The Aesthetic Aspects of Psychoanalysis

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By assaying the aesthetic qualities of psychoanalytic interpretations and the psychoanalytic course (as one would for other aesthetic enterprises, such as drama, fine art, poetry, sculpture), we can evolve criteria for judging psychoanalytic form and content. These criteria shift, I suggest, to some degree just as artistic styles shift to address the existential needs and interests of the cultural era. Despite shifting styles, however, any aesthetic enterprise has enduring criteria that hold across time and even culture in order to judge whether a work is fine, mundane, or trivial.

At one level, criteria are art-form specific: in drama or narrative forms, for instance, we have Aristotle's suggestion of beginning, middle, and end; for visual arts, we have Lomazzo's seven elements of good art. At another level, aesthetic criteria generalize across art forms in at least two ways: first, laypersons judge whether a piece is aesthetically pleasing without necessarily resorting to highly technical, specific criteria; second, we judge whether one art form fits with another: Is there an aesthetic fit between the sound of Beethoven's *Eroica* and its nominal heroic theme; is there a fit between the music of the Bach Double Violin Concerto and the movement of Balanchine's eponymous ballet?

Aesthetics deal “with such notions as the beautiful, the ugly, the sublime, the comic, etc.,... as applicable to the fine arts, with a view to establishing the meaning and validity of critical judgment.... The study of the mind and emotions in relationship to the sense of beauty” (*Random House Dictionary*, 1987).

Psychoanalytically, we were set on this aesthetic path by Freud's views that a good interpretation is judged by three criteria: content, timing, and affect (Freud, 1912, 1913a, 1937). These are,

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after all, aesthetic criteria that could be readily applied to drama or music. Our task in this article is to flesh out this skeletal frame, building on the efforts of Winnicott (1971), Leavy (1980), and Loewald (1980). In a more personal sense, Freud set us on this course not only by creating our discipline, but also through the meaningful irony that his only major award was the Goethe Prize—for the quality of Freud's simple, yet elegant writing, “boldly interpreting the similes coined by imaginative writers” (Gay, 1988).

Placing psychoanalysis in the aesthetic arena helps us in several ways. First, at the level of a single interpretation, we can better articulate what makes a sound interpretation or reconstruction. Second, by treating the patient as if we were engaged in an aesthetic act, we elevate the material, which as Loewald (1988) suggests, is an exercise of sublimation. Third, macroscopically, we can articulate what makes for a successful analysis as well as its stages. Fourth, we can open dialogue about the historical and cultural shifts in psychoanalytic technique, theory, and psychopathologies. Finally, we can better articulate psychoanalysis with other aesthetic enterprises. After all, we are accustomed to applying psychoanalytic knowledge to different aesthetic idioms (drama, art, autobiography, for instance). This is not an unusual task in aesthetics, that is, for one art form to inform or to interdigitate with another. If in fact we can recognize psychoanalysis as an art, then this clinical art will not only inform about other arts, but be informed by art: an extension and integration of presenting psychoanalysis as narrative, rhetoric, or metaphor (Cohler and Galatzer-Levy, 1992; Schafer, 1985; Szajnberg, 1985/1986).

Psychoanalysis has been an enterprise that from the beginning borrows from contemporary, but conceptually different explanatory constructs in order to explain psychoanalysis to others (such as hydrodynamic theory and computer science). Psychoanalysis stumbles when it moves from using other fields' terms as metaphorical constructs, to reifying these terms: it is one thing to say that the mind is like a hydrostatic, or biological, or information-science enterprise, but it is quite another to treat it as if it were one. This would be comparable to a patient moving from transference neurosis (analyst is like one's mother) to transference distortions or psychosis (analyst is mother).

This conceptualization may be paradoxically inherent to psychoanalysis. For, in clinical work, we ask the patient to transform and translate feelings (including physiological states), memories, wishes, fears, and desires into words. As Daniel Stern (1985) discusses, the developmental attainment of words, although permitting better communication, may preclude communing with earlier self-other experiences. So too, analysts use others' words to translate psychoanalytic ideas: Although we may gain in some ways, we lose in others.
To accomplish this task of reframing psychoanalysis to bring it into relief as an aesthetic enterprise, I will draw on one particular nonpsychoanalytic aesthetic text as a model for establishing aesthetic criteria in the face of shifting aesthetic styles. I recognize that there is debate about choosing aesthetic criteria even within aesthetic fields (such as art or music), let alone across all fields. I select one classical literary criticism text with the caution and humility that I am not an aesthetician, rather an analyst. I do so in the hope that the reader will be convinced as to the value of this enterprise. I review some of the discipline-specific aesthetic criteria evolved by psychanalysis. I offer clinical examples of the implications of using aesthetic judgment for clinical practice. Then I close with remarks about maintaining the aesthetic sense of psychoanalysis in the face of shifting social reality and psychopathology.

