

## Psychoanalysis and Globalization

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While the title of this conference is **Psychoanalysis in the Modernizing Society**, the subtext must be Psychoanalysis and Globalization and, as in most contexts, the term globalization brings with it both excitement and optimism and anxiety and pessimism. In what follows I will discuss both the technology that enables globalization and then the need for bilateralism in all endeavors under that rubric.

Until just recently China has had a kind of love affair with things Western. Recent economic developments have somewhat tarnished the image of the 'beloved'. China's love affair with the West includes its extraordinary interest in psychoanalysis. Although psychoanalysis has had a long history in China and a place in India, Japan and other Eastern nations, nowhere has there been the kind of interest that there is in China now. In 1921, Zhang Shizao received the following letter from Freud

"Most esteemed Professor,

In whatever way you wish to carry out your intention, ... by paving the way for the development of psychoanalysis in ... China... I will be extremely pleased...

Very respectfully,

Yours  
Freud"<sup>i</sup>

Many of us are following Freud's advice. For the past 20 years the IPA has had a presence in China, teaching psychotherapy and very recently admitting some analytic candidates. The Jungians have had a long presence in Shanghai and other cities, the Lacanians in Chengdu, and other brands of psychoanalysis

elsewhere. I am speaking to you today as the president of CAPA, the China American Psychoanalytic Alliance. We are a young organization, seven years old, but a large one. We are an alliance of Chinese students (about 150) and more than 200 psychoanalysts and analytic psychotherapists (mainly Americans, a few Australians, Germans, South Americans and one Israeli). At this moment we have two missions:

1. To train Chinese mental health professionals in psychoanalytic psychotherapy and
2. To analyze as many mental health professionals as we can.

Currently 40 Chinese mental health professionals are in analysis with American analysts (3 to 5 sessions/week) and 14 are in psychotherapy. We have long waiting lists.

The West has seen itself as a kind of benevolent suitor bearing the gift of psychoanalysis to China. This is certainly better than a gunboat bringing opium up the Yangtze. More recently Chinese colleagues have begun to make their own contributions, but these contributions are known mainly in China. It is my impression that Western journals have not published much, if anything, by Chinese scholars. Chinese is yet young in psychoanalysis. But China's long history of interest (both Confucian and Buddhist) in the workings of the mind position China to make major contributions to the world of psychoanalysis and to enrich our view of the mind. But, alas, like most things globalized, it is not clear that the West, at this time, is deeply interested in the changes that this new psychoanalytic endeavor may bring,

Generally, leaders of organizations reach their esteemed positions as a result of experience and maturity (other words for age). Age encompasses wisdom but also resistance to change. Speaking of love affairs, many analysts chose their profession on the basis of a love affair with psychoanalysis—like Greenacre’s love affair with the world<sup>ii</sup>. And, like most lovers, we don’t want our beloveds to take a serious new lover and then change. Most often our attitude has been “We want you to love and admire our beloved, but we are not so sure we want our beloved to love you.” Several young Chinese therapists have said to me apologetically and even fearfully, “We hope this won’t upset you and we are most grateful for all that you are teaching us, but eventually China will have to develop its own kind of psychoanalysis.” The idea that psychoanalysis itself may be changed by contact with another culture is very frightening to many Western analysts.

Another issue—psychoanalysis, since its earliest days, has been famous—or infamous-- for its internecine warfare. Freud and Adler, Freud and Jung, Freud and Karen Horney all waged bitter battles. The children and grandchildren of the original combatants still have trouble speaking civilly to each other, let alone collaborating. In Europe battles still wage between Lacanians and others. The English have been able to find a road to coexistence between Kleinians and the followers of Anna Freud. The multi-theoretical nature of this congress is a good sign for psychoanalysis in China ---and in the world as well. While some European theoretical struggles continued in America, most American internecine warfare takes different forms: for example, battles between

psychiatrists and psychologists. This long war was resolved only by a costly lawsuit, the scars of which are still visible twenty years later. Only recently, has APsaA begun to accept as members, trained analysts from the five IPA institutes in America. In America--- a bitter war continues to be fought for more than 25 years about who is qualified to analyze future analysts. APsaA although part of the IPA, but unlike it, requires specific examinations and other vetting, both locally and nationally, before some one can become a Training Analyst.

