different patients, based on what the particular individual situation at hand brought to her mind. So an established TA, lecturing at the oldest, perhaps most “orthodox” institute in the country, spoke about keeping an open mind. As I started to wonder how much of our open-mindedness stems from more sophisticated theories of mind – ones that allow for de-idealization and tolerance of uncertainty – I witnessed Dr. Kantrowitz’s celebration of the excitement of not knowing. She felt that her ability to employ multiple lines of inquiry was of great benefit to her and her patients.

- I wish I knew that real debates have emerged about the very nature of training and the validity of its particular components. Reading about these debates would have left me feeling more comfortable with the tensions inherent in a situation that combines professional training with such intense personal development. Learning this history would have reassured me that genuine thought had been given, regularly, to the way we do things and that a kind of institutional self-analysis was at work.

- I wish I knew that I could expect to feel anxious as a function of psychoanalytic training, which presents formidable emotional and intellectual challenges to the beginning candidate. Not only do candidates have to figure out some version of clinical truth, but we also have to discern the relative contributions of its multiple sources. How much does it derive from our own emotionally constructed inner world, from identification with our own analyst (and his or her technique), and/or from supervision and/or coursework? Add to this the challenge of passing through the curriculum and persistently struggling with core notions of what being psychoanalytically competent might mean as we begin to work with our own cases and learn to write about the psychoanalytic process. Regardless of a particular institute’s stance, candidates must navigate a pluralistic theoretical world, perhaps yearning the whole time for an expert to orient us to some “analytic truth” to counter the anxiety of not knowing. These already difficult hurdles become even more complicated when we learn – often through the grapevine – of a colleague’s rejection from an institute’s training program, or hear an esteemed teacher berate a dissenting theoretical school-of-thought after just having watched him show the highest degree of respect for a patient’s clinical struggle.

- I wish I knew that fixed stances on who is eligible to train, and with what theoretical perspective or with which TA, influence candidates’ feelings of safety and autonomy, or lack thereof.

- I wish I knew that identification with the aggressor is one style of analytic teaching, and that when encountered, it could be understood and handled as such. Fortunately, I have not personally had to confront that style as a candidate. Paternalism, orthodoxy, and intolerance of diversity have characterized the history of our field but no longer need carry the academic day.

- I wish I knew that I would struggle intensely over the years to discover some version of the truth about myself, my patients, and my fellow human beings, but that analytic training would, paradoxically, lead me to form only tentative conclusions, ones that I would continue to

evaluate and revise as I learned and read more.

- I wish I knew that I would experience disappointment along the way in my pursuit of an ideal. It was just that – an ideal. With enough work and insight, however, that state of intolerance would become tolerable to me.

- I wish I knew that the largest fear I would have to conquer in training would not stem from the outside, in any particular structure of the institute, but would originate within myself. This authoritarian exclusion would be *of myself by myself*, independent of our field's institutional history.

- I wish I knew that part of my task as a candidate would be to de-link this projection of transference from my mind onto the training structures from any actuality of the training structures.

- I wish I knew that candidacy would open my mind like a developmental stage that would offer a new way of feeling and being in the world – with my patients, my family, and myself – and that this new state would feel infinitely better than before.

- I wish I knew that one of the indicators of a good referral process is candidates' becoming analysts where they trained and participating in their analytic communities after training. This community life might entail study groups, teaching, or joining with people who share a similar pursuit of life.

In one sense, presenting this material to candidates early in their training constitutes an intervention. First, I am providing information that had been unavailable to me, or that I believed to be unavailable to me. Second, I am implicitly endorsing a spirit of open inquiry in sharing the reflections of senior analysts who endorsed my pursuit of knowledge about how psychoanalytic institutes deal with beginning candidates. Third, I am stating that candidate anxiety is not simply an intra-psychic issue; interview material conveyed that candidate anxiety is real and may, in part, stem from behaviors of institutes that have been injurious to applicants along the way.

Knowing more about the history of candidates' experiences with training would have helped in many ways. I believe that creating a format to address these issues could render our institutional history much less threatening, just as revealing a secret in treatment disarms its negative valence. I could have worked more effectively to understand the anxiety generated internally and how that was molded, or not molded, by institutional practices and institutional history. Knowing that what were once standard practices have sometimes been reversed in psychoanalytic history (for example, TAs reporting on their analysands) would have helped me appreciate that psychoanalytic authority evolves. Perhaps I would feel, with more personal conviction, that if the "parents" of my training experience could identify mistakes *they* had made, *I* could express concerns about my own training without fear of redress.

I wonder what reading this paper will be like for the beginning candidate. Will others relate to my discoveries and reflections? Will their anxiety about expressing their own ideas and

questions be ameliorated? Will they believe that this project represents, primarily, an “acting out” of my own conflicts over authority and the acquisition of knowledge? Or might there simply be something irreducible about the anxieties evoked by psychoanalytic training that, with its myriad variables, we all must struggle with individually? These are only a few of countless possibilities that might arise in testing the validity of what started as my own experience of anxiety, then became the kernel of this paper, and now serves as this laboratory experiment.

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Address correspondence to:

Chap Attwell, MD

200 East 94th Street, Suite 1417

New York, NY 10128

chapattwell@yahoo.com

Chap Attwell is a Clinical Assistant Professor of Psychiatry at NYU School of Medicine, as well as a 2005 graduate of the adult psychoanalytic training program and a senior candidate of the child psychoanalytic training program at NYU Psychoanalytic Institute, NYU Medical Center.

The Use of Psychoanalytic Technique in Training: A Candidate's Perspective

Christopher Bonovitz, PsyD

The author explores the teaching of technique during his analytic training. He describes an admission interview and three different supervisors in terms of each supervisor's version of technique, how technique was taught, and the various ways in which it was communicated. Consideration is given to what was mutative across these training experiences in facilitating the author's own analytic style. There are three threads that link these training experiences together and begin to fill out some of the ingredients of technique according to these training analysts – these threads are the inevitability of enactment, receptivity, and play.

Introduction

The advances in psychoanalytic clinical theory over the past quarter century raise the question of what we mean by “technique” these days, a question that has implications for analytic training and supervision. By technique, I mean the traditional skills and activities of the analyst: interpretation, empathic reflection, inquiry, and so on. The proliferation of work on countertransference, enactment, and the influence of the analyst's personal psychology have shifted the focus from the patient in isolation to the analyst-patient dyad. In other words, the focus has changed from a one-person psychology to a two-person psychology. No longer do we just refer to transference by itself. Instead, we speak of transference/countertransference enactments, matrices, and entanglements. There is an intense interest in the interactional process across the varying psychoanalytic schools of thought, with therapeutic action conceptualized as, in Stern et. al's (1998) words, “*something more than interpretation.*” The analytic relationship itself, in all of its complexity, is the vehicle for our work. I am interested in how this shift was reflected in my psychoanalytic training.

In this paper, I explore my expectations concerning the practice of psychoanalysis compared to what I was actually taught during my training. I describe how some of my supervisors regarded technique, how it was taught, and the various ways in which it was communicated. In looking back at these supervisions, as well as at one of my admission interviews, I examine how these teaching analysts embodied some of what they had to teach. I also explore what was mutative across these training experiences in terms of what I needed in order to grow – what facilitated my development as an analyst and contributed towards the cultivation of my own style.

The Admission Interview: Setting the Stage for Analytic Training

My purpose in beginning with one of my admission interviews for analytic training is multifold. First, this interview was one of my first contacts with the psychoanalytic training program, a first meeting akin to any other first session with a supervisor or analyst. The interview was charged with all of my anxiety, transferences, and fantasies of who this interviewer was and who he might become to me. I was dimly aware that the interviewing analyst might become my analyst or supervisor, so in some ways I was “secretly” assessing him as much as I was being assessed myself. I felt some degree of choice going into the interview situation. In my less anxious moments, I could see that, in this psychoanalytic climate, supply was greater than demand, which at the time meant to me that I might have the luxury of choosing

a program, as opposed to feeling that I had to accept whoever would have me.

Before describing the interview in more detail, I would like to reconstruct my state of mind at the time – my expectations, anxieties, and what I thought I was looking for. I was terribly nervous, uncertain about my abilities, and wondering if I had what it took to become an analyst. I believed that one needed to possess an “analytic mind,” mental discipline, and emotional receptivity, with a developed capacity for intimacy. By analytic mind, I also am referring to a belief in unconscious process and the ability to think in terms of symbolic communication.

One expectation of mine was that I would find a professional “home,” a place where I felt mentored, looked after, accepted, and where I could grow as a person in the process of becoming an analyst. Although unsure where this notion came from, I had the idea that analytic training had the potential to be a second adolescence. I would be spending a lot of time with my classmates, teachers, supervisors, and my analyst, which would bring with it competition, regressive behavior, envy, idealization, devaluation, and, ideally, a sense of community and affiliation that could become host to my own development as an analyst. What kind of a member of the community would I be? What kind of classmate?

Throughout the set of admission interviews (there were three in total), I was looking for approval and for someone to convince me that, in fact, I had some of the ingredients, or at least the potential, to become a good analyst. I had the sense that I was going to be evaluated on many different levels: my personality, reflective capacity, intelligence, relatedness, capacity for intimacy, reasons for wanting to become an analyst, and so on.

The interview I will draw on here took place in Dr. H.’s home office, a morning appointment in an old New York-style apartment in a pre-war, stately looking building. I remember arriving rather early, by about a half hour, and standing outside the building, unsure when I should ring the bell. Would I be disrupting a session, waking him up out of bed, or just annoying him? Would I reveal my obsessional machinations in ringing too early? But, would ringing with only five minutes to spare be seen as disrespectful or cavalier? The list goes on.

Although having an office in one’s home is fairly common in New York City, this was my first time in such a situation. Dressed in a wool suit on one of those humid city days, beads of sweat started to run down the side of my face as I sat in the waiting room. Noticing the sweat just made me more nervous, as I was now no longer hiding my anxiety, but instead wearing it on my newly pressed shirt – little blotches of sweat that would not dry quickly enough.

After a few minutes of waiting, from around the corner and down the hallway, I could have sworn I saw Dr. H. in his pajamas, older than I expected, slightly hunched over, and moving rather slowly, toothbrush in hand. Where was he walking? Why was he still in his pajama top seven minutes before our appointment? Did I have the appointment time confused? The wrong day? Had he overslept? I quickly turned my head away so as not to be seen as snooping. Had I, in fact, just seen Dr. H. in his pajamas? Did he see me? Fantasy and reality momentarily collapsed in the midst of my transference to Dr. H. What was real and what was fantasy became blurred as I sat and waited.

Over the years, I have wondered about this glimpse of Dr. H. From it, I constructed an image of an older man (relative to myself at that time) in his *vulnerability*, an image that caught me by surprise and one that collided with some of my other associations of white, older men in positions of authority. Although I felt I had just inadvertently spied on Dr. H. – seen something I was not suppose to see – I experienced some relief, something having to do with his visible humanness, which I could relate to and identify with in that anxious moment.

Looking back, the actual content of the interview seems almost inconsequential; what does stand out is Dr. H.'s presence. I recall the dim lights in the office, which made it difficult to see him, but at the same time, the light and dark coloring of the room added a sense of mystery and subtlety and created a soft, quiet ambience. Dr. H. was a man in his early 60's, who immediately struck me as someone who, although an accomplished training analyst, embraced his humility. He fostered an atmosphere of openness, in which I felt at ease and able to freely engage in a dialogue. He did not take himself too seriously, yet impressed me as a rigorous and critical thinker, with a felt presence. Dr. H. was surprisingly disarming, and, through his questions, invited me to reflect on my professional and personal lives and to think, with him, about what I was in search of in my training. What I noticed about myself in speaking with Dr. H. was the experience of discovery, hearing myself say things that felt "right," but that I had not thought about before in the same way. I have thought a lot about this interview during the course of my training, but I am still unable to formulate all the reasons why this experience was so significant for me.

My reflections about my encounter with Dr. H. continue to evolve. It was a good feeling to know that he liked me, and I took to heart his expressed confidence in my abilities, however they might have shown themselves. I walked away from the interview with a sense of enjoying what Dr. H. brought out in me – a freedom to think, to search without knowing, and a genuineness and honesty in our engagement. He exhibited qualities in his own person that I wanted to cultivate in myself as an analyst.

Interestingly, although I would go on to later have Dr. H. as a teacher for a course, I never sought him out as an analyst or supervisor. The reasons for this are not entirely clear to me, except that maybe I chose to bottle this experience, to preserve it for safekeeping, not wanting to tinker with it for fear of it becoming something other than what it already was: one of those special moments that I could take with me through my training. In the beginning of my analytic training, I came to associate the institute and its values with some of what I had experienced with Dr. H. Seeing Dr. H. as someone who had, through his years of experience, brought his own person and humanity into his "analyst self," set the stage for my analytic training and began to clarify for me what I was looking to develop in myself.

Supervision with Dr. S.

In my first year of analytic training, what was most important in choosing a supervisor was finding someone who could help ease me into the work, a supervisor who was not too tough, and yet not falsely reassuring either. I had the idea of choosing someone who represented an interpersonal perspective, an analyst who could map out the "party line" on the application and translation of interpersonal theory to practice. I had the illusory notion at the time that there was a mainstream way of theorizing and practicing analysis within the institute. I not only wanted a

supervisor who could teach and support me in my clinical work, but also someone who was potentially available as a mentor – a supervisor with whom I might work over a long period of time, someone who might take a genuine interest in my training and development. Finally, I also wanted a supervisor who was familiar with the history and the politics of the institute, someone who could help me navigate my way through the organization. Even at the time, I was aware that this was a tall order.

After consulting with one other supervisor, I chose Dr. S., a female analyst who had been recommended to me by another candidate. Dr. S. was an accomplished senior analyst, a sought-after supervisor and teacher who had written and presented on the topic of emotions, an area I was interested in from a developmental perspective.

One of the first things that struck me about Dr. S. was the arrangement and proportions of her office furniture. Dr. S., a woman of small stature, sat in an enormous, cozy-looking armchair. There was a couch to one side, and a thin, slightly uncomfortable, bamboo-like chair positioned just a few feet directly in front of where Dr. S. sat. Unsure of where to sit at our first meeting, I first chose the couch, and then switched to the chair in our following meeting. Why I switched I am not sure, except that I had to crane my neck when on the couch in order to look at Dr. S. head on; it was partially out of my own physical discomfort that I moved to the chair. I remember studying the chair before moving into it, trying to figure out why it was placed in such close proximity to Dr. S.'s. Why was it so close? Did my perspective in some way reflect my own anxiety around a potential intimacy? Was the arrangement of the furniture intentional? Was it haphazard? Where was I "supposed" to sit?

Probably having something to do with my own state of mind in our first supervision session, I saw the chair as sitting alone, by itself in the middle of an open space, unencumbered. My private theory as to why the chair was positioned where it was had to do with Dr. S.'s interest in affect states; sitting close to each other would allow Dr. S. to "use" my facial expressions to enrich her understanding of the emotional communication between myself and the patient, as well as with her. Sitting in the chair felt like an opportunity to find out what might happen between us.

Little did I know at the time that, in moving to the chair at the following supervision session, I would come to use it for the next two years. In using the chair for the first time, I noticed that behind me was a sparsely furnished, expansive, open space. In collecting these reflections for the purposes of this paper, I have come to think of Dr. S.'s office configuration as an apt metaphor for my supervisory experience with her. My own challenge with Dr. S. was learning to use, and play within, the "analytic space," and to grow increasingly more comfortable doing so.

Looking back now, what stands out is Dr. S.'s personality and its impact on me. She made her presence known in her enthusiasm for the work and her creative mind, but with enough space for me to join in and, together, for us to play and explore. Dr. S. had a gift of being able to teach through play. She was energetic and conveyed an openness to discovery without a clear sense of what it was we might find. Dr. S. conveyed a general feeling of respectfulness and a real interest in collaboration and our learning from each other. The predominant feeling from

supervision was one where we were both using each other's reactions, associations, and ideas, in response to the clinical material, to build upon and expand our understanding of the patient and the transference-countertransference. We seemed to feed off each other. I remember often leaving supervision feeling replenished and inspired, and yet *without* a playbook of any kind that I was expected to implement. I felt Dr. S. to be nearby in my work with my analytic patient, but not hovering.

An early focus of mine with Dr. S. was the sense of urgency I felt to make something happen in this first year of treatment with my patient – an urgency stemming, of course, from my own self-interests; namely, that I wanted to feel effective as a therapist and make a good impression. The need to make something happen sometimes manifested itself in an eagerness to *make* meaning, which could have an oppressive effect on both the patient and me. I also found myself invested in making smart interpretations and feeling the press to figure things out, as though I was being presented with a math problem.

The rush to make something happen existed alongside my attempt to become more aware of the subtle, and not so subtle, ways in which the patient impacted me – the push and pull of his character style. For Dr. S., the analytic process was not so much about “looking for” something as it was about analyst and patient “looking at” something together (see Schachtel 1959). Technique, for Dr. S., was not about “what I should do,” but rather about struggling with the tension between expressiveness and restraint, while searching for ways to expand and open up the process – to move it outward and avoid the collapse inward (i.e., premature interpretation, which has the potential to collapse the process inward).

Although I am unsure how much Dr. S. drew upon the emotional field between us, she did attend to sensory experience, a pathway which allowed her to feel her way into the clinical material. For instance, one question of hers that stands out is when she asked, in response to hearing my patient's dream, what was most visible in listening to the dream. What in the dream gave rise to an image? Until then, attending to images in my mind as a source of “data” about the patient, our respective unconscious, and the process between us never occurred to me. I was more focused on words, associations, and *finding meaning*. Dr. S. taught me that “feeling” one's way into the material through the various routes (nonverbal or verbal) had to do with receptivity and allowing experience to emerge, rather than forcing something to happen. What made her such an effective supervisor was her ability to create an ambience where what she had to teach, what she had to offer, could be experienced. She managed to create an ambience where I felt a freedom to attend to and explore my own internal process, a freedom which opened up experience. It became apparent in my supervision with Dr. S. that learning was experiential, not something delivered in the form of abstract knowledge.

Over the course of my two years with Dr. S., I came to see her as a contemporary Frieda Fromm-Reichmann, someone who I imagined was incredibly committed to her patients. Through our work together, Dr. S., without ever directly using the phrase, gave me a working understanding of “analytic integrity.” She gave me a glimpse of what it means to actively struggle in the messiness of the interpersonal field, a struggle that the analyst ideally approaches with a sense of responsibility, discipline, and emotional honesty. My fantasy was that Dr. S. would go to great, but reasonable, lengths to reach a patient, all with an attitude of respect and an

appreciation for the resilience of the human spirit. I find it difficult to point to specifics in my supervision to back up this impression, except that she seemed dedicated to the work, and she embodied as a supervisor the qualities with which I imagined she approached patients.

Creative Disorder and Entangled Webs

I came into analytic training with the notion that an analyst had to be, above all else, clever, at least clever enough to put together interpretations that revealed the unconscious content and meaning of the patient's communication, interpretations that were directly linked to theory and its explanatory framework. It was not until I encountered my first teachers and supervisors in analytic training that I came to learn it was permissible to ask questions. In fact, in my training, asking questions was preferred over other kinds of traditional interpretations. This was a relief to me, as it took the pressure off. but at the same time, it left me with some confusion: If the analyst was not making direct interpretations, what about knowledge and insight? If the analyst was not figuring things out and then delivering insight to the patient, where did it come from? Who was responsible for supplying knowledge about the patient?

My supervisory experience with Dr. R., as compared to the collaborative Dr. S., could best be described as didactic. Dr. R., a well-respected senior analyst, was going to teach me about the way he worked and expected that I at least try it. Although at first this caught me off guard, I found that I enjoyed his more structured approach. I was aware that Dr. R. had been influenced by Clara Thompson, Edward Tauber, and most notably, the work of Edgar Levenson (1972, 1983, 1988, 1991).

For Dr. R. and many interpersonalists, questions are not just questions as we know them in their everyday usage. In his translation of Harry Stack Sullivan's (1954) use of the "detailed inquiry," Dr. R. made it quite clear that not only was it permissible to ask questions, but questions had many useful purposes. As I would come to learn, even referring to the detailed inquiry as merely a set of questions is a misrepresentation and misses the complexity of its usage. Dr. R. believed that the inquiry, unlike an explanation in the form of an interpretation, aids the analyst in finding out more about "what really happened," nudging the patient to become curious about the details of a given situation. The inquiry invites the patient to elaborate on experience, rather than distill it down. It clarifies misunderstandings, the meaning of certain words or terms, contradictions in the patient's narrative, and hones in on what is not mentioned or left out – what Sullivan (1956) referred to as "selective inattention."

In beginning to work with Dr. R., I recall reading process notes to him and his asking me questions about the material, or suggesting questions I may have thought to ask the patient. The challenge for me was learning to be more curious about details that might seem inconsequential on the surface. Somewhat skeptically, I initially viewed his suggested questions as inane and tedious and found myself worried what the patient might think in response to such a question. I imagined a patient protesting, "What in the world does that question have to do with what I am talking about?" However, over time, I came to see the value of the inquiry.

For instance, I recall telling Dr. R. about a car trip the patient took with his family to the beach. My focus in relaying the story was to emphasize the patient's annoyance with his father, which culminated in a shouting argument while ordering take-out food at a rest stop. Dr. R.

stopped me midstream and asked what the patient and his father had ordered to eat. The question, to say the least, caught me off guard and, on its face, seemed ludicrous. Feeling somewhat annoyed by the interruption, I muttered to myself, "Who cares?" I wanted to return to the patient's argument with his father and speculate about what was going on between the two of them. This was my agenda.

However, Dr. R. was less interested in my agenda and, instead, had stumbled upon and become curious about something I would never have been able to foresee. Rehashing some of the details from the session in question, I remembered the patient had referred to his father eating a hamburger and his eating a garden burger. Dr. R.'s ears perked up. He asked why I thought the father was eating a hamburger in spite of his extremely high cholesterol (the patient's father had numerous health concerns, one of which was high cholesterol). Dr. R. continued, "What was the patient feeling towards his father as he witnessed him eating this hamburger? Was he worried, pleased, annoyed?" These questions led to more: What about the patient's contrasting eating habits? Why did the patient prefer a garden burger to a hamburger? Was the patient worried about his health? What might the patient's reactions to his father's neglect of his physical health have to do with the argument they were having with each other?

Despite my own initial reluctance to Dr. R.'s curiosity, I could begin to see the value of this kind of inquiry and what it potentially opened up. It was also interesting to me that Dr. R. had become curious about an aspect of the story that was outside of my own perceptual focus. I was concerned with the son's experience of the argument with his father, not what each of them was eating. Dr. R.'s inquiry turned the entire situation on its head, as he encouraged me to look around a little more, rather than just report on what I already "knew." Suffice it to say, I became more convinced of the utility of the detailed inquiry, and came to appreciate giving consideration to those minute details in the patient's narrative that are not immediately apparent.

Rather than relying on theory, I began to see how the detailed inquiry yields data about the patient's life, which guide one's understanding of the patient's character and his relationships. I could see how the inquiry works to deconstruct the patient's set of assumptions – as it did with my own – and, in some cases, deconstructs the person's rigid perceptions and fixed narratives of himself in relation to others. The inquiry expands awareness, both the patient's and the analyst's. I became more interested in poking around and increasingly more aware of situations where I felt led by a pre-existing set of assumptions or ideas directly linked to theory, a linearity to my thinking that sometimes blinded me to the unexpected. The challenge was to *hold lightly* any formulations, hypotheses, and insights I might develop along the way and to attend to material that was, paradoxically, shrouded by clarity.

I also came to appreciate, in my work with Dr. R., the inevitability of finding myself drawn into the complicated web of the patient's interpersonal configurations. For Dr. R. and many interpersonalists, psychoanalysis, as Levenson (1983) succinctly puts it, is not about what is done. Rather, "*psychoanalysis deals with what is said about what is done*" (italics added) (p. 77). More specifically, for me, this statement puts the emphasis on analyzing with the patient something that has already occurred, some kind of meaningful exchange, which the analyst may have been unaware of while it was happening. Often, I have found that it is the patient who will, directly or indirectly, alert the analyst to the emotional valence of such an exchange. To extend

this point one step further, psychoanalysis, and technique, are *not prescriptive* as much as they are a *retrospective* analysis of a process in which we are perpetually caught up. For me, this statement has come to embody a central feature of an interpersonal sensibility.

In being drawn into transference/countertransference enactments, the challenge became remaining open to looking at certain qualities in myself selected out and cast into the spotlight. For example, one of the analytic patients I followed with Dr. R. had a tendency to attend to and become invested in cleaning up the mess created by her parents. On one occasion, the mess had to do with water leaks and a bug infestation in her parents' home. In these situations, the patient became embroiled in aiding her parents, all the while steaming with resentment, yet holding firm to the belief that no one but she could competently resolve their problems.

Over the course of describing a story involving this theme in her relationship with her parents, the patient became focused on cleaning up *my* messes. First, there were my misunderstandings and misperceptions in listening to her. Second, and more importantly, in an almost surreal way, the office into which I had just moved began to fall apart. There were bugs in the hallway, water leaked through the ceiling of the waiting room, and old cable and phone wires gradually accumulated in the yard that could be seen from the waiting room. Needless to say, I was a bit distressed. This was the first office that was entirely mine; no longer could I blame such incidents on an anonymous landlord or the primary lease holder. It felt to be a direct reflection on me. As the flaws of this new office made themselves known, I felt exposed and vulnerable. Not only were there problems with the physical space, but also there were my reactions to these problems: my annoyance, frustration, irritation, and embarrassment. What was my patient seeing about me that I did not intend to show her? What would she notice that I would rather remain hidden? Why was I so worried about what she might see? This all was new territory for me.

My patient, not one to look the other way in these kinds of situations, brought these rather noticeable problems to my attention, along with helpful pieces of advice to improve our surroundings. I am not particularly mechanically inclined (to put it mildly). My patient, however, is a true handyperson. In our discussions about the bugs and the water leak, she offered suggestions that sounded quite useful. Yet, I was unsure what to do with these suggestions. Was I "permitted" to act on her advice? Would this be a kind of gratification or acting out against the "rules"? These kinds of private superego concerns weighed in on my thinking.