My intent, following Freud and more recently Schafer (1985), is to reframe our conceptual perspective so that familiar clinical data may be seen in a different, more productive sense. That is, as Robert Coles said of Anna Freud, we should use “theory as a quiet resting place rather than a final destination” (Coles, 1993).

I have selected a classic text of literary criticism, Auerbach's (1953) Mimesis: The Representation of Reality in Western Literature. Saul Bellow (personal communication, 1971) considers this one of the finer aesthetic studies of literature. I present its parallels to psychoanalytic work throughout the article. In brief, they are as follows: (a) as literary criticism, this text focuses on interpretation, a hallmark of psychoanalytic work; (b) Auerbach studies how Western literature represents serious or tragic social reality (rather than farce or comedy) in narrative, a fundamental task for our patients—representing inner reality ultimately in narrative form; (c) Auerbach addresses how literature shifts in representing reality as social reality shifts over time. This is comparable to the temporal/developmental challenge in psychoanalytic work (Schafer, 1985).

Mimesis, imitation, as Auerbach reminds us, is one of the higher art forms (Plato, 1971). As used by Aristotle, mimesis is not simply an exact replication: rather it is an attempt to represent an action in a different form. Conceptually, it is related to metaphor, that is, representing one thing through the expression of another that is dissimilar and yet shares similar traits. Aristotle suggested that understanding metaphor requires good intelligence (Szajnberg, 1985/1986).

Three ideas guide Auerbach's brilliant text. First, the ancient classical authors used a doctrine of levels of literary representation: literary style matched content. “High”-content, heroic tales such as the Iliad or Aeneid, were articulated in a high style. “Low”-content stories, the domestic, the mundane, were represented in low style. This paradigm
recurred with each historical rebirth of the classical style. Second, the doctrine of matching style to content was ruptured with Christian literature. Just as Christ rose from humble origins, now everyday reality would mix with sublime tragedy: “high” style would be used for either content. This mixing of style recurs in modern literature, however.

Therefore, Auerbach's third point is to distinguish modern from Christian literature. Although both mix styles and content, they have a fundamental difference characterized by what Auerbach referred to as Christian *figura*. Both late antiquity and medieval Christianity's figural conceptualization of reality embody the idea that an event on earth signifies itself and some other heavenly event (temporally or spatially distinct). Figural events are united spiritually, they are not logically, nor spatially, nor temporally proximate. For instance, Abraham's near sacrifice of Isaac is a Christian figural event that prefigures God's sacrifice of his son Christ. Sarah's conception of Isaac after the visit of the three strangers is a prefiguring of Mary's immaculate conception. As a nontemporal example, man's action on earth figurally connects with heavenly will.

Auerbach's concept of *figura* may not sound so foreign to psychoanalytic ears. We would say that a manifest phenomenon reflects latent material (nontemporally), or contemporary repetition compulsion is defined as repeating a remembered event (temporally). Further, the psychoanalytic concept — that something represents an underlying something else — can be conceptually

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1 Loewald developed this when he said, “The transference neurosis is such an imitation of action in the form of action … it develops from such an imitation … of an original action sequence and remains under the formative influence of that original action” (*Loewald, 1988* p. xi).

related to a 20th-century view of reality that Wayne Booth, a literary critic, refers to as motivism (*Booth, 1974*). Booth argues (critically) that our ability to reason has been undermined by the assumption that whatever someone says is really interpretable by some underlying cause (Marxist, feminist, liberal, conservative, psychoanalytic, etc.). But the framework for interpretation in the ears of the listener may not be shared by the speaker. This leads the listener, as Booth argues persuasively, to dismiss what is said as not *really* meaning what is said.

We face this challenge in psychoanalytic work: we have developed a higher regard for staying close to the surface material and for establishing a therapeutic alliance rather than deep-sea diving for latent “real” meanings. The point here is that Auerbach's concept of Christian *figura* may be manifested secularly in modern thought, particularly in psychoanalysis.
Examples abound of the shift in content and style between classical antiquity and modern literature. Homer or Virgil used high style to speak of great heroes and events: of arms and the man, of the sack of Troy. In contrast, Dostoevsky (1950) used serious tragic style to write of a murderer; James Joyce (1946) of a day in the life of a mundane Leopold Bloom; Bellow (1964) of the reminiscences, idiosyncracies, and descent into despair of a divorced, absent-minded teacher, Herzog. Here is an important parallel and possible influence on psychoanalysis. Freud applied the highest thoughtfulness and seriousness, the still, small voice of reason, to apparently mundane, meaningless events such as dreams, hysterical paralysis, or obsessional stone-kicking. That is, the stance in modern literature of treating even the mundane seriously may be a general cultural trend in which psychoanalysis participates (Szajnberg, 1992).