Another of my Chinese colleagues told me they were concerned that we would export our wars to China and wage them here. He said, "You must know that we are really not interested in them". I think this is true of China, but the ones waging these wars may not be so willing to declare a truce, peaceful co-existence and even ---collaboration. This is true not only of people of different theoretical persuasions, but also of people with similar theoretical views, but a desire to be preeminent in this new psychoanalytic arena, China. Freud spoke of the narcissism of small differences and that is what we are dealing with here.

### **Teaching In China**

We in the West have a long history of attempting to impose our values on others. China, Beware!! Historically, dating from Confucian times, Chinese people have had great respect for authority. A danger for future development, both in China and in the rest of the world, is that the analysts and teachers who come here will be treated with too much respect. There is one Western tradition more honored in academia than in psychoanalysis: in academia students are encouraged to question authority and received wisdom as means of advancing

knowledge. I have surveyed the CAPA members doing the 40 analyses. It is difficult, at least initially, for Chinese analysts to question or disagree with their analysts. This occurs in the West too, but not to such a great extent. Luckily, a well-trained analyst knows how to analyze this problem. Similarly, in our classes, which are run as seminars, Chinese students, accustomed to a lecture system, have difficulty discussing and disagreeing, but after a while, they flourish.

### **Technology: Promises Pitfalls And Phobias**

Globalization, in all arenas, relies on the new modes of communication that have made the world a much smaller place. China is a huge country, the most populous in the world and soon to be among the best educated. China has 1900 institutions of higher education. I am told a new university opens each week. 19 million students are currently enrolled<sup>iii</sup>. In the United States there are 17.5 million students enrolled in post secondary education. This number includes students at small religious colleges and other very small private institutions. Because the Chinese figure includes predominantly people at large universities, the figures are even more disparate. There will soon be, there may even be now, a Chinese middle class population greater than that of the U.S. It is of course these university graduates, middle class people, who will both need and want analysis and analytic psychotherapy. But, we must not forget China's huge rural population and the rural workers who have migrated to the larger cities. **M. Phillips and J. Zhang et al in** A recent report in *The Lancet*<sup>iv</sup> states that in China the ... "1-month prevalence of any mental disorder was 17.5%". Many of these

people may neither want nor be appropriate for analysis or analytic psychotherapy, but the mental health professionals trained in these disciplines will be the teachers of the people who do treat them. Many recent studies show that patients treated with both psychotherapy and drugs do far better than people treated with drugs alone. The problem of course is how to train sufficient Chinese analysts and analytic psychotherapists to help the huge and growing middle class population and also to help the rural and migrant populations.

The number of people who have funds, even with government help, to be trained abroad for the six to eight years that full analytic training takes is miniscule. Even the number of people who can be trained abroad for 3-5 years to do psychoanalytic psychotherapy is also tiny. Both kinds of training must take place in China, first with foreign teachers and then with Chinese teachers. This process has already begun.

### **Training and Technology**

Thus training is a most important arena where new technology comes into play. I refer to Skype and other video-conferencing technology. Skype has the advantage of being free. CAPA has just begun the second year of its two-year training program. We have second year classes at five sites in China and first year classes at five other sites. Over 110 students attend classes four hours a week for thirty weeks a year. Each student has one session of individual supervision each week. These training programs are similar to psychoanalytic psychotherapy programs offered by American psychoanalytic institutes and,

indeed, one first and now one second year course is taught by the Washington Psychoanalytic Center an approved training institute of the American Psychoanalytic Association. We have more applicants than we can teach. Clearly, this kind of teaching is the way over the next ten years to train large numbers of people as psychoanalytic psychotherapists. CAPA will probably offer third and fourth year classes to selected students. Eventually psychoanalytic training could be pursued in this fashion—but most of our students have not had enough experience with long-term psychoanalytic psychotherapy to even consider that at this time.