As some of these maintenance problems with my office dragged on, the patient became more curious as to why they were not resolved more quickly. She wondered whether I was being forceful enough with the landlord. Why did I not insist on having these problems resolved? Was I protesting by refusing to pay the rent? If pressed, I could certainly locate some of the possible meanings to these questions in the context of the patient's psychic life; yet her curiosity nudged me to give some consideration to my own character and my relationship to authority. In supervision, while part of me just wanted to ignore the situation entirely, as it already took up too much of my time, Dr. R. noticed the ways I sometimes avoided getting interested in the patient's observations, perceptions, and fantasies as to what might be going on around her, and what might be going on with me. Although this was a great opportunity, as now one of the central themes in

the patient's life found its way into my office – literally – it required my having to look at my own mess through my patient's eyes.

At the time I was beginning supervision with Dr. R., my own insecurities about measuring up as an analyst, along with a past analytic experience of mine, left me with the idea that the analyst's job was to "know." What I mean by "knowing" is that I felt I was expected to have a sound understanding of the patient's dynamics. Moreover, my job as the analyst comprised formulating and delivering interpretations in an effort to expand the patient's awareness of himself or herself by making, as Freud clearly stated, the unconscious conscious. Dr. R. turned this expectation of mine on its head. He was adept at steering me in the direction of what I did not know, rather than what I felt I knew. I had to work to *untrain* my mind's tendency to formulate, to want to make sense of, and organize the clinical data. Dr. R.'s belief, which I later came to embrace, was that analysis is working when the analyst is in the dark as to what may be happening in the process. If I thought I "knew" what something meant or had clarity, it was a sign that I was in need of supervision. In short, Dr. R. taught me the value of "creative disorder" (Levenson 1994). Disorder was potentially creative (mutative) if I, and the patient, became lost in the mix.

Dr. R. placed much importance on the use of the detailed inquiry, using it as a means of exploring areas of the patient's narrative and associations that were unknown, confusing, or contradictory. While there is a technique of sorts (inquiry), what the analyst is in search of is left undefined and open-ended. For Dr. R., there were no pre-packaged explanations or fixed ideas to explain what the patient will find. The inquiry into the patient's experience is accounted for as part of the psychoanalytic process, not a function the analyst performs independent of the relational contexts in which it takes place.

"Restaurant Talk" and Emergent Experience

By the time I made my way to supervision with Dr. Z., I had arrived at the conclusion that the supervisors who had pushed me furthest along in my development were often the ones with approaches and ways of working that appeared to greatly vary, at least from a distance, from my own. Dr. Z., a maverick of sorts, was someone who thought outside the box, a senior analyst and a descendant of Ferenczi, who worked closely with Wolstein and Wilner (1987, 1998a,b). Although not a proponent of mutual analysis, Dr. Z. valued the symmetrical dimension to the analytic situation and unbidden experience, experience that emerged from the various contexts surrounding the analytic situation. As a supervisor, he offered associative thoughts, feelings, and fantasies, or "psychic happenings," as he referred to them.

One of my reasons for choosing to work with Dr. Z. was the constraints I felt on myself as an analyst, stemming from a hovering analytic superego – a superego that could interfere in my attempt to cultivate my own analytic style, or personal "idiom" (Bollas, 1987). Questions of how to proceed in a given situation with a patient were too often led by my trying to discern the "proper" or most therapeutically-informed choice. I was quick to dismiss fleeting associations or fantasies, which at face value appeared to be distractions related to my own personal life, with no relevance to the patient. While these sorts of concerns about what constituted "acceptable" interventions were not altogether unworthy, I felt that a preoccupation with these determinations had the potential to close off possibilities; and, although my training was much more about the

use of one's self in the analytic process, some of the constraints I experienced could be located in the larger psychoanalytic culture and its history.

In the early stage of working with Dr. Z., I was taken aback by what appeared to be "wild" reactions to my character style. He was not shy about letting me in on his internal dialogue moment to moment, all in the context of a two-person paradigm – my psychology in relation to his. At the same time that he was voicing his associations in the context of our work together, he was sometimes reflecting on personal memories, adventures, and stories concerning his own life. On occasion, I was left wondering whether the "real patient" (my analytic patient) in question was getting short shrift. How did she fit into all this?

For instance, on one occasion, Dr. Z. informed me that he had to cancel our supervision for the following week because he was going to be away. Feeling a little more comfortable and inquisitive, I followed up with a question about whether the appointed day that he would be missing was a holiday, to which Dr. Z. said he thought it was. Giving some thought as to whether I might take the day off from work myself, I asked if it was a nationally recognized holiday. Dr. Z., seemingly out of *nowhere* (which Dr. Z. preferred to think of as *now-here*), had the immediate thought that I wanted to make him work harder, and that I might be invested in his feeling guilty about taking the day off. He felt I was closely watching him and concerned with his whereabouts. He had the fantasy that I wanted him to take work on his vacation, or even consider skipping his vacation altogether.

Dr. Z.'s musings did not strike me as absolute interpretations so much as immediate associations to a question I had asked, associations that were ripe to be played with. There was something about Dr. Z.'s openness and my having access to his private dialogue that appealed to me. However, though invited to "let it fly" in response, I initially found myself stepping back from engaging in this kind of exchange. I was not ready to join in. In my initial retreat, I remained confused by the question "What in the world does any of this have to do with supervision and my patient?" I felt as though Dr. Z. knew more about me than about my patient. When I did bring my patient up, Dr. Z. alternated between sticking to the material and offering random associations to his own personal life, psychoanalysis, literature (he read everything under the sun), and cultural events, among other topics. I slowly realized that there was no longer any need to read the Arts/Leisure section of the *New York Times*; Dr. Z. would keep me up to speed.

Over time in supervision, I noticed a shift taking place in me. In continuing to find Dr. Z.'s style disarming, I felt more at ease and able to just "go with it," or, in other words, surrender to whatever arrived in my own mind. I felt as if I could experiment with my mind, seeing where it might take me, speaking before I knew what I was saying. I gradually came to feel more comfortable and trusting towards my own psychic experience. In retrospect, I might describe this shift as a leap of faith in the unconscious workings of the mind.

The patient, Susan, who I had originally brought to Dr. Z., was a schizoid woman in her late 20's, who could become caught up in a highly obsessional, ruminative thought network, fearful of her own urges and feelings. While in this mode, I found it oppressive to be with her, as she became closed off and inaccessible. She created a private, ascetic world devoid of pleasure and play in order to protect herself from harsh, critical denouncements, which ensued

whenever she pursued her desire. What I unexpectedly began to discover with Susan was that when I more directly shared my associations, it provided a window for her, through which she might emerge from behind her rigid defensive system. She became more flexible when I was able to speak directly from my own subjective experience.

During the course of my work with Dr. Z., he and I stumbled upon a passion we shared: restaurants. Dr. Z. and I live in the same neighborhood, and, at some point during supervision, discovered the enjoyment of introducing each other to the newest joints or an undiscovered gem. With supervision on Monday morning, we often spent the first part of the hour regaling each other with stories of our local food expeditions the past weekend. Dr. Z.'s hand gestures and highly detailed descriptions were very persuasive, even if the food itself was not typically something I would eat.

On one of these Monday mornings, as I walked through the door, Dr. Z. had some good news. He had discovered a wonderful pan-Asian restaurant over the weekend. It was clear he loved this restaurant. It was an undiscovered neighborhood restaurant, populated by a gracious staff and local residents, and full of creative dishes and unusual cocktails. Upon describing the dining experience there, he handed me a business card from the restaurant. He thought that I would enjoy it, and encouraged me to try it out. I was moved by the gesture of the card, and that he had thought of me outside of the supervision time. I was left with the sense that I had an impact on him, and thought of the business card as a kind of gift. Also, I continued to feel appreciative of his capacity to unabashedly indulge in life's pleasures without visible traces of guilt, an area of conflict and angst for my patient Susan, as well as for myself.

In my next analytic session with Susan, following this supervision hour with Dr. Z., she presented me with one of her desperate quandaries. She was bogged down with the question of how to handle a conflict with one of her professors (she was in graduate school at the time), someone who she felt had been excessively critical of her dissertation proposal. As we explored this together, she became preoccupied with "what to do," and my attempt to better understand her conflict quickly became a nuisance to her. My questions were annoying. From Susan's point of view, we needed to solve this problem, not analyze it.

With time running out in the session, she pressed me for an answer. I told her I was not sure how she should handle it, and then, for some reason, associated to the movie, *Star Wars*. I remembered those instances when Luke, confronted with a dangerous situation, with the odds stacked against him, heard Obi-Wan Kenobi's disembodied voice speaking to him. "Luke, let the Force be with you," he advised, in a voice that combated Luke's attempt to assume tight control and, instead, invited him to surrender to his instincts. I then recalled, in considering this association, that I had just watched the movie with my son and had thoroughly enjoyed it. It was his first "official" movie, and I had taken pleasure in sharing one of my childhood favorites with him. Although my initial inclination was to dismiss this association, chalking it up as a distraction of some kind, a moment later I found myself telling Susan, just as she was about to leave, "Susan, let the Force be with you." In saying this, some part of me wondered if I had just disqualified myself from becoming an analyst. How could I justify this statement as "analytic"? Fortunately, I had many counter responses to this part of me from my work with Dr. Z. I also had Susan's reaction on my side. To my surprise, she seemed relieved in hearing this, and the

sense of panic receded for that moment. In reflecting on this exchange, I viewed my decision to tell Susan not so much as a *decision*, but as something that seemed to come out of nowhere. I surprised myself.

The next session, Susan arrived with a wide grin on her face. She went on to explain that she had spent time roaming around the neighborhood and somehow, almost in an inexplicable way, wound up in a chocolate store, one that made all of its own chocolate. She had initially left the store upon walking in the first time, but a few minutes later, she went back in and managed to enjoy the process of scanning the various kinds of chocolate and ended up spending quite a bit of time there. Although she had wanted to visit the store for many months, her self-imposed strictures had pronounced it off limits. This venture into the chocolate store was accompanied by the collision of guilt and pleasure, as well as moments of reprieve from her more typical suffocating state of mind. What stood out was her delight in the fact that she could allow herself to enter the store at all, and then to talk about it while sustaining the feelings of pleasure she had experienced along the way.

While there are an infinite number of ways to explain the concurrence of these events (Dr. Z. giving me the restaurant card, my association to *Star Wars*, Susan's visit to the chocolate store) and the potential meanings associated with them, my point is to illustrate the unconscious connection among them. We might say that my advice to Susan approaches what Dr. Z. was, knowingly or unknowingly, trying to teach me: to trust my intuition. While some might refer to the parallel process or isomorphism between my supervision with Dr. Z. and the analysis with Susan (Levenson 1982), Dr. Z. might argue, and I would agree, that it was the embeddedness of experience within the interpersonal field, and the associative, unconscious links among these different events and relationships that opened up a space for playfulness and new experience to take place. The emphasis was less on content and deciphering meaning and more on the opening up of something new within the existing relational structure of the supervisory and analytic dyads. Trusting my intuition involved being receptive to and listening to the various sources of my experience. For that moment, my immediate experience took precedence over reason and causality.

The Mutative Aspects of Training: What Worked

In thinking back about these significant training experiences, I wonder how aware these analysts were of what I needed at that time in my development. Although unsure about the extent to which my own needs guided how each of them worked with me, I probably honed in on what was particularly helpful. Each of these analysts, in their own way, gave me space to not only learn from them, but also to gradually come to know more about my own proclivities, tendencies, and emerging style. With each supervisor, the content of our actual sessions seems less important compared to the intangible aspects of our relationship and what each of their personalities brought out in me. This was a product of both how I was with them and where I was in my training and my own personal analysis at the time.

What I did learn about technique in supervision seemed experiential at its root, either with me directly, or indirectly through the patient we constructed together. The personality of the supervisor, and his or her particular way of working, left an impression comprising interpersonal, visual, and visceral elements. These supervisors, for the most part, were

collaborative and had come to embrace their humility over the years in a way that fostered a respect for the complexity of analytic work. On the whole, each supervisor, in his or her own way, demonstrated a willingness to show the limits of their understanding, which created an ambience in which I felt a certain freedom to think, and which enabled me to become more versatile in doing the work.

Hartman (2006), referring to relational theory, cogently argues that it is “recursive” because “relational theorizing about mental structure is located in the unfolding of the clinical material itself. The analyst and the analysand play out that which is being theorized” (p. 287). “Theory” itself did not seem to dictate a set of rules around technique, or what might be referred to as a top-down model (Goldner 2002). Although each of these three supervisors were part of the same institute, each had a so-called technique very different from the others. My impression has been that there is really no prevailing metapsychology among the supervisors at my institute. There is neither a rigidly held explanatory framework nor an agreed upon set of theoretical assumptions. While all three supervisors would probably subscribe to certain tenets of interpersonal psychoanalysis, what became apparent is that each of them has his or her own private metapsychology, which explains, in part, how what they do is potentially mutative (Claire Basescu, personal communication).

Psychoanalytic Technique

While I have made technique a focal point in looking back at how it was taught across these different supervisory and interview experiences over the course of my training, one might ask whether what I have just discussed would even be regarded as technique. In fact, technique, the word itself, was rarely used in my training. From my own point of view, technique still has relevance to contemporary psychoanalysis. Although the word may have negative connotations in its association with positivism and objectivity, the practice of psychoanalysis, what the analyst *does* (whether an interpretation, a question, and so on), falls under the heading of technique.

Bromberg (1998) cogently points out that, within the interpersonal school of psychoanalysis:

The model is of a field of observation framed by the *real* interaction between the two participants. It rejects the idea of an analytic situation divided into two components: “how to listen” and “what to do” (that is, “technique”). The analyst’s participation is seen as an ongoing element in the field of observations and inseparable from it. What the analyst must be trying to listen to in his basic stance includes the immediate and residual effects of his own participation (p. 151).

For Bromberg, technique is concerned with the analyst’s examination of his or her participation within the interpersonal field. The question is not future-oriented, as in “What to do?,” so much as it is retrospective, in the question, “What has already happened?” This direction in constructing an understanding was borne out in my own training. When supervision was effective, it was not so much about devising a game plan for the next session as reflecting on what had already taken place. What was I caught up in without even realizing it? For Bromberg, technique is more of an approach having to do with the attitude of the analyst, where reality is

not fixed or predetermined, but rather co-constructed and newly discovered with each analytic dyad.

From my experiences in training, it seems that “good” technique is an outgrowth of countertransference. It is hard to imagine separating out what the analyst does from what the analyst is experiencing in a given moment. In this sense, the transference/countertransference situation, or configuration, has a strong influence on what the analyst does. From this perspective, the technique itself is subject to exploration, not exempt as though it takes place outside the interpersonal field.

McLaughlin (1996), a Freudian analyst, speaking about the authority and influence of the analyst, puts it well when he says that the “...fundamental task of the analyst *is to use his or her powers primarily to lead and guide the patient toward HOW he or she will discover rather than to WHAT*; to help the patient grasp *how* he or she can contemplate the inner world of self and others, rather than toward what specific experiences and shapings will be found in the search” (p. 212).

While I would agree with this sensibility, based on my own training, it seems that there is more of a reciprocal dimension, in that the analyst, too, is guided and led by the patient in this search. In the same spirit of Bromberg and McLaughlin, I have also found it to be the case that as soon as I think I can pre-package an intervention of some kind, with the intention of bringing about a specific response or outcome, I move closer towards mechanizing the process and foreclosing possibilities (Bonovitz 2006).

When I consider my supervisory and interview experiences, there are a few threads that link them together, and these threads begin to fill out what goes into technique and how it was taught. First, as already alluded to, there was an assumption that I was always caught up in a transference-countertransference enactment. As I tried to show through my supervision with Dr. R., enactments were inevitable and the point was not to stand guard trying to avoid them so much as to sustain a curiosity as to what was going on between the patient and me. This entailed not only being aware of how the patient’s internal world and pattern of interpersonal relations were making themselves known, but also reflecting on my own participation with the patient.

A second thread in these supervisions was “receptivity,” or what Stern (1997, 2006) refers to as “courting surprise,” where thoughts, feelings, and understanding arrive unexpectedly. Stern describes the analyst as working towards surrendering to uncertainty, which allows for the disconfirmation of our preconceptions and, in doing so, makes room for the unexpected. For me, this entailed working to remain open and receptive to communications and shifts from within myself, as well as from the patient – communication in the form of words, feelings, sensations, associations, somatic movements, and so on. This involved noticing a feeling or sensation, sensing something was “in the air,” yet not rushing to unpack it prematurely. The challenge was to sustain my curiosity so as not to collapse possibility. This meant enduring the strain of “not knowing,” resisting the temptation to formulate, to make sense of and organize what was happening.

Third, I was encouraged to play. By playing, I mean creatively and spontaneously using

my experience, trusting enough to go with it rather than stifle it. In order for play to take place, there had to be some kind of mutual dimension to the supervisory relationship, which there often was in the training experiences I have discussed. Playing, for me, in supervision and as an analyst, involved growing more comfortable with exposing and working from within my own vulnerability. As a beginning analyst, exposing my vulnerability, even to myself, let alone to someone else, was not easy, as it was often accompanied by the voice of my analytic superego warning me about the possible negative consequences of my actions.

In thinking about these three different threads, what comes through is that, for these supervisors, technique is not only about what an analyst does, but also is an extension of their analytic attitude and sensibility – their general stances toward the analytic situation. Each of these analysts appeared to have made technique his or her own.

Conclusion

In choosing to write about these influential training experiences, I have become more aware of my idealization of these supervisors. Perhaps idealization, something akin to Freud's unobjectionable positive transference, is necessary, to some extent, in order for the work to be effective and endure the test of time – analysts who will become part of my "internal chorus" (Buechler 2004). What I learned in the way of technique is an ongoing process; part of the challenge for me is making what I was taught my own. In light of what I observed from these supervisors, technique is most useful when it is an extension of one's personality and embedded within one's own unique analytic style.

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Address correspondence to:
Christopher Bonovitz, PsyD
119 Waverly Place - Ground Floor
New York, NY 10011
[*chrisfb@nyc.rr.com*](mailto:chrisfb@nyc.rr.com)

Christopher Bonovitz is a psychoanalyst practicing in New York City. He is on the faculty of the Manhattan Institute for Psychoanalysis, and at the National Institute for the Psychotherapies in their Child & Adolescent Program. Dr. Bonovitz is an Assistant Editor for Psychoanalytic Dialogues, and an Associate Editor for Contemporary Psychoanalysis. He is also a Clinical Supervisor at the Derner Institute of Advanced Psychological Studies, Adelphi University, and at the Doctoral Program in Clinical Psychology, City University of New York.

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The Interview Process and the Psychoanalytic Candidate: Setting the Stage for Training

Elizabeth E. Groisser, JD, PsyD

The interview process for psychoanalytic training is often a candidate's first exposure to the psychoanalytic institute. The author explores how these preliminary contacts, demanding an unfamiliar blend of professional competency and personal revelation, are experienced by prospective candidates. In an interview-based pilot study, the author discovered that prospective candidates had a variety of responses to the admission interviews for psychoanalytic training. Some felt the interviews to be helpful consultations with an encouraging senior colleague; others felt misunderstood by intrusive, overreaching interpretations. The author draws attention to this preliminary contact, which sets the tone for how the dual role of patient and trainee will be handled in the psychoanalytic institute setting.

Introduction

The psychoanalytic candidate's first foray into the training process begins at the interview for candidacy, which sets the stage for the candidate's expectations of training. There is a body of literature addressing overall criteria for selection, including the candidate's analyzability. However, little has been written about the actual experience of the training interview from the perspective of either the candidate or the interviewing analyst (Kappelle 1996). Of particular interest are the psychic vulnerability of the candidate as she proceeds through the interview process; the struggle over issues of self-disclosure; the impact of the process on the candidate's view of training at a particular institute (or even the choice of training institute); and the effect of having to assume, for perhaps the first time, the dual roles of "patient" and "trainee" in the same setting, due to the structure of the initial institute interview.

A candidate approaching the admission interview to an institute may wonder how openly to disclose personal information. Self-disclosure may be seen as a positive indicator for openness to the analytic process. At the same time, editorial restraints on disclosure can be seen as evidence of good self-observing capacity (Drescher 2002). The candidate also may unwittingly present a subtly sanitized version of herself, by tailoring her story for the interviewing analyst (Gediman 1986). To the extent that she has represented herself incompletely or inaccurately, the candidate may experience acute anxiety as she shifts from the application process to the role of her interviewer's professional colleague, student, or supervisee.

The evaluation of an institute applicant poses special challenges for the interviewing analyst as well (Orgel 2002). How the interviewer responds to the interviewee may have significant implications for how the trainee feels about the interview and about the prospect of training – at a particular institute, and in general. An open, receptive analyst may strike a chord of curiosity in the trainee, which can leave her eager for analysis and training. A more restrained, emotionally distant analyst may leave the trainee feeling unsettled and ashamed. Initial identifications and counter-identifications with interviewing analysts may color the candidate's sense of herself as she proceeds through training. Admission interviews also may inform the candidate's thinking about how boundaries are handled in the context of analytic training, and how candidates cope with the inherent power differential between themselves and their analytic supervisors.

To explore the influence of admission interviews on the candidate's experience of entry into analytic training, I have begun interviewing both current candidates and graduate analysts. The following observations are derived from the four interviews that have been conducted to date.

Essential Ambiguity of the Interview for Analytic Training: Prospective Colleague or Analytic Patient?

For the applicant, there is an inherent ambiguity in the interview process. She must present herself as both a competent professional and as a prospective analytic patient. The interviewer may elicit one stance more than the other. Some applicants may find it difficult to inhabit the role of prospective patient – especially if unsure about the interviewer's views of their professional qualifications.

One recent candidate experienced a palpable tension between herself and the interviewer as the interviewer assumed an interpretive stance. She recalls, "I didn't like the questioning, and I sort of bristled at his whole way of being with me and then he handled that by trying to interpret it.... If I complained about aspects of the interview process or seemed to find them objectionable, then that was interpretable...that was a clinical manifestation automatically -- something we should explore...." She continues, "I remember one point when he was asking me question after question, and saying to him at the end of them, 'Gosh, I really feel like you are interviewing me to graduate; I am just trying to start...I am not supposed to be perfect here.'" She recalls the interviewer's response as follows: "Do you think you have some superego need to be like a graduate before you have even begun?" Upon hearing this, the candidate ran through a litany of counter-arguments in her mind while sitting with the interviewer. "So then it's...my fault that I am experiencing you this way, so it is my superego that is making me feel all this pressure -- not that you are interviewing me as if I should have this mastery of this wealth and range of issues." The applicant remained reserved and chose simply to say, "I will think about it." For her, the interviewer's request for a third meeting meant that he was saying, "Well, two times does not give me a sense that you are appropriate for this program, so I think we need to meet a third time."

Impact of Generational and Cultural Context

The experience and perception of the interview process also may be influenced by the era and cultural context in which an applicant applies for training. In the 1960s and 1970s, institutes were filled mostly with psychiatrists. One senior analyst recalls what sounds like a rite of passage for entry into an old boys' network, in the context of an implicit expectation that analytic training was the natural next step for psychiatric residents. Of the 16 residents in his first-year residency class, approximately 13 were admitted for training early in their careers. This analyst describes entering his interview with a sense of security. He joked with the interviewer about their joint passion for pipes, grimacing as he commented on the interviewer's particular method of dislodging his ashes. For him, the primary motivation to apply for training had to do with reaching professional goals. When asked why he would want to be in his own personal analysis, he "...really hadn't thought enough about that question.... I should have thought about it but at that time, I viewed my analytic training...[as part of] what I wanted to be professionally, much

more than [a matter] of personal growth.... I came in, in many ways, naïve.” Caught off guard, he gave the interviewer “an honest answer, which was not exactly the answer that he wanted me to say.... I guess I felt somewhat ticked off.” He simply said that he had not given this question any consideration and could not formulate an answer. Almost certain of his acceptance to the institute, this applicant could allow himself the freedom to be authentic.

In recent years, the pool of applicants for analytic training has shrunk, but it also has diversified. Psychologists and social workers now are regularly admitted to analytic training alongside psychiatrists. Yet, many applicants with non-medical degrees continue to approach institutes with some anxiety about their acceptance. At the same time, psychoanalysis has seen a general decline in popularity. Applicants may struggle with doubt about the value of the education they are pursuing. At the same time, interviewers may feel compelled to demonstrate the worth of analytic training. A heightened sense of anxiety on both sides may play out between interviewer and applicant. For example, one candidate recalled what might be understood as her interviewer’s hard-sell effort to prove the benefits of the analytic process. This applicant had left a prior profession in the same field as her father. She was “taken aback” when an interviewer attempted to explain her wish for analytic training with this presumptuous-sounding interpretation: “You are simply trading one father for another...trading one authority figure for another.”

A Dilemma for the Applicant: When and How to Assert Personal Boundaries

A critical issue for many applicants appears to be the struggle with asserting and establishing personal boundaries within the interview. One candidate reported that after one interviewer made some clumsy interpretations, she approached the next interviewer with vigilance. When the second interviewer asked about early memories related to a traumatic childhood event, she misapprehended the question. She recalls, “The [second] interviewer said something to me about early memories and I said, ‘You know what, I really don’t feel like answering this,’ and [the interviewer] was completely surprised that I didn’t want to answer. I was crazy anxious from the first bad experience so I was resolved to be incredibly inhibited. I remember her saying to me that she found it so strange I didn’t want to answer, since all she had asked was if I had an earlier memory around a particular event in my life.... But I was so overwhelmed by the intrusion, I just heard it like, ‘Here they go, the next thing is about masturbatory fantasies,’ and all sorts of things that you hear about -- ‘the crazy stuff they feel the need to ask.’” Heightened sensitivity to possible intrusion by the interviewer can lead the applicant to erect defensive walls where none are needed.

Words and Music: The Importance of the Interviewer’s Tone

Another candidate recalled how an interviewer made her cry when he asked why her parents hadn’t purchased her eyeglasses sooner than they did, given her early vision problems. The applicant felt the interviewer was “making my parents into these horrible people who they weren’t.” She recoiled further when asked about her “sexual practices,” to which she responded, “Basically, it is none of your business.” By contrast, a subsequent interviewer’s tone and demeanor made this applicant feel much less need to assert boundaries in the interview. She recalls, “He somehow managed to ask the most intrusive personal questions and not offend me.

He also made me think about things I hadn't thought about, ways of looking at things, pointing out things in a non-judgmental way...."

Influence and Impact of the Applicant's Maturity and Analytic Experience

One analyst, who had a prior career in another field and had already undergone an analysis before applying, approached the interview as an opportunity to learn about herself. According to this analyst, "I would say I used my interviews...for treatment; they functioned that way for me, and I felt free to use them that way." She entered the process undaunted and open. She feels her ability to do so resulted from "a combination of having been in analysis and that I was free to say what is on my mind so...I don't think I held back on anything, I felt free to say whatever I wanted... I just kind of thought, 'Well, these people are analysts, and I am supposed to say whatever comes to my mind.' It never occurred to me to be protective or to hold back." Perhaps because of this attitude, the applicant did not experience a rupture, even when the interviewer reportedly offered a "formulaic interpretation...so stereotypical, like, 'Ah, you hated your mother and wanted your father.'" Although "annoyed" by this interpretation, this applicant was able to continue with this interview feeling "pretty much totally open."