In fact, it may be that one of the curative factors in psychoanalysis is the aesthetic ability to lift the mundane to the sublime, a secular figura. Winnicott (1977) persuades us that creativity is part of everyday life (not only the purview of the artist) even in the creation of a symptom. Loewald (1988) suggests that offering words for deeds is both an act of gratification and of sublimation. That is, Auerbach's thoughtful observation brings psychoanalysis into the realm of modern literature, of modern thought.

Auerbach's work shares another characteristic with psychoanalytic thought. He demonstrates that a reason for shifts in representational literary styles is due to shifts in what is being represented, social reality. Like Berger and Luckmann (1967),

Auerbach understands that social realities change over time. Even within an era, our social reality is varied: the social realities of Somalia, Bosnia, and the United States may interact, are contemporary, but are not the same. We would not expect that literary representations of the respective social realities to be the same. Nor would one expect the same psychological experiences in different cultures (and consequent psychopathologies [Erikson, 1950]), despite contemporaneous, but widely varied social realities.

In the history of psychoanalysis, social reality has shifted over the past 100 years, from the senescence of Vienna, described so well by Schorske (1981) and Ellenberger (1970), through the dislocation of psychoanalysts around World War II, to the multilocality and greater variability of psychoanalytic work from the United States to Britain, from France to South America. We wonder if we see different psychopathologies because of cultural and historical shifts (Kohut, 1977). For instance, the Japanese emphasize the capacity for dependence (Amae). Doi (1982) articulates the consequent differences in psychopathology and psychoanalytic treatment. This contrasts to the Western emphasis of independence (Geertz, 1983; Mahler et al., 1975).
Even within a single psychoanalytic case study, the principle of shifting social realities applies. As Freud suggested, preoedipal difficulties color oedipal and postoedipal experiences. Further, in psychoanalysis as we reorder our perspective(s), the “facts” of historical reality are experienced differently (Schafer, 1985).

**Aesthetic Frames**

Let us turn to two problematic areas in aesthetics and in psychoanalysis: (a) identifying and differentiating two levels of aesthetic criteria — of craft and of art; (b) developing specific criteria for judging good aesthetic form.

The first problem is enduring and not easily solved. There are at least two levels at which we can judge aesthetics: technical expertise and conceptual quality. For instance, under technical expertise, we can judge a visual artistic work using Lomazzo's enduring 16th-century criteria of color, light, perspective, motion, proportion, composition, and form. These cut across eras and styles. DuChamp's *Nude Descending a Staircase* created some 300 years after Lomazzo, emphasizes the challenge of representing motion in static art. The early Renaissance, northern Italian artists brought perspective into art, just as Matisse's paper cut-outs or Picasso's *Mademoiselles D'Avingon* redefined perspective in representing sensuous women.

After looking at the seven technical aspects of visual art, however, how do we judge that an aesthetic work is not only technically good but artistically good? Or, why do we consider imitations of a particular style to be derivative even if the imitation is technically good? Here we introduce a conceptual criterion for aesthetic: How does this work add to, change, enrich the way we see and experience the world (Bettelheim, 1990; Rose, 1980). I suggest that what elevates the technically good piece to an aesthetically good piece is that it touches the observer, listener, or reader. The Secessionist Schiele's multiple self-portraits are technically well done, they add to our aesthetic lives because in their distorted ugliness Schiele represents his attempt to portray inner man manifested on appearance; Edvard Munch's “Geschrei” helps us see this affective experience viscerally. Monet's “Haystacks” helps us see how varying light affects our world.

How do we apply these two sets of aesthetic criteria, technique and concept, to psychoanalysis? In order to do so, let us take a further journey through aesthetics, through Auerbach's literary criteria to learn about representing social reality. But listen to these with a psychoanalytic ear. I will selectively cull aesthetic criteria from Auerbach.

Auerbach begins with Homer's *Iliad* using the suspended moment when Ulysses returns home. Ulysses realizes that his childhood nanny will soon identify him by his scar as she washes his feet. In this early classical text, events are externalized, uniformly
illuminated, freely expressed with uninterrupted connections. Meanings are clear. There is little historical perspective. Much is in the foreground (even past events are remembered as if occurring presently). Homer uses retardation to decrease suspense.

Auerbach contrasts this text with a relative contemporary that is born of a different culture, the Old Testament. Using Abraham's near sacrifice of Isaac, he distills the darkness of God's command and Abraham's brief unquestioning response, “Here I am.” Some events are selectively illuminated in high relief, other events obscure (where is this Hebrew God who unlike the Greek gods appears disembodied to interfere in the life of man?); time and place are unidentified; multiple meanings appear and demand explanation (why sacrifice, why now, why Abraham?). The event makes universal historical claims, is preoccupied with the problematic in everyday life, while thoughts and feelings remain unexpressed (how does Abraham feel about the command; and Isaac, on his realization that there is no ram to sacrifice?). Suspense grabs the reader.