The pitfalls of training are few. While most people would like to be in the same room with their teachers, the technology is such that the illusion of being present is there. After a year of teaching, many CAPA teachers are most avid to visit China and teach here. Twenty of them are coming with me next month. They will visit the five cities where we have training programs. Other professions have utilized video conferencing technology for training for many years. In America, when new psychoanalytic institutes are being formed in areas geographically distant from the parent institute, analytic training via video conferencing has a long history. Many years ago, people at the Menninger Foundation flew to Chicago on weekends where they had their classes, supervisions and also their analyses: one session Friday evening, one Saturday morning, one Saturday evening and one Sunday morning before flying home. They did this for the five to seven years the training took. While many excellent analysts were trained this way, the consensus was, I believe, that spreading out

the 4 or 5 weekly sessions over 4 or 5 days works far better than compressing them in a weekend. Recent neuroscience research emphasizes the importance for processing events that goes on during sleep. Skype enables distance training and also distance analyses. Most recently, after the hurricane in New Orleans, when analytic candidates and teachers were scattered, training and analysis continued. Disasters lead to change or as President Obama said we can "discover great opportunity in the midst of great crisis."<sup>v</sup> In Sichuan province after the earthquake, CAPA organized training for perhaps two thousand or more mental health workers and volunteers using these new technologies. Training and supervision via Skype is continuing in the Disaster Area.

### **Treatment and Technology**

Telephone analysis has a long history. I conducted one myself forty years ago. The patient was a classical musician who was on tour for much of the year.. In much of the world, (and now particularly in China) the mobility of the middle class is legendary. Increasingly in America, analyses are very often conducted by telephone. Skype is of course twice as good as the telephone: first, because there is visual contact and second because, unlike telephones it is totally secure. (We have recently been hearing a lot about the American government tapping phones.) Often the room is set up just as it would be in an office analysis. The patient enters the room, greets the analyst, arranges the computer on a table behind the couch, lies down on the couch and begins. The analyst sees top of the patient's head and the patient only sees the analyst if he choose to turn

around. The analyst then wonders why the patient chose that moment to look at him.

At present, most analyses that use technology take place in situations where the analyst and the patient have met and perhaps begun treatment in the same room before beginning the technologically assisted treatment. When CAPA began doing psychotherapy training and psychoanalysis on Skype, many American analysts had never heard of Skype. I was one such person. Many were fearful of the technology, and of technology in general. They did not believe that an analysis conducted on Skype could be a real analysis. We know that what a real analysis is has been debated for more than 100 years. Must it be conducted 3, 4 or 5 times a week? The IPA accepts three times a week; APsA requires four or five times a week. Must a psychiatrist conduct the analysis or will a psychologist do? Must it be conducted by a training analyst (APsA regulations) or can someone be appointed a TA for the duration of a patient's analysis as is now happening with the IPA analyst in Beijing and also in Chicago? And now a new question—can analysis be conducted on Skype or must it be conducted in the flesh so to speak? And if a non-technologically assisted introductory period in the same room is necessary, how long must this period be? Many of the people doing Skype analyses under CAPA auspices have come to China and seen their patients in person. BUT opportunity is arising for a new type of warfare between the proponents of Skype analyses and the proponents of analyses that begin in person. In the past months, two Americans, doing Skype analyses presented their (suitably disguised) clinical and process material: one at a large meeting

and the other to a smaller group of colleagues. Neither analyst mentioned that the patient was in China or that the analysis was being conducted on Skype.

The audiences were shocked when both of these facts were revealed.

Psychoanalysts tend to be very conservative people—although the first generation—Freud and his followers—were in many ways quite radical forward-looking people. And most senior analysts are of course older; change comes hard to us as I mentioned earlier. Older people are generally much less comfortable with technology than younger ones who have grown up with it. I often advise Americans beginning to use Skype to get their grandchildren to help them. So, when considering modernizing societies, we must think not only of China but also of our psychoanalytic societies and their members in the West. I think it is a serious mistake to think of China as a modernizing society and the West as one already modernized. We are **all** modernizing under the impact of technology and globalization.

### **Pitfalls of Cross Cultural Treatment**

I will mention three pitfalls, there are others: Transferential and counter-transferential problems that result from the reduced fee; Curiosity about an alien culture; and the narcissism of generosity. The reduced fee: Our patients and students wonder why we are doing this. So do I.

The reduced fee: We have noted both in training and treatment situations the huge amount of idealization and gratitude felt by our patients and students. CAPA analysts have told me how long it takes and how difficult it is for the

negative transference to become available with their Chinese patients. CAPA asks its students anonymously to evaluate their teachers on a variety of scales. University students in America evaluate their professors at the end of each semester. Compared to American evaluations of teachers, the Chinese evaluations are incredibly laudatory. But several students, whom I know well, have spoken with me privately. Their evaluations are quite different from the ones emailed in. Some part of this disparity results from traditional Chinese respect for elders, and their unfamiliarity and discomfort when asked to criticize teachers. But some part arises from the specific characteristics of the analytic (and teaching) situation. Our Chinese patients are well aware that the fees they pay are much smaller than we would earn in our usual practices. Paying a significant fee to the analyst or teacher helps reduce the patient's burden of gratitude and facilitates exploration of negative transferences. The American idiom would be that paying the analyst "levels the playing field".

