

# TRANSFORMING THE UNDER-REPRESENTED

## The Unacknowledged Influence of Ego Psychology

FRED BUSCH

*While a new form of ego psychology focusing on the psychoanalytic method continues to be developed, some undefined version of ego psychology remains under attack. The author argues that the thinking of current and earlier ego psychologists is evident in disparate theoretical schools, although rarely acknowledged. Common ground between seemingly disparate psychoanalytic theories is explored.*

*Keywords: contemporary ego psychology, process knowledge, building representations, here and now, language action, preconscious thinking, counter-transference*

*Alors qu'une nouvelle forme de psychologie du moi axée sur la méthode psychanalytique continue de se développer, une certaine version indéfinie de la psychologie du moi demeure la cible de vives critiques. L'auteur soutient que la pensée des psychologues du moi d'hier et d'aujourd'hui est nettement perceptible dans diverses écoles théoriques, même si elle est rarement reconnue. L'article explore les points communs entre des théories psychanalytiques apparemment divergentes.*

*Mots clés: psychologie contemporaine du moi, processus de la connaissance, élaboration des représentations, ici et maintenant, action du langage, pensée préconsciente, contre-transfert*

Throughout much of the psychoanalytic world, ego psychology has been supposedly relegated to the analytic dustbin. This has occurred even though one can see its continued, but unreferenced, influence amongst diverse psychoanalytic perspectives. In fact, I hope to show that some of the most important strides in psychoanalytic technique over the last thirty-five years have been made in the realm established by the early ego psychologists, captured sixty years ago by Rapaport when he stated, “The necessity and feasibility of the task should not be doubted: *we need a crystallization of the psychoanalytic theory of thinking* from its fragments; this theory must be cast as an indispensable part of psychoanalytic ego psychology” (Rapaport, 1950, p. 31; italics added).

Over time, a psychoanalytic theory of thinking has become a central factor in major developments of how we understand our patients, and a major factor in changes in technique. As recently noted by Ogden, “The shift in emphasis on *what* the patient thinks to *the way* he thinks has, I believe, significantly altered how we, as analysts, approach our clinical work” (Ogden, 2010, p. 344; italics added).

Ferro (2005), writing from a Bionian perspective highlights the point that “there is not an unconscious to be revealed but a capacity for thinking to be developed, and that the development of the capacity for thinking allows closer and closer contact with the previous non-negotiable areas” (p. 102).

Yet the vituperative attacks against ego psychology remain and are startling. In a recent discussion of a clinical case presented by a North American analyst, an analyst from Latin America said, “The initial curiosity I felt about this case was accompanied by a vague sense of discomfort. Here in the South it is *said, believed, and reaffirmed, often with foundation*, that American psychoanalysis is so dominated by Ego Psychology that Freud *had little hope* that in a culture so dominated by pragmatism, that his concepts would develop in accordance with his fundamental beliefs” (de Posadas, 2012, p. 536; italics added).

Putting aside for a moment that Freud’s statements about the United States came before the structural model was described, and a half-century before ego psychology had its heyday in the United States, and that heyday has long since past, why is there this ongoing attack on ego psychology, so that in this same journal in a book review, an analyst is quoted as writing, “The literal destruction of psychoanalysis came at the hands of ego psychologists,” without even a literary “raised eyebrow” by the reviewer (Gariépy-Boutin, 2012, p. 792). I’m also impressed with how many American analysts proclaim their now being two-person psychoanalysts and not one of those old

one-person analysts like the ego psychologist, never mentioning that most of the rest of the psychoanalytic world, like the French and Kleinians, are still one-person analysts.<sup>1</sup>

Bergmann (2000) captured the problem I attempt to address in this paper in describing the passing of what he called “the Hartmann era”:<sup>2</sup> “When one era passes its contribution is not erased. It leaves behind a series of new problems not envisioned earlier. All too often psychoanalytic practitioners remain unaware of the connection between the historical period and the new problems that emerged as the aftermath of that era” (p. 64).

### THINKING ABOUT THINKING IN THE ANALYTIC ENCOUNTER

In this section I will briefly highlight three developments in ego psychology that preceded later developments in a psychoanalytic theory of thinking. I will also describe certain changes in the psychoanalytic method that flowed from ego psychology and were incorporated in the methods of diverse psychoanalytic cultures.

Starting in 1939, Hartmann introduced a bold new version of the ego, which previously was seen primarily as a peacekeeper amongst the warring agencies of the mind in Freud’s model (e.g., the rider on the horse). Hartmann suggested that the ego was autonomous from birth<sup>3</sup> and developed secondary autonomous functions derived from conflict. While the idea of a conflict-free part of the ego was seen as an affront to Freudian psychoanalysis (e.g., Green [2000] saw it as an indefensible position), it is an inherent part of every interpretation we make to a patient. That is, whenever we intervene we have an expectation there is a part of the ego that can hear, integrate, and use what the analyst says to build a new representation. As we shall see, our psychoanalytic work has changed in a way that working closer to a preconscious surface is part of a new common ground based (but not specified) on a less conflicted part of the ego’s

---

1. It isn’t that ego psychology or these other schools never take into account the effect of the analyst on the process. Rather, the emphasis is on the patient’s mind, and what it makes of experience. For example, we may recognize that a patient’s withdrawal after an interpretation may be related to a sharp tone in one’s voice. What the patient makes of this is crucial, as well as our self-reflection on why this took place.

2. In his essay Bergmann made it clear that the era that passed was the Hartmann era, not ego psychology.

3. While this idea seemed particularly onerous to many, there are numerous indications it is accurate (e.g., Pinker’s 1994 studies on language development and Stern’s 1985 report of the infant’s capacity to distinguish mother and non-mother as early as three days after birth).

synthesizing capacity. Bion's notion of moving beta to alpha elements, and the Kleinian notion of changing the paranoid to the depressive position, are congruent with the necessity for building greater ego autonomy from more primitive affects and drives.