Auerbach summarizes that although Homer's text is complex linguistically, syntactically, and intellectually, the human portraits are simple. Homeric or Roman heroes need or present clearly expressible reasons for interpersonal and intrapsychic conflict (the abduction of Helen sets Ulysses against the Trojans; for Aeneas, the Greek attack is reason to defend his Troy, or after his murdered wife's ghost's urging, to abandon the city). In the Bible, however, it is enough that God commands Abraham to sacrifice his son. Lot's wife turns to a pillar of salt because … she was told not to look back. The reader is left wondering what sort of man is Abraham that he would accede to such commands. (Such distinctions are not consistent: when God plans to destroy Sodom, Abraham bargains.)

Let us tentatively look at these examples as if they were psychoanalytic clinical material, but keep them within the literary aesthetic framework. This task is challenging as we tend to rely on pathological categories (whether obsessional, hysterical, character disordered, and so forth). Nevertheless we can tentatively begin by recognizing that some obsessional clinical material echoes some of the aesthetic characteristics of Homer: events are in the foreground, equally illuminated, there may be little suspense (even

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2 Steven Post (personal communication, 1993) remarks that this is similar to the “the analytic interpretation that succeeds only in accurately repeating, if in different language, what the patient has said. Nothing is new in it, either of an enlivening sort from the analyst's own experience, or of new discovery of vistas belonging to the patient. It is a pedestrian imitation, leaving the patient to wonder … why it was made.”

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boredom), association may occur freely but with uninterrupted connection, meanings (at least as interpreted by the obsessional patient) are “clear.” The “beauty” of the material has a two-dimensional quality like that of an Egyptian frieze. This is not to say that the Iliad or Odyssey are equivalent to obsessionality; only that they share aesthetic aspects.

Auerbach moves through other eras, identifying differentiating aesthetic characteristics. Comedy abstractly schematizes the social milieu (like an editorial cartoonist). Romance inserts magic, adventure, mythology, and erotic detail to the detriment of representing everyday life. In the Middle Ages, literary style incorporates undisguised sudden brutality: things happen just because they happen (no need for an abduction or command from God). Christian morality is present but ineffective. With a psychoanalytic ear, we can hear the lives of some of our patients (medievally) presented: things happening just because they do, morality is present but ineffectively so, brutal fantasies or even acts occur suddenly and undisguised.

The value of recasting clinical material into such aesthetic frames is that we can shift from a more pathological view to a more descriptive, adaptive view: Because the aim in our psychoanalytic work is to help the patient shift from one aesthetic style that no longer fulfills existential needs to another. Shifting aesthetic frame results in “enlarge(d) awareness, understanding, insight” (S. Post, personal communication, 1993). This would be the same as an artist changing from representational to nonrepresentational style, for instance, because he or she is trying to answer new and different questions. This paradigm of shifting aesthetic style fits with the more modest aims characterized in recent psychoanalytic literature (Arlow and Brenner, 1964). It moves the patient from a more vulnerable position — having a psychopathology that is “bad” — to a more creative stance — having a style that can be shifted collaboratively: the patient as artist, the analyst as redactor.

**Analytic Aesthetics**

As mentioned, Freud (1912, 1913a, 1937) set us on an aesthetic path with his views on good interpretation, which can be stated epigrammatically as timing, content, and affect. At a more macroscopic level, as Schafer (1985) points out, Freud's framing of psychoanalysis as a biological enterprise determined how he heard and interpreted psychoanalytic “facts.”

Construction/reconstruction, an important late innovation, moved Freud (1937) closer to aesthetic practice. Here is an enterprise that is conceptually different than transference analysis and recovery of the repressed (Sedler, 1983): here the analyst and
patient collaborate on filling in missing pieces. Freud was sensitive to the accusation that this could leave analysis vulnerable to criticism of contrivance, making-up, even suggestibility. He leaves incomplete his argument for how the psychoanalytic patient “knows” that a reconstruction is correct. Here we enter more clearly the realm of aesthetics. A reconstruction is as effective as a recovered memory, Freud says. The patient and analyst need judge that the analysis is freed up, moving forward. The reconstruction is plausible not only in and of itself, but also within the framework of the analytic experience.

Although it was near the end of his life that Freud introduced construction, he began his career with a clinical construction, creating a dilemma that plagues us to this day: he decided, he judged, that his hysterical patients' reminiscences were not of historically experienced trauma, but fantasied: an aesthetic call on Freud's part. The aesthetic call includes discovering internal contradictions, specifics of remembered times, places, and participants, similar to the proper placement of figures in *The Last Supper.*

As object relations was introduced in psychoanalytic work, the focus of hearing clinical data shifted to the interest in mental representations of significant others: This inner world became the matrix for uncovering memories, or defenses, or anxieties (Greenberg and Mitchell, 1983). More recently, with the aesthetic shift to creativity, sublimation (Loewald, 1988), narrative (Schafer, 1985; Spence, 1982), metaphor, and autobiography (Szajnberg, 1985, 1986, 1992), we can more comfortably place psychoanalytic concepts such as wishes, fears, dreams, and anxieties into an overall conceptual frame that deemphasizes without relinquishing diagnostic categories.