In America for many years, there was a debate about whether analyses could be conducted when insurance companies paid the fee. I don't know if the debate was ever resolved. Practicality triumphed and analysts began to accept the insurance payment. But there are other problems that may arise from the very low fee that we would rather not look at. Is the analyst less likely to make up missed sessions, to begin late or end early, more readily terminate the analysis or reduce the number of sessions if the patient proves difficult? We see similar problems with clinic patients in America and have learned to deal with them. We hope that our own analyses and firm superegos will protect both us and our

patients from these dangers, but we must be vigilant.

Curiosity: There is a line from a Christopher Marlowe<sup>vi</sup> play referring to an illicit act, "...but that was in another country..." it begins. We know that our superegos are less stringent when travelling, when in 'other countries.' China is certainly the most 'other' of other countries for most even very well educated Americans. I have been startled by the ignorance and misconceptions of my colleagues about China, too many and too embarrassing to be detailed here. I was startled by some of my own lack of knowledge. Some of this lack is pure ignorance and some, less pure, the result of fantasies and projections. Fantasy and projection is a bilateral enterprise. Our Chinese patients and students have their own fantasies and projections about Americans but we also do about them..

During an analysis, the analyst gains an intimate knowledge of another culture (perhaps for him, a culture seen as "exotic"). We must beware the dangers and seductions of Orientalism.<sup>vii</sup> This curiosity is a kind of prurience, similar to that arising when treating famous people. It is not fair to the patient. The analyst's focus should be on the patient—not on his fascinating culture. The patient or students often collude with the analyst's or teacher's curiosity. His culture is something the student knows about, he can be the teacher, he can "level the playing field." Besides the transference meaning of this collusion, speaking about the 'culture' defends the patient from exploring his own personal history.

Narcissism: Does the analyst feel very proud of his generosity? "He is giving so much." The narcissistic components of generosity present a danger

both for the analyst /teacher and the patient/student. If we are raised on pillars, these pillars are constructed of material dug out from under the other. We raise ourselves on high by lowering them—this is not good for either of us. And, in Kleinian fashion, the patient/student may ultimately envy and hate the benefactor. We envy those who have something we do not have, even when they offer to give it to us—especially when they are so proud of their ability to give.

Language is another aspect of this inequality. Almost all younger Chinese people speak English. The number of Westerners who speak Chinese is very small. (CAPA has four Mandarin speaking therapists and two other are learning.) I am embarrassed to say that my Chinese is limited to “Hello “ and “ Thank you”. Embarrassed because I have not even tried to learn Mandarin. CAPA does all its teaching in English. Before entering our program students are interviewed and their English—among other things-- is evaluated. Some are urged to study English for another year and reapply. Other programs teach in English or in the native language of the teacher and use translators. Many of these translators are also CAPA students, and alas, sometimes their English is not good enough to do translations of complex material. We have worked with a book translated from English into Chinese and then had a reverse translation made. The differences were enormous.

There are psychological aspects to this problem as well. We tend to regard those who do not speak our language well as children, because children do not speak their native tongues well. Perhaps we feel that since we are being so generous in other ways, we need not learn the language of our hosts.

Perhaps we think we are too important to make the effort. We need to look into ourselves about this.

### **Bilateralism**

In order for globalization in any context to function well, both sides of the enterprise must feel that they benefit. In the simplest view of the usual analytic situation, the analyst receives the patient's fee and the patient receives the analyst's interpretations. And so long as the both parties are satisfied with this exchange, the work continues.

So what does the analyst working in China for a reduced fee receive. Maybe the best-case possibility is that the analyst gets something like 'functional pleasure,' the joy of using his skills?