To glimpse a better understanding of the importance of thinking about thinking for early ego psychology, we need to turn to the work of the brilliant David Rapaport, now largely forgotten.<sup>4</sup> Starting in 1942, Rapaport wrote a series of papers on thinking (e.g., 1942/1967b, 1950, 1951/1967c, 1957/1967d). In a continuing refrain throughout his work Rapaport emphasized the importance of thinking about *thoughts*. His major contribution was expressed this way: "Though the understanding of *content* is sufficient for everyday communication and for many needs of diagnostic and therapeutic practice, it is insufficient for understanding of personality and thought processes. *Consideration of contents will have to be supplemented and reinterpreted into formal characteristics of the thought process*" (1951/1967c, pp. 432–433; italics added).

At a time when practice throughout most of the world was focused primarily on unconscious content, this seemed like heresy. However, as we shall see, this idea was also being expressed by Marty (1952/2010) in France, and later considered by Bion (1962) in his thoughts about the alpha function.

As I've shown in previous publications (Busch, 1992, 1993, 1995, 1999), the *consistent* application of ego psychology to the psychoanalytic method began with the work of Paul Gray (1982).<sup>5</sup> His primary focus was on the use of the more conflict-free parts of the ego in helping patients grasp the psychic processes that interfered in their functioning. It was first captured in the following: "It has for some time been my conclusion, rightly or wrongly, that the way a considerable proportion of analysts listen to and perceive their data has, in certain significant respects, *not* evolved as I believe it would have if historically important concepts concerned with the *defensive functions of the ego* had been wholeheartedly allowed their place in the actual application of psychoanalytic technique" (p. 622; italics added).

---

4. It isn't clear why this happened, but many of the psychoanalysts who trained with him (e.g., Gill, G. Klein, Holt) turned against his thinking after his death. Some, like André Green saw him as hostile to Freud.

5. The key word in this sentence is *consistent*. While others offered insights into how the ego might be more effectively used in treatment (Kris, Loewenstein), it was never consistently applied. Further, as I've shown in the papers mentioned in this sentence, those who were thought to be using the principles of ego psychology more often were bypassing the ego.

He went on to describe a method of analyzing resistances (Gray, 1994) in the clinical moment that until then had only been more honoured in its breach. As an illustration of what Gray was describing, I will present an example from Greenson (1967), who was considered one of the primary practitioners of ego psychology, but often bypassed the ego in his interpretations.<sup>6</sup>

In the first year of his analysis, a young man comes into a session angrily denouncing a professor who lectures “without thinking of whether the students can follow.” As he continues in this vein, he slips and says that he hates “to have him treat—I mean, teach me.” He then challenges Greenson with the comment, “I suppose you will make something of that.” When the patient continues to complain about the professor, Greenson makes a semi-resistance interpretation (i.e., where the resistance is noted but the intent is not to explore it but to get to what is being resisted). Greenson asks him, “Aren’t you trying to run away from your anger toward me?” The patient acquiesces with some expressed doubt, but returns with thoughts about feeling sorry for the professor because of rumours that his wife had recently committed suicide. He then returns to complaining about the professor as a “big shot,” who “doesn’t give a shit for me.”

Greenson intervenes: “Aren’t you angry with me for going on my vacation next week?” The patient angrily denies this, accusing Greenson of sounding like he looked this up in a book and making a universal analytic comment. Greenson notes his anger, but tells the patient his “real” anger is over his vacation. The patient reluctantly agrees and presents some confirmatory data (Greenson, 1967, pp. 299–300).

From the beginning of this vignette, Greenson seems not to be taking into account what the patient may consciously accept. As with the analyst’s complaint about his professor, he does not consider “whether the students can follow.” The slip, which indicates the patient has already made the unconscious connection between his feelings about Greenson and the professor, is challenged. It is clear the patient is in a feisty mood, and connections between Greenson and the professor will not be welcome. This is the resistance that seems most closely available to consciousness. Greenson raises it, but takes the further step of telling the patient that it is his anger toward the analyst that he is avoiding. Greenson clearly has something in mind, which he finally gets to, when he tells the patient he is angry about the analyst’s upcoming vacation. However, there is nothing in the data to suggest that the patient might have any awareness that

---

6. I have published this example previously (Busch, 1993).

one might work with, except in the resistance, that he is *really* angry at Greenson, or that the reason has to do with Greenson's vacation. In bypassing the resistance, the patient's conscious participation is left out of the analysis, except to passively accept the interpretation. Greenson's explanation for his remarks is that he saw the slip as an indication of the patient's anger, "but he refuses to accept this consciously" (1967, p. 300). This is just the point. *Where* a patient is consciously and *why* he is there are a crucial part of the analytic task. Consciousness is not something to be run roughshod over. Greenson's explanation is, "I believe it is necessary to pursue the resistances until one mobilizes a reasonable ego in the patient" (p. 300). In this, one sees Greenson's tendency to confuse the resistance with the feelings behind the resistance. What he pursued were the patient's feelings of anger. What he did not pursue was the patient's reluctance to make a connection between Greenson and the professor (i.e., the most observable component of the resistance at that time). Furthermore, for patients, their conscious ego is always the most reasonable one. If we believe a patient is warding off something from consciousness, it is not our task to only bring this to her awareness. From the side of the ego, there is a perfectly good reason why it is being warded off; understanding this reason is a first step toward conscious acceptance of what is being warded off.

In his 1982 paper Gray also brought in another perspective that had the further potential to change the way we thought of the analytic encounter at the time when he noted, "*The therapeutic results of analytic treatment are lasting in proportion to the extent to which, during the analysis, the patient's unbypassed ego functions have become involved in a consciously and increasingly voluntary co-partnership with the analyst*" (1982, p. 624; italics added).