By placing psychoanalysis within an aesthetic framework we can make sense of multiple historical forways into specific aesthetic art forms: Freud used psychoanalysis to explore drama (Freud, 1913b), literature (Freud, 1939), memoir (Freud, 1911), and the development of culture (Freud, 1930). But he also drew on a great drama, Sophocles' *Oedipus,* to illuminate a central complex; he dwelled on the visual power and characteristics of dreams to explore their subjective power (Freud, 1900).

Aesthetic ventures by his followers into other fields were comparably slower. Lacan (1977), better portrayed as a iconoclastic follower perhaps, approached an aesthetic view of psychoanalysis in his play with words. Kris (1952) and Rose (1980), while focusing on psychoanalytic accounts of art form, did not take the next step of allowing that psychoanalysis is in itself an aesthetic experience. Schafer and Spence as mentioned, bring psychoanalysis
into the narrative fold (Szajnberg, 1996). Szajnberg (1985, 1986, 1992) explores the metaphorical and autobiographical qualities of psychoanalytic accounts. If we consider psychoanalysis an aesthetic enterprise, as psychoanalysis informs art, so too art can inform psychoanalysis.

**Aesthetic Implications for Nosology and Technique**

An aesthetic framework recognizes that different artists have different styles that may not be appealing to all members of an audience, yet each style may be technically and aesthetically good (or mundane). That is, taste is independent of aesthetic quality. For instance, Impressionist art is not “better than” Cubist or Secessionist art. Nevertheless, Impressionist art may be better at addressing certain aspects of reality, such as the effect of light, than other styles. We can judge the aesthetic quality of an Impressionist (or Cubist or Secessionist) work, even if it is not to our taste. By taste, I suggest a specific meaning: The degree to which a style (whether painting, drama, or interpretation) speaks to us; more specifically, the degree to which a work helps us recognize, reframe, or enhance personal, existential concerns.

The implications for psychoanalysis are significant. Diagnosing a patient is no longer a unilateral act, as if psychopathology lies completely within the patient. Rather, diagnosis reflects our perception of the patient and of that patient's interaction with the analyst. That is, we can extend Deutsch's (1942) observation of the “as if” personality into a dialectical stance: Not only (to some degree) do patients conform themselves to the analyst's expectation, but also patients are conformed by the analyst's expectation. For instance, for phenomenological therapists, patients are “borderline” if they behaviorally conform to DSM-III-R (American Psychiatric Association, 1987) criteria. [I wish to distinguish between the analyst selecting a DSM-III-R diagnosis because he or she finds it clinically (aesthetically) helpful versus because he or she is required to make that diagnosis for fiscal reasons (by a third-party payor).] To other therapists, patients are “borderline” if they have intrapsychic structural characteristics. Even in the latter school, there is debate about what these intrapsychic characteristics include (Giovacchini, 1993; Kernberg, 1975; Kohut, 1977). Because we judge intrapsychic structures by how they manifest in interpersonal interactions, this opens an ambiguous area of intersubjectivity, of interplay between the subjective stance of the analyst's taste (usually stated as a metapsychological framework) and the patient's. This does not put us in a nihilistic stance of uncertainty: there can be some consensus of “borderlineness” just as there is about Impressionism, recognizing that Impressionist styles vary and that the boundaries of
Impressionists and, let us say, Pointillism are open to reasoned disagreement (Booth, 1974).

At the more microscopic level of the interpretation, aesthetics open the issue of judging whether an interpretation is “good,” pleasing, or suitable. For Freud (1937), an interpretative construction is made between the patient and analyst. Following him, Winnicott (1971) and Giovacchini (1987) put this within the sense of transitional phenomenon. It is aesthetically pleasing, let us say, when there is some consensus that makes sense to the patient, to the analyst, and even to an observer who finds some “movement” forward in the work (Gabbard et al., 1988). Even “movement” reported by the analyst is framed by the analyst's persuasion (Schafer, 1985). This does not obviate more standard criteria for judging a “good interpretation”: is there articulation of impulse, conflict (or lacuna), motivation, and defense (Arlow and Brenner, 1964). Rather, it opens up more intersubjective areas for discussion.

