

THE BOOK REVIEW

Preamble

It has long been this reviewer's opinion that the development of an effective self-analytic method and its application by analytic therapists will be a major direction for psychoanalytic research to take in the years to come. It is generally recognized that the degree to which clinicians have dismantled the conflicts that fuel their own symptoms is a determining factor in how far they can enable their patients to do likewise. It is also widely acknowledged that the technical theories currently available for personal analysis cannot, and do not, reach and eradicate the deepest roots of the many symptom that can be found in human beings, including analysts (e.g. Moraitis on phobias, in Trosman, 1988, p.232; Poland on character symptoms, in Barron, 1994, p.222). Thus if theoretical breakthroughs into symptom depths are to take place, reason would say that training (i.e. personal) analyses will not make them. Some practitioner-researchers will be required to use themselves as their experimental subjects. They will have to proceed farther into their symptoms than anyone has yet gone, and self-analytic methods that will allow them to do so will have to be developed.

If the analytic discipline manages to overcome its long-standing attraction to art and its aversion to science (see Cooper, in Shapiro and Emde, 1995 p.389), and if it commences to create standardized scientific theories that are resistant to unconscious influence, a development of this order could become a possibility. Like personal analysis itself, at this point in time, self analysis as a treatment and investigative approach is suffering from its loyalty to unscientific formulative methods that are incapable of objectively dissecting the structures and processes of identified symptom material. Use of the favored "Free-Floating-Attention" method, for example, does not allow analysts to exclude the influence of derivatives from the unconscious while formulations are being developed, and while this technique poses difficulties for *patient* analyses it must present the clinician with a multiplicity of problems when used for *self* analysis. Selves that are forever managing areas of unintegrated "drive" life by the fear-primed maintenance of defenses that include repressions, cannot be expected to accurately read their own defense systems if the systems themselves are permitted to participate in the readings. Their efforts must be destined from the start to meet brick walls of exertion from anxious and defending self elements that manoeuvre them into defense-reinforcements masking as conflict resolutions. In particular, the *motivators* of

defenses must creep (or even run) into the self's attempts to locate its symptom surfaces and systematically begin its work, while, at the same time the *defenses* themselves keep already-established, circuitous routes of partial drive discharge (that are characteristic of symptom activity) firmly in their places.

Without the creation of consciously-applicable, cognitive approaches to the analysis of symptoms in others and self, a development that is strongly resisted by members of the profession (e.g. Cooper, in Shapiro and Emde, 1995 p.389), it is difficult to think that those who pursue self discovery by self-analytic means will succeed in reaching into the bedrock regions where the geneses of their conflicts are to be found. It is also impossible to think that, without the introduction of scientific methods into theory development, current self-analytic approaches will ever become reliably effective instruments of psychoanalytic investigation. If available methods continue to be the dubious tools on the research-methodology shelf that they are at present, much dust is likely to settle over them.

In the light of these considerations, then, and from the standpoint of the psychoanalytic literature on self analysis in general, where does James Barron's book best find its place? What does it tell the analytic discipline about the current state of development of self-analytic methods? How helpful will it be to those who would probe more deeply into symptoms than their personal analyses took them? How much will it contribute to individual analysts and a would-be analytic science that could usefully explore the questions of why no personal analysis is ever complete and what remains? How far will it go in helping interested researchers redress the situation of "limited possibility" that current technical theories impose upon the quest to reach and eradicate symptom roots for good?

The Book

This book, in being the only one on this important subject to have been published, deserves commendation on the basis of its conception alone and before its contents have even been examined. It highlights this fascinating field of study and makes it a more officially recognized topic than has been the case to date. While there have been *some* journal reports of self-analytic endeavours published over the course of the past thirty-five years, they have been few and far between. The analytic discipline has never mounted a continuous, progressive effort to explore, discover, create, share and expand in the area of self-analytic methodology, and Barron's inspired effort has the potential to help set such an estimable project in motion.

The book itself consists of eleven papers that describe aspects of individual self analytic experiences by (mostly) practising psychoanalysts - one on the development of the capacity for self analysis, one on what has been called Samuel Beckett's "creative self analysis", and another on Freud's self analysis. The papers are divided into five loose groups, each of them preceded by an overview and commentary provided by the editor. They are presented in the following sequence.

Virginia Demos discusses positive infant-developmental experiences that lead to the capacity for self observation and inquiry. She sees the therapist as an enabler during the patient's search for lost self parts and draws parallels between the elements of effective parenting and those of the therapeutic endeavour. *Ricardo Bernardi and Beatrice de León* point to the many types of assumption that therapists bring to their treatment role. They regard their emotional roots to be essentially unreachable and advocate their regular study. *Alfred Margulies* observes analyst dreams that have manifest contents with similarities to those of patient dreams that preceded them. He considers hypotheses that might explain the implied connection and expresses continuing puzzlement over the phenomenon. *James McLaughlin* and then *Henry Smith* address the role of (often difficult) clinical situations as stimuli for self analysis. *Ernest Wolf* offers segments of the analysis of a taboo. *John Gedo* speaks of rare occasions of self analytic process that were set in motion without conscious volition and proved to be relatively effective. *Robert Gardiner* calls self analysis an "art", speaks of his personal experience with the procedure as "inefficient" and relatively unproductive, then cites the "fun" that it provides as its justification. *Rivka Eiffermann* describes how transferences from internal objects attached to audiences when she reported on self-analytic work, and how the analysis of the "audience" effects furthered that work. *Adrienne Harris* and *Therese Ragen* describe the use of mutual supervisory sessions for the exploration of countertransferences and self edification. *Warren Poland* speaks of the supportive and interpretive roles that others play in self analysis. *Stephen Sonnenberg* discusses resistance to self analysis and finds it "formidable". *Didier Anzieu* describes what he considers to be five stages of an intense and sustained self analysis, using experiences of the writer, Samuel Beckett, as example. *Martine Lussier* ends the volume with a discussion of Freud's self analysis and its limitations.