In this view, Gray was following Hartmann in suggesting that our interventions will be most effective if we try to include the areas of the ego that might be freer of conflict by not arousing excessive anxiety. While not fully developed by Gray, this perspective was taken up by a number of other psychoanalysts (e.g., Adler & Bachant, 1996; Busch, 1999, 2000, 2001, 2006, 2009a, 2009b; Paniagua, 2001, 2008; Sugarman, 2003, 2006).<sup>7</sup>

---

7. Unfortunately Gray's work lost some of its importance over time because:

- a. He believed that resistance analysis alone would lead to uncovering the deeper strata of the personality.
- b. Resistance analysis, for Gray, was restricted to the moment of conflict in the session and the patient's conscious reflections on this moment, rather than seeing the associations that follow as a possible window into the conflict. My own perspective is that the patient's associations after this moment will tell us the

# **MODIFICATIONS IN THE PSYCHOANALYTIC METHOD ACROSS PSYCHOANALYTIC CULTURES**

Shifts in the goals of treatment and the psychoanalytic method of interpretation in diverse psychoanalytic cultures have come about via the continued development of thinking about thinking, and of the role of the ego. I will briefly summarize them below.<sup>8</sup> Throughout I will mention how these changes are also evident in the work of psychoanalysts from psychoanalytic cultures not known for their interest in the ego. Although I will be presenting the changes as discrete entities, there are many overlapping principles in each category.

## **PROCESS KNOWLEDGE**

What do we hope our patients have developed at the end of a “good enough” psychoanalysis? The way most of us have been taught to practise in the international community is that knowledge of the unconscious is what patients most urgently need to know. Our basic theory suggests that the more of these unconscious elements we can bring into awareness, the less likely the pull of their manifestations in action will occur. There is, of course, a great deal of merit in this perspective. However, there is another perspective to be considered, which is that the process of knowing is as important as what is known. It is my underlying thesis that what is accomplished in a relatively successful psychoanalysis is *a way of knowing*, and not simply knowing. My experience in doing second analyses is that patients often come in knowing a lot, but they *don’t know how to know*. They are stuck in knowing what they learned from their analyst in a previous treatment and can’t continue to grow and develop when the exigencies of life arouse variations of previous anxieties. It can lead to a belief in a kind of knowing we might call formulaic intuition.

Others have captured the idea of *process knowledge* in a variety of ways. We see it in Green’s (2005), statement, “The aim of an interpretation is not to produce insight directly but to facilitate the psychic functioning that is likely to help insight” (p. 5). Sugarman (2003), writing from the perspective of child analysis, and later considering adult analysis (2006), highlights what he calls “insightfulness.” This concept focuses on how we help

---

most.

- c. He believed that a well-analyzed analyst would be an objective analyst, and counter-transference feelings were cause for further analysis.
- d. He emphasized super-ego aggression, with a relative neglect of sexual life.

8. I have gone into greater detail in Busch (2013).

our analysts develop a theory of mind. Fonagy and Target's work (e.g., Fonagy & Target, 2000) touch similar concerns.

### REPRESENTATIONS

In some theories on the psychoanalytic method, it has become popular to see words as not restraining or substituting for action; they *are* actions. Or as Stern (2002) put it, "Contemporary clinicians also take it for granted that *every time* they speak, they are taking some kind of action with and toward the patient" (p. 230). While I think there is a place for words as actions, as you will see, these analysts miss the multiple role that language plays in psychoanalysis.

From an ego psychological perspective, and throughout a great majority of the psychoanalytic world,<sup>9</sup> there have been certain paradigm shifts. Basic to this shift is the increasing understanding of the significance of *transforming* the under-represented<sup>10</sup> into something potentially *representable*,<sup>11</sup> or *represented in a more complex form*. In this process one can imagine the *inevitability of action being replaced by the possibility of reflection*. This is why I see the discounting of the power of the analyst's words, as in an extreme postmodern view, as leading us away from some significant developments in psychoanalytic thinking, and potentially interesting psychoanalytic questions.

In fact, there has been a paradigm shift *across psychoanalytic cultures*, captured by Lecours (2007) as the movement from *lifting* repression to a paradigm of *transformation*. That is, rather than *primarily* searching for buried memories, we attempt to transform the under-represented into ideas that are representable. For example, we attempt to build representations as a way of helping the patient *contain* previously threatening thoughts and feelings so that he can move toward deeper levels of meanings.

---

9. The French, the Kleinians, most of Europe and Latin America, and those still working within a Freudian tradition in America, and its developments over time.

10. I have struggled for some time with the question of whether something that has never been represented, as exemplified in Freud's concept of "primary repression" (Freud, 1915), can be represented. I will discuss this later in this paper.

11. Stern's (1983) concept of "unformulated" experience captures descriptively what is meant by unrepresented thinking. There are two problems with his conception. The first is that he ignores an admittedly difficult issue, i.e., in what part of the mind these unformulated experiences may be found. Second, he contrasts unformulated experiences with the unconscious, which he depicts as something already inside the individual's mind, "just waiting for him to acknowledge it" (p. 241), as if the Freudian unconscious were populated only by already formed representations rather than the formless and inchoate, and what exists in the language of action.



What is represented can continue to build structure and enhance the ability to contain. This leads to what Green (1975) called “binding the inchoate” (p. 9) and containing it, thus giving a container to the patient’s content and “content to his container” (p. 7).

The importance of representations in psychic life was crucial in the development of the French psychosomatic school. In their introduction to one of the pioneering papers in this area by Pierre Marty (1952/2010), Aisenstein and Smadja (2010) point out the significant step Marty took in understanding psychosomatic patients: “It was not a question of looking for the *content* to give sense to the somatic symptoms but rather of observing the *inhibition or failures of psychic elaboration that proceed or accompany them*” (p. 343; italics added). In short, Marty saw the symptoms of psychosomatic patients as a result of a particular type of *problem in thinking*, or non-thinking (i.e., the failure of representation)<sup>12</sup> rather than primarily the result of a physical enactment of an unconscious fantasy or conflict.<sup>13</sup> Green (2005), in fact, sees the essential paradigm of psychoanalysis on the side of representation.<sup>14</sup> We see in Bion’s (1962) concepts of a “thoughts without a thinker,” and changing beta elements into alpha elements, notions very close to the French representational concept. As previously noted, Ferro has emphasized this shift from revealing the contents of the unconscious to exploring and developing the capacity for thinking itself in areas of psychic life that were previously “non-negotiable.”

