Reflections on *In Treatment*

by

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HBO’s In Treatment has polarized analysts and therapists like no other television series in recent memory. Wherever I traveled during February and March, therapists either loved it or hated it. For those of you who don’t own a television or can’t afford HBO, let me orient you to the controversy. In Treatment started out as Be ‘Tipul) was the most popular television series in the history of the country of Israel. HBO picked it up and transported it across the Atlantic with its creator, Hagai Levy, as one of the executive producers. The HBO director, and writer, Rodrigo Garcia, had it translated more or less intact from the Israeli version with some minor changes in culture, location, and dialogue.

Dr. Paul Weston (Gabriel Byrne) is a fiftyish psychotherapist who received some sort of psychoanalytic training in his past and practices some variation of psychodynamic therapy. He appeared on the show Monday through Friday from 9:30 - 10:00 p.m. Eastern time. On Monday evenings he saw Laura (Melissa George), a wildly hysterical patient with a rip-roaring erotized transference. On Tuesday evenings he treated Alex (Blair Underwood), a Navy pilot with narcissistic personality disorder and a deep sense of guilt about having inadvertently killed innocent people in the Iraq war. On Wednesday evenings Paul saw Sophie (Mia Wasikowska), a self-destructive adolescent gymnast. Thursday nights he shifted gears to see a uniquely incompatible married couple, Jake (Josh Charles) and Amy (Embeth Davidtz). On Friday evening, the most perplexing half-hour in the week, Paul visited Dr. Gina Toll (Dianne Wiest)
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for some amalgam of supervision, consultation, individual therapy, marital therapy, and catching-up-on-old-times chit-chat.

Like their Israeli counterparts, the HBO team had the courage to keep the camera in Dr. Weston’s office for the full 30 minutes of each episode for most of the series. Those who were expecting a documentary on how to conduct effective dynamic psychotherapy were disappointed. Those who were looking for an absorbing and hypnotic melodrama got hooked.

It’s hard to sustain a regular audience five nights a week with two talking heads on screen. Somehow the writers managed to do it. Sex helped. Laura wanted to sleep with Paul. Paul wanted to sleep with Laura. Alex did sleep with Laura, but worried that he may be gay. Sophie slept with her gymnastics coach. Amy had sex with her boss, and told Jake about it during a couple’s therapy session. Paul’s wife Kate cheated on him with a man she met at the gym, and they (Paul and Kate) saw Gina to discuss it. The show manages to be steamy without ever showing a bedroom scene. When one compares it to the previous HBO series, Tell Me That You Love Me, one comes to the inescapable conclusion that talking about sex can be more exciting than watching it.

Paul’s psychotherapeutic technique ran the gamut from reasonably effective to wildly boundaryless. However, whether you loved or hated the show, one aspect of the series is unmistakable. For the nine weeks of the show, every
night for a half hour American television audiences were exposed to people who behaved in ways that they didn’t understand. Critics varied in their opinions, but no one complained about the fact that unconscious motivation was center stage in each episode. Could it be that audiences are now more accepting of the fundamental Freudian principle that we are consciously confused and unconsciously controlled? If so, it’s about time.

The benefits of *In Treatment* for the profession should not be overlooked. A survey in Israel showed that more people were going to therapy and analysis as the result of the series. In the United States, patients frequently talked with their own therapist about what happened in Dr. Weston’s office, opening up new areas of exploration that had previously been closed to inquiry. The creators of the series have provided marvelous vignettes for training purposes—particularly instructive regarding what *not* to do. Katie Couric on CBS, *The New York Times*, and other media voices discussed transference and countertransference in a respectful way that has been rare in the media.

I have heard many colleagues express concern that Paul’s boundary violations with Laura will convey an impression to television audiences that therapists may seek to gratify their emotional and sexual needs with patients. In fact, this form of countertransference enactment is indeed an occupational hazard that happens with disconcerting frequency. The writers have depicted the progression of the boundary transgressions in a way that resembles what
happens in the real world—a lovesick therapist, whose wife is involved with another man, finds himself desperately needy of the idealized love offered by a patient. He ignores the aggression in himself and the patient, confuses “true love” with transference and countertransference, and frantically tries to fend off his despair by erotizing the clinical situation and employing manic defenses to help him avoid contemplating the consequences of his actions. On the other hand, the consultation he receives from Gina is appalling. But after all, it’s not real life. It’s HBO.