When examined in the light of the questions posed at the start of this review, the various papers that have been offered prove to be quite limited in terms of answers. If they are addressed with the query about the current state of "method" research in mind, this collection of essays portrays an overall

picture in which analysts appear to fall into individual self-analytic techniques, and methods are as numerous as are those who practice them. And if the reader seeks to learn how to probe more deeply into persisting symptoms, there is little description of agreed-upon approaches that produce complete symptom resolutions that last. In fact, most of the authors are pessimistic about such a possibility. They repeat the common psychoanalytic refrain that understanding the self is a “life-long” task (i.e. that no analysis is, or *ever can be complete*) (e.g. Demos p.26, Bernardi/de León p.37, Sonnenberg, p.241, Anzieu, p.275).

There are also more general problems that plague this book. One of them is a difficulty that it shares with written accounts of analytic thinking at large. It is an unfortunate habit that infects and diminishes the analytic profession's attempts at discovery, and in this case it interferes with the possibility of lifting self analysis to the status of a reliable research tool, an instrument capable of taking theory to new horizons. It is the problem of the “*unsupported categorical statement*”. It is the generalization from speculation and personal experience without scientific (or sometimes any) attempts at proof, and it is the enemy of scientific psychoanalytic advance. Barron (p.3) provides an example of it when he says that loss and mourning are inevitable aspects of the self-analytic process. Demos (p.26) also illustrates it when she says (without a survey) that no two people carry out self analysis in the same way. Bernardi and de Leon (p.36) evince it, as well, when they claim that all analysts insert their own personal equations between what they listen to and what they interpret.

Another problem that intrudes its way into the book's potential, is the tendency for analysts to abandon some of their own technical theoretical beliefs when they turn to studies of themselves. For example, there is very little sign of the identification and delineation of “symptoms” as the starting points for the self-analytic efforts that have been reported. Yet that is where patient analyses begin, and it is a logical place from which to embark upon a journey into internal conflicts. A still further problem is a trend to cite and pass over striking observations that could be regarded as vital to analytic research, observations that one would like to see enlarged and explored. Stephen Mitchell, for example, in his forward to the book (p.xvii), comments that he rarely, if ever, applies the tools that he uses for patient analyses to neurotic symptom material in himself. One would like to be taken on a depth trip to why.

Goals reached and futures suggested

In this reviewer's opinion, this book's chief strengths are threefold. For one, as earlier stated, it has brought self analysis into the limelight of analytic curiosity. For a second, it has brought some students and practitioners of the self-analytic enterprise together. For a third, it has provided the starting place for a valuable critical process of discussion and investigation among analytic theoreticians.

With respect to this last point, it is impossible in this brief report to speak to all, or even many, of the issues that could be selected for fruitful critique, but two will be mentioned by way of example.

In the first of these, Demos speaks of the parallel between the parent's role in regulating the infant's affect, and the analyst's concern with the timing of interpretations. But would the so-called technical theoretical issue of "timing" not be better viewed as a problem resulting from the near-complete absence of a scientific psychoanalytic theory of "surfaces and layers"? The few papers on this subject (Levy, S. and Inderbitzin, L, 1990; Paniagua, C., 1995) and a recent panel (American Psychoanalytic Association, 1993) that have explored it, show that almost nothing of agreed-upon substance is known about it. And such is the current state of the subject in spite of the fact that the technical maxim advising clinicians to "work from surface to depth" has been floating about the analytic world for years.

In the second example, Bernardi and de Leon provide an illustration in which the analyst's attention is "caught" by the second of three patient dreams. The selected dream is then formulated from the manifest content. But would these actions on the part of the clinician not be more usefully regarded as symptomatic behaviours to be addressed by self analysis? It can readily be said that they *do* cut across some of the sounder elements of accepted technical theory.

Summary

This publication is recommended as a critical read to that breed of curious analytic therapists who persist in their attempts to enter into self regions never before travelled. Although they may be stymied in their searches and frustrated by their methods, it is this reviewer's hope that they will be stimulated to identify themselves and form a happy band of explorers who find it *"dull ... to pause, to make an end, to rust unburnished, not to shine in use, as though to breathe were life!"* (Tennyson's *Ulysses*, 1842).

References

Barron J., 1993. *Self Analysis: Critical Inquiries, Personal Visions*. The Analytic Press, New Jersey

Levy, S. and Inderbitzin, L. 1990. The analytic surface and the theory of technique. *Journal of the American Psychoanalytic Association*, Vol. 38, #2, p.371-392

Panel on analytic surface. *Journal of the American Psychoanalytic Association* (1993, p.179-190)

Paniagua, C. 1995. Common Ground, uncommon methods. *International Journal of Psycho-Analysis*, Vol. 76. Part 2, p.357-372.

Shapiro, T. and Emde, R., 1995. Research in Psychoanalysis: Process, Development, Outcome. International Universities Press, Madison, Connecticut.

Trosman, H., 1988. (Editor) The Annual of Psychoanalysis A Publication of the Chicago Institute for Psychoanalysis, Vol. XVI. International Universities press, Inc., Madison Connecticut.