In Betty Joseph’s clinical approach, she is constantly focusing her interpretations on representing what is going on in the immediacy of the clinical moment. Joseph emphasizes the elucidation of those ways in which the patient creates tone and atmosphere for understanding or against understanding. She argues that only when this is *clarified through representations*, which often takes repeated demonstrations, is it helpful to move toward understanding the reasons or motives. Joseph’s assumption is “that real psychic change is more likely to be promoted by the detailed description of how the patient is using the analyst, using interpretations, or using

---

12. To clarify, the problem in thinking is the result of psychic conflict, developmental arrests, psychotic thinking, etc.

13. A paper by Monsour (1960) is characteristic of this latter view where asthma is seen as the result of such factors as excessive, unresolved dependence on the mother, the fear of death, anal, urethral, or sexual excretory impulses, etc. That these same factors play a role in patients without asthma makes their explanatory value questionable.

14. Fonagy, Moran, Edgumbe, Kennedy, & Target (1993) think of mental representations as structures, similar to Freud’s view in “The Project” (1895). It is a position supported by others (Busch, 2006; Weston and Gabbard, 2002; and Schmidt-Hellerau, 2000).

her mind in a given session, and *then* to move to the way the patient's history, and unconscious phantasies express themselves in the immediacy of the processes and interactions in the session" (Feldman, 2004, p. 28).

Kris (1956), similar to Lecours some fifty years later, in talking about a treatment model that relies on discovering repressed memories, states,

In a subtle way this model has overshadowed psychoanalytic discussions, even after it had lost its value as prototype, i.e., after the introduction of the structural approach in Freud's work. Since we no longer view repression as the only mechanism of defense, the tendency to measure results of psychoanalytic treatments in terms of "new" memories recovered is—as Glover (1928, 1940) suggested some twenty years ago—outdated. And yet this tendency seems to linger on, as part of an unwarranted simplification in our thinking. (p. 55)<sup>15</sup>

As mentioned earlier, Rapaport (1950) introduced the notion of the importance of *how* thinking is interfered with at different levels of psychic disturbance. In his revolutionary work with Gill and Schafer (Rapaport, Gill, & Schafer, 1946) on the Rorschach, he introduced the idea that it was the *form* of thinking rather than the *content* alone that differentiated neurotic disturbances from the more severe character disorders. One sees in this a link to Marty's views on the form of thinking of psychosomatic patients being more central than the content, and even Green's thinking on the "negative."<sup>16</sup>

#### **WORKING IN THE HERE AND NOW**

Most current authors agree that because of certain qualities of the mind, the patient can primarily grasp what needs to be represented in the here and now. These qualities of the mind are called "pre-conceptual," "pre-symbolic," or "pre-operational." For much of analysis this type of thinking leads patients to best understand themselves in the *concreteness* of the clinical moment. As noted previously (Busch, 2011), Betty Joseph, amongst the London Kleinians, seems to fully embrace this position. For example,

---

15. Anticipating the work of Green (1974, 1975) on the significance of the preconscious in making interpretations meaningful, Kris felt it was "necessary to distinguish between memories which suddenly emerge from repression and memories which had been preconsciously available before they entered the patient's communication in analysis" (1956, p. 78). He felt that it was these latter memories that had significance in psychoanalysis.

16. As noted earlier, while these ideas were in the analytic ether of the early ego psychologists, they were not articulated as fully or applied to the clinical situation in the depth of these other analysts that followed.

in describing the work of Betty Joseph, Feldman (2004) notes how she stresses concentrating her observations “in the detailed interactions of the session, generally avoiding interpretations that refer to phenomena that are not immediately accessible to the patient” (p. 23).

While Gray’s (1982, 1994) work is not often considered within the context of the here and now, it is in fact radically here and now. The heart of Gray’s method is what he calls “close process attention” (Gray, 1996, p. 88). In this method the context of the material the analyst is listening to is optimally the immediate one. The intention of the analyst’s interventions is to draw the patient’s focus of attention to the process taking place within the manifest sequence of what occurs in the session. He is especially attuned to changes in affect and changes in voice.

### **LANGUAGE ACTION**

Over time we have learned more about those times when the patient’s verbalizations are meant to do something or bring about something, rather than communicate something. This occurs at an unconscious level (for the most part). As we have gradually understood, the whole range of psychic states and dynamics can be expressed via language action. Language action is used to ward off anxiety, to repair a self-state, to bring about a response from the analyst that is gratifying, traumatizing, or reinforces a resistance, and to express every other human emotion or fantasy. Loewald (1975) captured the ubiquity of language action in psychoanalytic treatment when he stated, “We take the patient less and less as speaking merely about himself, about his experiences and memories, and more and more as symbolizing *action in speech*” (p. 366; italics added). This comes about, in part, because early thought is heavily infused with action components, and early conflicts are often resolved in language action.<sup>17</sup>

It is interesting that Marty noted as early as 1952 that psychosomatic patients’ thinking was infused with action determinants, and their thinking was very concrete. It has since been demonstrated that this type of thinking is common in more severe character disorders, but occurs in most analyses at some point.

### **PRECONSCIOUS THINKING (IN THE NEIGHBOURHOOD)**

We have learned, belatedly and not always consistently, that one cannot interpret what is unconscious without preparation for making it accessible

---

17. Of course, Freud first noted language action in 1914, in “Remembering, Repeating and Working Through.”

to preconscious thinking. Working in the preconscious cuts across theoretical lines and is the basis for one element in a new common ground (Busch, 1993, 2006). Further, it is a crucial ingredient in creating a psychoanalytic mind. If the analysand cannot grasp how understanding comes from his own mind, it is difficult to see how he can experience himself as having a psychoanalytic mind. Again, we can see the similarities with analysts from different cultures below:

1. Ferro states, "Earlier, I mentioned my contribution to a serene atmosphere—but what exactly does that mean? Does the analyst pretend to agree with everything, or does he or she pretend that nothing has happened? I would say absolutely not to either question, nor can the analyst be seen as simply testing the temperature and distance of interpretations. *I do believe, however, that it is essential to respect the patient's threshold for tolerating interpretations, and to recognize that a feeling of persecution in the session is a glaring sign of excessive insistence*" (2003, pp. 189–190; italics added)
2. Baranger notes, "The interpretation arises at the moment when the analyst considers that he has understood the point of urgency *and worked out how to make it accessible, at least in part, to the patient's understanding* (1993, p. 20; italics added).
3. Joseph writes, "No interpretation can be seen as a pure interpretation or explanation but *must resonate in the patient in a way that is specific to him and his way of functioning*" (1985, p. 447; italics added).