Ideally, the Interview Can Serve as a Valuable Clinical Consultation

As the prior example suggests, the application interview can serve as a powerful clinical consultation when there is a good fit between interviewer and applicant, and the applicant is (wittingly or unwittingly) seeking something personally useful from the interview.

For one analyst, the interview served as a pivotal turning point in clarifying her real motivation for seeking analytic training. After three prior interviews for entry as a partial (non-clinical) candidate, she met with her fourth interviewer, who "...stopped me dead in my tracks. He did his first interview and said, 'So, what's all this about being a partial candidate?'" At first, the applicant defended her decision with some rationalization: "I said, 'Well, I have a hospital job and I can't do this training fully, so I'm just going to take classes.' And he said to me, 'But you want to be an analyst.' And I thought, 'Who said *that*?' I hadn't said this to anybody; why was he saying this to me?" The interviewer responded that the applicant "could not train this way," and stressed that she needed to see patients as she went along in training. In our interview, the analyst reflected, "It was like he made clear to me that this was a serious thing...he clearly picked up something in me that I had been so conflicted about acknowledging myself. I realized that I was keeping myself from something I really wanted. He heard something and got me on track." She then entered training as a full clinical candidate.

Conclusion

The prospective candidate's interview experience carries the potential for role confusion. Often, it requires some delicate negotiation of boundaries. To what extent does the prospective candidate allow herself to become a prospective analytic patient? What modulates her level of comfort in this role? The cultural and generational context of the interview may influence expectations; so may the candidate's maturity and understanding of the analytic process. The interviewer's tone also may play a determinative role, causing an anxious applicant to raise or

lower her guard. My hope is that careful attention to the nature of the application interview will help both applicant and interviewer use it to the best possible effect, achieving collegiality in the context of a clinically meaningful interaction.

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Address correspondence to:
Elizabeth E. Groisser, JD, PsyD
83 Rugby Road
New Rochelle, NY 10804
egroisser@aol.com

Elizabeth E. Groisser is a candidate at the NYU Psychoanalytic Institute, NYU Medical Center, and is in private practice in New York City.

Discussion of the Panel, "The Development of an Analytic Identity: The Impact of Early Formative Experiences and Theoretical Models in Training"

Elizabeth Fritsch, PhD

On first reading these papers, I realized how much I had "forgotten" about the moments of persecutory experience during my analytic training. Upon graduation, becoming an active member of a training institute helped dissipate the grip of these experiences. The panelists have made a significant contribution by detailing formative aspects of training that can be submerged and lost, and have raised findings that deserve broad discussion.

I am impressed by the emphasis on the admissions interviews as a salient part of the candidate experience, and see a number of reasons for this emphasis. First, the interviews represent a circumscribed experience. The candidate, so often in the scrutinized position, has more than one example of how the analyst in authority handles the interview and, therefore, can move from being examined to conducting a comparative study of the authority. The survey material gathered by Drs. Attwell and Groisser augments the quest that began with their interview experiences. Second, the needs of the institute and the needs of a prospective candidate do not easily mesh at this juncture, which inevitably causes the kind of strain and stress described by each of the panelists. The admissions interviewers feel tremendous pressure, in a less than ideal format, to assess the applicant's capacities and motivation to become an analyst. A wrong determination has profound consequences for the institute, the trainee and patients. Later assessment is complicated, as the candidate and institute become more and more invested in the success of the training process. The admissions interviewers must rely on an abbreviated set of interviews to make a complex determination, while the prospective candidate is looking for validation of his or her training aspirations. The support and identifications provisionally established during these interviews, as the panelists demonstrate, can be carried throughout the training years.

I want to add an organizational perspective to the thinking about the admissions process described by the panelists. I find myself applying my Tavistock group relations background to the problems posed by them. A.K. Rice developed conferences at Tavistock to teach individuals about the covert aspects of group and organizational life and built on Bion's notion of a study group. Rice asserts that the "input" stage to an organization, the experience of what is termed "joining" the group, is of enormous importance to the subsequent life of the organization. From this organizational perspective, the applicants engaging in admissions interviews are involved in the process of joining the group. Therefore, part of the task of the interviewer is to recognize that evaluation is being done simultaneously with a joining process. Many of the interview experiences recounted by the panelists reflect behaviors that are neither consistent with good analytic nor good organizational functioning. When interviewers are inattentive to this joining function, they introduce significant uncertainty about the prospective educational enterprise. The job of the interviewer should include recognition of the dependent position of the applicant and recognition that the interviewer represents the institute. The task of an admissions interviewer is inconsistent with omniscient analytic interpretation or sadistically tinged or seductive behavior. The more analysts work effectively with the multiple tasks of these admissions interviews in

mind, and with analytically-based restraint, the more secure the candidate is likely to be to fully join the educational enterprise, and negotiate the inevitably humbling and anxiety-provoking process of learning.

The question of how to ensure that an institute functions coherently is a challenging one. Kenneth Eisold (1994) describes analytic organizations as having a "fragile nature" (p. 795). He details their many tensions, which include members' detachment from organizational life and the function of the pair in the group, as well as the primary alliance of the training institute's members to psychoanalytic pairs, including the analytic pair and the supervisory pair. Admissions interviewers can readily operate in an institutional vacuum, involved in a pairing with prospective candidates. The findings of the panelists remind those charged with training to educate admissions interviewers to work with their multiple tasks, to give them opportunities to review their protocols and think about their functioning, and to bring them more fully into the educational organization.

I want to comment briefly on the process of analytic identity formation conveyed in these papers. The very act of writing and presenting these papers is a critical one in developing analytic identity. One of the explicit aims of training institutes is to encourage candidates to develop a mature and creative analytic identity. This is an uncontroversial goal, yet institutes often behave in ways to undermine this aim. Otto Kernberg, in his wonderful 1996 paper, "Thirty Methods to Destroy the Creativity of Candidates," informs us of the many ways institutes can operate to foster inhibition in candidates. This paper should be required reading for all candidates, faculty, supervisors, and training analysts. Kernberg is not sanguine about organizational life. He observes that "a certain degree of paranoid fear permeates most psychoanalytic institutions" and "all social organizations struggle with such developments" (p. 1036). Disturbing training encounters with analysts operating in a less than ideal way are, unfortunately, inevitable. As documented by the panelists, the task of training is not a walk in the garden park. What we do with such disturbing encounters is critical. We continue to work them out over a long period of time. Dr. Bonovitz's bemused description of the question that remained in his mind – about whether he had or hadn't seen the interviewing analyst in his pajamas – is a good example of the reflective space that is required for identity consolidation. He continues to wonder why he didn't go back to this analyst for supervision despite a very good interview.

Supervision with a variety of supervisors is essential in helping candidates develop a personal frame of technique that evolves and changes creatively over time. Curriculum selection is another critical aspect of such development. In my institute, I am working with a committee on curriculum revision. Among other aims, we are striving to create an approach to teaching that dispels a promotion of the over-idealization of technique. To do this, we have made the teaching of analytic listening a centerpiece of the curriculum and will feature senior analysts who are willing to illuminate the mind of the analyst, the experience of doing analysis, and the inevitable uncertainty that accompanies our work.

Analytic identity formation is a very long process that requires revision and mastery of the collection of identifications, idealizations and introjects of analytic training. Nina Coltart (1985), a British analyst, writes: "The day one qualifies as an analyst, the analyst that one is

going to be is a mystery. Ten years later, we may just about be able to look back and discern the shape of the rough beast – ourselves in embryo." Thirteen years ago, at my final case presentation, the last step prior to graduation, I offered a 45-minute detailed account of the development of one of my cases to a small group of evaluating analysts. After I finished, the chair of the group asked me the following unsettling question, in a pointed way: "I've heard your account but I wonder if you could tell us about how you work." I had been forewarned that this particular chair had a reputation for putting candidates off balance and so, though surprised, I had a quick rejoinder. I pointed out that I had presented several segments of process material and asked her to clarify her question. I navigated this mistimed challenge quite well. But I actually think her question was a good one. Thirteen years later, I have come up with a better answer: "That's a mystery. I can tell you in another ten years."

To conclude, the candidates on the panel are actively and constructively engaged in an essential learning process, one that I believe can be brought back to the institutes in which we all participate.

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Address correspondence to:

*Elizabeth Fritsch, PhD
6842 Elm Street, Suite 104
McLean, VA 22102, USA
fritscheb@aol.com*

Elizabeth Fritsch is a training and supervising analyst at The New York Freudian Society's Washington Program. She is a former director of the training institute and current chair of the Training Analyst Panel.

Discussion of the Panel, “The Development of an Analytic Identity: The Impact of Early Formative Experiences and Theoretical Models in Training”

Judy L. Kantrowitz, PhD

In analyzing the contributions of the panelists, the material seemed to coalesce around three salient questions, which I shall address in my discussion.

What Are the Implications of the Findings / Experiences of These Candidates for the Educational Enterprises of Analytic Institutes?

There are five overall points:

1. The experience of anxiety that occurs as part of the admissions interviews continues through candidacy itself. One very important function of the panel is to normalize this experience.
2. A dualism exists. What are the interviewers and institute leaders really like, and what is the candidate's transference? When the interactions are on a one-to-one basis, as in the admissions interview and supervision, the “match” between their characteristics and conflicts needs to be considered. Although in each instance, the issues of one or the other person may be the dominant factor, different people bring out different aspects in each other.
3. Each institute has its own history and may be reacting to the behavior of the previous generation.
4. The zeitgeist needs to be taken into account. The way one thinks and acts is influenced by the culture. What in earlier generations was viewed as “purity” is now seen as rigid and limiting growth. Previous beliefs in certainty and conformance with authority have been replaced by an appreciation of the effects of subjectivity and relativism. These concepts influence psychoanalytic technique and teaching. We are now more tentative about what we say and how we say it.
5. The influence of the candidate peer group was mentioned, but not elaborated on, by Dr. Bonovitz in an original draft of his paper. It may be a very facilitating or impeding factor, depending on the nature of the group.

All three panelists address the problems of inhibition and anxiety that are engendered when candidates perceive the analysts who are in charge of admissions or progression as judgmental and rigid. There is no denying that such analysts exist. When a person feels judged and criticized, it is difficult to take in material and learn. Psychologists speak of a state of receptive learning. Anxiety interferes. In an early draft of his paper, Dr. Bonovitz suggested that he felt this characterized his earlier personal analysis, and he sought a training setting that would be different. His description of the diversity and openness at the William Alanson White

Institute is similar to the way I currently perceive the Boston Psychoanalytic Society and Institute and several other American Psychoanalytic Association (APsaA) institutes, but I doubt that all candidates at the institutes view these centers as supportive and facilitating. Candidates' experiences differ based on many factors, including which analysts, supervisors, and teachers they have, and the candidates' particular sensitivities. It must be remembered that what one candidate may experience in this fashion, another may not. It must also be remembered that individual analysts – as interviewers, training analysts, supervisors and people – may be widely viewed as insensitive and intrusive.

Some of the experiences that Drs. Attwell and Groisser report from their interviews are very upsetting. It is distressing to think that anyone ever interviewed candidates in this fashion. In no way can this behavior be viewed as acceptable. But lest we assume that these experiences are (or were) commonplace, a methodological point about research should be introduced. When we ask people to volunteer their experiences, those who have had intense affective reactions are most often the ones who offer their stories. My experience with volunteers, who described reading their analysts' published clinical examples about them, provided outraged or enthusiastic accounts – mostly the former. Intense affect about an experience does not invalidate what is reported, but the researcher and readers must be aware that the data are not necessarily representative of the larger population. These accounts, however, should increase analysts' sensitivity to being intrusive, formulaic, judgmental, or pathologizing. As Dr. Groisser points out, the tone of the analyst-interviewer's questions, above all, is important; it can stimulate defensiveness and inhibition, or openness and self-inquiry. Detailed questions about sexual behavior, as some described, are inappropriate, but some applicants are offended by questions not at all offensive to others, such as those about family background. We need to ask, "What constitutes a good admissions interview?" Given that our ability to predict is poor, what questions are relevant to this enterprise?

Applicants differ in their comfort about self-disclosure, some being much more private than others. Certainly having had a previous analysis, provided it was a positive experience, makes a difference. Under these circumstances, candidates are likely to feel much more comfortable discussing, and even exploring, more personal aspects of themselves. My own experience illustrates this point. I had had three and half years of what seemed to me a good experience in personal analysis before applying to be a candidate. (At that time, the late 1960s, we had to stop our analyses before applying. I am not sure of the reasoning behind this requirement; it never made any sense to me.) One of my interviewers asked me about my other interests. When I told him I was interested in literature and used to want to be a short story writer, he asked me to relate one of my stories. From it, he selected an image and asked for my associations. Although manifestly this did not seem so relevant to my application, I went with it and soon found myself in the depth of an affectively-charged memory. On only a few occasions in my analysis had I felt so deeply moved. The interviewer said he felt he had really gotten to know me. I saw the point in what he had done; he was assessing whether I could open myself to an analytic process. But I think, had I not had my previous experience as an analysand or if my previous analytic experience had been negative, I would not have been able to respond as openly as I did.

One's experience as an analysand, in my view, is the most important and central part of

becoming an analyst. While it is true that one's impression of one's training analyst may well change over time – and not only because of the transference – the fact that one has selected this person to be the one to work with seems very important. I cannot imagine how one could feel right about being assigned. It might work out very well, and that would be fine. But if it didn't? Not everyone would feel free to change. How would you be able to differentiate a poor "match" from a negative transference that might change over time? When I was a site visitor for APsaA, from 1990 to 1996, none of the institutes I visited ever assigned training analysts, nor had my own, even back in the late 1960s. I was really flabbergasted to think that this practice still existed. Suggestions, sure; but imposition seems antithetical to everything we understand. As a believer in the importance of the "match" and in our limited ability to predict analyzability, it is hard to imagine how this practice is justified. Of course, some analysts (like some people everywhere) will maintain they can "know" what is best for someone else; but institutionalizing this practice is another matter.

As many candidates are now older, it may be even harder for them to accept that they are in the student position, one that brings with it evaluation by those who teach them. Some anxiety inevitably accompanies evaluations, and issues of inclusion and exclusion cannot be eliminated. However, they, too, can be handled with greater or lesser sensitivity. Rejections, delays in progression or graduation, failure to be certified or become a training analyst – all are narcissistic injuries. Even were we to change all these systems, inclusion and exclusion would exist on some basis. A colleague-friend from South Africa has said that if we do not use some system of evaluation based on assessment of merit to place people in positions of leadership, it will be done by charisma. How can we resolve these dilemmas?

How Do Analysts, as Authority Figures in Analytic Institutes, Manage Their Roles? How Do Candidates Manage Their Relative Lack of Authority?

Drs. Bonovitz and Attwell both emphasize entering training with the idea that it was the analyst's job "to know" and impose his certainty. However, they found very different experiences in their training that contradicted these expectations. Not only are institutes different from each other, there are notable differences within them. In addition to knowing the workings of my own institute, as a site visitor for APsaA I had the opportunity to learn in depth about the training processes of six other institutes. There were creative analysts, open analysts, authoritarian and rigid analysts, and some who were not clearly one way or the other, in every training facility. The overall atmospheres were different. In some places, it was wonderful to be a candidate, but afterward, opportunities for participation was limited; only a few "chosen" ones ever became training analysts. In other institutes, the atmosphere was rigid and oppressive, while in others that were relaxed and open, there was reluctance for people to assume any role of authority. What I learned was that these cultures were most often reactions to the generations that had preceded them. In the rigid institutes, previous generations had engaged in boundary violations; the laissez-faire institutes had previously suffered from authoritarian oppression. In those institutes with a very long history, one could find earlier iterations of these cycles. When I was a candidate, we used to talk about the training analyst group as "they." What I am trying to convey is that the "they," who we assumed determined our future, are not monolithic. But candidates' transference to authority can often make it feel as if this were so.

There is another side to the learning issue, the problem of tilting so far in the direction of maintaining an atmosphere of comfort. Analysts, supervisors, and teachers may have become so concerned about causing anxiety and repeating injuries they themselves experienced or have heard about from others, that they are afraid to try to help candidates grapple with aspects of themselves they do not like, of which they feel ashamed, or which they would like to disown. This fear of inflicting discomfort, at times, prevents them from helping candidates see that there might be other ways to address something with a patient or recognize their own blind spots and countertransferences. Of course, there are more and less sensitive ways to raise these issues. Unless candidates understand that the person addressing them has understood their perspective, they may find it hard to take in a view that is not their own. Narcissistic sensitivity cannot be underestimated, and everyone likes to be admired. But learning is also exciting. In addition, people who enter analysis rarely do so only for professional reasons. They have pain and want to change things in their feelings and their lives. To not facilitate increased awareness and promote personal and professional growth is a disservice. It leads people to either believe they cannot be helped, or that psychoanalysis is of limited value. Facilitation does not occur by imposing “certainty” or “knowing” on someone; it is about a process of discovery that is a mutual endeavor, but not a symmetrical one. The analyst and supervisor, by virtue of experience and of not being the same person as the candidate, can see things the candidate does not yet know or may be “blind” to for intrapsychic reasons. There are also many things the analyst does not know and is blind to in him/herself; the analyst can learn about these from the candidate’s observations, if s/he is open to them. However, the primary focus of inquiry and learning is for the candidate – and if this is backed away from, the candidate will lose a precious opportunity.

Dr. Bonovitz describes his experience at the William Alanson White Institute as meeting the criterion for which we would all wish: holding the tension between comfort and challenge. We do not, of course, know whether all candidates there share this experience. Candidates need to seek out what they need in their choices of analyst and supervisors, and, when possible, courses. The more candidates can tell supervisors or instructors what they do not grasp or need to learn, the more candidates can grow. Most analysts will welcome these requests, when they are made with the same respectful tone with which candidates wish to be addressed.

Creating an atmosphere of safety is essential for learning, but I worry that we have tilted so far in this direction in many analytic institutes – as a reaction to earlier times of insensitivity to anxiety and inhibition – that we may sacrifice an appreciation of the benefits from the stimulation and growth from challenge. Some people remain overly sensitive to narcissistic injury. For example, I presented a case at an international conference; the discussant made some very cogent and helpful observations about things I had not seen. After, he worried I had been injured and was angry with him. While I would love to have seen what he saw myself, I mainly was glad to see them then. I asked if he would be willing to listen to a later hour; I felt I really could learn from his perspective. He never responded. Years later we were together at a meeting on education. He said it was really impossible to give meaningful feedback to people because they would be narcissistically wounded. Afterwards, I said I now understood why he did not respond to my request, but that I felt deprived. He said this was an unusual response, and he would not engage in reviewing my work with me. One of my analysts similarly complains that neither teachers nor supervisors push the edges of her learning.

Yet when I hear the current papers, especially those by Drs. Attwell and Groisser, the other side resurfaces. Dr. Attwell worries that what he has written may have negative consequences if certifying analysts read it. But reading and re-reading his paper, I wonder what he expects would be negative. He has only stated that a number of psychoanalytic educators report that we have often made poor decisions about admissions (in both directions). Certainly this is true – and, I thought, perhaps naively, widely acknowledged. Analysts can behave judgmentally and insensitively; again, of course, true. We would like to believe everyone would be respectful, sensitive, non-dogmatic, and non-judgmental. But people are people, and even those who generally are less likely to behave in this manner, do sometimes behave in undesirable ways. Is this an idealization of analysts and analysis, resulting in inevitable disappointment and disillusionment because the analytic world and family cannot be all we hoped it would be?

How Does One's View of Formative Experiences Change Over Time?

To what extent one comes to view one's admissions and early training differently over time depends on both one's later experiences at the institute and the extent to which one changes oneself. Dr. Attwell's reflections on his transference to authority, which he continues to examine and understand, are central here. Similarly, Dr. Bonovitz's reflections on his wishes not to disrupt the idealized view of his admissions interviewer, and later, to preserve his idealized view of supervisors, are also relevant. Both panelists are highlighting that they are aware that their own dynamic issues color their perceptions. None of us has our neurotic proclivities totally disappear, but analysis helps us recognize them; continuing to grapple with them is our own responsibility. We need to find ways to compensate for aspects of ourselves that tilt in unhelpful directions, too far one way or the other. Hopefully, we do not repeat what is unhelpful and hurtful, and can use what we learn that helped. But since we do inevitably bring our own proclivities, selectively attune to ideas or behaviors that we both fear and desire, there can be a propensity to repeat or to do just the opposite. Like all reflexive reactions, there is some rigidity and limitation. To the extent that institute training disconfirmed expectations – in either direction – is likely to modify initial impressions. Also important are personal experiences in supervisions – for better or for worse. But what we learn about ourselves in our own analyses, and in our work with patients, is most likely to transform our understanding of ourselves and our relationship to authority. A better understanding of how we are prone to perceive authority, and to react both positively and negatively, would hopefully increase the complexity of our views over time. The tendency to generalize and to see the analysts who run the institute as “they,” whether feared or idealized, would then decrease, as we become part of that community.

Address correspondence to:

Judy L. Kantrowitz, PhD

334 Kent Street

Brookline, MA 02446

judy_kantrowitz@hms.harvard.edu

Judy L. Kantrowitz is a Training and Supervising Analyst at the Boston Psychoanalytic Institute and an Associate Professor at Harvard Medical School. She is the author of two books, The Patient's Impact on the Analyst and Writing about Patients: Responsibilities, Risks, and Ramifications, and several papers on the patient-analyst match and outcome of psychoanalysis. Dr. Kantrowitz has served on the Editorial Boards of the Journal of the American Psychoanalytic Association and The Psychoanalytic Quarterly.

On Speaking Up While Still in Training

Thomas A. Bartlett, MA

Several years ago, I began to voice concerns – first by letters sent to my Education Committee chair and to Board on Professional Standards committee chairs, and later by use of the American Psychoanalytic Association (APsaA) e-lists -- about training issues in APsaA institutes. Those who read the APsaA Members List are familiar with these issues: prohibitively high training fees, lackluster teaching, and the ever-advancing age of starting candidates, to name a few.

What candidates new on the scene may not appreciate is that only five years ago, many of these issues went largely without public mention. Talking about money was uncouth, taboo. Actual fees were kept private between candidate and supervisor or training analyst (TA). Publicly criticizing the teaching in our institutes was seen as unappreciative – that is, when it was not interpreted as “acting out.” The aging and declining numbers of new candidates was overtly denied. Today, these problems are taken more seriously and committees and list discussions have been set up to address them. I want to emphasize that these changes *only* came about because a small number of us did speak up repeatedly -- zealously, at times -- until these concerns registered. I say this because I have been amazed and disappointed by how many people were afraid to do this.

In the context of discussing initial candidate anxieties, I want to address this fear of speaking up, which I certainly had in the beginning, and which I continue to find in many other candidates. When I first began to voice these issues, many colleagues -- highly accomplished professionals in their forties, fifties and sixties, members of academic faculties, clinic directors, parents, even grandparents -- would say to me, “Be careful. This will get you in trouble.” “They can make it hard for you.” Other common reactions were apathy (“They’ll never change or listen, so why bother?”), blasé indifference (“I never expected the teaching to be any better. I did this for the supervision.”), and guilt (“Our teachers don’t get paid.” or “I don’t want to hurt anyone’s feelings.”).

What is it about analytic training -- about our analytic culture -- that leads otherwise autonomous adults to become so willing to hold back what they think, keep their heads low, and go along so as to get ahead? In psychoanalytic training, of all places!

In an earlier Affiliate Council Forum on the progressions process, Deborah Cabaniss raised the question, “What can we do to reduce candidate paranoia?” There is no question that there is an inordinate amount of fear and resentment, especially when you consider that our training, more than any other, is meant to foster open analytic inquiry. Is it paranoia, or is it grounded in reality? Well, obviously, both.

We all know stories of appalling treatment of candidates, and may have met with some ourselves. But for each of these stories, there are so many more fantasies, so many cases of candidates worrying among themselves, while they would actually have been welcomed, had

they asked, to participate on the very committees addressing these issues. Candidates collude in a pervasive fantasy that we are infants, even in the very act of grumbling about our infantilization. Faculty support this by conflating their role with that of the analyst, and either acting as a blank slate, or worse, dismissing all complaints as transference projections and part of the "growing process." Repeatedly, I have seen that all we had to do was take our own concerns seriously, and we, and the issues, would then get taken seriously. But this, too, involves a process, and one that is, in whatever form it takes, probably fundamental to graduating, and to becoming an analyst.

For me, a freeing moment went something like this: "I am licensed, and so, really, I have little to gain professionally by graduating and nothing to lose that I would consider valuable by speaking up. I am not making up these problems. If I have to keep my head down in order to graduate from my institute, I do not want any part of it. When would it ever end if I started down that road? Once I became a TA? Once I became chair of the Education Committee?"

For others, the shift may not be cast so politically. But it is a similar shift. In effect, we graduate when we no longer care about graduating *per se*, because we place more confidence in our own sense of things. We care about doing analysis.

So, in my healthy reversal of Groucho Marx's famous dictum, I decided I would not want to join a club that would *not* have me, *as me*, as a member. Once I could say this, I suppose I had already become, for all practical concerns, a member. I could enjoy supervision and study for its own sake, and my official graduation became just that, a mere formality. (Now instead of paying high training costs, I pay higher membership dues and fees to attend meetings!)

In his excellent book, *Hate and Love in Psychoanalytical Institutions*, Jurgen Reeder (2004) discusses what he calls a destructive "superego complex" that analytic institutes so often engender, whereby the person who is most rigid is considered the most "rigorous," and old rivalries get passed along over the generations through processes of identification. Early in training, we all outdid one another with knowing comments, quite unlike ones we actually made in our own work. Where this psychoanalytic and institutional super-ego holds sway, there is a right way to do things -- it sits on our shoulders, and we know we are ever failing it. Our patients even sense this in us. At some point, it lifts when we become comfortable with our unique style, with all its strengths and limitations. Hopefully, not long after this, our supervisors and committees agree we are ready. But if not, does anyone believe that by doing the training over, or by being made to continue yet several more years, that we would emerge all that different, practice all that differently, in the privacy of our offices?