That is, there are perhaps two aesthetic levels and criteria for assessing the quality of psychoanalytic work. First, is the initial reaction of the audience (patient, analyst, the reader), who react with discovery (and, at times, pleasure) at a piece of work. This is the “aha” reaction that Greenson (1967) describes. This is the level at which one art form is compared to another (Ricoeur, 1970). At a second, discipline-specific level, there are the psychoanalytic criteria for a good interpretation or good hour or good psychoanalysis. For instance, the quality of an hour can be assessed by the nature of the libido (drive, inhibition, wish, affects), the ego/object (secondary autonomous functions, defenses, the transference, the counteridentification/evoked response, the selfobject), the dream (repressed wish, manifest and latent content, position of the analyst and patient). These criteria, belonging to the craft of aesthetics, are part of but do not necessarily define good aesthetics. These criteria do not generalize easily across aesthetic disciplines. I will offer clinical examples at different ends of the psychopathological spectrum to suggest implications of an aesthetic frame for interpretation.

**The Aesthetics of Interpretive Consensus**

**Case Example**

Here is an example of how aesthetics apply to the coconstruction of an interpretation. A woman who had characteristics of borderline personality disorder and anorexia nervosa had been in analysis for 2 years and was functioning well enough to attend a well-regarded liberal arts college, which, however, initiated a move from the analyst. One year after terminating treatment, the patient's parents learned of a new
eating-disorders inpatient program. They decided to hospitalize the patient, despite stabilization of both her weight and life functioning. At this hospital, she was told that she had multiple personality disorder and was “forced” in small and large group meetings to own up to this new problem. She became regressed and overtly psychotic for the first time in her life. She became self-destructive. She was discharged when her insurance ran out. Returning to analysis, she tried to reconstruct her psychological descent over the intervening year. In doing so, she described her self-destructive act: using a cigarette, she slowly burned holes in her skin in order to become a cheetah.

From her associations, we discussed the adaptive aspects of being a cheetah, including being able to escape (the fastest living animal) her tormentors, and how the stigmata would “show them,” that is, her parents, how badly she hurt within.

The analyst had an additional interpretation based on the following associations, however. She related for the first time in her treatment that there was a murderer associated with organized crime in her family history. She was told never to mention this, even though he was placed on trial and sent to jail. She added that as an adolescent she dated (with her family's quiet compliance) an immigrant with a shady history. He took her on escapades in which she was told to drive a get-away car. He would not tell her what went on in these escapades, only that she should keep the engine running and drive away if she heard gunfire. She became frightened of associating with him after an attempt on his life; he said this event was related to why he had to immigrate.

An additional line of association followed. One evening after the patient was asleep her mother took her elderly pet dog and brought it to the veterinarian to “put it to sleep.” Although the patient never forgave her mother, she insisted that her mother didn't murder the dog. The patient later got a job as a veterinary assistant, remembering how she would carry the dogs post rigor mortis to the storage refrigerator.

Having confessed this, she was horrified and tried to deny and retract the information: her relative murderer, her mother's act, and her teenage “friend.” She became convinced that she would be killed by her family if they found out she revealed this material to her analyst. The analyst asked if she felt she was “cheating” her family by disgorging this information. She said “No”: after all, she denied having said anything of the sort anyhow.

Here, the analyst felt aesthetically that he was onto another aspect of being a “cheetah/cheater”; one of the multiple determinants of this weighted word. The patient disagreed with this, although concurring with other aspects of the interpretation. Following the late Freud's (1937) aesthetic view on constructions and confirmation, the reader may believe, even if not confirmed fully at the time, that aesthetically both running
away and cheating are reasonably correct interpretations; or the reader may believe only some of the interpretation; or the reader may believe none of it. The belief depends on the analyst's recounting of the material (Was this well done rhetorically?), the “actual” correctness of the material, and the reader's frame of reference. (For instance, some reader might conclude that given this patient's borderline personality diagnosis, she should not have been in analysis and therefore the interpretation was irrelevant.) The interplay of aesthetic frames of patient, analyst, and reader become intricately engaged. Of course, an aspect of the aesthetic is whether, with time, there is additional supportive data.

Transference Projection
Case Example

In a second example, a middle-aged, widowed mother of two, began a reduced-free clinic analysis 1 year after the death of her husband. She felt unable to function in the face of her mourning and was haunted by “cobwebbed memories of her childhood,” which she had felt were a closed book. Early in the analysis, her associations fell to issues of the reduced fee, such as whether she would draw down her children's inheritance in order to pay for the treatment (the fee was set with protection of the children's resources in mind). Yet the analytic candidate began to feel guilty despite his awareness of the negotiated fee.

The patient related how early in her career a boss took advantage of his position and attempted to rape her. Associations indicated that she felt concern that she would be taken advantage of by someone in a superior position; she felt discomfort at reclining lower than the analyst sat.