### DEEP INTERPRETATIONS

As I've noted previously (Busch, 1993), although Freud switched from the topographic to the structural model because of his clinical experience (e.g., unconscious defences), he remained ambivalent about its application to the clinical situation, which in turn caused confusion amongst those who followed. The theoretical framework for deep interpretations as the primary psychoanalytic method can be found in Strachey's (1934) influential paper on what is mutative in psychoanalysis, where he presented an argument for *confrontations of split-off unconscious elements* as the key element in psychoanalysis. In this paper Strachey highlighted the importance of the patient's *experience* of the unconscious. According to him,

Every mutative interpretation must be emotionally "immediate"; the patient must experience it as something actual. This requirement, that the interpretation must be "immediate," may be expressed in another way by saying that interpretations must always be directed to the "point of urgency." At

any given moment some particular id-impulse will be in activity; *this* is the impulse that is susceptible of mutative interpretation at that time, and no other one. (p. 150)

It is this *experience of the unconscious*, especially what Strachey called the “id-impulses,” that became bedrock for many theoretical perspectives. In contrast, Sterba (1934), writing at the same time,<sup>18</sup> and using insights from Freud’s structural model, viewed the gains in psychoanalysis from a *widening of the ego’s capacity for tolerating thoughts*. This latter perspective led to the importance of working with unconscious resistances, and working closer to the preconscious. However, Sterba’s view on the necessity of widening the capacity of the ego did not take hold at the time. In trying to understand this, I believe it’s important to consider the analyst’s unconscious, to which I will now turn.

#### COUNTER-TRANSFERENCE ENACTMENTS

While my views on the psychoanalytic method have become part of my analytic DNA, I am well aware, within myself, of how tempting it is to practise in all the ways I’ve questioned. This is especially true of the *urge* to interpret deep unconscious content the analysand is unaware of. There is an almost *visceral* pull to make these types of interpretations at times. This is especially true when analysands are using *language action*, i.e., when the analysand is talking (e.g., free associating or telling a dream) and unconsciously *doing* something to or with the analyst while talking.<sup>19</sup> As I mentioned earlier, language action touches the analyst’s own unconscious. What I would suggest is that in the great majority of time, when the patient is enacting in language, the *analyst feels forced into what seems like an alien position*. We are well aware of how, over time, we realize we are being pushed to feel like or be a lover, torturer, parent, child, self-object, super-ego ... the list is endless. However, what drive us to push back and *force the patient to accept her own unconscious*, are primarily our uncontained counter-transferences. It often seems it is a wish to expel what is transferred back onto the patient. “You feel this way, not me,” we seem to be saying. It is a way of the analyst getting rid of something uncomfortable stirred in his own unconscious. It has led me to wonder if this is the reason for an observation I’ve made in the literature on counter-transference,

18. Although Sterba’s paper appeared in English in 1934, it first appeared in German in 1927. It was the first paper to employ the insights from Freud’s (1923) move to the structural model, and his) second theory of anxiety (Freud, 1926).

19. I think this is the specific mechanism involved in projective identification.

which is the absence of reports where the analyst had a counter-transference reaction, and then realized it *was not a reaction to the analysand's transference*. That is, we seem to treat our counter-transference reactions as *unerring guides to the patient's behaviour*. As counter-transference reactions are often the result of unconscious messages from the patient first picked up by our own unconscious, it seems more likely there are times when our counter-transference reactions are quite idiosyncratic. Pushing these reactions back on the patient frees us from these uncomfortable feelings.<sup>20</sup> It takes considerable restraint, narcissistic balance, and an ongoing self-analytic capacity to maintain our role of participant-observer and forestall the inevitable pull towards enactment.

#### DIVERGENCES IN THINKING

While this paper has emphasized the common ground, I don't want to leave the impression that there aren't still many differences amongst the psychoanalytic schools I've linked. To highlight one way these differences exist, I will focus on the manner of analyzing *inhibitions*. To briefly characterize the methods: (1) contemporary ego psychologists have a specific manner of analyzing inhibitions; (2) the French attempt to overcome inhibitions; and (3) the Kleinians seem to analyze inhibitions mainly within the context of their unconscious derivatives.

The basic theoretical difference in approach between the French and the contemporary American ego psychologists is that the ego psychologists focus more on what they see as *the underlying process that allows for accessibility of unconscious derivatives to preconscious thinking*, while the French focus on *stimulating what is already preconscious to uncover unconscious derivatives*. To put it another way, the Americans focus on working through the unconscious ego defences, while the French attempt to overcome the defences by strategic stimulation of the preconscious. The American approach to defense analysis requires an additional form of listening on the analyst's part. In most case reports one hears the analyst listening to the *content* of the associations for the derivatives of the unconscious. Listening for the resistances requires greater attention to the *process* of associations. For example, we listen for when there is a change in

---

20. Carveth (2012), in an important review of Racker's concepts of concordant and complementary counter-transferences, points out that it is the awareness of one's countertransference, or lack thereof, not the particular type, that determines its usefulness. While Racker considered the analyst's concordant identification with empathy, and thus therapeutically useful, Carveth pointed out that if this remained unconscious it could lead to blind spots as much as unconscious complementary identification.

voice. It may be a blatant, dramatic, sudden difference from what occupies the moment before; or it may be an exceedingly subtle alternative. At other times, one can hear the resistance in an analysand's "consistency of voice." Take, for example, the patient who rushes from topic to topic in order to ward off a fantasy of being suffocated, or the analysand who keeps spaces between topics so they do not touch. At these times the analyst listens primarily for the meaning of *how* the analysand is associating, rather than to the meaning of the associations themselves. As noted by Green (2005), it is customary in French psychoanalysis to interpret as close as possible to the ego, sometimes making use of ellipses or allusions, proceeding by limited touches, stimulating the associative work, counting on the participation of the patient. In general, French analysts do not interpret resistances.<sup>21</sup>

The Kleinian approach to inhibitions can be seen in an example from Feldman (2007). He reports the patient was hostile and provocative in the session, announcing that she had binged on food and alcohol the previous weekend. Hearing this, Feldman felt frustration, anger, and hopelessness. The patient mentioned in passing that she hadn't been short-listed for a job she applied for. Using his counter-transference reaction as a guide to a projective identification, Feldman takes up how disturbing this had been for her, and suggested that it resonated with her feeling she didn't have a place with the analyst. He then reports saying, "I thought these experiences contributed to the hostile dismissive way in which I was now being treated, as the person who was unsuited for the particular job" (617).