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Address correspondence to:
Thomas A. Bartlett, MA
1735 Lombard Street
Philadelphia, PA 19146-1518
thomasabartlett@comcast.net

Thomas A. Bartlett graduated in 2006 from the Psychoanalytic Center of Philadelphia, where he has served on its Education and Curriculum Committees. He is the former chair of the APsaA Affiliate Council's Task Force on Training and also saw to the creation of APsaA's Affiliates e-list, as well as e-lists for the International Psychoanalytic Studies Organization (IPSO), the organization for candidates of institutes of the International Psychoanalytical Association. Mr. Bartlett has been an active proponent of educational and organizational reform to meet the economic circumstances and academic interests of contemporary aspiring analysts.

Power to the People

Donna S. Bender, PhD

In reflecting on the conversation begun by this new journal, as well as being a new graduate and, thus, a veteran of analytic training, I thought it might be a good time to pass along some advice to those of you who are still in the trenches. While a rather cheeky thing to do, I will model my remarks on those made by Otto Kernberg in his provocative paper, "Thirty Ways to Destroy the Creativity of Psychoanalytic Candidates." I propose the following: "Ten Ways for Candidates to Ensure They Are Downtrodden and Marginalized."

1. First and foremost, when you begin analytic training, ***forget that you are already a trained professional in at least one field.*** Many candidates who come to our institute not only have a degree and experience in a mental health field, but often have had distinguished careers in other fields as well. Get over it -- you don't want to come into the training venture thinking you are a grown-up. It is an assault to the narcissism of your instructors and supervisors, and it slows down the regression in your analysis.

2. ***Do not attend your institute's lectures and seminars.*** Granted, we are all very busy, but you know that is not the real issue. There is a pecking order there and candidates are the lowest caste. (At least the maintenance staff is useful in helping to set up chairs.) No one wants to hear your questions anyway, and when you cannot participate in the ongoing discussions generated by these meetings, you can just say, "Uh, couldn't make it."

3. ***Never attend institute-sponsored social events and graduation celebrations.*** This is an obvious one. You may, horror of horrors, see your analyst on the other side of the room. (Can't bring this up in treatment ahead of time, right?) It is better to put off this showdown until after you graduate and have to actually be your analyst's peer.

4. ***Idealize teachers, supervisors, analysts, guest speakers, etc.*** This helps ensure achievement of objectives 1 to 3 above. After all, idealization is a defense and we do not want to be stripped of our defenses too quickly.

5. ***Fail to participate in your institute's candidates' organization.*** Since you are all lowdown, no-accounts anyway, why compound your grief by associating with fellow peons? Surely you would not want to be in a position to empower yourselves as a group to participate in institute policy-making and training issues that affect you directly. It is much easier and more fun to gripe about the few candidates who do try to organize their peers. Also, with no critical mass of candidates assembling, you ensure that there is no democratic process, thus contributing to achievement of #6.

6. ***Refuse to join institute committees and boards even when invited to do so.*** I can illustrate this directly with a recent example. (Case details have been altered for confidentiality purposes.) An obscure South American organization decided to create voting positions for candidates on both society and institute boards. An election was called by the head of the candidates' organization. Fortunately, candidates did not have to muddle their minds with

decisions about voting because they only barely managed to find enough people to fill the open slots.

7. ***Do not turn in evaluations of class instructors.*** This is a no-brainer also. You know they are just throwing you a bone by giving this appearance of some power and influence. Well, don't go along with this condescension. Passive-aggression is a beautiful thing.

8. ***Approach your training analysis as an obligation rather than a liberating privilege.*** It's expensive, right? Better to get the heck out of there as quickly as possible.

9. ***Stay in really bad supervision relationships and analyses.*** You are going to need to learn about sadomasochistic enactments anyway, so why not experience them firsthand?

10. And finally, when they do relent and let you begin to look for control cases, ***assume that analysis is the treatment of last resort for most patients.*** When you consider patients currently in your practice or do a consultation, sheepishly suggest analysis, hoping they have read the recent *Newsweek* article saying Freud is not dead, and apologize for offending them if they ask questions about your reasoning in making the recommendation. If they seem remotely interested, reassure them that you would be more than happy to ease the way by charging them a fair price, say \$2 per session, regardless of their means. After all, analysis is a treatment intended only for New York freaks, a few weirdos on the West Coast, and those wacky Argentinians, right?

I could go on and on. Some of you may be wondering if I have been successful at any of the above. Not one for wanton use of self-disclosure, I refuse to make this into a cheap confessional. However, if anyone asks, I would be willing to star in a new reality TV show: *Survivor XXI -- The Institute*.

Now, as I saunter into the ranks of the real analysts, I wish you all the best. Happy Oppression!!

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Address correspondence to:

Donna S. Bender, PhD

Assistant Clinical Professor of Medical Psychology in Psychiatry

Columbia University College of Physicians and Surgeons

NY State Psychiatric Institute

1051 Riverside Drive, Box 129

New York, NY 10032

bender@pi.cpmc.columbia.edu

Donna S. Bender is Assistant Director, Department of Personality Studies, New York Psychiatric Institute, and Assistant Clinical Professor, Columbia University of College of Physicians and Surgeons. She is also Co-Principal Investigator and Director of Training for the NIMH-funded Collaborative Longitudinal Personality Disorders Study. Dr. Bender maintains an Upper West Side private practice in adult psychoanalysis and psychotherapy, and graduated in May 2006 from the Institute for Psychoanalytic Training and Research.

The Inevitability of Candidate Anxiety and the Role of the Institute in Enhancing or Decreasing This Tendency

Kim Gelé, PhD

The papers presented by Drs. Attwell, Bonowitz, and Grossier all returned repeatedly to the anxieties that candidates commonly experience and to the need for institutes to be more sensitive to the power differential and the way in which candidates are treated. This paper discusses various aspects of candidate anxiety, including how it arises and how and to what extent it may be alleviated, with a particular focus on the importance of clear communication between candidate and institute.

One very basic instance of candidate anxiety occurs when candidates are asked to provide feedback to the institute. Even when a forum is provided, candidates often hesitate to speak openly. For example, many candidates at my institute shy away from filling out faculty and course evaluation forms; when they do fill out the forms, it is often with such a lack of candor and detail that the institute finds them nearly useless as a basis for making faculty and curriculum decisions. Candidates tend to offer two main reasons for failing to fill out the evaluation in detail, or at all, particularly when the evaluation is not wholly positive: fear of reprisal and fear of hurting the instructor's feelings. Many candidates do not believe that the evaluations are truly anonymous, as billed, and doubt that the evaluations are taken seriously by the institute. Interestingly, these reasons reflect both a fear of being persecuted and a fear of persecuting others.

Of course, speaking up is easier if one knows that the institute makes a consistent effort to listen to what candidates have to say, rather than ascribing complaints to anxiety, immaturity, or clinical inexperience, and without being swayed by political considerations. There may be strategic reasons for holding back, especially when a candidate already feels "bitten" by the institute. Still, this attitude of reticence is very frustrating. Perhaps more candidates should take the position that if an institute is not a place where one can speak honestly, then it is not a place from which one wants to graduate and spend one's professional career. If candidates want the institute to speak to them in a clear, straightforward way about strengths and weaknesses, treating them as adults, then surely candidates should approach the institute in the same way. One should assume that instructors welcome honest feedback about the course, and that if evaluations are requested, they are actually used. To do otherwise is to engage in an empty ritual, a kind of small talk that is the antithesis of psychoanalysis.

A forthright approach is easier if the institute reliably treats candidates as adults, but despite improvements, this is still not always the case. As with candidate evaluations of faculty and curricula, institute evaluations of candidates are not always as clear and direct as they might be. There are many reasons for this. Faculty may have the same fear that candidates do of hurting someone's feelings with negative feedback, or they may have difficulty shifting from the role of psychoanalyst (in which giving a rating or evaluation will feel reductionistic) to that of instructor. Further, it is complex to determine not only what constitutes a good analyst, but also when someone meets that standard; that is, when a candidate is ready to progress or graduate. But if transparency in course and faculty evaluation is important, transparency in candidate

evaluation is essential. Candidates realize they are being evaluated and assessed, and must bear this knowledge without being inhibited in their capacities to learn, be creative, and grow. They must take emotional risks, be open and nondefensive, even while being watched and evaluated. The anxiety that this produces would be lessened if the institute would make evaluation criteria explicit and the completed evaluations available to candidates. Even then, candidates would no doubt still be left with some evaluation anxiety that would inhibit full and nondefensive engagement in training. That may be unavoidable, however, and may be an acceptable sacrifice to make in the interest of assuring a rigorous training.

It has been suggested that the focus, in recent training reforms, on making candidates comfortable can easily shift into reducing the rigor of training. However, comfort need not be equated with lowered standards. To take the admissions interview as an example, some candidates describe being pathologized during the interview. Whether an applicant is ultimately considered suitable for training or not, however, an interview that is conducted with respectful and straightforward questions and comments, including challenges at a level the applicant can respond to, is likely to leave the applicant feeling understood and supported. It may be true that applicants who have already been in analysis are able to respond nondefensively to a higher level of challenge in the interview, but even applicants who are not accepted for training can be left with a positive experience – perhaps even in agreement that analytic training is not the right choice for them. As well, those who are accepted for training will approach the institute more trustfully and optimistically if they have had a positive experience in the interview.

Anxiety may also be evoked when some aspect of training challenges the candidate. Of course, challenge is essential in training. What is often overlooked, however, is that challenge is useful not only in areas that are difficult for the candidate, but also in areas that are not. To illustrate: A candidate and his or her supervisor will naturally pay more attention to areas in which the candidate seems to be having difficulty. The candidate will give extra thought (and time in his or her own analysis) to interventions that the supervisor encourages but that do not feel right to the candidate. The candidate may experience this as either positive or negative, but in any case, areas of conflict or difference with the supervisor will get attention and scrutiny. We think much less about what feels natural, e.g., the habits of technique that one picks up from one's analyst, suggestions given by the supervisor that fit right in with what a candidate has already thought of doing, or interpretations that were successful. Such experiences tend to be just accepted, if noticed at all. But surely they would benefit from examination and challenge as well, to foster learning and integration, rather than simply incorporation.

While it should be evident that group dynamics will be a significant element of the training experience, this is rarely discussed as such. Here, a major mediating factor is the way in which the institute handles, or fails to handle, any problems. A cohesive class can lay the groundwork for years of collaboration and collegiality in the institute community. On the other hand, one or more unduly competitive, anxious, or dominating class members can seriously detract from the training experience, becoming a major source of anxiety (among other feelings) in the other candidates. A different set of problems in group dynamics arises from the fact that today, more than in the past, there is likely to be a wide (sometimes very wide) range in age, clinical experience, professional background, and length of time already in therapy or analysis, among beginning candidates. Such diversity can make it a challenge to address classes, or even

the whole training program, on a common level. Of course, class make-up can be controlled only to a very limited extent, if at all, but the resulting issues should be recognized and addressed by the institute.

Like group dynamics, the format of classes gets little specific attention from institutes, typically being left to the preference of individual instructors. Yet this also affects candidates' experiences, including anxiety. While the meandering "What did you think of the paper?" type of class allows room for exploration and encourages tolerance for ambiguity in learning, this should not come at the expense of classes that include focus and direction, with specific points to cover and concepts to master, and that impart a clear idea of where the particular papers fit into the topic at hand. Having a solid grasp of fundamental concepts on an intellectual level will provide the basis for a gradual deepening and more experiential learning as training progresses. This will not only reduce anxiety, but in the long run, will enhance confidence and pleasure in one's professional work.

Training to become a psychoanalyst is a complex and unusual undertaking. Whatever reforms may be instituted, it is doubtful that candidate anxiety can ever be eliminated. Anxiety is bound to be a part of any process that includes, as analytic training does, such conflicting elements as formal evaluation and an expectation of emotional openness. But while anxiety may remain, reforms can go a long way toward reducing the paranoia that candidates often experience. Thus, institutes should aim at implementing training policies with the goal of, to borrow a phrase, transforming persecutory fear into ordinary anxiety.

Address correspondence to:

*Kim Gelé, PhD
211 West 56th Street, #7K
New York, NY 10019
KCGele@aol.com*

Kim Gelé is a psychologist in private practice in New York City and a candidate at the Institute for Psychoanalytic Training and Research.

Paranoid Reactions to Joining

Jesse A. Goodman, MD

During the panel, “The Development of an Analytic Identity: The Impact of Early Formative Experiences and Theoretical Models in Training,” which took place at the 2006 winter meetings of the American Psychoanalytic Association, three candidates presented descriptions of the range of experiences and reactions to joining an institute. These descriptions took the form of narrative personal stories or summaries of interviews with candidates about their entry experiences. Three more senior analyst respondents then presented their reactions to the presentations.

In response to these presentations, I have formulated some thoughts of my own to organize the meaning of a specific range of reactions described by candidates as they join an analytic institute. Specifically, I believe that the experiences of disorientation, persecution, and intrusion are reactions to the process of joining, which is a danger to a new candidate’s identity, thus evoking the usual defensive responses to a dangerous situation. Writing for the inaugural edition of *The Candidate*, I assume my primary audience is other candidates, and so I will refer to candidates as “we” or “us.”

In each of the three aforementioned presentations, candidates described feeling intruded upon, being treated disrespectfully, judged, and pressured to reveal more about themselves than they wished. These feelings describe a paranoid attitude in which the institute or its interviewers are dangerous and malevolent. By no means were these themes the majority experience, but their frequency piqued my curiosity, particularly because I felt quite opposite feelings during my entry into the Berkshire Psychoanalytic Institute two years ago. I recall my interviewers as supportive, welcoming, and interested in learning about me. Rather than feeling intruded upon, I felt at a safe distance from them. I believe I accurately perceived their attitudes about me and other entering candidates. At the same time, I suspect that I am remembering my defenses against the dangers of joining an institute. For me, adopting an aloof attitude provided familiar and reliable protection against intrusion.

Not surprisingly, beyond just paranoid reactions, the presenters described a wide variety of reactions to early experiences in analytic training. One expects different individuals to respond to the same situation differently. At the same time, each candidate encounters a unique institute with a distinct cast of fellow candidates, teachers, supervisors and training analysts. Since identity develops in the context of these important relationships, these figures create a unique family. Furthermore, each of us enters the institute with our own set of unconscious fantasies about what it means to be an analyst. We would not enter into such a significant commitment to professional development unless doing analytic work provided powerful and specific personal gratification. Yet despite the uniqueness of each institute-family, there is a shared persecutory reaction to joining an institute. How are we to explain this? Are we a paranoid group as a whole? Are institutes persecutory on the whole?

I think not. The prominence of persecutory experience is derived from another source. The experience of vulnerability and intrusion is best explained as the reaction to the process of

joining. Joining requires relaxing our internally held identity in order to learn. Joining a group involves letting others know who we are while opening ourselves to learning from others in the group. In analytic training, we learn from our teachers, analyst, supervisors and fellow candidates, as well as from the psychoanalytic tradition. As candidates, we relax our boundaries and allow them to become more permeable in order to take in new ways of thinking and listening. Each of us holds our beliefs and values dearly, as they give shape to our image of ourselves. We have to set aside our own values and beliefs to be open to learning foreign ways of seeing the world and ourselves. The paranoid experiences described by candidates may describe the subjective experience of identity diffusion. A basic feature of the paranoid-schizoid position, as described by Melanie Klein, is confusion of the difference between self and other. Learning is just such an event, as one allows what is outside to enter inside.

Joining an institute can be viewed as an identity crisis. The basic premise of psychoanalysis is radical – that our experience of ourselves and others, and our behavior in the world, are determined by unconscious fantasies and early relationships. The suggestion that our behavior is determined by ideas out of our awareness is an assault on our observational capacities and our belief in our own agency. This feature of psychoanalytic thought may have some bearing on the paranoid themes that emerge in candidates during their process of joining. Candidates are often in a training analysis when they interview, or anticipate beginning a training analysis. Lying on the couch and sharing one's associations with another, and even with oneself, is a vulnerable situation, which likely contributes to paranoid feelings.

Sometimes, as candidates early in training, we are experienced by our patients as wooden, stiff, or distant. While this may be, in part, transference, it is also, in part, an accurate perception of us trying on a way of working. As though wearing poorly-fitting clothes, we are not able to move freely and naturally from an analytic stance. In time, analytic authority becomes more natural and less intentional. When working analytically is more familiar, we are more relaxed as we work. A parallel shift occurs in our relationship to our institute. While joining, the diffusion of our identities often evokes defensive strategies that include treating the institute as an enemy or as a malevolent, controlling object. As we negotiate how to be open to learning without submitting or abdicating our identities, aims, and beliefs, we feel freer both to learn and to present our own ideas in class, in our writing, and in our analytic work. We can risk taking in from the outside without fear of dissolving, and we allow the learning process to proceed.

Deciding to pursue analytic training represents a significant commitment of time, money, and mental work to a philosophy of mind and a professional identity. Feeling that one has been treated badly may be a common feature of entering an institute for some. I am certain there are real examples of individual faculty behaving sadistically to candidates, and when this occurs, action should be taken to stop it. However, more often, experiencing the faculty as persecutory and intrusive reflects our experience of relaxing our boundaries between inside and outside to promote the learning process, our development, and a gradual reshaping of our sense of ourselves and the world around us.

Address correspondence to:

Jesse A. Goodman, MD

25 Main Street

Stockbridge, MA 01262

Jesse.Goodman@austenriggs.net

Jesse A. Goodman is Staff Psychiatrist at the Austen Riggs Center in Stockbridge, MA, Consulting Psychiatrist at Gould Farm in Monterey, MA, and a candidate at the Berkshire Psychoanalytic Institute.

Safety, Vulnerability, and the Creation of Potential Space in Psychoanalytic Training

Lauren Levine, PhD

Psychoanalysts from diverse theoretical perspectives would agree about the importance of establishing a sense of safety and trust, and a capacity to play in the analytic relationship, if the analysis is to become a transformative experience. As Winnicott (1971) suggested, psychoanalysis takes place “in the overlap of two areas of playing, that of the patient and that of the therapist” (p. 38). Along the same lines, one might imagine that analytic institutes would aspire to foster an atmosphere where candidates feel safe to make mistakes, think critically, explore their countertransference, and open up the potential space for creativity. However, the history of training institutes tells a different, at times darker, story. Auchincloss and Michels (2003) have argued that training analysts “have been far more dedicated to *patients* achieving curiosity, flexibility, and creativity than to helping students do the same” (p. 398). Traditional analytic training institutes in the U.S. and abroad have been described as quasi-religious, indoctrinating educational institutions (Balint 1948; Bruzzone et al. 1985; Garza-Guerrero 2002; Thompson 1958), filled with “hierarchical and political pressures” (Kernberg 2000) that discourage dissent and controversy (Slavin 1997).

Among the training analysts who participated on the panel, “The Development of an Analytic Identity,” there was widespread agreement that there have been humanizing changes in psychoanalytic training institutes over time. Perhaps this is due, in part, to the larger shift in the field to a less authoritarian, more intersubjective perspective (Bass 2000; Munder Ross 1999; Sorenson 2000). Certainly, there continue to be alarming stories of incidents that still occur in training, such as applicants being asked in their initial interview about their masturbatory fantasies or their sexual orientation, questions that were apparently asked routinely in the not too distant past.

What was striking to me, however, from the stories shared by the candidates, was that there remains a pervasive sense of being evaluated, judged, and interpreted, an unsettling anxiety about being a “good enough” analyst throughout their training, culminating in the accreditation process by the American Psychoanalytic Association (APsaA) (and continuing afterwards in the process of becoming a training analyst). Clearly, we all struggle with our own anxieties, aggression, and competitive strivings throughout the process of becoming psychoanalysts. But the degree to which an institute tends to foster apprehension, judgment, and infantilization on the one hand, or playfulness, critical thinking, and the development of one’s own analytic voice on the other, varies from one institute to another.

It was in the spirit of creating a more democratic, pluralistic model of analytic training that the New York University Postdoctoral Program in Psychotherapy & Psychoanalysis (Postdoc) was born (Aron 1996; Kalinkowitz and Aron 1998). Postdoc, a university-based, interdisciplinary analytic institute was founded in 1961 for doctoral-level psychologists who, historically, had been excluded from mainstream analytic institutes of APsaA and the International Psychoanalytic Association. At Postdoc, candidates are given tremendous academic freedom, flexibility, and autonomy, and there is a deep sense of respect for students as

colleagues. Not only do candidates choose their own courses and supervisors, but they can either choose to take courses and work with supervisors across the theoretical spectrum, or focus primarily in one of the four tracks: Freudian, Interpersonal, Relational, or Independent orientations. There is no training analyst system; candidates are free to choose their own analyst. Thus, one's personal analysis remains completely confidential and separate from any evaluative component, beyond fulfilling the treatment requirement (analysts must have graduated at least five years before from a recognized analytic institute) (Lifshutz 1976; Wallerstein 1978).

I came to Postdoc with the desire to immerse myself in the Relational community, and to work closely with some of the leading figures in the Relational movement, but I also wanted to be in an analytic setting that encouraged, indeed welcomed, theoretical and clinical discourse. After not having been in weekly supervision for many years, I was anxious beginning my first supervision at Postdoc. Furthermore, my analytic patient was a woman I had been seeing in analytic psychotherapy for several years before we began analysis. I experienced a deep sense of respect from my supervisor for my patient and for the work that my patient and I were already involved in, and an appreciation of the multiple meanings (to the three of us) of his "intruding on" the intimacy of our relationship. This allowed me to feel safer exploring and making use of my own reveries, countertransference, and associations in the service of facilitating and deepening the analysis with my patient. I learned a tremendous amount from this supervisor, from the process as well as the content of the supervision. Rather than presenting his point of view didactically as the correct technical interpretation, he and I played with different possibilities about how to respond to complex clinical moments. As Berman (2000) suggests, "The inner freedom achieved may allow a supervision with an intersubjective focus to evolve into a transitional space within which the dyad generates new meanings not accessible by the intrapsychic work of each partner in isolation" (p. 284). Although my supervisor never appeared in pajamas (see the Bonovitz paper in this issue), there was a sense of mutual openness and vulnerability, listening to the multiple realms of unconscious experience and communication (Bass 2001). This, in turn, opened up the transitional space with my patient and enriched the analysis.

On the first day of a Relational case seminar, a question was posed by the professor: "With all the toxic, traumatic, dissociated material we absorb on a daily basis, how do we take care of ourselves as analysts?" (Harris 2006). This question set a tone in the class of respect for the difficulty of the work we do, and the challenges and obstacles we face. We were encouraged to present patients with whom we were really struggling, especially in terms of complex transference-countertransference issues. How do we create a safe-enough holding environment to present our most difficult patients, our most vulnerable selves? When we are caught in anguishing enactments or stalemates with our patients, how can supervision or a clinical seminar help us to extricate ourselves from a complementary position of doer and done-to and regain our sense of an analytic third (Benjamin 2004), as opposed to feeling shamed or inadequate, leading to a further collapse of self-reflective space?

Ultimately, we have a responsibility, as a profession, to the next generation of candidates and analysts, to treat them with respect and dignity, and to encourage creativity and critical thinking. We should expand our notions of safety and play in the analytic relationship to our training institutes, honoring multiple voices and perspectives. As a candidate, I feel particularly

fortunate to be a member of a community that values psychoanalytic pluralism and cross-disciplinary discourse, supports candidates' autonomy and originality, and cares deeply about the continuing vibrancy and relevance of psychoanalysis to the larger diverse culture in which we live.

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Address correspondence to:

Lauren Levine, PhD

21 West 86th Street, Suite 903

New York, NY 10024

levinespou@aol.com

Lauren Levine is a candidate at the NYU Postdoctoral Program in Psychoanalysis. She is also a Clinical Adjunct Supervisor at the City College of New York and Teacher's College, Columbia University Doctoral Programs in Clinical Psychology. Dr. Levine is in private practice in New York City.

Analytic Identity Formation: A Ritual Process

Jeffrey Longhofer, PhD, MSW

When I read the Call for Papers for the first volume of *The Candidate*, I felt once again on familiar ground. The editors referred to “critical rites of passage,” and asked about the contribution of rituals to intellectual and emotional growth, and the role of ritual in both producing and limiting curiosity and creativity. They wondered how rites of passage are experienced, in real and imagined ways, and thus contribute to the formation of analytic identities. I only recently had left a tenured faculty position and an academic career in anthropology to pursue graduate training in clinical social work and psychoanalysis. For many years, I have found myself betwixt and between identities, in a sort of liminal state described by a foremost student and anthropologist of ritual, Victor Turner. The editors, I thought, had found a perfect language to capture not only my experience of the many and complex social dimensions of analytic training (described nicely by the anthropologist Tanya Luhmann (2000)), but had also found a vocabulary for describing my emergent identity and associated emotional experience.

Turner (1995) described three phases in rites of passage, each, I think, with associated anxieties (while Turner acknowledged the profoundly psychological experience of ritual, he did not offer an adequate conceptual vocabulary to capture the dynamics). First, one must be separated from his/her former identity(ies) and prepared for the second phase, which he called the liminal. Here, one’s identity is symbolically stripped, thoroughly blotted out, before being prepared for the final phase: reincorporation into the normative social order, perhaps as a full-fledged psychoanalyst. Before reincorporation, one is left at the margin, in a liminal, ambiguous state, no longer in the old state and not yet in the new. It is an anxiety-producing time of role reversal and confusion, where boundaries are blurred and one may feel, profoundly, the absence of norms (e.g., not unlike Carnival, Mardi Gras, Halloween, candidacy). As I listened to the panelists, I heard all phases described in their myriad rites of passage and recognized my own, in both the phenomenological experience of candidates and in the reported survey data. I contemplated how the panel discussion itself and the formation of the online journal, *The Candidate*, were products of this liminality – the need to acknowledge and to explore the liabilities and potentials of this state.

It seemed to me that most of the panelists described something close to the liminal, or what Winnicott, in other terms, might have described as a creative and sometimes troubling transitional space of play. It was in their “thick” descriptions of liminal moments in the matriculation into training and training itself that I began to feel not only my experience of the ambiguous social roles and struggles to form an identity, but also the anxieties and ambivalences inherent in liminality: Who am I? Student, candidate, analyst? What is the process of identity formation? Am I in it? How am I to describe myself? Anthropologist, social worker, psychoanalyst? I have often found myself in social gatherings and with colleagues in anthropology awkwardly defending my new identity(ies), and just as often, I am looking over my shoulder. On one occasion, a feminist colleague said, “You’re studying psychoanalysis? People still do that? What will that mean for your career?”

