Obstacles to Change

San Francisco Center for Psychoanalysis

Instructor: Nancy Beckman, Ph.D.

September - October, 2018

Course Description:

This course will focus on challenges in treatment, as we encounter our patients' entrenched "survival" techniques that block both the patient's contact with his internal state, as well as contact with the therapist. Such entrenched survival mechanisms are necessary to avoid overwhelming states of catastrophic anxiety. Most often, patients in whom we encounter such deep resistances, have suffered early attachment trauma. Filled with annihilation anxiety—a sense of threatening psychic collapse and death—such a person "lives in a primitive and primary way, responding to every other person as a threat to his existence" (Gurevich, 2015). The difficult and prolonged task of the therapist is to attempt to communicate with the authentic person underneath these rigid and contact-prohibiting ways of relating.

Even at its best, treatment with such patients is difficult and slow, with many advances followed by an intensified return to defensive postures. Analyses often bog down, falling into intractable impasses, leaving patient and analyst feeling hopeless, inadequate, resentful, and/or self-blaming. Such impasses often occur when the analyst does not hear the patient in a deep enough emotional register. This is often due to our insufficient understanding of the real level of the patient's terrors (especially if the patient is able to present with a convincing "false self"), and to the difficult task of bearing intense countertransference pressures as the patient projects into us his most disturbed and disturbing object relations, and attending primitive emotions.

We will begin this course by focusing on the early developmental traumas that give rise to intense protectiveness, dissociation, identification with the aggressor, and the need to employ psychic retreats. We will consider the ways in which this attachment trauma directly or indirectly manifests in treatment, and the necessity for the therapist to meet the patient at the level of existence at which he became dissociated (ie, vacated his "real self" in efforts to protect this vulnerable and nascent self). Often, this means recognizing that there is no differentiated "self and other" for our patient, such that transference interpretations only serve to confuse; what is required is the analyst's recognition and acceptance of the patient's need for a more symbiotic attachment in which the analyst's mind (and body) serve as a container within which the patient can begin to develop.

We will then focus on narcissistic defenses—that is, the patient's attempts to block further exposure to the threat of annihilation—including "psychic retreats" (those highly organized, defensive systems into which the patient takes refuge when meaningful contact with the therapist and/or reality is experienced as threatening). Examples of such retreats include perverse use of the object (perversion of one's needs and dependency) and pathological organizations. Each of these retreats can be temporary or more chronic and difficult to penetrate. Treatment of patients

in which pathological organizations play a prominent role is long and difficult, and creates tremendous countertransference strains in the therapist.

In the final section of this course, we will explore, in greater detail, countertransference difficulties roused in the therapist in working with such patients. For example, feelings of futility, rage, helplessness, inadequacy, or retaliation, are common countertransference responses that arise as our attempts to speak to the "real patient" are met with destructive assaults on our own and on our patient's goodness and capacity to think. Another countertransference strain arises when we actually make contact with the "real self" in our patients, as this means coming into contact with our patients' most primitive and annihilating experiences. At these times, we are not in the presence of an adult patient "remembering" unbearable experiences of death and disintegration, but rather, are involved with the traumatized child, who is, once again, alive and terrified in an impending experience of destruction. Unwittingly, we may shut down the revelation of these unbearable states out of a need to defend ourselves against our patients' psychotic anxiety, but we may also foreclose out of a need to avoid experiencing similar states within ourselves. Lastly, we will consider the place of love in analysis—what it means, when it becomes important, and the fears love engenders in both patient and analyst.

Learning Goals and Objectives:

1. Develop an understanding of early attachment trauma and its sequelae (primitive anxieties that give way to dissociation, identification with the aggressor, and the need to avoid contact with the traumatized "true self" and with the analyst).
2. Become more familiar with entrenched defensive patterns that protect the patient from primitive agonies (including narcissistic defenses such as psychic retreats, pathological organizations).
3. Develop an increased capacity to speak "underneath" these defensive survival strategies to the "real selves" of our patients, such that we are making therapeutic contact with the nascent self who is lost in primitive anxiety.
4. Develop an understanding of the countertransference strains on the analyst in working with primitive patients—strains that arise from bearing our patients' intensive defensive strategies designed to block contact, and countertransference strains that arise from being in the presence of undefended primal agonies (both those of our patients', and our own that we must encounter in reaching toward our patients).

I. Primitive Anxieties and Infantile Need

Week One: September 7, 2018

1. Winnicott, D.W. (1974). Fear of Breakdown. *International Review of Psycho-Analysis*, 1:103-107 **(PEP)**
2. Ogden, T.H. (2014). Fear of Breakdown and the Unlived Life. *Inter. J. Psycho-Anal*., 95: 205-223. **(EZ Proxy)**

II. What Stays Alive

Week Two: September 14, 2018

1. Gurevich, H. (2015). The Language of Absence and he Language of Tenderness: Therapeutic Transformation of Early Psychic Trauma and Dissociation as Resolution of the "Identification with the Aggressor". *Fort Da,* 21:45-65. **(Reader)**

III. Engagement with the Need for Symbiosis: The No "Between Us" State

Week Three: September 21, 2018

1. Grossmark, R. (2016). Psychoanalytic Companioning. *Psychoanalytic Dialogues*, 26(6):698-712. **(EZ Proxy)**
2. Lemma, A. (2014). The Body of the Analyst and the Analytic Setting: Reflections on the Embodied Setting and the Symbiotic Transference. *Int. J. Psycho-Anal*., 95(2):225-244. **(EZ Proxy)**

IV. Psychic Retreats

Week Four: September 28, 2018

1. Steiner, J. (1993). Chapter One: "A Theory of Psychic Retreats", pp. 1-13, in Psychic Retreats. London: Routledge. **(EZ Proxy: Taylor and Francis Ebook Collection)**
2. Tamas, Nina (2016). Some Thoughts on Psychic Retreats. *British Journal of Psychotherapy*, 32, 1: 65-78. **(EZ Proxy)**

V. Narcissism: Not Needing Others

Week Five: October 5, 2018

1. Rosenfeld, H. (1987). Chapter Five: "Narcissistic Patients with Negative Therapeutic Reactions", pp. 85-104. Impasse and Interpretation. London: Tavistock/Routledge **(PEP)**

2. *Optional: Williams, P. (2014). Orientations of psychotic activity in defensive pathological organizations. Inter. J. Psycho-Anal., 95: 423-440.* ***(EZ Proxy)***

VI. The Strain of Receiving the Patient

Week Six: October 12, 2018

1. Rosenfeld, H. (1987). Chapter Two: "Some Therapeutic and Anti-therapeutic Factors in the Functioning of the Analyst", pp. 31-44. Impasse and Interpretation. London: Tavistock/Routledge. **(PEP)**
2. *(Optional: Feldman, Michael. (1997). Projective identification: The analyst's involvement. Inter. J. Psycho-Anal., 78: 227-241.* ***(PEP)***

Week Seven: October 19, 2018

1. Goldberg, S.H. and Grusky, Z. (2013). Chemistry and Containing: The Analyst's Use of Unavoidable Failures. *The Psychoanal. Quarterly*, 82: 145-178. **(EZ Proxy)**

Week Eight: October 26, 2018

1. Mendelsohn, Eric. (2007). Analytic Love: Possibilities and Limitations. Psychoanalytic Inquiry, 27: 219-45. **(PEP)**
2. Ogden, T. (2010). Why read Fairbairn? *Int. J. Psycho-Anal*, 91: 101-118. **(PEP)**