In this example the analyst, using his counter-transference as a guide, directly interprets the projective identification within the transference, as is typical of the London Kleinians. There are a number of differences in this approach from those of us writing about resistance analysis within the structural model (Busch, 1993; Paniagua, 2001). As Schafer (1994) noted, these Kleinians have not adequately developed a position on matters of importance in standard Freudian structural and functional theory. In a dialogue with Joseph (Busch, 2004), I suggested that the London Kleinians have a view different from those of us who follow Freud's structural model (Freud, 1923) and his second theory of anxiety (Freud, 1926).<sup>22</sup> They have not sufficiently dealt with the fact that it is difficult to help patients think and reflect because what is most crucial for patients to know is what they are desperately afraid to know. As Schafer (1997) pointed out, they are still

---

21. In reading Birksted-Breen, Flanders, & Gibeault (2010) on French psychoanalysis, one only hears about overcoming resistances, never interpreting them,

22. For a further elaboration of this see Busch (1993).

working with insufficient differentiation between the concepts of an ego and the self. I would add they also have not appreciated the function of an ego distinct from its being a depository for abandoned object cathexis. It is my impression that, at times, current Kleinians are struggling with their heritage from Klein, who had the view that in order to establish and sustain the analytic situation, the analyst must give deep interpretations that locate the level of anxiety (Hinshelwood, 1988), which is based on Freud's first theory of anxiety, which viewed anxiety as based on dammed-up libido. Schafer (1994) noted early on that Klein directed interpretations at the deepest layers of anxiety and conflict. It is not assumed that there is no resistance; rather, it is assumed that the only way to decrease resistance is to attack its deepest sources through interpretation.

It is my impression that in Feldman's example he doesn't focus on what I would see as crucial (i.e., the *inhibition* of the feelings of disappointment over not being short-listed, leading to her drinking over the weekend). Left unexplored is why the patient was unable to be aware of how much she was affected by this news. Rather, it is interpreted directly as part of the transference reaction. If the patient had to drowned out any feelings of disappointment over the weekend, why would we assume that she could accept the analyst telling her this was what she was feeling, let alone that she was enacting this with the analyst, where now he is the unacceptable one? It is indeed an interpretation at the deepest level of anxiety at the moment. As Schafer said (1983),

There are many moments in the course of an analysis when analysands seem to dangle unexpressed content before the analyst. These are moments when the analyst is tempted to say, for example, "You are angry," "You are excited," or "You are shamed." But if it is so obvious, why isn't the analysand simply saying so or showing unmistakably that it is so? To begin with, it is the hesitation, the obstructing, the resisting that counts. If the analyst bypasses this difficulty with a direct question or confrontation, the analysand is too likely to feel seduced, violated, or otherwise coerced by the analyst who has in fact, even if unwittingly, taken sides unempathically. (p. 75)

#### FINAL THOUGHTS

For many years psychoanalytic schools of thought rarely interacted with each other in person or print. Each school primarily quoted its own authors and ignored the rest of the field. There were exceptions, like Green's writing on the importance of Winnicott (Green, 1975) and Bion (Green, 1992). However, without any particular attention paid to it, and with difficulty in understanding how it has come about, there seems to be a growing common



ground in certain methods of analysis, and a way of thinking about thinking in the psychoanalytic hour.

The pioneers in ego psychology, like Hartmann and Rapaport, were not received well outside North America. This response was based, it seems, on the view that ego psychology was moving away from the primacy of the unconscious in psychoanalytic thinking. However, over time, Rapaport's explorations emphasizing *forms* of thinking in addition to content, and Hartmann's notions of the ego's autonomous functions have been integrated into current modes of thinking among diverse schools. Whether stated or not, this change in our way of working reflects an appreciation for the ego's central role in the change process from psychoanalysis. While not stated as such, the question being answered by the changes in technique noted earlier, can be characterized as, "How might we best take into account the importance of the ego's central role in moving from the inevitability of action to the possibility of reflection?" It is an implicit recognition that our path to the unconscious is through a widening of the ego's capacity for tolerating what had been unthinkable or unknowable thoughts, as well as an appreciation of the quality of the patient's thinking in the midst of conflict. The ultimate message gleaned from ego psychology that has become common practice amongst diverse groups is that we need to take a slower path to the unconscious through the ego.

In an earlier article (Busch, 1993), I showed how we have struggled with the issue of direct interpretations of unconscious content since Freud's 1910 paper, "Wild Analysis." For most of this paper Freud warned us about the problems of direct interpretations of the unconscious, leading to his famous statement,

If knowledge about the unconscious were as important for the patient as people inexperienced in psycho-analysis imagine, listening to lectures or reading books would be enough to cure him. Such measures, however, have as much influence on the symptoms of nervous illness as a distribution of menu-cards in a time of famine has upon hunger ... Since, however, psycho-analysis cannot dispense with giving this information, it lays down that this shall not be done before two conditions have been fulfilled. First, the patient must, through preparation, himself have reached *the neighborhood* of what he has repressed, and secondly, he must have formed a sufficient attachment (transference) to the physician for his emotional relationship to him to make a fresh flight impossible. (pp. 225–226; italics added)

However, toward the end of this article, Freud offers a surprising caveat: "‘Wild’ analysts of this kind do more harm to the cause of psycho-analysis

than to individual patients. *I have often found that a clumsy procedure like this, even if at first it produced an exacerbation of the patient's condition, led to a recovery in the end.* Not always but still often" (1910, p. 227; italics added).