Finally, she related a lengthy episode about her sister-in-law asking for a new-car loan: The sister-in-law was someone who had difficulty functioning personally and professionally and for many years was chronically short of money. Previously, her sister-in-law had applied for bank loans and asked the patient to cosign; the patient felt put off at how much personal information she had to give to her sister-in-law. The sister-in-law was turned down by banks and her immediate family. In contrast, the sister-in-law offered no financial information to the patient. The patient commented forlornly how she felt that her sister-in-law had not earned the right to learn so much personal information about the patient; one needed to earn such intimacy. Nevertheless, the patient loaned the money from her children's bank account, hoping that the aunt would feel obligated to repay the children.
At this time the analytic candidate felt increasingly that there were transference elements, which were clouded by his feelings of “taking advantage” of this patient's mourning, but otherwise good functioning prior to her husband's death in order to begin his control case. He felt prepared to interpret that the patient was developing a transference neurosis that the analyst would take advantage of her, just as her sister-in-law and manager had.

The candidate's supervisor maintained that at this time, early in analysis, it was not evident whether there was true projection of the transference. There was potential for clinical confound here. The patient may have felt that the analyst was taking advantage of her, but it wasn't clear that these feelings were characterological and would develop into a transference neurosis. Of course, some would argue that one doesn't need full transference neurosis in order to interpret transference feelings (N. Simon, personal communication, 1993). There were certainly feelings on the analyst trainee's part of “taking advantage” of the patient. However, these fell within the frame of classical countertransference as Freud outlined: idiosyncratic personal feelings of the analyst that may be countering the development of the patient's transference neurosis. There is debate about how early transference interpretations can be made (Gill and Muslin, 1976). Time would tell whether the patient's initial feelings would develop into a transference neurosis but, at this time, early in the treatment, to interpret as a transference neurosis what could be idiosyncratic countertransference could cloud the treatment course.

Here, rather than argue either stance, I ask the reader to listen to the importance of aesthetic judgment. Does it feel (aesthetically) that a transference neurosis is developing and an appropriate interpretation should be made? Does it feel, rather, that there is insufficient evidence for a transference neurosis: that a transference interpretation would come more from an idiosyncratic countertransferential perspective that would muddle the treatment? Without resolving either perspective, we note how commonplace is this aesthetic judgment, not only in day-to-day clinical work, but also in our theoretical discussion. We attempt to use specific aesthetic criteria to make such a judgment.

**Selecting an Interpretation**

**Case Example**

Let us consider one final vignette from a single session. The patient related a lengthy dream involving danger, being followed and escaping to find herself in her bedroom. She still felt danger and set to repairing the lock on the bedroom door. While doing so, her
children appeared. She sent them back to their rooms, relating this in the tone of possibly impending danger in her bedroom. She returned to complete repairing the door lock.

Her associations and interpretation of this segment of the dream was a sense of remorse and guilt over sending her children away. She felt that she should spend more time with them, even feeling that her late-afternoon sessions took time away from being with them.

The analyst concurred with this interpretation, but offered an addendum. Perhaps, for now, she was sending her children away from her internal danger, while she worked at repairing aspects of her self (in psychoanalysis).

She responded that she liked the analyst's interpretation better. Aesthetically, the patient analyst and reader should watch and listen carefully; is the patient accepting the analyst's interpretation as “better” because it fits her feeling states better; is she accepting the interpretation as “better” because it is inaccurate and her confirmation will help mislead herself and the analyst (Freud, 1937); is she accepting the interpretation as “better” because of a false-self compliance (Winnicott, 1977); and why does she claim it as “better” when the analyst offered it as a supplement to her own (reasonable) interpretation? All of these call on our aesthetic sensitivities to make a judgment.

**Discussion**

What are the implications for positing the aesthetic aspects of psychoanalysis? Analysis has been placed within different conceptual frameworks ranging from biological, hydrodynamic (Freud, 1900; Hartmann, 1958) to mythic, hermeneutic, linguistic, narrative, visual, information sciences, chaos theory, metaphorical and autobiographical genres (Kris, 1956; Moran, 1991; Ricoeur, 1970; Rose, 1980; Schafer, 1978, 1985; Szajnberg, 1985, 1986, 1992, 1993). In addition to placing psychoanalysis within these conceptual frames, there is a longer tradition of using psychoanalysis to enlighten other social science and humanistic fields ranging from Freud's body of work to Kris's and Rose's work on the visual arts. This lengthy series compels us to justify putting psychoanalysis in yet another conceptual framework.