Perhaps more important, in forming an analytic identity, one finds oneself immersed in sometimes troubling tensions among various psychoanalytic schools of thought and their representatives. In forming a “core identity,” as called for in the *Principles and Standards for Education in Psychoanalysis* (APsaA), one is not asked to remain maximally open to diverse points of view. One is left to wonder how a “core” identity emerges from competing and sometimes contradictory perspectives on the human mind.

Finally, the panelists addressed how and when progression decisions are made, what conventions govern them, and who makes them. There is a kind of indeterminacy to the question, “When will I graduate?” There seemed to be, in the hackneyed expression of our time, very little transparency. As I listened to the panel and reflected on the problem of transparency, I recalled learning from a candidate in Cleveland’s program that she had learned of her graduation only months after the decision had been made; there was no ritual of acknowledgment and no formal notification. No rite of reincorporation! Not possible, I thought. As an anthropologist, I am not only interested in rites of transition; I believe they are important aspects of identity formation, maybe even essential to it.

I am eager to see where this discussion leads and I am hopeful that the dialogue that began here will initiate, for both candidates and institutes, a deeper reflection on the nature and process of identity formation and analytic training.

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Address correspondence to:
Jeffrey Longhofer, PhD, MSW
Mandel School of Applied Social Sciences
Case Western Reserve University
10900 Euclid Avenue
Cleveland, OH 44106-7164
jxl102@cwru.edu

Jeffrey Longhofer is Visiting Associate Professor at the Mandel School of Applied Social Sciences of Case Western Reserve University, and Adjunct Associate Professor of Anthropology at Case Western. He is a fourth-year candidate at the Cleveland Psychoanalytic Institute and a clinical social worker in private practice. Dr. Longhofer has served as editor and associate editor of journals for the American Anthropological Association and the Society for Applied Anthropology, and has conducted ethnographic fieldwork among the Old Order Amish, Hutterian Brethren, and Mennonites. He is a coauthor of a forthcoming book for Columbia University Press: Toward Relational Case Management.

One Candidate's Somewhat Unusual Interview Experience

Gregory M. Lowder, LCSW

It is difficult to write about the development of an analytic identity when my own experience is still so much in flux. Moreover, my experience of the interview process was not only specific to my institute, but to the two individuals who interviewed me. Nonetheless, it seems important that candidates themselves begin to write and talk about these issues. There is still a lot of candidate anxiety about speaking openly about various facets of the training process. The candidate's vantage point -- that of being immersed in training -- is indeed unique. As such, it may provide the opportunity to perceive various aspects of the analytic training process from a "not-yet-analyst" but "sort-of-analyst" position, which could provide fresh and important views at a much needed time.

My experience of the interview process was somewhat unusual. I moved to New York City in the summer of 2003 to start the doctoral program in clinical psychology at the Derner Institute of Adelphi University. I had been practicing psychotherapy with a master's degree in social work since 1996, and I decided that I really wanted to be a psychologist and wanted to receive psychoanalytic training in New York City. Before arriving in New York, I had, almost exclusively, studied relational and intersubjective theorists. My impression, derived from reading and talking with others, of the history of psychoanalysis (especially in the United States) was that it was rife with imperious, misguided, even sadistic psychoanalytic theoreticians and clinicians. I also had read and heard that this contemptuous spirit was alive and well within the American Psychoanalytic Association (APsaA) and its respective institutes. Therefore, I was considering training only at institutes that had come to be deemed "good" in my mind, such as the William Alanson White Institute and the NYU Postdoc.

But then a funny thing happened. Through my advisor at the Derner Institute, I was offered a fellowship at the Pacella Parent Child Center of The New York Psychoanalytic Institute. Although this seemed like a great opportunity, because there is so little money for research into psychoanalytic ideas, I was initially reluctant to take such a generous offer. I was leery of becoming affiliated with an institute whose members, I was pretty sure, would not only be narrow-minded, uptight, and arrogant, but would all likely have goatees.

I began meeting analysts at The New York Psychoanalytic Institute. To my surprise, not only were few of them goateed, but they were smart, humane, and usually open-minded. I found the atmosphere to be comfortable and utterly personable. Could it be, I wondered, that many of my preconceived ideas about both APsaA and its respective institutes were wrong? Could the disturbing perspective of the anonymous interviewee, Aaron Green, in Janet Malcolm's *The Impossible Profession*, on the scene at The New York Psychoanalytic Institute, have been made up of half-truths? I heard evidence that this was the case, but I was still not convinced to train there.

Thinking that I would likely train elsewhere allowed me to approach the interviews at The New York Psychoanalytic Institute with an especially relaxed and open attitude. I am thankful for this, as I know of plenty others who were gripped with anxiety. I was told by the

Admissions Committee chair that Drs. A and B would be conducting my interviews; I contacted each and we set up times. Their personas and offices could not have been more different, but each of them proceeded to conduct an interview that was unlike any personal encounter I ever had. More than anything, I would say that they each were remarkably curious, respectful, and sincere in their interactions with me, as they asked me questions about my life and previous experience. The questions did not, in any way, feel clinical or staid, but instead seemed especially searching and spontaneously crafted. I found myself laughing easily at moments, being chagrined about one previous life experience or another. They either laughed as well, or were clearly with me in spirit. I also talked about some difficult experiences in my life, and it did not feel as if they had pried to get me there, and it certainly did not feel like I was left on my own. With Dr. A, I presented a clinical case, but it came about in such an informal and comfortable manner that it did not seem like I was presenting -- not in the way that I had known. It was more like I was simply discussing a pivotal life experience that happened to involve working with a patient.

As far as I can tell, from my "not-yet-analyst" but "sort-of-analyst" position, both Drs. A and B conveyed what I am coming to know as the analytic attitude -- that seemingly elusive and endlessly controversial phenomenon, which I am actually coming to have something of a feel for.

As it turned out, I began psychoanalytic training at The New York Psychoanalytic Institute in September, 2004. Straightaway, I was permitted to choose my analyst and advisor. Later, I would collaborate with the people at my institute who knew me best to choose each of my supervisors. I have enjoyed and valued the faculty, overall. Currently, I have two training cases, and two excellent supervisors, who have said things to me like, "It doesn't matter whether you are chatty or say very little, you just have to develop your own style," and, "There are no rules in psychoanalysis because the goal is to really just do all that you can to allow your patients to realize their unique potentials as fully as possible."

For many, the interviews are the first contact with the institute, and they can certainly set a powerful tone. For me, the interviews proved pivotal in my decision to train at The New York Psychoanalytic Institute. In preparation for writing this piece, I spoke with a number of senior analysts at my institute about the interview process. Each of them, more or less, conveyed that not a whole lot could be gleaned from the interviews, and it seems clear that you really cannot determine who will do well in training and who will not (which includes that you cannot determine who is analyzable and who is not -- whatever analyzable means these days). It is best to just determine if the person has the basic academic and clinical experience requirements, try to make sure they are not severely disturbed, and then just get to know a little about them, and do so in a manner that models the analytic attitude. It sounded pretty straightforward, and part of me wanted to hear that it was more complicated; but in the midst of so much complex theory and practice, it's nice to encounter a little simplicity.

Author's Note: Some of these ideas were included in my article: Lowder, G.M. (2006). A student in psychology hears half-truths that seem to plague rather than move us along. *Psychoanalytic Psychologist* 26(2):66-68.

Address correspondence to:

*Gregory M. Lowder, LCSW
103 East 86th Street, #15C
New York, NY 10028
glowder@gmail.com*

Gregory M. Lowder is a third-year candidate in psychoanalytic training at The New York Psychoanalytic Institute. He is also a fourth-year PhD candidate at the Derner Institute of Adelphi University, and a Research Fellow at the Pacella Parent Child Center of The New York Psychoanalytic Society and Institute.

Reality and the Development of an Analytic Identity

Angelica Kaner, PhD

A fundamental purpose of psychoanalytic training and mentorship is to foster the growth of an analytic identity in candidates. Such an identity reflects the group to which one belongs and that one represents; significant identifications within that group; and how one experiences oneself and what one does. It reflects a way of thinking about mental processes, namely, the importance of inner life and the pursuit of meaning. The continuity of psychoanalysis and the vital essences of what it has to offer are embodied in its progeny; the matter of analytic identity is of no small concern.

As part of the candidate's psychic life, an analytic identity is an internal dynamic happening shaped by the experience of analytic training. Ideally, if all goes reasonably well, it becomes a source of pride, each graduate embodying the spirit of the analytic project and carrying the mantle of psychoanalysis into the future. This commentary examines two realities of the 21st century: the increasing age of candidates and the decreasing demand for analysis. By destabilizing the frame surrounding analytic work, these realities simultaneously impact analytic training itself and the candidate's emerging identity.

Despite the premium placed on inner life, neither analysis nor analysts ignore consideration of external influences affecting the patient. In fact, the success of the analytic enterprise rests on the analyst's efficacy setting up the analytic frame, those conditions (i.e., continuity, predictability and the safety they ensure) that make exploratory work possible for both analyst and analysand. The frame's provision of safety lies in its being rooted in reality (space, time, fee, etc.). Its purpose is to facilitate the transition from the external world to the analytic space *and back again*. It allows regression and expressive freedom precisely because it safeguards both the analyst's and the analysand's connection to external life. By acknowledging the world beyond the consulting room, the world to which we must ultimately adapt, the frame underscores the importance of external reality (Kaner and Prelinger, 2005). Fundamental to an analytic identity, then, is an appreciation of the ways in which both inner and outer worlds count and relate to each other.

The First Reality: The Increasing Age of Candidates

Candidates today are entering analytic training significantly later in life than in past years. In an e-mail circular (February 10, 2006), former American Psychoanalytic Association (APsaA) president, Jon Meyer, reported that the average age of candidates entering training was 43, placing them squarely in middle adulthood, which roughly spans ages 35 to 55.

As psychoanalysts and social scientists began to look beyond childhood, they took greater interest in adult development. They began to focus on changing realities, namely, the transformations of the human body and shifts in social circumstances, as well as the stresses, demands and adaptive challenges that ensued. Adulthood came to be understood as having its own distinct phases, replete with age-specific developmental tasks and conflicts, not as just a screen onto which early fantasies and conflicts were projected.

One such challenge concerns how adults cope with a changing sense of time. According to Roger Gould (1978), we begin life never quite believing we will escape the timeless capsule of our families. By our 30s and mid-40s, a sense of urgency emerges upon recognizing our mortality, and by our mid-40s, we become emotionally aware that death lies somewhere in the future. This is an overriding reality of middle adulthood, arguably the central expression of the reality principle, and it becomes an organizing principle of life. It is then that we may experience the first of the great losses – the illness and death of parents. Or perhaps children are poised to leave home, or perhaps we start noticing our physical self aging, the waning of youth. As the emotional reality of mortality and limitation come into view, how time is spent becomes a matter of great importance. It is during this period of life when many candidates are apparently deciding to enter analytic training.

Entering training in midlife as opposed to young adulthood, then, brings its own age-specific set of pressures. Unlike the situation with younger candidates, it is not simply that potential analysands have become scarce; time itself has become scarce, turning length of candidacy, for some, into an all the more pressing concern. Will there be time left to develop as an analyst? Will there be a coming of age, a graduation? Will this be but an intellectual endeavor? The experience of older as opposed to younger candidates may be distinguished mainly by the nature of the stakes involved, namely, the pressures of time. If, as Auchincloss and Michels (1989) stated, a central psychological task of middle age is the vigorous conscious reexamination of needs and life goals, deciding which ambitions to realize and which to forgo, perhaps forever, then older candidates especially must have appraised analytic training as offering the most developmental bang for the buck, cast their lot with the analytic community, and made a go for it! It must have been that important.

Another salient fact of midlife candidacy is the rough age equivalence of candidates and faculty. Candidates are more or less adult peers of their teachers, even their own analysts. They enter training with established careers and professional identities. They are experienced psychotherapists, teachers, and/or supervisors. Some have published. Many are parents, even grandparents. Teaching and learning at an institute these days, then, is done largely among professional peers, some of whom may have established friendships beyond the institute. It can be tempting for faculty and candidates both to think of candidates as belonging to another generation, even as “kids.” In the regressive atmosphere of training, it often happens that the power of filial dynamics trumps reality and good sense. For older candidates, the eruption of these processes may be all the more narcissistically injurious and shame inducing.

The Second Reality: The Decreasing Demand for Analysis

Speaking to the dwindling number of individuals seeking analytic treatment, former APsA president, Newell Fischer (2006), estimated that 50% of graduate analysts in the association have no analytic cases. In light of these numbers, Kenneth Eisold (2005a) asserted that many of the cases discussed at analytic meetings may, in fact, be psychotherapy cases. Eisold (2005b,c) wrote how patient length of stay in psychotherapy – let alone analysis – has been affected by socioeconomic changes in the larger culture that require of people a greater mobility, and with it, a changed conception of time.

Arguably, an analytic identity exists in some nascent form very early on in the lives of eventual analysts, but it develops roundly in training from many kinds of participation: conversation with teachers and peers in classroom settings, supervision, and conferences. However, it emerges most from actual analytic work, by being in the trenches with analysands, the *raison d'être* of the analytic endeavor. This is the *experiential* furnace out of which such an identity is forged. It follows, then, that in order to go on being an analyst, one must go on doing analysis. This basic understanding is built into the requirements of psychoanalytic training and operationalized as the “immersion” necessary to “progression.” Immersion refers to a candidate's engagement with analysands, sufficient to learn and begin to master the ways of analysis. Progression refers to the candidate's movement toward these ends. Implicit in the term progression is some notion that the candidate's analytic identity is developing, a process that begins but does not end with training.

The prospect of becoming a psychoanalyst is a compelling one. Eisold (2005a) wrote that people are drawn to psychoanalytic training because it “retains an intellectual excitement and a spirit of discovery that is lacking in more contemporary ‘cookbook’ approaches to psychotherapy. Creative minds are drawn to the opportunities it provides for complex, layered and challenging thinking,” so the urge to seek analytic training is strong, akin perhaps to the motivation of artists who create for the sake of their existence (p. 1182). Further, the candidate is seeking the companionship of like minds, a community of kindred spirits.

Entering psychoanalytic training is a decision that cannot be taken lightly. It involves a considerable investment of resources – temporal, financial and emotional – not to mention the stress and challenge of explaining it to those beyond the chorus, whose sensibilities and values differ from analytic ones. This is serious psychological business, a considered decision done without impulse. It involves a ritual of entry, the interview process, and gatekeepers. It is a choice to embark on the creation, to use Daniel Levinson's (1978) term, of a new life structure as a member of a psychoanalytic community, a new armature that will organize one's life. It begins the development of an identity as part of that community and the pursuit of goals within it. It is a means within which to foster less developed aspects of oneself, a venue for further social engagement, expansion and competence. For many, it is felt as an exciting new beginning, as a new lease on life, as a move toward integration, as growth.

Rather quickly, however, many candidates experience the decreased demand for psychoanalysis as a formidable reality, evident in the considerable difficulty finding training cases. In a narrowing pool of analysands, cases unsuitable for training purposes (not necessarily unsuitable for analysis) come to be relied upon more heavily, increasing the risk that candidates may become involved in a very lengthy treatment and/or a treatment that will be interrupted. Although dealing with uncertainty is the meat and potatoes of analysis, beyond a certain point the resulting “iffiness” of cases – their stick-with-it-ness, their stay-putted-ness – exerts its effect on the framework of training, which can come to feel unsteady and unsafe. This has consequences.

For one thing, there are the feelings involved. Interrupted work potentiates an array of dysphoric emotions, from anger and frustration to disappointment and sadness. Further, an

interruption that occurs after a process has taken hold, as opposed to before it has really begun, signals the end of a relationship and, perhaps, something of a mourning process. This can be especially hard to withstand if “the hours don’t count” and progression, with all its complexities, is stalled. Also, unpredictability and discontinuity provoke anxiety, which can show its insidious effect by disrupting freedom of thought, that free-floating attention, and the concomitant synthetic processes, essential to creativity in the analytic space.

In addition, there is length of candidacy. Training requires that a candidate adapt to being a novice once more: S/he is newly low in the ranks, being evaluated and trying to assimilate new information. S/he is also being analyzed. This altogether regressive state is borne for all the good that comes with it and of it; because it is temporary, expected to end, and end in a timely manner, based on suitable experience with training cases; because the candidate anticipates that s/he will move on, come of age and take his/her place as a fledged analyst. But, like a gale, countervailing social forces push hard against the forward strivings of candidates, resulting in a feeling of being stuck, of being in limbo. For trainees, the fear, if not the fact, of indefinitely prolonged training exerts its wear and tear. If this fear is experienced as a feeling that control over one's advancement is in the hands of external forces, such as luck in finding suitable analysands, it can be quite demoralizing, affecting a sense self-efficacy, and inducing even a kind of malaise.

There are no easy answers. But it is important that the leadership of APsaA and its institutes, and candidates themselves, seriously grapple with the above-described realities to facilitate and safeguard the development of the profession.

In the distressing and complex new world of managed health care and diminished appreciation of the power and workings of the inner world, psychoanalysts-to-be face obstacles their mentors may not have had to bear – at least to this degree. Today's candidates face a catastrophic decline in the demand for analytic treatment and they are older, likely to be their teacher's peers.

This commentary asserts that these new realities exert their effects via the framework of analytic training itself, the stability of which is a necessary condition for remaining reasonably anxiety free, thinking creatively, and keeping motivated. When this steady-state is put at risk, candidates become unsettled, worrying how they will learn in these unfavorable conditions, and how they will practice what they value and are passionate about. Many candidates today are likely to be feeling the burden of conceivably unrealizable potential, and this will impact the development of their identities as psychoanalysts. Of course, one ought not overlook the many graduate analysts who share this predicament. Future inquiries would do well to pursue the experiences of individuals both pre- and post-graduation.

For various reasons, candidates may or may not choose to speak of this reality. When they do, it ought to be kept in mind that their efforts may have less to do with unworked-through developmental issues, such as conflicts over separation-individuation, than with the revival of a basic and developmentally appropriate request for attunement to the tribulations generated by a clear and present threat, and to the need for innovative ways of adapting to it.

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Address correspondence to:
Angelica Kaner, PhD
240 Bradley Street
New Haven, CT 06510
angelicakaner@comcast.net

Angelica Kaner is Assistant Clinical Professor of Psychiatry at Yale University School of Medicine and a candidate at the Western New England Institute for Psychoanalysis. She is co-author (with Ernst Prelinger, PhD) of The Craft of Psychodynamic Psychotherapy (Jason Aronson, 2005). Dr. Kaner practices in New Haven, CT.

A Good Self Is Hard to Find: Analytic Identity Crises and Implications for Training

Sarah E. Schoen, PhD

In listening to the thoughtful papers and discussions from the panel, "The Development of an Analytic Identity: The Impact of Early Formative Experiences and Theoretical Models in Training," I was impressed by the ubiquitous constructions of authority around which conversations about analytic and institutional identity revolve. The material presented by the panelists raised salient facets of candidates' self-experiences during their initial engagement with the authority figures in their analytic communities. In the presentations, meaningful differences in local institute cultures emerged. The papers underscored the anxiety generated by hierarchical structures, authoritarian dictates, and secretive decision making, and the appeal of more collaborative and flexible interpersonal and organizational systems. While this material clearly reflects ongoing concerns within the broader psychoanalytic community, it is also possible to hear it as addressing one problem while enacting another. As we have embraced postmodern epistemology and focused our efforts on differentiating ourselves from the bad authoritarian analysts of the past, we have effectively deconstructed the conceptual foundation from which we derive our own expertise and professional legitimacy. As a result, we now find ourselves having to figure out how to work and become analysts when our clearest ideas are about what we do *not* know and who we will *not* be.

There is variety among institutes in the extent to which they are perceived by candidates as valuing anti-authoritarian ideals (e.g., flexibility, collaboration, uncertainty, personal idiosyncrasy, and creativity). There are differences, as well, in the extent to which institutes openly acknowledge abuses or misuses of power. Nevertheless, finding analysts these days, from *any* institute, who do not publicly present themselves (and their institutes) as pro-flexibility, collaboration, and humility is about as likely as finding a presidential candidate from either party proudly announcing himself as the anti-education choice. Between the explosion of broad social and intellectual critiques of authority, the emergence of two-person models and theoretical pluralism in psychoanalysis, and the pressure for analysts to compete in a marketplace for psychotherapy consumers, it is theoretically popular, practically imperative, and politically correct to idealize egalitarianism and object to oracular proclamations.

But idealizing egalitarianism and celebrating constructions of personal meaning, while rejecting the possibility of generalizable truths, actually undermine analysts' capacities to define who we are, what we know, and why this knowledge represents a distinct, legitimate form of expertise. This problem, which plagues our attempts to conceptualize our role in the context of our clinical work, is present in every facet of psychoanalytic training. How do I "learn" psychoanalysis when there are multiple theories regarding what constitutes psychoanalytic process and therapeutic action? How do I know I am "doing" psychoanalysis if I cannot be comforted by the certainty that putting a patient on the couch or seeing this patient for some magic number of sessions per week ensures it? How do I develop the trusted, *authoritative* voice my patients want and need me to have if everything between us is co-constructed and I cannot check my unconscious at the door of my consulting room? How do I "become" an analyst if I must transform my way of working with each new dyad and allow myself to be transformed, in

turn, by my patients' impact on me?

I have grown up, thus far, as an analytic clinician in these chaotic, contemporary times. I cannot think about old modernist ideals in the absence of our new(er) postmodern critiques; I am aware that no matter how persuasive my formulation of a case, no matter how fruitful a particular intervention may be, there is always another way of looking at it, or even an altogether different treatment that would unfold had a particular patient of mine found her way to another clinician. I cannot escape knowing that I cannot really Know, and that I am hopelessly trapped in my own personal, cultural, historical milieu. I join the chorus of voices noting that, intellectually, these have been exciting times for psychoanalysis, and I must acknowledge my deep identifications with contemporary intellectual trends and values. Yet when it comes to developing my professional identity, I cannot help but long for the good old days of classical psychoanalysis, characterized, as they were, by theoretical Truth, predictive power, and hierarchical models. One might even argue that some of the appeal of cognitive behavioral therapy, both to potential patients and to clinicians in training, is its comforting clarity regarding the nature of therapeutic authority. This therapy, which makes its own claims to "collaborative" stances, is modeled on teacher-student interactions, in which the authority of the teacher is clear, the plan for learning defined, and the outcome of the "work" reassuringly predictable.

Thus, while my early experiences of my own institute (in the interview process, in supervisory relationships, in analysis, and the like) have become part of my professional development, these experiences are not where my thoughts turn when they turn to the topic of "developing an analytic identity." We all need communities. We need affiliations. Certainly, the choices we make in these regards will affect the analysts we become. But it seems to me that no matter where we are as candidates and what distinguishes one psychoanalytic neighborhood from another, we all face the difficulties of learning psychoanalysis when so much of its fundamental structure is under siege or, at the very least, up for grabs. We are in need of efforts by our supervisors, our teachers, our analysts, and our institutes to grapple with the implications of this for our models of treatment and training, and in the process, to rescue and redefine analytic authority in terms both sturdy and flexible enough to withstand the tensions of our times.

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Address correspondence to:

*Sarah E. Schoen, PhD
164 West 91st Street, #3A
New York, NY 10024
seschoen@earthlink.net*

Sarah E. Schoen received her PhD in clinical psychology from the University of Michigan. She is a former fellow of the American Psychoanalytic Association and a current candidate at the William Alanson White Institute. Dr. Schoen is an instructor and supervisor on the faculty of the New York University School of Medicine and has a private practice in New York City.

A Positive Reflection on Training

Jan A. Seriff, PsyD

Two years ago, just four months into my training at the Boston Psychoanalytic Society and Institute (BPSI), I attended the winter meetings of the American Psychoanalytic Association (APsaA). I vividly recall feeling anxious, self-conscious, and energized by the experience of walking through the lobby of the elegant Waldorf-Astoria Hotel, glimpsing senior analysts and fellow candidates from BPSI. I had to ask my companion, a third-year candidate, to tell me the names of people whose faces I recognized.

Now, as a fourth-year candidate in psychoanalysis at BPSI, I feel like a seasoned veteran, knowing my way around the Waldorf, even venturing this year in the early morning hours into the hotel's gym. I can now match names with the faces of our local participants and also recognize many other familiar faces from the previous two years.

I have arrived! At least, I have grown into the clothing of candidacy. Midway through my training, I co-chair our institute's Candidates' Council, and with a candidate-colleague, represent our group on the BPSI Executive Council.

At this year's APsaA winter meetings, I had three especially enjoyable surprises. The first was the opportunity to join a dozen candidates at a full-day Senior Analyst Presentation seminar. It was very satisfying to share clinical ideas and experiences with candidates from all over the country in the intimacy of the full-day seminar. The second surprise was the chance to attend an Affiliates Council breakfast and talk more informally with several candidates from Denver, where I had attended graduate school. Finally, I had the opportunity to attend a panel presentation, "The Development of an Analytic Identity: Impact of Early Formative Experiences and Theoretical Models in Training," and to hear the wonderfully rich and thought-provoking papers by candidates and responses from senior analysts.

Throughout the conference, I reflected on the training I am receiving in Boston and the high caliber and enthusiastic involvement of candidates throughout the country. While much was said during the panel presentations and discussions about the inherent relative lack of authority and imbalance of power that candidates often feel, my own experience has challenged those notions.

As I listened to the three candidates read their papers on their own beginnings and interview experiences, I reflected on my interview process four years ago. I felt kindly welcomed and encouraged by each of my three interviewers. They all represent the best of BPSI's culture, with their warmth, their humor, their respectful interest in me as a person as well as a clinician, and their positive attitudes about psychoanalysis and psychoanalytic training.

Two of them met with me in their home offices, a common arrangement in the Boston analytic community's culture. I was already familiar with this, having been a control patient earlier in my career with an analyst who had a home office. Following in her analytic footsteps, I, too, have a home office.

During these interviews, I found myself musing about the transformation my own office might soon undergo, with the exchange of my traditional sofa for an analytic couch. Did I dare daydream that someday soon I might complete the journey that, as I wrote in my personal essay accompanying my application for candidacy, I “had been traveling, or perhaps ambling, towards for nearly twenty years, since beginning my first analysis?” Would my couch be leather, as was the couch in my new analyst’s consulting room, or would its lines be sleek and simple, as was the couch in one of my interviewer’s offices?

Several months after my interviews, having been accepted into training, I was so eager to begin that I commissioned the construction of an analytic couch with lines that matched the existing furniture in my office. I chose a richly patterned and textured velveteen fabric – reflecting an amalgamation of influences from others with my own taste. Now, three years later, I have several of my own control patients. So, in that way as well, I follow in my first analyst’s footsteps.