"The ego psychologists have demonstrated the broad significance of Freud's concept of "pleasure in functioning" as well, especially through Hartmann's concept of a primary "conflict-free sphere of the ego" (Freud, 1905b); (Hartmann, 1948), (1956); (Kris, 1952). This concept is closely connected with "functional pleasure," defined as "pleasure in the fact that the exercise of a function is now possible without anxiety" (Fenichel, 1945, p. 45); (cf. Kris, 1952), or, according to Freud, as the pleasure in the active mastery over something passively experienced (Freud, 1920); (cf. Waelder, 1933). The ego psychologists, it should be noted, do not merely describe this pleasure or consider their task complete after offering a circular explanation, but attempt to explain the phenomenon in economic terms as well.<sup>viii</sup>

Many, not all, the Americans conducting analyses in China are very senior people, partially retired. The work with Chinese patients permits them to prolong their working lives and their productivity. Hans Loewald, a famous American psychoanalytic theoretician, said when he was retiring in his mid-eighties, "It is a pity I have to stop just when I was getting good at this."<sup>ix</sup> The same is true of teachers. My husband, a "retired" academic in another field is now teaching at two universities. He is really good at it There may be also some desire to return

something for what they themselves have received. In the Hippocratic oath which physicians take, there is a pledge to teach others in return for the training they themselves received.

“To consider dear to me, as my parents, him who taught me this art; .....(and) to look upon his children as my own brothers, to teach them this art.”<sup>x</sup>

Another more or less innocuous pleasure for the analyst and teacher is the identification with a young culture and young students and patients. I can remember America in the 50's and 60's, half a century ago, when there was the same sort of excitement and interest in psychoanalysis as there is in China now. What a pleasure to be here! ! And back then, there were more people seeking to be analyzed than there were analysts to do the work. Everyone had a long waiting list. Alas, that is not the situation in America now. I do not know the situation in Europe. One thing China could do to equalize the balance of trade is to provide patients. Besides one's own analysis, seminars, and supervisions, what makes one a good analyst is doing analysis. Analytic institutes in America do not have enough patients to train their senior candidates; young analysts cannot find analytic patients. And here, there are more people, mental health professionals, who want analyses than CAPA can possibly treat. These supervised analyses would be a great boon to the profession in China and a great boon to the profession in America.

The worriers are anxious that technology will so alter analysis that it will no longer be “real” analysis. Research is needed to demonstrate that Skype analyses are “as good” as other analyses. CAPA is going to undertake outcome studies on our 40 analytic patients. And since for the most part, we rely on single

case studies for our “proof” in psychoanalysis, five or ten good case reports should be sufficient. We will also be using a statistically validated outcome research protocol used by one APsaA institute. I said earlier that the definition of “real” analysis varies from time to time, theory to theory, place to place etc. This debate has continued since at least 1893, one hundred and sixteen years ago. Freud was walking in the Alps when he encountered Katherina. She was clearly suffering from hysteria. Freud ventured on some interpretations. He later wrote in *Studies on Hysteria* “Was I to make an attempt at an analysis? I could not venture to transplant hypnosis to these altitudes, but perhaps I might succeed with a simple talk.”<sup>xi</sup> And so he did.

So the Alpha and Omega of my talk is Freud. He encouraged the introduction in any way possible of psychoanalysis to China and he found that analysis would flourish everywhere.

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<sup>i</sup> Blowers, G. (1993). Freud's China Connection. *Journal of Multilingual and Multicultural Development*, 14, 4:263-273.

<sup>ii</sup> Greenacre, P. (1957). The Childhood of the Artist—Libidinal Phase Development and Gif... *Psychoanal. St. Child*, 12:47-72. p.57

<sup>iii</sup> NY Times 6/13/09 Page A4

<sup>iv</sup> *The Lancet*. Vol. 373 # 9680. June 13, 2009. Phillips, M., Zhang, J. *et al* “Prevalence, treatment, and associated disability of mental disorders in four provinces in China during 2001—05: an epidemiological survey”

<sup>v</sup> Associated Press March 7, 2009

<sup>vi</sup> Marlowe, C. (1589) “The Jew of Malta”

<sup>vii</sup> Said, E. *Orientalism* (1978) Pantheon Press NY, NY

<sup>viii</sup> Ducey, C., Galinsky, M.D. (1973). The Metapsychology of Pleasure. *J. Amer. Psychoanal. Assn.*, 21:495-525. P.505

<sup>ix</sup> Personal communication

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<sup>x</sup> Hippocrates 4<sup>th</sup> Century BCE

<sup>xi</sup> Freud, S. (1893) *Studies on Hysteria*, SE Vol II, p. 127