In this one passage Freud seems to renounce everything he has said before. He now comes down on the side of the usefulness of even "clumsy" efforts to bring the unconscious wishes to consciousness, even if the initial effect is deleterious.

The importance of being "in the neighbourhood" now seems insignificant as an interpretive guideline. The emphasis on the patient's readiness to accept an interpretation and all that it implies seems now to be disavowed. This is done even though most of what he said previously cautions against taking such an approach and expresses doubt about the usefulness of such a technique.

Various authors (Busch, 1999; Gray, 1996; Paniagua, 2001) have described the magnetic pull of direct interpretations of the unconscious, and some possible reasons for this. As indicated above, changes in practice are moving away from this approach and following some of the principles of ego psychology, which remains unacknowledged. My hope is that while reminding us of some of these principles, we may still transform this under-represented perspective called ego psychology.

#### ACKNOWLEDGMENTS

I would like to thank Charles Levin and the anonymous reviewers for their detailed, thoughtful reviews and many helpful suggestions.

#### REFERENCES

- Adler, E., & Bachant, J. L. (1996). Free association and analytic neutrality: The basic structure of the psychoanalytic situation. *Journal of the American Psychoanalytic Association*, 44, 1021–1046.
- Aisenstein, M., & Smadja, C. (2010). Conceptual framework from the Paris psychosomatic school. *International Journal of Psycho-Analysis*, 91, 621–640.
- Baranger, M. (1993). The mind of the analyst: From listening to interpretation. *International Journal of Psycho-Analysis*, 74, 15–24.
- Bergmann, M. (2000). The Hartmann era and its contribution to psychoanalytic technique. In M. Bergmann (Ed.), *The Hartmann era* (pp. 1–78). New York: Other.
- Bion, W. R. (1962). *Learning from experience*. London: Tavistock.
- Birksted-Breen, D., Flanders, S., & Gibeault, A. (2010). *Reading French psychoanalysis*. London: Routledge.
- Busch, F. (1992). Recurring thoughts on unconscious ego resistances. *Journal of the American Psychoanalytic Association*, 40, 1089–1115.

- Busch, F. (1993). "In the neighborhood": Aspects of a good interpretation and a "developmental lag" in ego psychology. *Journal of the American Psychoanalytic Association*, 41, 151-177.
- Busch, F. (1995). *The ego at the center of clinical technique*. Northvale, NJ: Jason Aronson.
- Busch, F. (1999). *Rethinking clinical technique*. Northvale, NJ: Jason Aronson.
- Busch, F. (2000). What is a deep interpretation? *Journal of the American Psychoanalytic Association*, 48(1), 237-254.
- Busch, F. (2001). Are we losing our mind? *Journal of the American Psychoanalytic Association*, 49(3), 739-751.
- Busch, F. (2004). Response. *International Journal of Psycho-Analysis*, 85, 575-577.
- Busch, F. (2006). A shadow concept. *International Journal of Psycho-Analysis*, 87(6), 1471-1485.
- Busch, F. (2009a). Can you push a camel through the eye of a needle? Reflections on how the unconscious speaks to us and its clinical implications. *International Journal of Psycho-Analysis*, 90(1), 53-68.
- Busch, F. (2009b). On creating a psychoanalytic mind: Psychoanalytic knowledge as a process. *Scandinavian Psychoanalytic Review*, 32(2), 85-92.
- Busch, F. (2011). The workable here and now and the why of there and then. *International Journal of Psycho-Analysis*, 92, 1159-1181.
- Busch, F. (2013). *Creating a psychoanalytic mind*. London: Routledge.
- Carveth, D. L. (2012). Concordant and complementary counter-transference: A clarification. *Canadian Journal of Psychoanalysis*, 20(1), 70-84.
- de Posadas, L. V. (2012). A commentary on "a very dangerous conversation." *International Journal of Psycho-Analysis*, 93, 535-544.
- Feldman, M. (2004). Supporting psychic change: Betty Joseph. In E. Hargreaves and A. Varchevker (Eds.), *In pursuit of psychic change* (pp. 20-32). London: Bruner-Routledge.
- Feldman, M. (2007). The illumination of history. *International Journal of Psycho-Analysis*, 88, 609-625.
- Ferro, A. (2003). Marcella: The transition from explosive sensoriality to the ability to think. *Psychoanalytic Quarterly*, 72, 183-200.
- Ferro, A. (2005). *Seeds of illness, seeds of recovery*. New York: Bruner-Routledge.
- Fonagy, P., Moran, G. S., Edgumbe, R., Kennedy, H., & Target, M. (1993). The roles of mental representations and mental processes in therapeutic action. *Psychoanalytic Study of the Child*, 48, 9-48.
- Fonagy, P., & Target, M. (2000). Playing with reality. *International Journal of Psycho-Analysis*, 81, 853-873.
- Freud, A. (1965). *Normality and pathology in childhood*. New York. International Universities Press.
- Freud, S. (1895). The project. *Standard edition* (Vol. 1, pp. 283-413).
- Freud, S. (1910). "Wild" psycho-analysis. *Standard edition* (Vol. 11, pp. 219-230).
- Freud, S. (1914). Remembering, repeating, and working through. *Standard edition* (Vol. 12, pp. 145-156).
- Freud, S. (1915). Repression. *Standard edition* (Vol. 14, pp. 141-158).
- Freud, S. (1923). The ego and the id. *Standard edition* (Vol. 19, pp. 1-66).
- Freud, S. (1926). Inhibitions, symptoms and anxiety. *Standard edition* (Vol. 20, pp. 75-176).