My training experience to date has continued to reflect a similar commingling of influences from within and without. During the panel presentations at the winter meetings, my mind wandered to my first evening of classes three years ago. Not yet knowing where to find on-street parking in downtown Boston, I parked in a garage underneath the Boston Common, walked across the gorgeously manicured Public Garden, and then down the tree- and bench-lined center boulevard of Commonwealth Avenue. Historic brownstones flanked both sides and BPSI stood majestically in the middle of that first block.

Of course, I was a few minutes early, being the anxious first-year candidate who dared not be late for her first day of school. I sat on a bench to gather myself before walking into the building. I vividly remember a fantasy of nervous anticipation about the world of colleagues, mentors, and teachers I was about to enter. I imagined my former analyst, a former supervisor, who was also on the faculty, and a close friend who was a third-year candidate – all waiting to greet me inside the imposing BPSI foyer.

I certainly appreciate the wish-fulfilling aspect of that fantasy. In fact, when I entered the building a few minutes later, I encountered a number of candidates greeting colleagues after the summer break, others searching the bulletin board for their classroom assignments, and my fellow first-year candidates looking as anxious and lost as I felt. But in a sense, my internal welcoming committee was there with me – those three people who I had imagined being in the foyer had, in fact, supported and encouraged my decision to seek psychoanalytic training and have continued to be models of aspiration and identification for me.

The sense of welcome and encouragement I felt from that first evening of classes has contributed to my increasing comfort in talking to some of my patients about the potential value of psychoanalysis for them. As several patients from my psychotherapy practice have transitioned into psychoanalysis, I have been able to foster an atmosphere of comfort, in which they feel increasingly “at home” to explore aspects of their inner worlds that were less accessible in the previous therapy. The other inevitable side of that coin is that both my patients and I struggle at times with the questions: “Whose home is it really? Do I really belong? Will I

always be welcomed back?” I remember 12 years ago, when my twin daughters were a few days old, saying to my husband, “When are their parents coming back to get them?” It took some time to feel “at home” as someone’s mother, much like it continues to be an ongoing process to feel “at home” as someone’s analyst.

A few concrete manifestations of “who’s in and who’s not” do come to mind. For example, parking at our downtown “home” is always a challenge. While there is a small parking lot behind the building, on class nights only faculty may use the approximately 15 spots. Parking is one of the few tangible perks of teaching for our volunteer faculty. I park there one evening a month when I attend a BPSI committee meeting. But aside from “parking envy,” I have not felt excluded or diminished by my candidate status.

Faculty and senior members are interested in candidates’ opinions. They welcome our proactive participation in all aspects of our training, as well as in important or controversial issues within our institute and society. Some of us have even been lucky enough to figure out where the nearby on-street parking spaces are to be found. We’re not in the back lot, but we’re within spittin’ distance.

I feel very fortunate to have found an analytic home at our institute. When I complete my training, I will once again have to go through the growing pains of developing an identity as a non-candidate, new member of our psychoanalytic society. But for now, three years into my training, I feel confident about finding a parking space every week and increasingly comfortable as a candidate and analyst-in-training. These clothes fit fine for now.

Address correspondence to:

Jan A. Seriff, PsyD

251 Mill Street

Newton, MA 02460

janseriff@comcast.net

Jan A. Seriff received her PsyD from the University of Denver School of Professional Psychology in 1983. She is in private practice in Newton, MA, and is a fourth-year candidate at the Boston Psychoanalytic Society and Institute.

Are There Inherent Impediments to the Therapeutic Outcome of a Training Analysis?

Leslie Cummins, LCSW and Peter Sass, MD

Despite its central importance in psychoanalytic training and identity development, the literature on the training analysis remains minimal. Although the possible conflicts inherent in the process have been cited in the past, beginning with Anna Freud in 1938, and the reporting aspect has been eradicated, recent calls to revise the system have again brought into question the potential pitfalls and benefits of the current system. The authors undertook a broad survey among affiliates and members of the American Psychoanalytic Association to explore possible inherent impediments to the training analysis. Discussion of these responses and personal reflections by the authors are presented, and questions for further discussion are raised.

Introduction

There are three crucially important aspects of psychoanalytic education that, for distinct and intertwining reasons, contribute to the development and training of a psychoanalyst: clinical and theoretical course work, supervised clinical experience treating patients, and the training analysis. This notwithstanding, we have discerned an inverse relationship between the importance that the training analysis holds in every facet of the professional and personal life of the candidate, and the extent to which it is openly discussed in the educational process, in academic meetings, and in the literature. Perhaps the comparatively small degree of attention the training analysis has received is a displaced transference phenomenon that reflects the very personal, private and privileged relationship between the analyst and the analysand. This is no less so if the latter is a psychoanalytic candidate, in whom the very future of psychoanalysis is invested by the profession and the institutes that train that candidate. Kairys (1964) believes that a topic of such importance has been perceived by some in the profession to be unsuitable for open academic inquiry; instead, it should be left to the private meetings of educational committees to examine and implement. Another cultural belief is that problems of conducting a training analysis under the umbrella of an educational setting are insoluble and to be implicitly accepted as such.

Given the central importance of one's analysis – the analysis of the analyst being no less significant than the analysis of the analyst's patients – we have attempted to examine an essential question: Are there inherent impediments to the therapeutic outcome in a training analysis? We have endeavored to explore this question by collecting personal vignettes to investigate the issues with which candidates, now and in the past, grapple, as well as reviewing the literature pertinent to training analysis.

Survey

Our study design was simple: We sent a letter via electronic mail to members and affiliate members (i.e., graduates and candidates, $n =$ approximately 1,500) of the American Psychoanalytic Association (APsaA) asking the question: "Do you believe there are inherent impediments to the therapeutic outcome of the training analysis?" Suggested talking points included: issues that arose in the referral process; the effects of the analyst's affiliation on the analysis; the degree to which the training analysis was helpful in achieving personal goals; and

whether treatment was sought subsequent to the training analysis. The question could be answered theoretically or personally, or both, as most were. We set up a web address to which respondents could send their submissions anonymously.

The response rate was one percent; we received fifteen vignettes in all. Although anonymous, from information disclosed in responses, graduates and candidates seemed to be nearly evenly reflected. Although not a systematic study, these vignettes offer important personal reflections on the most private aspect of psychoanalytic training.

Literature Review and Results

From the inception of psychoanalysis as a mode of therapy, the importance of the student undergoing an analysis has never been underestimated; however, the goals of the analyst's own analysis have evolved. By its very name, a "training analysis" implies varying goals, which are arguably cohesive, or alternatively, inconsistent. In addition, given the unique nature and varying purposes of the candidate's analysis, there have always been particular dilemmas regarding the very nature of this procedure. Freud (1937), in "Analysis Terminable and Interminable," defines the goals of training analysis as providing the candidate with the following: the conviction of the existence of the unconscious, the ability to perceive repressed material that would otherwise seem incredulous, and a first sample of the manner in which psychoanalytic technique is conducted. Freud (1937) also went on to recommend a re-analysis every five years, although at the time of this recommendation, the duration of analyses was usually no longer than several months. He recognized the potential for an analyst to hide behind a "prowess of analytic knowledge" and to make use of analytic knowledge for defensive purposes.

Training analyses were problematic due to the small number of first-generation psychoanalysts having both close personal and professional relationships. When an analysis was needed during times of personal and professional crisis, analysts not infrequently had to give up their practices for lengthy periods to travel to distant cities to insure confidentiality. This was coined the "Epidemic of Migrating Senior Analysts" (Balint 1954, p. 158). By necessity and as a result of this shortage of analysts, the pressing need for the psychoanalyst to be analyzed was solved by means riddled with what we would consider today to be boundary violations. A common occurrence was for one's analyst, supervisors, and social contacts to exist in the same circle and even to *be* the same person.

Subsequently, Ferenczi (Balint 1954, p. 158) realized the incompatibility of analysts conducting far longer analyses than they themselves had received during the course of their training. He called for a "supertherapy" of the candidate to last on the order of several years, with the implicit goal of protecting the psychoanalyst through extensive exploration of as much psychic conflict as possible. From these stormy beginnings of the analysis of the analyst, the training analysis embodied a dual role: the personal analysis and the education of the candidate.

From these inherent difficulties in the beginning of the psychoanalysis of the psychoanalyst, the educational and therapeutic role of the training analysis co-existed and became the fodder for confusion, controversy, and conflict. To cite one such area: Balint (1954),

McLaughlin (1967), Kairys (1964) and numerous others wrote about the harm imposed upon the training analysis by the reporting system in place at psychoanalytic institutes prior to the 1970s. Acceptance to institutes and permission to start classes, pick up control cases, and to graduate were all partly contingent on written reports and verbal feedback from committee meetings in which the candidate's progress was being evaluated. This direct participation in the candidate's life by the training analyst was deemed untenable because the authoritative aspect of the transference relationship between training analyst and candidate was not only fantasized and stimulated by the candidate's psychic past, but also quite real and inhibitory to the openness and freedom of self-disclosure, which is essential to the therapeutic relationship.

There may be a perception by some that discarding the reporting system has done away with the most obvious, or perhaps the only, therapeutic impediment that existed in the training analysis. However, the recent movement to allow candidates to seek training analyses with training analysts affiliated with institutes other than their own, and proposed changes in the APsaA Bylaws to grant institutes the ability to appoint training analysts not certified by APsaA, suggest ongoing growing pains in this unique relationship. Many of us, as candidates and faculty, have a strong conviction that there is a powerful synergy between simultaneously immersing ourselves in coursework, supervision, and a personal analysis. However, a few more modern analysts, such as Thomä and Kachele (1999), write about "the destructive fusion of making a professional career dependent on a very personal treatment." Some analysts have found it difficult to exist in the multiple roles of institute administrator and training analyst. Soon after becoming the first training analyst, Hanns Sachs reportedly withdrew from his appointed positions in his society and institute to assume the sole roles of analyzing patients and teaching students.

In her classic paper, "The Problem of Training Analysis" (1938), Anna Freud wrote:

We do not hesitate to brand it as technically wrong if for the purposes of therapy an analyst selects his patients from his circle of acquaintances; if he shares his interests with them or discusses his opinions either with them or in their presence... if he actively manipulates the patient, offers himself to him as a pattern, and ends analysis by permitting the patient to identify with him personally and professionally. Nevertheless, we commit every single one of these deviations from the classical technique when we analyze candidates. Further, we do not inquire frequently enough how far these deviations complicate the candidate's transference and obscure its interpretation (p. 420-421).

That was 1938. The following, from our survey, is 2006:

I wish I had the opportunity to use an analyst outside of my institute, a recent, welcome and overdue choice. It would be easier to speak one's mind safely about other candidates or faculty in analysis, knowing that one's analyst is unlikely to interact with them. After all, as therapists we don't take into treatment friends of friends, or people with whom we may interact socially; we have an ethical standard. This is sidestepped in a

training analysis. I would even argue that recommendation be made to choose one's training analysis outside of one's institute.

Potential structural and political impediments abound in the training analysis and were brought up in many of the vignettes we received, as in the following:

The fact that my analyst was a training analyst was a plus, because I knew I eventually wanted training, but it was not the deciding factor. The sex and personality of the analyst made this person the only one in this institute that I felt I could work with. Some years later, my therapeutic analysis became a training analysis. My getting into training was a complicated process... I was put through hell. I understood but was not happy with the fact that my analyst did not explicitly condemn some of the decisions and actions that were made by the good old boys club of analysts that had control of the EC. I also knew that my analyst had made compromises and gone along with the powers that be at the local institute, although there was also evidence that my analyst differed with some of their views. My analyst did make a few suggestions about what political tactics might be useful for me to employ. Another analyst, a supervisor, was actually more supportive and helped me to maintain the feeling that I was not insane, but that some of the people in town had issues of their own.

Another person writes:

How can the referral process be less ambiguous? I was pressured to terminate treatment with my non-APsaA analyst in order to begin my training and analysis with an institute analyst. I feel as if I were given a message from the institute: "We'll respect the analytic process as long as it is in our own house, but that's where our respect ends." How is that analytic?

These individuals' vignettes pose an interesting issue pertaining to the adherence to the training analyst system, particularly for a candidate who already may be in a meaningful and productive analysis with a non-training analyst. Psychoanalytic training limits the candidate's selection of a psychoanalyst to a select and small group deemed to be equipped to handle the particular needs of a candidate and able to work within the parameters of a training situation. Can strict adherence to this rule create unintended consequences? Are there circumstances in which alternative approaches are useful?

The conflict in which the candidate may be placed – between the many roles s/he may play as esteemed member of a professional community, and as student, analysand, and colleague within an institute – can pose special difficulties. Several respondents commented on varying aspects of this dilemma, one particularly on the possible attendant challenges entering "the fishbowl" of psychoanalytic training.

A quite different experience is reflected in the following:

I have to say I have been pleasantly surprised by the extent that my confidentiality has clearly been respected. I recall when I started supervision with a neighbor (and, I speculate, a friend) of my analyst and realized that even my relationship with my analyst (neighbor and colleague) was not known to my supervisor. Perhaps I should not have been surprised but I was. It was a good lesson in boundaries and professionalism. A chronic difficulty of being in treatment with a faculty member is the frequency that our paths cross outside his office. But hey, what are you going to do? New York is a small town.

The "fishbowl effect" may be more likely in a training analysis in which the identity of a candidate's training analyst is known to individuals in the governance level of a psychoanalytic institute who may have their own ideas and influence on how an analysis is to be conducted. There may be an additional burden of extra-analytic contact for the candidate and the analyst. A continued potential hazard exists, despite the elimination of reporting, of cross-talk between training analyst, supervisors, and instructors. Perhaps it is a therapeutic impediment that anonymity is not as complete for candidates as for other analysts.

In a communication that touches on the related issue of the referral process of the training analyst, another survey respondent reports:

I was assigned my analyst. He was very silent. In the second year, in the midst of intense transference, my analyst developed cancer and died within 6 months' time. He did not tell his patients anything, even when confronted. I dutifully told him dreams of tombstones popping up all over the place, while he interpreted my abandonment issues. Unfortunately, the experience reinforced my most severe trust issues, and I saw analysis, at least for me, as a sham and as self-serving. I had another analyst who was wonderful and helped me a lot. One of the problems was that my analyst was afraid to let anyone at the institute know he was sick, so no one could help him. He obviously had trust issues, too.

Another states:

For me, the system worked. The quality of the work was such that I was able to reveal whatever came up without worrying about its effect on my progress or graduation. The analyst (who was NOT the one I would have chosen) proved to be an excellent model. He was always realistic and – honest. Had he been alive when I suffered severe losses, I would have consulted with him once more; instead, I had no trouble finding the help needed.

Numerous respondents commented not only on these more external phenomena (which, of course, affect the clinical work of the analysis), but also on direct influences on what occurs

between training analyst and candidate. An area of complexity in all analyses is the fee, and perhaps it is particularly so in training analyses, where the fee is often reduced. It struck us, however, in reading these vignettes, that only one person mentioned it, and in that way made its absence in the other submissions and the literature we reviewed all the more conspicuous. The candidate writes:

My analyst has always dealt with my fee in the fairest way I can imagine. For at least the first half of my analysis, my fee was substantially lower than his customary fee, a privilege granted to me as a candidate. How else would this quality of treatment have been available to me shy of massive debt? I felt guilty about this, although I could not have worked any harder to pay the fees I did. This means struggling with perhaps the truest of gifts, the gift of one's self. My analyst could only have worked with me in this way and at these fees because he was giving of himself. Now there is some closeness to deal with!

Upon reading this, one can only wonder about the possible inhibiting effect this may have on a candidate's aggression being analyzed in the training analysis. The issue of the reduced fee and the particular difficulties it may present, for training analysts and for candidates, seems to be an underreported phenomenon. We found ourselves wondering if it is also under-discussed in supervision and in training analyses, as it was in these vignettes.

Other potential countertransference reactions of the training analyst exist. One respondent writes (echoed in another report given to us verbally):

...a serious concern for training analyses is the too-often unanalyzed career choice of the candidate-analysand. Rather than treat this life development as part of the analytic investigation, it is easily accepted at face value by many training analysts as a given and as an idealized self-identification.

Although narcissistic gratification is an occupational hazard for all analysts, is it more so for training analysts, whose own work is so much more on display? In a paper entitled "Some Hazards to Neutrality in the Psychoanalysis of Candidates," Orgel (2002) discusses the temptation to interpret prematurely the candidate-analysand's aggressive transference, when the candidate's behavior suggests that he is externalizing aggression toward the analyst. The training analyst could feel anxious that his colleagues and other candidates will interpret this as a signal of trouble in the analysis. So, in essence, there is a "fishbowl effect" for the training analyst as well as for the candidate, which could also impede the therapeutic outcome.

Another contributor to our research comments on this from another viewpoint:

I believe I have a counter-intuitive, or at least counter-conventional, development to report, which I think demonstrates the effectiveness of my training analysis. I decided NOT to seek appointment as a training analyst. Before analysis, I was (like many pre-meds and physicians) ready

to jump through any hoop that was put in front of me, without questioning whether the other side of the hoop was really a place I wanted to be. In that spirit, I assumed that after graduation from analytic training would come certification, then application to become a TA, but the analytic exploration of this tendency, and all that lay behind it, led me to conclude that I was quite happy with my life and practice as a non-training analyst and general psychiatrist. I suspect that many in the analytic community would regard that as an unhappy outcome, but if we're serious about the training analysis being an exploratory and therapeutic process, we have to be open to the possibility that the outcome will be inconsistent with the field's expectations about an analyst's career.

One word that has been repeated several times in the vignettes we received is "honest." It appears again in the following:

My therapeutic analysis becoming a training analysis derailed my personal life and my analysis to such an extent that I would recommend that candidates get a therapeutic analysis before they get into training. It is hard to sort out all the factors, but I don't believe that a training analysis can be therapeutic unless the training analyst is extremely honest, and willing to put all of his/her cards on the table as to political conflicts in the institute, his/her own theoretical leanings, etc. My impression is that few analysts are willing to make such self-disclosure. Nevertheless, I also believe that my personal analysis was the most beneficial part of my analytic training.

Orgel (2002) argued an opposing view. In paying particular attention to the importance of analyzing aggression, he writes:

It is my impression that many institutes today, concerned about prosperity and even their own survival, use some aspects of current psychoanalytic theory and practice to rationalize analysts' temptations to be "helpful," to make their own orientations, biases, and personal attitudes toward their educational institution more "open." Such approaches may seduce the analysand away from expressing latent transference hostilities in the analysis. These tactics are sometimes rationalized as being in the interest of "honesty" or "getting real;" of forging an atmosphere of trust and safety for the analysand; of relieving too disruptively painful or disturbing countertransference pressures; or of protecting the analysand from what we believe, because of our inside knowledge, to be "real" as opposed to neurotic dangers posed by institutional politics, conflicts, and personal alliances and antipathies (p. 427).

He adds:

Self-disclosures about an increasingly broad range of the analyst's

subjective and external life, employed as technical devices, effectively limit the analysand's increasing tolerance for responsibly knowing about and living with passionate love and hate in the transference. Such self-disclosures support the temptation to unquestioningly enjoy mutually narcissistic idealizations between the analyst and the analysand, an old danger in our profession. A crucial reason why psychoanalysis is reviled when not administered in diluted doses is that it exposes the indirect ways in which the unconscious mind reveals its presence *all the time*, in *everyone's* daily lives of thought, feeling, and action (p. 430).

For the training analysis to be “successful,” realizing that the definition of that term is part of what this paper addresses, honesty must also come from the candidate-analysand. Being in treatment with someone on the faculty, educational or progression committee, or even just one's own professional community, requires a leap of faith perhaps larger than the one analysis requires of every analysand. But an ability to make that leap is paramount. Reports one respondent:

Whatever negative feelings I had about my analyst, I wrestled with in this new treatment, a second analysis that would become a training analysis after starting classes at the institute. Then I learned that he was the director! I felt immediately terrified. I had so many issues with authority. I had to learn to be completely honest with someone who had such direct authority over me; it made the transference feel like beyond transference – a feeling of being in the hands of the enemy.

Rather than seeing the institutional affiliation as an impediment, this candidate felt quite differently:

I would now say that having my analyst be at my institute has made me less able to avoid dealing with issues of authority and my mistrust of it.

Questions were also raised about how much of what transpires reflects the larger culture, the culture of APsAA, or that of the particular institute, in ways that prove problematic or limiting:

My training analyst was a traditional male who seemed somewhat bemused at the idea of a woman wanting to be both an analyst and a mother. Overall, I experienced him as a lovely gentleman and quite competent, but he was ready to terminate when I graduated and had two children. I was not finished in my own opinion, but I complied. What I felt was left incomplete was the formation of a professional persona that could realize ambitions, such as being a training analyst myself and also a leader in psychoanalysis. His attitude was that I had everything that I could possibly want and that perhaps someday someone would tap me on the shoulder and anoint me a training analyst. I had not a clue as to the drive and political savvy necessary for this next step. At the final session,

he wished me well and commented that he would be glad to refer patients to me “as long as they didn’t mind going to a woman.” To put this in a time frame, this took place over thirty years ago.

If a theoretical bias is reflected by an analyst rigid in his or her style or personality, things can become more difficult.

My training analysis was in the '80s... My analyst and I got into [a] transference/countertransference bind, and I now think, looking back, that my analyst was not adequate to handle it. I was angry at him (transference), but, instead of exploring my anger, he handled it in a reductionistic manner, closing off my associations with premature interpretations, and infuriating me further! He was only interested in ego psychological explanations. My anger was preoedipal maternal... He did listen to me talk about my anger for a time, but did nothing to help me explore its origins through the transference, and, in fact, blocked me from doing so with premature oedipal interpretations. Part of my conflict was that I was capable of being verbally angry and rebellious, but not of acting constructively, so we remained in this bind for many years without movement. I even got a consultation early on (year 2 out of 8) with another senior training analyst in my institute who was helpful, in that she pointed out that there were probably parts of my complaint that were reasonable, but that it was also probably colored by transference issues that had not been elucidated. But she did not follow up later to see whether or not the analysis had gotten on the right track. It had not.

This person writes further:

My children and I suffered for 5 years needlessly while I struggled with my first treatment and was not the adaptive person I could have been much earlier. The first analysis lasted 8 years. What could be done to help others? I think there needs to be an ongoing system to evaluate the work of training analysts. They need to be more flexible theoretically and personally than other analysts.

Highly problematic for any analysis are dysfunctional personal characteristics of the analyst. One candidate describes the obstacles encountered when the training analyst exhibits such traits:

My first training analysis consisted of 28 months with a training analyst whose technique, behaviors, and so-called “style” conveyed a chilling lack of involvement and far exceeded what can be explained by bad fit, impasse, transference neurosis, or any other loopholes at our disposal. From the beginning, it was clear my analysis held little interest for him. His office buzzed and hummed with noises from his computer, fax, and answering machines. When I complained, I was told he had a “very busy

professional life.” Eventually, he did something to diminish the noise level. His tone of voice was often hostile. This finally changed after 20 months. At least twice weekly, he would go through his mail in the office. He often canceled sessions, and once, ending a session 15 minutes early, stated that he had been confused but would not discuss it further. He called me persnickety when I tried to understand what happened between us. While he occasionally asked a question, he never made an interpretive comment. His silence was the most consistently displayed characteristic. In supervision, it was suggested that I discuss a particular aspect of my countertransference, and brought this up in analysis. Again I was met with silence. When I inquired how my countertransference might be addressed, after already being told that my analysis was not a “didactic experience,” he said in an irritated tone, “When there is something analytic to be said, I’ll say it.” Many similar incidents occurred, but by far the most telling came 22 months into the analysis, during a summer session when I sat up to remove my jacket and saw, in my peripheral vision, him reading from a pile of papers on his lap. He denied it, but as I would not abandon my position, he apologized in a manipulative and seductive tone, using the transference to his advantage. In this climate of silence, hostility, and distortion of fact, I began working with my first case. The patient was a young woman; projections and denial were used liberally, as were some hysterical defenses that allowed her to overlook the concrete and the obvious. In supervision, it was determined that making my presence known to her, providing a holding environment and clarifying her associations would be the best approach. Intellectually, I understood my supervisor’s directives and agreed with them. But when it came time to apply these, I suddenly found myself conflicted: If I spoke, what would my training analyst think of that? Was it analytic to intervene in such a way? Would he approve? I would be different from my training analyst and would that mean that his techniques were indeed flawed, as I suspected? ...the conflict also found its way into my therapy practice, which I had had for a number of years. For the first times, I “forgot” to turn off the phone and ended one session five minutes early. I did not discuss these incidents in supervision, but repressed them for many months, not recalling them until I began my second analysis. What was happening to me? I disliked my training analyst’s technique and style; I made great conscious effort to guard against any identification with him. Yet unconsciously, I was identifying with him despite my efforts and as it remained unconscious, I was acting it out with my patient. Because of my supervisor’s careful and watchful eye, my hysterical defenses were prevented from dovetailing with the patient’s. I am happy to report that now both patient and candidate/analyst are in stable condition. The patient tolerates interpretations, challenges her own defenses, and has less need to silence herself. The candidate/analyst, after many months with a new training analyst, no longer feels guilty or frightened about speaking to the patient, has a training analyst she can like, identify with freely and

comfortably, and emulate. Sometimes, there are happy endings.

These two vignettes illustrate the added difficulty for the candidate to seek consultation or change analysts as a result of a stagnated or even destructive treatment. The second vignette depicts the candidate's ability to extricate him/herself from a serious problem, possibly by being able to use his/her supervisory experience as some type of alternative perspective. However, the possibility that this does not always occur, and that a troubled analysis could be viewed by an institute governance board as reflecting poorly on the professional development of the candidate, could predispose such an analysis to endure and the candidate to defer "the real analysis" until after psychoanalytic training or never to have one at all.

Personal Reflections and Conclusions

We would like to share some personal reflections derived from studying the contributed vignettes and the pertinent literature, and from our own experiences and those of fellow candidates. The goals of the training analysis have not drastically changed over the years since Freud outlined them. To review, Freud suggested the purpose of the training analysis was threefold: to demonstrate the existence of the unconscious, to enhance the analysand's ability to perceive repressed material, and to experience personally the manner in which psychoanalytic technique is conducted. Cabaniss and Bosworth (2006) found that nearly the same objectives are cited in the contemporary literature. They identify five: to analyze the future analyst; to instruct the future analyst in psychoanalytic technique; to support the candidate's educational experience; to provide an experience of psychoanalysis; and to foster conviction about the efficacy of psychoanalysis.

