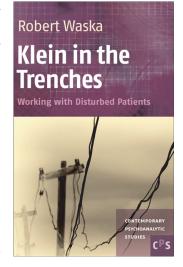
Klein in the Trenches: Working with Disturbed Patients

by Robert Waska Amsterdam, NY: Editions Rodopi B.V., 2012, pp. 203.

Robert Waska is a prolific writer, publishing at least one paper or book every year. Klein in the Trenches contains some previously published material but is mostly original work. The book has three sections, and their status seems unclear. The first three chapters describe analytic work with borderline and/or narcissistic patients. The next four chapters describe the life story of a severely disturbed man who many times was at the brink of suicide, complete breakdown, or massive drug overdose, yet he managed to fashion a productive life from the wreckage. This man had various forms of help along the way and his analytic experience helped him to construct



a coherent narrative out of disparate bits. The third section concentrates on technical questions in working with severely disturbed and disturbing patients. It is this third section that lends the book its value.

Stylistically Waska is at his best when he writes about his patients. His theoretical introductions are often filled with Kleinian jargon; for example, concepts such as the death instinct are used uncritically without an attempt at definition. Waska also uses many ideas from other Kleinian authors (e.g., the concepts of psychic retreats, thin- vs. thick-skinned narcissism) without explaining them in depth or integrating them into a coherent theory. One gets the sense that theories are added horizontally rather than integrated vertically. On the other hand, as a clinician, Waska manages to show us his patients in their many facets. Here one feels in the presence of depth psychology.

Waska's practice resembles that of many analysts working in private practice. Many of his patients are quite disturbed and are not ideally suited for psychoanalysis. Waska also offers psychoanalytic couple therapy and judging from this book, many of the couples are equally disturbed and disturbing. His patients seek urgent symptom relief and most are not interested in psychoanalytic treatment specifically. In many case vignettes, the therapist has to prove his or her mettle fairly quickly in order to convince the patient of the value of treatment. In the third section of his book, Waska tackles the technical conundrums present in such volatile situations.

In previous articles (2008), Waska has presented his concept of "analytic contact" as the defining feature of psychoanalytic treatment, regardless of the setting or frequency. In my review of Waska's (2010) previous book, The Modern Kleinian Approach to Psychoanalytic Technique, I have discussed my view of the shortcomings of the concept of analytic contact. To summarize my previous argument, analytic contact owes much to Betty Joseph's (1985) idea of interpreting the total transference. In his definition of analytic contact, Waska extends this to using the total countertransference to interpret the transference/counter-transference matrix. As a complementary concept to total transference, total countertransference is defined as the sum total of all reactions and stirrings within the analyst in response to the patient and the analytic situation. Waska offers clinical examples demonstrating how he makes use of the total countertransference-that is, his own feelings and somatic states-quite effectively to understand and to notice more subtle aspects of his patient's projections. However it remains unclear, from a theoretical point of view, how analytic contact can move a person who predominantly uses projective identification/introjection cycles (i.e., who operates in the paranoid-schizoid position) towards a position where they manage to relate to another subject (i.e., to operate in the depressive position) and to not perceive them as just another object saturated with their own projections. In short, the term analytic contact does not account for the role of the relational matrix in reshaping psychic life, as do by contrast, the theories of Winnicott, Bion, and more recently Ogden, and Ferro, who write in the same tradition.

In reviewing the current volume, it occurred to me that Waska's clinical acumen is ahead of his ability to create theory. In conjunction with his use of analytic observation as a technical instrument in his work with difficult patients, analytic contact seems to have its place, because in striving for analytic contact the analyst is constantly, via analytic observation, attempting to address the most pressing problems in the analytic dyad. Some of those same principles might be equally useful in work with neurotic patients.

The third section of the book, "Analytic Observation and The Analytic Process," contains four chapters with the titles "Taming Destructive Phantasies," "Translating Destructive Acting Out," "Pre-interpretive Containment," and "Name It, Claim It, and Tame It." Taken together the four chapters present the theory and then illustrate the praxis of analytic observation. In "Taming Destructive Phantasies," Waska reviews the literature on psychoanalytic observation. Gabbard (2004) defined analytic observation as a technique that stops short of traditional interpretation, in that it describes psychic phenomena without an attempt to explain or link them to internal dynamics. Waska then adds that analytic observations "highlight the specific nature of their (the patients') object relational phantasies, and the destructive, controlling, limiting, and rigid nature of how they view themselves and others" (p. 119). As the title of his chapter suggests, Waska is working in the realm of transference enactments that, if left unaddressed, are destructive to either the patient and/or the treatment. "How the object is viewed and how the object is used are of immediate concern to the analyst" (p. 121).

To give a flavour of the case material, I have chosen an excerpt from an early session in the treatment of a narcissistic couple. Unfortunately, this book review does not allow for an extended case report, but I will try to present one salient analytic observation: Wife A and husband B have come for therapy because B punched a hole in a wall during a fight. A finally decided that she would divorce B if their marriage did not change significantly in the next six months. The couple therapy was partially covered by insurance. When Waska asked for a cheque for the co-payment, B became angry and physically threatening "I don't think we have to do that. You can't tell us to pay for something we don't owe" (p. 179). B was a large man with a booming voice, and not surprisingly, Waska felt scared and intimidated. He proceeded to ask, "Why are you so angry?" B replied, "I am not angry, just frustrated." After a few more exchanges, Waska finally told B, "I am telling you what you are doing here in my office is anger, and it is not your right to unload whatever is inside of you. I can help you figure out what is in there, and how to process it better, but you can't just pour it out. It sounds like you feel either you have the right to do as you please with your emotions or if I tell you no, then I am taking away your rights. I have the sense that is happening everywhere, with the neighbors, with your wife, with me, and with work" (p. 179). In reflecting on his intervention, Waska first describes his quasi-parental role of setting limits to protect himself and the analytic space (including his wall!). In telling B that he cannot "dump" his toxic rage, Waska introduces the idea that B has to treat him with respect like a valued container. By linking B's fear of being controlled, and his narcissistic entitlement to say what he wants, to difficulties in other areas of his life, Waska plants the first seeds for interpretation. In the following sessions, B's rage and his wife A's masochistic surrender continue to surface, but they are named and then connected to underlying

phantasies. Over time, enactment is being transformed into symbol and becomes grist for the analytic mill.

The techniques Waska highlights are not new, but what makes this book valuable is his use of many arcane concepts in a very straightforward manner. Waska introduces the reader to many patients who try to control the therapeutic setting in obvious and destructive ways. Waska's case vignettes ring true, and in some cases, I admired his courage. To me this book serves as a vivid reminder of the many times I find myself surrendering to fear, instead of speaking directly to the patient's destructive acting out, in the hopes that the acting out will simply disappear. Waska's book can be read as a companion piece to Racker's (1989) paper "Psychoanalytic Technique and the Analyst's Unconscious Masochism," in which Racker describes how the analyst's unconscious masochisms is conjured up by patients' destructive projections and acting out. Waska's elaborations on technique are a timely reminder on how to counter these tendencies in oneself. For that reason alone I found the book useful and I suspect that it can fulfill that same function for many readers.

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