

What Do Candidates Need to Learn?  
December 1, 2007  
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The question I wish to address is not simply what ought to be included in a psychoanalytic curriculum, but what is the effect on the candidate of the indeterminate nature of psychoanalysis? In other words, when we choose to pursue an education in a thing called psychoanalysis, what are we studying?

(Davidman, 2007, p. 77)

In this brief paper I describe some ways that I think our relativistic, constructivist, inter-subjective climate has affected psychoanalytic training. As a result of some misapplications of these concepts, what we offer candidates provides an insufficient basis for their development of professional proficiency, security, and a strong, sustaining sense of purpose. After describing what I see as some of the consequences of this situation, I close with a series of suggestions for changes in how we prepare candidates for a psychoanalytic career.

#### Has the Pendulum Swung Too Far?

Differing with some of the implications of Hoffman's constructivist views, Maroda (1999, p. 162) observed that, "It seems to be too much of a pendulum swing in the opposite direction of the analyst being all-knowing." I agree with her when she goes on to conclude that "What is philosophically interesting and high-minded may not be what is clinically useful, or even doable." Our candidates are usually avidly seeking what might be clinically useful and doable. If their training and, most especially, its earliest stages, primarily focus on what can not be known, how will they bring sufficient confidence and conviction to the first treatments they conduct as analysts? How can we expect them to assume the awesome responsibility of affecting other lives in moment-by-moment, intensely complicated judgment calls?

When I was an undergraduate, I participated in a program that allowed us to live out some students' favorite dream. We were not required to attend any classes. But we paid for this privilege by designing all our own courses, hiring tutors, writing and presenting papers, and other tasks. Many of the program's more valuable lessons were not apparent to me at the time, but struck me much later as they became useful to me. The one I find relevant in this context was that studying on my own worked beautifully for many theoretical courses, but failed miserably as a method of learning beginning languages. With languages, I needed to learn the basic skills in the traditional way first.

I suggest that something similar applies to the education of an analyst. The subjective nature of our work is meaningful only after the candidate has confidence that he has learned valuable, marketable, clinically applicable skills. In other words, first he has to hear the music of this new language, drink it in, feel its rhythms, become it. Once it is his own he can hear about the inherently subjective, limited nature of what the analyst can know without becoming overly disillusioned about the profession. Of course, I am not suggesting candidates should shut their ears when constructivist colleagues present at

conferences. But, as I will elaborate shortly, I do believe that their training should start with the development of certain basic skills, not unlike the scales the budding pianist masters, or the first positions in ballet. All learning can be understood as the appreciation of patterns. Analysis, too, depends on familiarity with certain basic patterns of character, defense, and responses to the treatment context. Formulating these patterns can enhance the beginning analyst's security and conviction that she is not fraudulently posing as an analyst, or pretending to acquire increasing expertise. With these strengths in place she can later appreciate the analyst's subjectivity without feeling self-negating despair.

I believe that in an effort to rid our training programs of the excessive authoritarianism and logical positivism of previous eras some have purged them of subjects that used to be considered essential to the education of an analyst. To avoid seeming old fashioned we expunged courses on specific diagnostic categories, and played down anything that smacks of character issues that existed before the analytic dyad was co-created. This has truncated the candidate's feeling of having gained anything solid that is demonstrably clinically applicable. It has also attenuated the candidate's pride in his profession, and belief in its purpose and inherent value. How can we cultivate a passionate desire to treat what can't be named?

Afraid to appear politically incorrect, we refrain from emphasizing ways the analyst's contribution to treatment differs substantively from the patient's. Everything is a matter of perspective, and each participant has an unconscious. Hoffman (1991) sums up the analyst's position by stating (p. 77) that "what the analyst seems to understand about his or her own experience and behavior as well as the patient's is always suspect, always susceptible to the vicissitudes of the analyst's own resistance, and always prone to being superseded by another point of view that may emerge." Until the candidate has a firm sense of what an analyst can provide, I believe that this emphasis on our limitations can deliver him to unending professional self-doubt or cynicism about analysis's worth and future. Put another way, if all we provided was a very limited form of love for our fee, what would that make us?

Taking this one step further, if we really believe there is little the analyst objectively knows about the patient, what is still worth teaching the candidate? Should analytic training, much like some forms of religious indoctrination, emphasize the development of profound humility? Should our courses be geared toward helping the budding analyst become aware of how little she knows, while still remaining capable of conducting treatment? Can this brand of chutzpah be taught? What would the curriculum look like? What would be the criteria for deeming a candidate ready to graduate? Should the certificate mention that the successful newly minted analyst has attained the capacity to admit how scanty is his basis for clinical judgment calls? How should we select our programs' teachers and training analysts? What qualities indicate that someone will be able to facilitate the candidate's development of comfort with how little she can claim to know?