Despite this similarity in goals, the progress and diversification in the field have created new challenges and complexities for the training analysis. This may be one reason numerous respondents expressed the sentiment "I am so glad this [our survey] is finally being done!" Some suggested an additional evaluation system for the progress of the treatment, or a system of "checks and balances." Freud's recommendation (1937) that an analyst have a re-analysis every five years can be regarded not merely as a product of his time, when analyses were radically shorter. Indeed, this may be a metaphor for an analyst's, particularly a training analyst's, continuing need for humility and self-reflection throughout his or her career in this "impossible profession."

In this regard, an explicit attempt needs to be made to disentangle the personal analysis from educational objectives. This could better protect the candidate's analysis from external influences that threaten its integrity and neutrality. Perhaps any goal other than enhancing the candidate's self-awareness, insight, and the relief of suffering is superfluous at best and inhibiting at worst.

In his 1996 article, "Analysis, Re-Analysis and Self-Analysis," Austin Silber describes with great candor the flaws in his training analysis and subsequent re-analysis. We are reminded by Dr. Silber's article that fundamental to any analysis is identification with the analyst's analyzing capacities. This results in a lifelong process of self-analysis; the exigencies of life inevitably pose new challenges. A training analysis can never be a final product. Intrinsic

qualities required of an effective psychoanalyst, such as empathy, recognition of a patient's psychic conflicts, and the ability to work in the transference, are not acquired wholesale by the candidate from the training analyst by way of introjection and identification. Rather, they are based on complex capacities that the candidate brings with him, ones that are honed within the course of working through the ambivalent relationship with his or her analyst.

The candidate also plays a significant role in this relationship. We are in a unique position, at once patient and provider, student and colleague. It is challenging to reconcile these roles, switching in and out of them during the course of our days as we do. But it also offers an opportunity to see what life is like on the other side of the couch, and a chance to be not only the passive recipient of this experience, not merely acted upon by an omnipotent training analyst. We can also reflect on the training analyst's position and the many competing roles he or she also may play in the course of a day. It is generally agreed upon that the enhancement of empathy is one of the principal aims of the training analysis. It seems to us that empathy is not only learned as one receives it, but also as one must learn to give it. The training analysis offers a powerful chance for that experience. As the candidate experiments with the various voices and styles of supervisors, instructors, and training analyst, he or she must also wonder what it must be like to *be* them, empathically, not only imitatively. This process may lead to dis-identifications as well as identifications, and the candidate's participation in this process requires further reflection as well. At the same time, it provides a choice opportunity to help one in the consolidation of one's own analytic, and human, identity

In conclusion, we raise a number of questions for further thought and research. As noted in our opening remarks, the vignettes we received evenly reflected people who were satisfied with their analyses and others who had recommendations, sometimes strong recommendations, for change. The literature review and examination of the vignettes raise questions we have already posed, as well as others we have not, including: Does there need to be such a separate category of treatment differentiated from a therapeutic analysis? Is there a way to make the referral process less ambiguous and smoother? Several respondents liked the idea of candidates being able to see analysts from other institutes. How much of this "inter-institute" training is due to people being in treatment before applying, and how often does it occur after admission? Can this/should this option be facilitated? Is there something we might label a training analysis transference/countertransference? How much transparency of the analyst pertaining to institutional factors is indicated, or would such transparency dilute the benefits of analytic treatment? On the other hand, how much are these dilemmas, as some have suggested, unavoidable side effects to conducting analyses within an educational setting?

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Address correspondence to:

Leslie Cummins, LCSW
300 Mercer Street, Ste. 23L
New York, NY 10003
leslie.cummins@med.nyu.edu

Peter Sass, MD
167 East 82nd Street, Ste. 1C
New York, NY 10021
psass59407@aol.com

Leslie Cummins is a senior candidate at the NYU Psychoanalytic Institute (NYUPI), NYU Medical Center, and a graduate of the Metropolitan Institute of Training in Psychoanalytic Psychotherapy. She is in private practice in New York City.

Peter Sass is a graduate of the Albert Einstein College of Medicine and completed his residency training in psychiatry at New York University Medical Center/Bellevue Hospital Center. He is a recent graduate of the NYU Psychoanalytic Institute (NYUPI), NYU Medical Center, and is in private practice in psychiatry and psychoanalysis in New York City.

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Personal Analysis and Training Analysis: An Independent-Critical View Commentary on Cummins and Sass

Lewis Aron, PhD

There are no good psychoanalytic societies; they are all bad in regard to analysis, since they maintain the transference that analysis tries to dissolve. They are not completely bad either, however, since analysts, after all, should not have to go mad, and since analysis could not be transmitted if there were not some sort of society.

-- Roustang, 1976, p. 34

Analysts of all contemporary schools continue to agree that the personal analysis of the analyst plays a critical and fundamental role in the development of the analyst as a person and in the formation of the analyst as a professional. From early in psychoanalytic history, the so-called "training analysis" has condensed personal and professional goals. This is a reflection of the nature of psychoanalytic work, which is deeply and intensely personal. Personal and subjective factors cannot be neatly separated from professional and more objective elements. Analysts' personal growth is not incidental to their functioning as competent professionals, but rather, just as we have learned that "the personal is political," we can also say that, in psychoanalysis, "the personal IS professional!" Indeed, much of contemporary psychoanalysis has been dominated by a heightened attention to the interrelation between subjective and intersubjective factors on one hand and technical and professional factors on the other (Aron 1996).

I refer above to the *so-called* "training analysis" because this term is not used at the New York University Postdoctoral Program in Psychotherapy & Psychoanalysis (Postdoc).¹ Among the reasons that I was invited to comment on this article is that the editors of *The Candidate* know that Postdoc approaches psychoanalytic training differently than the institutes of the American Psychoanalytic Association. While my remarks do not reflect unanimity within our community, I am, however, writing from the perspective of the director of a program that approaches psychoanalytic training from a non-mainstream angle and from a point of view that reflects our community's history and tradition. (Thus, my authorial choice of the royal "we.") Significantly, having been established in 1961, we bear the marks of growing up in the 1960s, representing diversity in psychoanalytic theory with a range of schools and positions, an emphasis on psychoanalytic dialogue and debate among these schools, a strong commitment to academic freedom as befits a program housed in a major university, and a determination to treat our students, who are all licensed professionals with postdoctoral education, as mature adults and colleagues. We do not see ourselves as training new professionals, but rather conceive of ourselves as providing advanced professional education for postdoctoral level mental health professionals who are already licensed as independent practitioners. In this respect, we are

¹ New York University has two separate psychoanalytic training programs, and to avoid confusion, I will identify and distinguish them here. One program is known as NYU Psychoanalytic Institute (NYUPI), is housed at the NYU Medical Center, and is affiliated with the American Psychoanalytic Association. The program that I direct, and which is described in this article, is known as the New York University Postdoctoral Program in Psychotherapy & Psychoanalysis (Postdoc). This program is housed in the Graduate School of Arts and Sciences and is an independent institute. To the best of my knowledge, these two psychoanalytic programs have never had any dealings with each other.

essentially providing continuing professional education.

With this as background, I return to my earlier statement that we do not use the term “training analysis,” but, instead, simply refer to the student’s or candidate’s “personal analysis.” Our position is that an analysis is always first and foremost a deeply personal experience. Ironically, it is precisely because the personal IS professional, specifically because the analyst’s character is so deeply intertwined with professional formation, that we want to keep a serious wall of protection between students’ analyses and any aspect of their formal psychoanalytic education. Not only do we eschew any reporting by the analyst to the program, but also, we do not have any system of training analysts (TAs).

Here are our program requirements:

Candidates in the program are required to complete 300 hours of personal psychoanalysis at a minimum of three sessions per week; each session must take place on a different day of the week and must be at least 45 minutes in duration. This analysis must begin prior to initiating work with a training case provided by our clinic, and it must be concurrent with at least one year of the treatment of the clinic patient. The candidate's training analyst must have had, at the commencement of the candidate's analysis, five years of experience following graduation from an analytic training program.

Candidates are free to choose any analyst of any psychoanalytic persuasion who has graduated from any reputable psychoanalytic institute. New students do not have to interrupt previous analyses when they enter our program. They are completely free to change analysts at any time or to terminate an analysis that they do not feel is progressing satisfactorily. I want to highlight that this leaves students free to choose an analyst who is affiliated in some way with our program (a graduate who has been out five years, a faculty member, a supervisor, or an administrator) or they may choose an analyst who is affiliated with or graduated from another institute and not part of our community at all. This also eliminates the problems of the referral process, in that students are entirely free to choose an analyst in any way they like. They may do this entirely on their own, they may keep or return to a former analyst, or they may seek guidance from colleagues at Postdoc. Moderate cost analysis is also made available to our students and here, too, they may obtain the names of several analysts without obligation or pressure to see any one of them. Financial arrangements are determined by the patient and analyst and are not predetermined or interfered with by our program. While this system is in some ways similar to the French system, in its effort to separate the personal analysis from the training program, it should be pointed out that we have not succumbed to the drawbacks of the French system. Namely, as pointed out by Kernberg (2000), the French system has tended to restrict the selection of analysts for pre-candidates to full members of the psychoanalytic society to which a candidate applies, and this, in turn, has promoted the politicization of the advance from associate to full member. We have no system of membership along these lines and there is no distinct status in being or becoming a TA, since we have no TA system. Furthermore, we do not require that the candidate have a lengthy analysis prior to beginning our program and, therefore, there is no unnecessary prolongation of training for this reason. (Training may well be protracted for other reasons, however.) Finally, evaluation and progression of candidates is based on their performance as analysts as determined by their course instructors and supervisors,

and not based on any anonymous voting into membership, as in the French system.

As to extra-analytic contact with their analysts, students are left completely free to determine with their own analysts how much extra-clinical contact they may have. Specifically, if a student's personal analyst is on our faculty, then the student is left free to take this analyst's course or not, based on what the student determines is in his/her own best interest. Since our courses are almost all electives and students always have choices about what courses to take, they are free to choose or not choose their analyst's course.

Because we have consistently eliminated a formal training analysis and instead insist on a personal analysis, our system eliminates many of the inherent impediments to the therapeutic outcome of a training analysis, so helpfully described and examined by Cummins and Sass. There is no hierarchy of TAs, no reporting or any other contact between analyst and institute, no institute-conferred surplus authority bestowed upon a TA, no problem of referral, no difficulty about changing analysts or terminating, no pressure or even preference to choose an analyst from our institute or one independent from us, no conflict about extra-analytic contact, and no predetermined fee arrangements or interference by the program in financial arrangements.

Finally, let me address the challenge that I would anticipate. With such a free and flexible hands-off policy, with the elimination of the TA system and such lax requirements, how can we assure that candidates receive the best possible analyses? How do we insure quality control? Our history with this matter, and we now have the accumulation of 45 years of experience with this system and over 600 postdoctoral psychologist graduates of our program, leads me to the following conclusion. The very best way to protect the candidates' personal analyses is to stay out of their way. Kirsner (2000) concluded, "An excellent heuristic devise for understanding trouble in psychoanalytic institutes could be: 'Search for the training analyst problem!'" (p. 232). He proposed that candidates' analyses be entirely separated from the institute so as to cut all patronage, anointment and privileged succession. The position of TA should be dropped, along with all reporting and evaluation functions on the part of the analyst. Kirsner specifically advised that analytic education follow a university model, with candidates assessed based on their performance, rather than on personality variables or assessment of health and pathology. Progression should be based on such criteria as reports from faculty and supervisors as to the candidate's ability to formulate case material, elaborate and critique theory, design and evaluate research, and of course, most importantly, the candidate's competence in discussing and engaging in clinical work. The proof of an analyst's competence and readiness for graduation should be measured by his or her competence in doing psychoanalytic work.

This is exactly what we have been doing for half a century and our results demonstrate that we have eliminated most of the problems still being debated by more traditional institutes. Is it a perfect system? No. Are there students, graduates, and faculty who I wish had further analysis? Of course. But should this be part of their educational requirement? Should it be connected to training and a professional society? I believe that personal analysis is better left to the individual, separate and independent from the institute or society, because this is the best way, paradoxically, to promote the individual's professional competence and personal growth and to insure the highest functioning of the educational institution and psychoanalytic society.

A final note: Postdoc has just begun an extended, longitudinal research project, utilizing quantitative and qualitative measures, to study the impact of analysts' personal analyses on their personal and professional development.² It is our hope that empirical investigation will lead to a better understanding of the impact of analysts' personal analyses on their personal and professional lives.

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Address correspondence to:

Lewis Aron, PhD

Director

New York University

Postdoctoral Program in Psychotherapy & Psychoanalysis

715 Broadway, First Floor

New York, NY 10003

lewaron@psychoanalysis.net

<http://www.nyu.edu/fas/program/postdoctoral/>

Lewis Aron is director of the New York University Postdoctoral Program in Psychotherapy & Psychoanalysis.

² The principle investigators are Jeremy Safran, Chris Muran, and Lewis Aron.

Differentiating General Impediments in Psychoanalysis from Impediments Specific to the Training Analysis Situation

Hillery Bosworth, MD

The training analysis is an area of particular interest of mine: I am currently conducting a study on candidates' views of the aims of their training analyses. I am pleased that others also have decided to take on this underdiscussed topic in an open and straightforward fashion. This is especially important now, given the challenges to the current training analysis system. Some advocate doing away with the certification requirement for training analysis; others press for the abolition of appointed training analysts (TAs) altogether.

The personal vignettes presented by Cummins and Sass do not, of course, definitively answer the question posed: Are there inherent impediments to the therapeutic outcome of a training analysis? One difficulty is that some of the issues raised in the vignettes are not specific to the training analysis at all. They argue for a paper entitled: "Are There Inherent Impediments to the Therapeutic Outcome of Psychoanalysis?" Examples include the analyst in denial of his terminal illness, the analyst reading papers during the session, and the analyst whose theoretical limitations prevent him from seeing pre-oedipal material. Likewise, debates about the role of self-disclosure abound in the general psychoanalytic literature. Whether self-disclosure is a useful or necessary tool versus a countertransference error is an open question.

Any analysand may have to grapple with the possibility that s/he is in a bad analysis. A candidate exposed to different theories of technique and case illustrations might be in a better position than a non-candidate to do so. Any patient may need to seek a consultation if they believe their life or their work is being derailed by their analysis. Challenging authority can be hard. Why would a candidate feel more intimidated or guilty about doing this than a non-candidate? I think – and it is one of my more general points about the paper – that the culture of the individual institute has a major influence on a candidate's experience of his/her analysis being private rather than intruded upon. At my institute, we are told, in writing, that there is no stigma attached to changing analysts. A faculty member meets with us each year to emphasize this point, and to offer confidential referrals for consultations about problematic analyses. A candidate still may or may not feel safe doing this, but at least the effort is made by the institute.

I also was taken aback by candidates who mentioned being "assigned" their TA. Now that would present a real therapeutic impediment! This sounded like such a strange, authoritarian diversion from the normal referral process that I found myself wondering if the candidates *perceived* a referral from a member of the institute as an "assignment." The institute may have a role in this perception if it is not made clear that despite the position of authority of the source, a referral is a referral and not all of them work out. Again, the culture of the institute may impact whether the training analyses of its candidates are relatively free of, rather than burdened by, paranoia, authoritarian intrusion and conflicts of interest.

Cummins and Sass draw attention to another potential impediment specific to the training analysis situation: countertransference problems of the TA. TAs may have more difficulty remaining neutral about their analysands' behavior if they fear such behavior will reflect poorly

on themselves. “Mutually narcissistic idealizations” may result in an unanalyzed hostile transference or an unanalyzed career choice.

My own interest is in the debate around the “educational” aims of the training analysis. Such aims may become manifest in overt or subtle ways. TAs may explicitly teach during the analysis, or may be more aware of their technique to provide a “good model” for the candidate. It is my impression, both from this paper and from remarks I have heard from TAs, that many assume the field has discarded the educational aims in the training analysis. Any agenda other than analyzing the patient/candidate is seen as interfering with the treatment process. For example, one could imagine how a TA’s taking on a didactic role could result in an actualization of the candidate’s fantasies of the analyst’s omnipotence. However, none of the vignettes point to this phenomenon as a source of therapeutic impediments. On the other hand, the fact that the candidate enters the same field as the analyst, and, perhaps inevitably, passively learns from the analyst, presents a more complicated issue. As Anna Freud said in 1938 (quoted in the Cummins and Sass paper), the field considers it “technically wrong” if the analyst “offers himself as a pattern, and ends the analysis by permitting the patient to identify with him personally and professionally.” So what is the TA to do? One who accepts these identifications as a reasonable outcome of a training analysis may be less likely to interpret their candidate/analysand’s use of him or her as a model. I took note of the candidate who spoke of her inability to feel comfortable using her TA as a model; she experienced this as an obstacle to her personal analysis. I am emphasizing the fact that the candidate considered the use of her analyst as a model to be a goal of her analysis, *not* in conflict but in confluence with her therapeutic aims. It seems possible to accept this kind of learning as reasonable and still interpret an idealizing transference.

It seems to me that the more potential pitfalls there are in the training analysis, and the more aspects of the training analysis that differ from non-training analyses, the greater the argument for maintaining some sort of TA status. After all, it does appear to require, at the very least, a special level of vigilance for countertransference enactments. It makes sense that TAs should be chosen based on their experience and clinical gifts (even if that rules out well-published analysts and brilliant theoreticians). Perhaps those given the honor and responsibility of the status should be required to immerse themselves in the literature on the subject during their first year of appointment. In group settings, senior mentors could discuss with younger TAs (obviously without active case material) the handling of unique training analysis situations. Such supports may be in place at various institutes, but some provide only optional post-appointment mentoring. I would also re-emphasize that institutes could do more to think of ways to minimize interference with their candidates’ analyses. Is it accepted practice for faculty to comment to candidates on what they think may or may not be going on in the candidate’s analysis? For faculty to comment to TAs about their candidate-patients? These vignettes suggest that the non-reporting of analyses has not provided sufficient protection, although perhaps permitting candidates access to TAs from outside institutes is a step in the right direction. I wonder if establishing procedures to promote continuous self-reflection on the part of TAs and the institute would be even more helpful.

With the perfectly attuned, reality-respecting, analytically-stanced TA, could every candidate have a training analysis free of institution-specific therapeutic impediments? Maybe

not. But I do not see how the field can simply do away with the requirement; we are going to have to make the effort to find out what works best. The Cummins and Sass paper is a good start. I hope to have my own data to add to the debate next year. One other valuable group from whom to gather information are those who have completed two analyses – one training and one non-training. Who better to let us know, in retrospect, if there really is a difference between the two, and if the training analysis really is less therapeutically effective?

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Address correspondence to:

Hillery Bosworth, MD

80 Fifth Avenue, #1001

New York, NY 10011

hcsb@nyc.rr.com

Hillery Bosworth is a fifth-year candidate at the Columbia University Center for Psychoanalytic Training and Research, and Clinical Assistant Professor of Psychiatry at NYU Medical Center.

Some Comments About a Difficult Question in the Impossible Profession

Steven J. Ellman, PhD

It is hard not to respond to this important and perhaps even courageous article without noting my own transference reactions to the topic that is being discussed. On one hand, I find it a heartening development that this topic is being discussed openly, but I also find it quite discouraging that only 1% of the population responded to this implicit questionnaire. This is quite a low percentage even for a distribution that occurs via electronic mail. As a bit of wild analysis, I imagine that some of the same currents that are reflected in the article are still operating fairly strongly in the population that is being sampled. I imagine that despite the rational knowledge that their confidentiality will not be violated, many candidates and graduates did not respond because of an implicit anxiety about being harmed professionally. The issue of confidentiality, then, may be a crucial issue not only in determining the therapeutic outcome of a training analysis but even in discussing the issue in a public forum.

I know of only two other investigations that looked at similar issues; one is Dr. Lora Tessman's (2003) recent volume looking at responses to different analytic experiences. Many of the respondents in her interesting volume had their first analysis as their training analysis. Dr. Tessman's sample was one that she interviewed in depth and they were all graduates of the Boston Psychoanalytic. The other investigation that I am familiar with was undertaken by Dr. Alan Tyson (personal communication) and I do not know if he ever published his findings. He collected a number of cases of analysts who went for a second (or third) analysis and compared their experiences with their first analysis, which was usually a training analysis. I will not try to distinguish my sources of information but rather give my impressions of the topic at hand. These impressions are derived from Tessman's volume and a rough memory of Tyson's discussions of his investigations. Perhaps the strongest impressions that I am left with are discussions of classmates as I gradually went through analytic training.

One impression that feels clear to me is that a training analysis can be a decisive event. If the analysis does not take hold, the candidate may never really have confidence in the analytic process. This can be true for any one of a number of reasons: if the analyst treats the analysis as a "learning" process rather than a therapeutic analysis or if the analyst is sadistic, distant, etc. I have heard a number of classmates comment that, in effect, they are not totally honest in their analysis for fear of being found out to be too disturbed or in other terms found to be unanalyzable. These revelations alarmed me at the time for I knew that I was not able to withhold this type of material from my analyst. They alarm me now for it seems to me that part of the reason for the feeling of crises in psychoanalysis has to do with a great number of candidates who never fully experienced the powerful effects of an analysis. I believe that, in part, the crisis in analysis is based on an internal crisis present in many analysts who never truly became an authentic participant in the analytic process. It then became very difficult for them to engage patients in this process unless they could do so on the basis of their authority (I am the Doctor). Of course, this authoritative stance is in many ways antithetical to an analytic process.

I am tempted to write in a more general manner but let me turn to the question at hand. It

is my view that there are so many impediments involved in a training analysis that we should rethink the various assumptions of the present model. In my view, we have to think about a training analysis as a personal analysis that is solely for the therapeutic benefit of the candidate. In this vein, if I was starting off seeing a patient who was forced to see me, I would regard this as a major issue in the treatment. Therefore, I have to wonder to what extent does the requirement of having to be in analysis effect the treatment? Do we analyze this coercive element in the treatment or do we let it go unanalyzed and say in effect that we, the analytic pair, are helpless to do anything about this structure? Of course, there are many candidates who have chosen to enter training, in part, because they at the same time wanted to enter treatment. Even for those candidates, the structure of the institute still provides a coercive background. What about our requirements for a four-times-a-week treatment, isn't this coercive? In my version of analysis (outside of a training analysis), the idea of an intensive treatment is a joint decision based in part on what has happened in the initial aspects of the treatment. Can one really have a joint decision, since the American Psychoanalytic Association (APsaA) or the International Psychoanalytic Association (IPA) or my institute requires that the analytic pair meet four times a week? Here I must say that although I am personally convinced that a more intense analysis is usually beneficial, this is quite different than both parties coming to feel, on the basis of a shared experience, that a more intense analysis would be of benefit to the analysand. I could go on multiplying the questions that in my mind indicate that we live in a coercive, hierarchical system but instead I will try to quickly indicate some of the ways that we might change this system.

The first change is something that I have already noted: we should change our view and at the very least change the name from training analysis to a personal analysis. The analyst should understand that if there is a training element, it is no different than it would be with any patient; the training involved is in coming to understand and experience in a full way one's conflicts and modes of repetitions. As a second point, institutes should be encouraged to tailor the analysis to the needs of the candidate and this should be done in a dialogue form. I do not have the time or the answers to try to indicate the extent to which an institute should meet the needs of a candidate but it is certainly something I am trying to think about whenever this topic is broached.

Third, over the last several years, we at the Institute for Psychoanalytic Training and Research (IPTAR) have come to the conclusion that the personal analysis might at times be more effective if the treatment was performed outside of our institute. We felt, as did several of the responders, that institute and society transferences were so powerful that it might be of benefit to our candidates to have analysts outside of our institute conducting a personal analysis. We approached the other IPA Institutes in New York with a proposal that this be allowed across institutes and we were greeted by mostly negative responses. (That is, the other institutes would gladly analyze our candidates but would be less glad to allow reciprocity). Perhaps this is because we are not members of APsaA but, of course, this raised a larger issue in terms of my thinking about this topic. Why would our institute (or any institute) interrupt an ongoing analysis if we thought that the analysis was of benefit to the prospective candidate? By and large, we at IPTAR do not interrupt if the treatment is well underway and the analyst is a training analyst of an IPA institute. However, even this somewhat more flexible policy is limited, since clearly we know that there are non-training analysts and non-members of the IPA who can conduct an analysis that can be of benefit to one of our candidates. What is the effect on our

candidates if we say that it is more important to us to have you in analysis with one of our training analysts than to continue what is a beneficial analysis?

Our struggle with this issue is reflected in several of the comments that the authors have collected. Is it possible to believe in the existence of one's own unconscious (we readily believe in the existence of another's unconscious) if the analyst is not trusted? Perhaps it is, but there is a much greater likelihood of being able to perceive repressed (defended) material if you are not constantly believing that in some way your future is determined by your analyst's realistic view of you. I believe it would be of great benefit to candidates to allow them to be analyzed in a variety of places where they might feel comfortable. I recognize that I have sidestepped an important issue of identification through the analysis, but here I would have to say that this is less important than a candidate having a full therapeutic analysis. If you are a training analyst and you believe that your institute is one of the few that has "real" analysts, then I would say without knowing you that there is a high probability that you are part of the problem that is now confronting organized psychoanalysis.

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Address correspondence to:

Steven J. Ellman, PhD

140 Riverside Drive, 14A

New York, New York 10024

sellman174@aol.com

Steven J. Ellman is Professor Emeritus of the City University of New York. He is a past president of and a training and supervising analyst at the Institute for Psychoanalytic Training and Research (IPTAR), Visiting Professor at the NYU Postdoctoral Program in Psychotherapy and Psychoanalysis, and past president of the Independent Psychoanalytic Societies of America. Dr. Ellman is author of The Mind in Sleep (1991) and Freud's Technique Papers – A Contemporary Perspective (1991). He is also an editor of the following books: Enactment (1998), The Modern Freudians (1997), and The Neurobiological and Developmental Basis for Psychotherapeutic Intervention (1997).

By Any Other Name

Philip Herschenfeld, MD

In an important sense, the term “training analysis” is an anachronism. In the early history of psychoanalysis, it was believed that this particular analysis was to be more than a therapeutic analysis and somehow a part of the training of the candidate. Although we continue to use the term, I think it leads to confusion about the nature of this treatment. An adequate personal psychoanalysis is an essential part of the development of any analyst. But the education comes from elsewhere. We no longer view the candidate as an apprentice to his analyst. (A candidate may unconsciously view him/herself as a kind of apprentice in the following sense: Children wish to be shown, not told, of the sexual secrets of the adult world. They desire a demonstration of what goes on between the grown-ups. This is material for the analysis.)