- Gariepy-Boutin, C. (2012). Review of the book *The crisis in psychoanalysis*, by A. Fayek. *International Journal of Psycho-Analysis*, 93, 791–798.
- Gray, P. (1982). Developmental lag in the evolution of technique for psychoanalysis of neurotic conflict. *Journal of the American Psychoanalytic Association*, 30, 621–656.
- Gray, P. (1994). *The ego and analysis of defense*. Northvale, NJ: Aronson.
- Gray, P. (1996). Undoing the lag in the technique of conflict and defense analysis. *Psychoanalytic Study of the Child*, 51, 87–101.
- Green, A. (1974). Surface analysis, deep analysis: The role of the preconscious in psychoanalytical technique. *International Review of Psycho-Analysis*, 1, 415–423.
- Green, A. (1975). The analyst, symbolization and absence in the analytic setting (On changes in analytic practice and analytic experience): In memory of D. W. Winnicott. *International Journal of Psycho-Analysis*, 56, 1–22.
- Green, A. (1992). Review of the book *Cogitations*, by Wilfred R. Bion. *International Journal of Psycho-Analysis*, 73, 585–589.
- Green, A. (2000). Illusion and disillusionment in the attempt to present a more reasonable theory of the mind. In M. Bergmann (Ed.), *The Hartmann Era* (pp. 105–116). New York: Other.
- Green, A. (2005, March). Issues of interpretation. Paper presented at the meetings of the European Psychoanalytic Federation, Vilamour, Portugal.
- Greenson, R. R. (1967). *The technique and practice of psychoanalysis*. New York: International Universities Press.
- Hartmann, H. (1939). *Ego psychology and the problem of adaptation*. New York: International Universities Press.
- Hartmann, H., Kris, E., & Loewenstein, R. M. (1946). Comments on the formation of psychic structure. *Psychoanalytic Study of the Child*, 2, 11–38.
- Hinshelwood, R. D. (1988). *A dictionary of Kleinian thought*. London: Free Association Books.
- Joseph, B. (1985). Transference: The total situation. *International Journal of Psycho-Analysis*, 66, 447–454.
- Kris, E. (1956). The recovery of childhood memories in psychoanalysis. *Psychoanalytic Study of the Child*, 11, 54–88.
- Lecours, S. (2007). Supportive interventions and nonsymbolic mental functioning. *International Journal of Psycho-Analysis*, 88, 895–915.
- Loewald, H. W. (1975). Psychoanalysis as an art and the fantasy character of the psychoanalytic situation. *Journal of the American Psychoanalytic Association*, 23, 277–299.
- Marty, P. (2010). The narcissistic difficulties presented to the observer by the psychosomatic problem. *International Journal of Psycho-Analysis*, 91, 347–363. (Originally published in 1952, *Revue française de psychanalyse*, 15, 339–357.)
- Monsour, K.J. (1960). Asthma and the fear of death. *Psychoanalytic Quarterly* 29, 56–71.
- Ogden, T. H. (2010). On three forms of thinking: Magical thinking, dream thinking, and transformative thinking. *Psychoanalytic Quarterly*, 79, 317–347.
- Paniagua, C. (2001). The attraction of topographical technique. *International Journal of Psycho-Analysis*, 82(4), 671–684.
- Paniagua, C. (2008). Id analysis and technical approaches. *Psychoanalytic Quarterly*, 77(1), 219–250.
- Pinker, S. (1994). *The language instinct*. New York: HarperCollins.

- Rapaport, D. (1950). On the psycho-analytic theory of thinking. *International Journal of Psycho-Analysis*, 31, 161–170.
- Rapaport, D. (1967a). *The collected works of David Rapaport* (M. Gill, Ed.). New York: Basic Books.
- Rapaport, D. (1967b). Emotions and memory. In M. Gill (Ed.), *The collected works of David Rapaport* (pp. 120–127). New York: Basic Books. Original work published 1942.
- Rapaport, D. (1967c). On the organization of thought processes. In M. Gill (Ed.), *The collected works of David Rapaport* (pp. 432–439). New York: Basic Books. Original work published 1951.
- Rapaport, D. (1967d). The theory of ego autonomy. In M. Gill (Ed.), *The collected works of David Rapaport* (pp. 722–744). New York: Basic Books. Original work published 1957.
- Rapaport, D., Gill, M. M., & Schafer, R. (1946). *Diagnostic psychological testing*. Chicago: Year Book Publishers.
- Reich, W. (1949). *Character analysis*. New York: Noonday. Original work published 1933.
- Schafer, R. (1983). *The analytic attitude*. New York: Basic Books.
- Schafer, R. (1994). The contemporary Kleinians of London. *Psychoanalytic Quarterly*, 63, 409–432.
- Schafer, R. (1997). *The contemporary Kleinians of London*. New York: International Universities Press.
- Schmidt-Hellerau, C. (2000). *Life drive and death drive*. New York: Other Press.
- Spitz, R. A. (1945). Hospitalism: An inquiry into the genesis of psychiatric conditions in early childhood. *Psychoanalytic Study of the Child*, 1, 53–74.
- Sterba, R. (1934). The fate of the ego in analytic therapy. *International Journal of Psycho-Analysis*, 15, 117–126.
- Stern, D. B. (1983). Unformulated experience: From familiar chaos to creative disorder. *Contemporary Psychoanalysis*, 19, 71–99.
- Stern, D. B. (2002). Words and wordlessness in the psychoanalytic situation. *Journal of the American Psychoanalytic Association*, 50(1), 221–247.
- Stern, D. N. (1985). *The interpersonal world of the infant*. New York: Basic Books.
- Strachey, J. (1934). The nature of the therapeutic action of psycho-analysis. *International Journal of Psychoanalysis*, 15, 127–159.
- Sugarman, A. (2003). A new model for conceptualizing insightfulness in the psychoanalysis of young children. *Psychoanalytic Quarterly*, 72(2), 325–355.
- Sugarman, A. (2006). Mentalization, insightfulness, and therapeutic action: The importance of mental organization. *International Journal of Psychoanalysis*, 87(4), 965–987.
- Westen, D., & Gabbard, G. O. (2002). Developments in cognitive neuroscience. *Journal of the American Psychoanalytic Association*, 50, 53–98.

Fred Busch  
246 Eliot Street  
Chestnut Hill, MA  
drfredbusch@gmail.com