Just as patients want to believe their analysts know something more definite than they do, so candidates want to believe they are accruing understanding they can rely on in the confusion of clinical exchanges. It is hard to sell people therapeutic or educational processes that eschew claims of knowing something worth transmitting. When I was in charge of a clinic staffed by very inexperienced doctoral student clinicians, a sincere

young man preparing to conduct his first therapy session knocked on my door to say, “I have just one question. When the patient arrives, what do I do?” Like that young man, candidates want to feel they increasingly know something about how to do their work. I think supervisors often imply that the candidate’s desire to feel prepared is a sign she is hopelessly controlling, or an obsessive perfectionist, or wedded to logical positivism, or grandiose. But we wouldn’t say to the novice in any other field that there is something wrong with their desire to feel they know what they are doing. On the contrary, we probably would find this praiseworthy in a medical student. Are we claiming that psychoanalysis is of a different ilk from all other subject matter, so the initiate’s job is to embrace uncertainty rather than try to dispel it? How is the candidate to attain a sense of competence if we tell him that everything that can be said about his patient is only a subjective perspective? Will candidates be content to spend at least four years of their lives devoted to a training process that makes such modest claims?

#### Machismo Exhibitionism in Analytic Training

Despite these modest claims about treatment, when we don our hats as supervisors and teachers, a mantle of authority seems necessary to complete the outfit. Where is our modesty about what we can know when training veers into a machismo competitive sport? I mention a few examples, hoping they will stimulate discussion.

1. As already mentioned, the climate in training can suggest that, as an analyst, needing a sense of what you are doing reveals you to be obsessive, uptight, cowardly, geeky, neurotic, and hopelessly unanalyzed.

2. Subtle communication, particularly in supervision, can convey that trying to help patients with their lives is inferior to doing something that can be called “real analysis.” Once again, this limitation in the analyst results from unanalyzed flaws, perhaps including being a woman, a mother, a social worker or some horrendous combination of these inferior statuses. The vast evidence of Freud’s interest in helping his patients with their lives does not seem to interfere in this form of analytic machismo.

3. The analytic climate spawns other forms of macho name calling. As an example, when candidates or graduates ask how to build a practice they are often told some form of the Nike approach- just do it, and if you can’t it is evidence of your fundamental inadequacy. The subtle implication is that if you have a flagging patient load you don’t have the talent it takes to get it up. The problem might be frequency related, that is, too many of your patients don’t come regularly enough. Or, perhaps, after only one encounter with you, they don’t come at all.

4. Elitist attitudes still can pervade analytic training. This can totally confuse the candidate. At one and the same time he is learning how little we can know and how much better an analyst is than a mere therapist. A real analyst easily throws his jargon around and would never be caught engaging in nurturing corrective emotional experiences. He can sharply confront the defenses of any patient or candidate this side of the Mississippi. Tact is for sissies. How tough the candidate is when confronted is a measure of whether they have the right stuff to be a real analyst. Can they take it?

5. The candidate should want to reveal herself. For training to be effective, the candidate must be willing to endure pain, shame, and anxiety. No pain, no gain. The focus should be on areas of difficulty, rather than strengths (in candidates in training, as well as in patients in analysis).

6. To become a real analyst, the candidate should privilege what is “deep” over what appears on the surface. Educative aspects of the work are superficial, though they may be therapeutic.

7. The real analyst values work with less disturbed patients over work with the more profoundly disturbed since, with these patients, we can really only do psychotherapy. That is, we have to help them too much to profoundly change them. To me this suggests the split between inferior helpfulness and superior analysis mentioned earlier.

When the message about how little we can really know is conveyed in the context of a macho climate, the result can come across like a song whose melody doesn’t fit its words. In this atmosphere, it is easy for candidates to feel like frauds. Some approach graduation with a mixture of relief and insecurity. While the faculty appears confident, they, themselves ponder why they still feel so confused. They wonder, “Did others in my class learn anything solid? Am I the only one who didn’t? Will They find out I am really only a therapist, at best?” In the concluding section I ask how our training and, more generally, our profession can serve us better.