Most psychoanalysts would agree that our current tripartite system of course work, supervised clinical experience and personal analysis is the best form of education that we have come up with to date. The course work provides an intellectual framework for the endeavor, as well as an experience in struggling, with the help of colleagues, to master the material. This experience, hopefully, will be repeated throughout the analyst’s professional life. Peer study groups are an essential part of our careers and continuing development. Supervision provides an experience in working intensively with an experienced analyst around a single analytic case. I find it difficult to characterize that work any more specifically, given my own experience with my supervisors, who ranged in quality from very good to excellent. Between my adult and child training, plus one voluntary supervision post graduation, I had eight different supervisors, all very different from each other. How each worked with me, how much each said, what each focused upon, how much each revealed about his or her own work was unique.

The course work and the supervision inform each other and create the intellectual framework for the development of the candidate. It is the business of those overseeing the education to evaluate how those two arms of the learning experience are progressing.

At one stage in the evolution of psychoanalytic thinking, the analysis of the candidate was also considered to be the business of others besides the analyst-candidate pair. Experience has shown otherwise. Analysis cannot take place in any other than a private and uninfluenced setting. The analysis that goes on during analytic education is a personal analysis for therapeutic gains, through making the unconscious conscious. This frees up the future analyst emotionally to do his or her work.

As Cummins and Sass have pointed out, there is precious little written about the analyses of candidates. Presumably, this is because of the requirement of privacy. The authors ask if there are inherent impediments to the therapeutic outcome in a training analysis. There are. That is because there are inherent impediments in all analyses, and it is those impediments (otherwise known as resistances) that we analyze, more or less successfully. It would be a mistake to say that all lawyers share particular common difficulties in their attempts to be analyzed. I think that now that certain egregious practices, such as analysts reporting to education committees or giving permission to the candidate to progress in training, have ended, it would be erroneous to

ascribe common analytic experiences to all candidates. Our science is based on the idea of the uniqueness of each of us, how each of us views the world through the lens of his/her own experiences and mind.

That being said, I would like to call attention to a common resistance that can be more difficult to analyze in candidates than in laymen. When any analysand says, "Let me tell you about a friend," it is usually possible to show that this friend represents some aspect of the patient. When a candidate says, "Let me tell you about a patient I am working with," it is more difficult to analyze. The resistance takes the form of "I am talking about this patient because I want to understand more and be a better analyst." This is true, but it is also a powerful resistance against looking at oneself.

Cummins and Sass describe the "dual role" that the training analysis was supposed to serve, both as a personal analysis and for the education of the candidate. This was an understandable early experiment in the field, which was unsuccessful. The training analyst (TA) presumably served as a model for the candidate. But if any *patient* begins modeling himself on some aspect of the analyst, it would be a matter to be examined. If an analysand begins to grow a beard and his analyst has a beard, this would probably be a matter of interest in the analysis. The person in question would still, obviously, be free to keep it or shave. The same is true if the candidate starts working as his analyst works, talking or thinking as his analyst talks or thinks. If the candidate did this, it could mean many different things, including dependency, mockery, fear of competition, identification with the aggressor, and more. But it would not be a matter of simply accepting it as a favorable development. That would be an enactment by both patient and analyst, which was Anna Freud's point, quoted by the authors. I think that identification with the analyst's analytic attitudes is possibly a different matter.

What follows is my response to a number of the individual vignettes described in the Cummins and Sass paper.

Sometimes a Snake Is Not a Penis

A patient recounted a dream in which "a Black Mamba, the deadliest of all snakes, was biting my [the patient's] wife's arm and I hacked it to pieces and saved her." It would not be analysis to jump right in and tell him that the snake represented a penis. In fact, with some amusement, he remembered that in the dream he had been emphasizing the "Mom" in "Mamba," and went on to describe various associations to his mother that seemed to inform the dream. Snakes do not mean the same thing to everyone. Similarly, to accept that all candidates would react in a given way to the meaning of being analyzed by a TA on the faculty of his/her institute is not thinking analytically.

Being analyzed by someone from a different institute, as one respondent suggested, is a viable option. But each candidate experiences the transference in his or her own unique way, based on a unique history. One candidate in the survey describes the fearfulness about speaking freely about other candidates or faculty with whom the candidate's analyst interacts. The implication seems to be that "Of course, everyone feels that way." I submit that this, too, is a matter for analytic inquiry. It has a particular meaning to this particular candidate. It is the

opposite reaction of the candidate who relished the opportunity to gossip in his session about the shortcomings of everyone else at the institute – faculty, students and staff. Eventually, this originally highly pleasurable activity was understood as a repetition of a bedtime ritual from childhood. The candidate's mother regularly took that time as an opportunity to complain to him about the shortcomings of her husband, parents and siblings. He felt this to be a special gift from her and was giving a similar gift to the analyst. Another example of this contrast would be the patient who assumes that he shares political convictions with the analyst and freely expresses them, versus the patient who fantasizes a divergence of opinion and is hesitant to reveal what he thinks. Each transference assumption is worthy of inquiry, and, if a candidate felt safer being analyzed by someone from another institute, perhaps an opportunity would be lost to understand some personal motives for distrust. Does this mean that analysts do not sometimes lose their analytic perspective when they hear a candidate talk about a colleague? Not at all. Analysis is practiced by human beings who sometimes do excellent work and sometimes trip up. This, too, is something that must be worked through in every analysis. One respondent described his analyst's inability to deal with his own fatal illness, a test that others also have failed.

Another respondent describes being "...put through hell. I understood but was not happy with the fact that my analyst did not explicitly condemn some of the decisions and actions that were made by the good old boys club of analysts that had control of the EC." This is somewhat more complicated than my legal analogies, but I will go back to them. If a junior associate were being persecuted in his law firm, the analyst's job would not be to condemn the senior partner. It would be to analyze what could be understood about the reaction of the analysand and whatever might be preventing the young lawyer from improving his situation, as best he could. But since the TA is a member of the governing body, it feels more realistic that he should act in some way. However, the analyst's most valuable contribution is to analyze, not to act in the patient's life.

The responsibility of the analyst is to insure that confidentiality is maintained and that information gained from the candidate not be acted upon, even subtly. It may be a point to be understood as to why the candidate cannot accept or trust that his analyst is able to do that. The analyst has to be able to be a faculty member, and when he is sitting behind the couch, his responsibility is exclusively to analyze that particular patient. We are called upon to do similar things in daily practice. Whatever the patient's views, the analyst's job is to listen to the unconscious meanings of the communication, not to approve or disapprove.

Dr. Shelley Orgel's excellent point, quoted by the authors, is worth emphasizing: There are always conscious and unconscious motives for the analyst to minimize the possibility of hostile transference and countertransference. In a training analysis, this may be even more so. But, for analysis to be effective, the patient has to experience the hatred as well as the love in the transference. The more the analyst is "helpful" or explains himself, the less room the patient has to become aware of the hateful transference fantasies. A more mutually comfortable analysis comes at the expense of a more genuinely therapeutic one.

The requirement that a TA be certified probably does create unintended consequences, as one respondent wrote. Certification is not a perfect system, but so far, the preponderance of feeling is that this is the most reliable way to insure a level of expertise in those treating our candidates. I am sure that some very good analyses have been interrupted. Most of us would

probably choose a board-certified surgeon over a non-certified one, and we would accept that this is not a guarantee of success, just the profession's way of adding another level of possible safety.

I found the vignette about the candidate who dropped off the panel disturbing. The authors are correct about the difficulties in being simultaneously an esteemed professional, a student-analysand, and a colleague in the institute. In part, this is because of the necessary regression that occurs in every successful analysis. In this particular instance, what should have been left within the analysis to be worked out was intruded upon by a bunch of busybodies. People should not have been talking about the candidate being on a panel with the analyst. If someone knows who someone else's analyst is, perhaps it is his/her own "sexual boundary violation" if s/he talks about it. The issue was for the candidate-analyst pair to figure out if being on the panel was going to promote or retard the analysis. Would the extra-analytic contact give the candidate real information about the analyst that would restrict the range of possible transference fantasies? This anecdote confirms, yet again, that people with the usual instincts populate our institutes and we must always work at guarding an analytic attitude. The vignette in which the prospective supervisor, who was the officemate and friend of the analyst, yet did not know of the analytic relationship, is the kind of analytic practice to which we should all aspire. Anonymity is not as complete for candidates as for others. What are people on the progression committee going to surmise when a name is brought up and someone walks out of the room? Nevertheless, boundaries should be, and very often are, respected.

A Psychoanalysis Is a Psychoanalysis Is a Psychoanalysis...

Whatever we may choose to call it, the treatment undertaken by a candidate should do the same things that any analysis does; that is, help the candidate understand him/herself, particularly unconscious conflicts and motivations, as much as possible. The analysis should work to free the candidate from symptoms, inhibitions and anxiety through making unconscious conflicts and defenses conscious. This process, of necessity, will convince the participant of the existence of an active unconscious and demonstrate how analysis works.

Psychoanalysis is an extremely powerful procedure. Occasionally one hears that, "It was a successful analysis despite the best efforts of the analyst." Being on the couch four or more times a week, paying close attention to one's thoughts and mind, thinking about how one is relating to the analyst and considering one's mental defenses are, more often than not, a creative force for changes in any individual. Part of the change has to do with a new, realistic perception of oneself and others. That means that no psychoanalytic environment could or should be perfect. What we attempt to do in psychoanalyzing candidates is, similarly, an exercise in reality. It is an analysis like any other, in that it presents challenges unique to that particular analytic situation. If your analyst reads the mail during your session, that is probably not a good thing. It should be openly discussed, its meaning to the analysand understood, and maybe apologized for by the analyst. The analysand may or may not be best served by deciding to find a new analyst.

Because psychoanalysis is not a re-creation of Eden (and if it were, that would not offer much help for real life), there will be problems in every analysis around the fee or the level of

attention or the accuracy of the analyst's memory. That list is very long. Narcissistic aspects of the analyst can affect every treatment, not just those in the "fishbowl of the institute." Every responsible psychoanalyst has one part of his or her attention focused inward in an attempt to avoid such pitfalls.

Dr. Milton Horowitz reminded me of one important facet of this discussion that has not been mentioned. That is the expected post-analysis contact between analyst and candidate-patient in their ongoing professional lives at the institute. This is a real difference between the analyses of candidates and those of laymen. In the non-training setting, there are fantasies of ongoing contact, chance meetings, or continued attachment through blame and recriminations. There is always the real possibility that further work might be needed with one's original analyst. But what does it mean for the analysand to know for certain that some real interaction was likely to be ongoing with the analyst? How does that affect issues of termination, separation, independence and attachment? Does it leave all of us with something not quite resolved because that door is never fully closed? I expect that the last word on this topic has not been said.

Address correspondence to:
Philip Herschenfeld, MD
167 East 67th Street
New York, NY 10021
Pwhmd1@aol.com

Philip Herschenfeld is a former president of The New York Psychoanalytic Society and the current dean of The New York Psychoanalytic Institute (NYPI), as well as a supervising and training analyst. He trained at NYPI, where he now teaches courses related to child, adolescent and adult psychoanalysis. Dr. Herschenfeld maintains a private practice in New York City.

Training Analysis: Impediments and Enhancements Commentary on Cummins and Sass

Robert Michels, MD

A psychoanalysis is an intensely personal event, and is always unique, shaped by the particular nature of the patient, the analyst, and their match. The analyst's familiarity with the patient's life, culture and career are all relevant. Training analyses, like all analyses, are influenced by these factors. The training analyst, by definition, shares a culture and a career with the patient. This makes a difference – in fact, many differences, both desirable and undesirable. These are the subject matter of the paper by Cummins and Sass, or more precisely half of them are the subject matter, for as the title makes clear, they are only interested in "impediments," not in positive effects. One might speculate as to why this narrow focus, but in this case, the motive does not make much difference. The results are a self-confirming hypothesis and reflect severe methodologic problems.

Cummins and Sass surveyed psychoanalysts, asking if there are inherent impediments to training analysis and received an astonishingly low response rate of one percent, mostly critical, as their question invited. A more neutrally phrased question might have elicited more diverse responses. The survey results are a handful of complaining anecdotes, not really data. Actually, one percent is a rather low incidence of negative experiences; probably more dissatisfied analysands were silent. More important, few of the complaints have to do with what is special about training analyses – they are complaints about bad analyses and bad analysts – pretty much what one would expect, since training analyses are, more than anything else, analyses.

The Cummins and Sass paper quotes almost all of the responses. Four respondents had no complaints. Two were dissatisfied with the system, not with their expertise in analysis. Four explicitly described their transference experience. Four criticized their analysts, but with criticism not related to the specifics of the training analysis. Only one had a comment that reflected the specifics of training analysis – that training analysts fail to analyze their analysands' career choices.

My conclusion: training analyses are, above all, analyses, and elicit the responses and reactions common to patients in analysis. They are characterized by the potential impediments *and enhancements* that occur when the analyst is familiar with the patient's "reality," values, and career. This can enrich the process (not explored by the authors), but can also lead to blind spots, countertransference enactments, etc. The most obvious problems that are special to training analyses involve conflict between the patient's and analyst's analytic and other relationships, "reporting," the question of participation in classes taught by one's analyst, and so on. These are relatively easy to solve, and, as a result, reporting is almost unheard of today, and the management of potential extra-analytic contact is recognized as an issue that occurs in many non-training analyses as well. The really difficult problems – the analyst's narcissistic investment in the analysand or the analysis, rigidity, exploitation, insensitivity – are problems of analysis in general, not of training analysis in particular. Administrative and organizational features can cause minor problems, or fail to correct them, but cannot resolve the major ones. Meanwhile, the training analyst's personal investment in the process is special, and offers

possible advantages as well as potential risks. In general, the analyst's knowledge of the patient's world heightens sensitivity to alternative perspectives on the patient's experiences. It is often helpful to have read the book, seen the play or movie, or to know the opera that the patient is discussing. It is certainly helpful, too, to know what a book, theater or opera is like in general. The training analyst is familiar with the professional aspect of the candidate's life; most often, s/he has analyzed other candidates, and unless one views experience as an analyst as a negative, this offers opportunities of analytic value.

Address correspondence to:

Robert Michels, MD

418 East 71st Street, Ste. 41

New York, NY 10021

rmichels@med.cornell.edu

Robert Michels is the Walsh McDermott University Professor of Medicine and Psychiatry, Cornell University, and a Training and Supervising Analyst at the Center for Psychoanalytic Training and Research, Columbia University.

The Lures of Idealization: A Response to Cummins and Sass

Shelley Orgel, MD

It is a fact of life that most training analyses are conducted with a training analyst in the candidate's own institute, and, for the most part, the analyst's identity *is* known to the administrative personnel. Given these conditions, perhaps some of the inherent difficulties in this situation, as discussed by Cummins and Sass, can be diminished by emphasizing the need to pay attention to some unresolved issues training analysts may ordinarily overlook or resist exploring in themselves.

Here are a few thoughts about the lures of *idealization* that invariably affect both the training analyst and the candidate-analysand. Such idealization of the training analyst may be accepted as based in reality, particularly if the candidate is successful and talented, and/or if the analysand's opinions of colleagues, other students, etc. coincide with those of the analyst. Such temptation is intensified by loyalty issues if the training analyst is embattled within professional and social organizational networks, for example, when a society is divided by conflicting groups. And, not infrequently, training analysts themselves have not been able to adequately analyze the idealizations and losses of idealizations in relationship to their *own* analysts, and *their* institutes in the generations past. Furthermore, there are many personal circumstances under which analysts need their analysands in order to fulfill narcissistic needs. These needs may include, perhaps, a shared desire to idealize psychoanalysis itself and to deny evidence of the limited power of psychoanalytic treatment to achieve wonderful goals, like a *complete* analysis or fully *resolved* transferences; or an inability to accept the reality that empathy, understanding, or being understood can achieve only so much.

When the analyst is impeded in analyzing transference idealizations, what follows is a failure to allow full development, exploration, and analysis of the aggressive transferences that underlie them, and often aggressive countertransference as well. We see the results of these phenomena in later painful consequences, which may take the form of angry disappointments, disillusion with analysis itself, feelings of having been cheated, shameful feelings of failure and inadequacy, and vengeful fantasies. Countertransference impediments to the analysts's ability to analyze the aggressions concealed in idealizations include: unrecognized disappointment in and resentment toward analysands who fail to live up to the analyst's wishes to have disciples, to have a group of future analysts who will carry on his/her message, who will represent his/her immortality. It is in this context that I wrote of ways that the emergence and analysis of aggression in the transference can be inhibited (Orgel, 2002); one such obstacle may include the analyst's prematurely interpreting it (pouncing on it, as it were), making it feel unsafe to express and own the affects and contents of the derivatives of unconscious aggressive fantasies directed toward the analyst. The analyst indicates his/her sensitivity to such material, and conveys a message that it must be curbed. Such "instructions" are powerful, and candidates may be especially attuned to receiving them, abiding by them, and, of course, then becoming more prone to identify defensively with the analyst (as aggressor), and slavishly follow his/her technique in their own work.

What we interpret, when and how we do it – and what we *do not* interpret – all convey

suggestions about the analyst's desires. Remaining aware of this fact of clinical psychoanalysis, while difficult to do, is very important, I believe. From the beginning, Freud struggled to free his clinical theory and technique from the influence of suggestion. Still, every interpretation, no matter how "neutrally" conveyed, tells what the analyst wants and does not want, to some degree, from the analysand, Freud's instructions to be like a surgeon, a mirror, a passive onlooker notwithstanding. Needing to deny this inevitable component of the relationship can lead to serious problems. But it is worthwhile to make the attempt to aim for as much neutrality as possible so that analysts succeeding my generation may possess greater freedom to be creative, to challenge the givens (us!), and to live with maximally possible autonomy, both personally and professionally.

Paying attention to idealization and aiming to reduce it by analyzing it in ourselves, our allies in external conflicts, our analysands, our institutes – for that matter, doesn't it extend to *our* cherished so-called way of life? – remains our central human task if we are also to avoid the dangerous demonization of the other. The costs of *not* working to achieve the healing power of ambivalence, in place of the primitive gratifications of splitting, are fearfully high.

References

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Address communications to:

Shelley Orgel, MD
245 East 87th Street
New York, NY 10128
shelleyorgel@AOL.com

Shelley Orgel is a Training and Supervising Analyst at the NYU Psychoanalytic Institute (NYUPI), NYU Medical Center, and Clinical Professor of Psychiatry, NYU School of Medicine, New York, NY.

I Was a Psychoanalytic Candidate: 1954-1959

Roy Schafer, PhD

The course of my candidacy will be more understandable if I first review briefly the professional background I brought to it, and what I know of the origin of the Western New England Institute in which I was trained. Without that background, I might never have been accepted as a candidate within the American Psychoanalytic Association (APsaA).

In 1943, fresh out of the City College of New York, I was recruited by David Rapaport, then Chief Psychologist at the Menninger Clinic, to be his intern-apprentice-research assistant. Our clinical work was in diagnostic psychological testing using a battery of tests, and our research (with Merton Gill as our psychiatric consultant on diagnosis) focused on test differences among different diagnostic groups of patients, and between them and “normals.” Gill and Margaret Brenman were then advanced candidates at, or recent graduates of, the Topeka Psychoanalytic Institute; they were doing research on hypnotherapy. By 1946, Rapaport was established as the head of a new Research Department, and I had been chosen to take his place as Chief of Adult Testing.

Although not an inside participant in what developed next, I gathered that Lawrence Kubie, the well-known New York analyst, had recruited Robert Knight, then Director of Psychotherapy at Menninger's, to be the new Medical Director of the Austen Riggs Center in Stockbridge, MA. Knight then recruited Rapaport, Brenman, and Gill to join his staff, and I was recruited by the four of them to come along as the staff psychologist. (In those years, both professionally and personally, Rapaport, Gill, Brenman and I formed a close-knit group.)

In 1947, two advanced psychiatric residents and I moved with Knight to Austen Riggs, and Rapaport, Brenman and Gill moved in 1948. Two training analysts -- Alfred Gross and William Pious -- soon moved from Topeka to New Haven, CT. Joseph Chassell (Washington trained) came to Riggs from Vermont; Erik Erikson came to Riggs from Berkeley in 1950; and Hans Loewald moved to New Haven from Baltimore-Washington in 1955. There were a number of analysts already practicing and holding meetings in Connecticut, some of them trained at the New York Institute as commuting candidates. Meanwhile, I had left Riggs in 1953 to be Chief Psychologist in the Yale Medical School Department of Psychiatry and would soon publish my second solo book on clinical psychological testing.

By 1954, the stage was set for the formation of a new regional psychoanalytic institute within APsaA. A two-headed institute it was -- divided between New Haven and Stockbridge, some 80 miles apart. It was named the Western New England Psychoanalytic Institute and Society. A group of experienced psychiatrists, assembled from both locations, was eager and ready to begin buckling down as candidates in Winnepisockie, as we called it. I, too, was ready and eager. I had received psychotherapy training at Austen Riggs and gained further experience there and in New Haven. I now occupied a number of roles: former student, current friend, and active colleague of the principal players I've listed above; also, former analysand of one of them (see below).

I was not in the usual place of a candidate at this time; by virtue of my long association with Rapaport, I was in an advanced position with respect to psychoanalytic theory and familiarity with the history of psychoanalytic thought. So much was this so that, upon my graduation, I was asked to take over Rapaport's introductory courses on ego psychology and metapsychology, so that he could switch to teaching advanced theory courses.

However, at that time, APsaA permitted its constituent institutes to offer full clinical training only to physicians. A move was afoot to establish a policy of waiving this restriction for applicants with solid research credentials in their own fields, who could present a case that clinical training would further their research in ways of potential interest to analysts; also, who would sign a "pledge" that, upon completing clinical training, they would not engage in the independent practice of clinical analysis. The historically understandable but nevertheless medieval guild policy of requiring this "pledge" embittered me no end, but I was so eager to get trained and have clinical experience in analysis – my dream since I first read Freud in college – that, when a referendum in APsaA approved the necessary change in the bylaws (a close vote, as I recall), I signed and applied for a waiver. This was about 1956, I believe. I had to delay taking my first case, though not for too long, while waiting for an APsaA committee to approve my training.

What was also odd about my acceptance was that my analysis (1947-1949) had been short, inadequate, and, I now think, entirely inappropriate, in that my analyst had been Robert Knight, my boss at Riggs, and the analysis was conducted within the confined professional atmosphere at Riggs. Despite its disruptive factors and limitations, that two-year "analysis" was accepted as my training analysis. It barely met the minimum requirement of 300 hours in duration, and it had never before been considered a training analysis. Perhaps what paved the way toward my analysis being considered acceptable was the important role being played by my former analyst, not only in the institute, but in the development of the research waiver program of APsaA. My performance during my training years was good enough that it raised no strong questions about my candidacy, my progression, and my readiness to graduate in 1959.

On my part, it took some years of living and first-hand exposure to the practice of psychoanalysis before I stopped idealizing my first analysis and analyst. On my own, then, I began my second, much more analytic and far-reaching analysis in New Haven around the time I finished my candidacy.

Thus, I believe, institute politics and self-deception collude in producing poor decisions about candidate selection, progression and graduation. I have observed these factors at work in numerous instances of both acceptance and rejection – also, in my judgment, in decisions about analyzability of "control cases" and appointment of training analysts. The combined influence of behind-the-scenes institutional dynamics, built-in institutional needs and constraints, individual narcissistic aims, and differences in judgment and values among responsible and competent analysts is, I think, too powerful to prevent decisions being made that, to put it mildly, do not command universal assent.

The quality of instruction in my course work and supervision varied in the usual way, but on the whole was good to excellent. Rapaport was brilliant, stimulating, doctrinaire and open at

the same time, and usually intimidating; Erikson was a dull, bored lecturer on child development but, in my estimation, creative and insightful to the point of genius in teaching the clinical dream course; Robert Knight taught a pedestrian, textbook course on the neuroses; Joe Chassell organized a light course on “other schools;” William Pious conducted a continuous case seminar on working with a borderline patient that was, for many of us, inspiring; and so on through the familiar list.

My supervisions varied similarly. It being the 1950s, most of the clinical training emphasized adherence to the austere classical model of practice and formulation. Yet the faculty, being what it was, was open to critical thinking. In the end, the candidates received a mixed message that had its pros and cons, a message that sometimes tied our (my?) clinical hands too tight.

Analytic research – scholarly, clinical, other – was encouraged; candidates were required to submit a paper to qualify for graduation. Everyone groaned, but in the early years (that is as far as I kept track), a number of these papers were publishable in juried analytic journals.

Despite losing two of my three control cases, one after about three years and one within a year, I accumulated enough supervisory hours to qualify for graduation. The required minimum was 150 hours, with one case carried to termination. The only well-chosen training case was the one that was accepted as having had a termination phase – barely that, I would now say.

Like most candidates, I was too eager to graduate, to stop being a student. During that time of professional and personal life, the conflict of roles is hard to tolerate. Being an established teacher and training director myself, a respected contributor to the clinical psychological, analytically-oriented literature, already a friend and colleague of my mentors, and husband and father, I put my narcissistic needs first and my analytic needs second, and went for graduation as soon as possible.

About my being non-medical in a class of experienced psychiatrists: In my particular institute, the atmosphere was entirely open in this respect. Much of that openness reflected the atmosphere at the Menninger Clinic; it was transferred by key figures in the new institute. Also, I was not coming in as an outsider, as I was on friendly terms and had collegial relationships with just about all of my six fellow candidates. Five of us traveled every other trimester to Stockbridge for our course work. Those two-hour rides each way were wonderful times to prepare, rehash, and gossip. Cohesiveness, rather like that of a graduate school, developed, so that there was much mutual instruction, as should be the case. (Regrettably, in big cities – with their single training centers, and with the candidates assembling and then dispersing unless otherwise linked by training, jobs, and social acquaintance – there is not much to facilitate that bonding and nurturing experience.)

I remain deeply grateful for the psychoanalytic education I both received and made happen. However varied and disappointing, it prepared me to continue growing as an analyst and (taking into account my second analysis with Dr. William Pious) as a person.

Address correspondence to:

Roy Schafer, PhD

390 West End Avenue

New York, NY 10024

royschafer@mindspring.com

Roy Schafer is a training and supervising analyst at Columbia University's Center for Psychoanalytic Training & Research. He was the first Freud Memorial Professor at University College in London and has been honored twice by the American Psychological Association for his contributions to psychoanalysis and professional knowledge. Dr. Schafer lectures extensively throughout the United States and abroad, and is the author of, among other works, A New Language for Psychoanalysis, Aspects of Internalization, The Analytic Attitude, and The Contemporary Kleinians of London.