#### Raiding the Inarticulate: Some Suggestions

.....Trying to learn to use words, and every attempt  
Is a wholly new start, and a different kind of failure  
Because one has only learnt to get the better of words  
For the thing one no longer has to say, or the way in which  
One is no longer disposed to say it. And so each venture  
Is a new beginning, a raid on the inarticulate  
With shabby equipment always deteriorating  
In the general mess of imprecision of feeling,  
Undisciplined squads of emotion. (T. S. Eliot, “East Coker,” pp. 30-31)

We train people to conduct raids on the inarticulate. As Eliot writes, with astonishing precision, every attempt is a wholly new start, and a different kind of failure, and, as we all know, from these failures the analyst tries to fashion a new raid. The “shabby equipment” Eliot refers to, those undisciplined squads of emotion, are the tools of the analytic trade. Over and over the analyst gropes for the words to express what can never be captured in words. And, though our feelings guide us, though we give it everything we’ve got, we fall on our faces, only to dust ourselves off, reach inside, and gather the conviction, the stamina, the sheer determination to try again.

How can we prepare candidates for a lifetime of raiding the inarticulate? The suggestions that follow are meant to stimulate our further discussion.

1. Our field has been remiss in the study of our own burnout which, I believe, takes many more forms than we have been willing to recognize. Burnout can speak softly, in words that masquerade as healthy skepticism. According to its critics, psychoanalysis has had enough near death experiences to occupy an army of occultists. Rather than to dither about whether psychoanalysis is dying, let’s occupy our candidates, and ourselves, in asking how (not whether) its insights can be better applied to today’s problems.
2. The equipment for conducting raids on the inarticulate must include passionate belief that it is worth the effort it takes. We will not inspire this passion unless we have it ourselves. If we have contempt for helping people live their lives, if we divorce ourselves

from the language of our poets, our grandmothers, and our friends in other disciplines, we cut ourselves off from vital sources of inspiration. Any form of splitting intellect from emotion divides us against ourselves. By creating hierarchies and idealizing and denigrating good vs. bad, real analyst vs. lowly therapist, what can vs. what can't be articulated, we truncate the equipment we bring along on our raids, and the equipment we teach candidates to bring.

3. I think the equipment we teach should include more emphasis on old fashioned character patterns, such as the ways of bearing the human condition that have been called paranoid, schizoid, obsessive, and hysteric. Although they have fallen out of fashion, they served a purpose. Used as shorthand and not as pejorative, they facilitated candidates' observational powers. Personally, I find it clinically useful to be able to sense, usually from the patient's word choices, when we are in paranoid territory. I am aware of the limitations of any spatial metaphor, but upon hearing the haunted language of paranoid anxiety I know to bring certain of my teachers along with me on my next raid. I know that Sullivan is likely to provide less shabby equipment for this particular venture than I might find on my own. But I know that I will most especially need clarity about my feelings and motives, since this patient will test my sense of having good intentions. Thus, it might be a good idea to check this particular part of my equipment before I go out on the next raid.

4. I think one of the best ways to teach is to become as transparent as possible. In supervision I try to give voice to the freedom to rove around the material, pausing at a childhood memory while, at the same time, eying the terrain in the transference-countertransference field. I might next find myself attracted to something floating, just on the periphery of my awareness. Is it a wisp of a near forgotten dream? Could it help equip my supervisee for her next raid on the inarticulate?

The painter, Kandinsky, once said that each brush stroke should come from inner necessity. I hear that as saying that something inside him pulls him toward painting one particular stroke, rather than any other. Following this pull, Kandinsky could feel conviction. I am not suggesting that we should go back to the bad old days, when our absolute adherence to our theories allowed us to ignore whatever didn't fit them. Forcing patients into Procrustean beds, we pressured them to lop off any bits that didn't conform. This resulted in some shameful, harmful treatments. I greatly value the changes in our field that affirm a respectful consideration of the multiplicity of human perspectives. But in order to inspire passionate commitment to psychoanalysis we need more than that. To listen to the pull of inner necessity, I have to profoundly believe in what I am doing, and in my capacity to do it. If I had had the chance to challenge Kandinsky I might have asked him how he lived with the knowledge that some might say his brush stroke would have worked better in blue. I imagine him staring in speechless wonder at someone so little acquainted with the creative process. "Don't you understand," my fantasy Kandinsky asks, "that I have spent many years learning my way around a canvas, honing basic skills to such a degree that when I feel the pull of inner necessity, I trust it, I believe in it, and I follow it with my whole heart?"

References

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