But the general struggle in psychoanalytic theorizing is between the school that sees psychoanalysis as a biological enterprise (or at least an offshoot thereof) versus those that see it as more of a social science or humanistic enterprise. It is well recognized that there is a tendency toward dualistic polarization in psychoanalytic debate, with Freud demonstrating the capacity for arguing both poles of the dualism versus the post-Freudian schools that engaged in interpersonal dualism (Frattaroli, 1992). Schafer (1978) took us a significant step beyond this struggle in a carefully argued and thoughtful chapter in his
book on action language. He articulated Hartmann's attempt to systematize Freud's work, softening the dualistic stance, and paradoxically, suggesting that biology was but one framework within which to place psychoanalysis. Schafer goes on to argue that Hartmann's carefully constructed work liberates us to recognize that psychoanalysis can be considered in other conceptual frameworks: in his case he puts it within the linguistic or narrative framework.

In fact, this brings us to the soul of clinical work, to sublimation. In his work on sublimation, Loewald (1988) suggested that this is a central function of a psychoanalysis. Winnicott broadened the idea of creativity to include our everyday symptoms or

transitional experiences. “It is creative apperception more than anything else that makes the individual feel that life is worth living” (Winnicott, 1971). Even if we were to think in clinical work that experiences originate with drives that are biologically/physiologically based, the task of clinical work is to recognize how these drives are manifested as mental representations and elevate those mental representations from the dross of drives/impulses to the sublime gold of relatively unconflicted thoughts and feelings and the capacity for gratification. Therefore, both in our daily clinical work and from our metapsychological papers, we have reason to argue that if we are dedicated to the idea of sublimation and creativity, then we are not constrained to think of psychoanalysis within a strictly biological framework.

How does an aesthetic conceptual framework aid us further? On a theoretical basis, the aesthetic framework envelopes the other frameworks that try to draw metaphorical parallels between psychoanalysis and other disciplines, whether these disciplines are biological, social scientific, or humanistic. An aesthetic framework permits us the most parsimonious framework within which to envelope other conceptual frameworks. Rather than dealing with multiple conceptual frames and engaging in generally fruitless debate over whether analysis is more of a biologically based or narrative/linguistic-based, or visual-arts-based enterprise, we can recognize that an aesthetic framework encompasses all of these. Within our daily clinical work, analyses may be characterized at different moments by any one of these (aesthetic) subsets. For instance, there may be times when feelings are felt as if driven, inherently and biologically based, even coming from without (Klein, 1975). There may be other moments, particularly with dream representation that is predominantly visual, when analysis may feel more akin to representation of form in the visual arts (Rose, 1980).

I suggest that even Schafer's work can be better captured within the aesthetic conceptual frame. In his carefully constructed works on narrative (Schafer, 1978, 1985), Schafer suggests that optimal analytic work (as reflected in language) should be
characterized by using the active voice. As one reads this, it appears compelling that this is an optimal position toward which to move. That is, Schafer appears to suggest that the analyst maintain an active voice and action language. He even gives prescriptions for language structure. Perhaps we can best read his book as recognizing that the analysand too will move toward expressing and experiencing himself as actor rather than victim, as a subject, rather than only an object in the grammar of life. I believe, however, it would be a misreading of Schafer's work to take a judgmental stance vis-à-vis the patient if he or she says that impulses or difficult experiences in the world are experienced passively. If we use an aesthetic frame, we can capture both sides of the analytic work, both the language and the experience of being active and the language and experience of being passive, with the recognition that, aesthetically, we should move toward the subjective experience of activity.

Let me conclude with a suggestion that we reframe the debates among various analytic schools, whether ego psychology, object relations, or self psychology. To say that one is better, more valued than the other, is fruitless at one level. As mentioned before, this would be akin to saying that Expressionists are better than Impressionists or Surrealists. At one level, they all engage in an aesthetic or in an artist psychoanalytic enterprise.

At another level, we are begged to account for differences in aesthetic style. For artists, different styles reflect different current existential or technical issues that are being addressed. To return to the visual, the artist addresses one or several of the aesthetic criteria such as color, form, or perception, or existential issues such as humankind's relation to the Virgin. These issues are fundamental to that particular artist. If it is also fundamental to that cultural era, then that style is critically welcomed within the culture milieu. Perhaps such is the case with shifts in psychopathology and psychoanalytic theory and technique. As different existential and technical issues come to the fore, styles shift. This is not to say that a previous style is invalid: patients with psychopathology of an earlier era, such as might be formed within a nuclear family with sexual repression and paternalistic structure, may do well with an ego-psychological approach. An alternative explanation for why someone does well comes from Glover's (1931) article on inexact interpretation: patients do well enough with previous technique because the interpretations were close enough to help them feel better. That is, patients may improve either because their psychopathology fits the technique from a particular era, or the technique is good enough, despite being inexact, to mollify the psychopathology.
My point is that moving the discussion of psychoanalytic schools into the framework of aesthetics permits us to address more readily aesthetic questions: What are the fundamental existential dilemmas that our patients bring to us, and consequently what aesthetic style would better suit those patients? Analysts make these aesthetic decisions: So do patients. And style may shift within a psychoanalysis as it may within a painting, depending on shifting aesthetic issues. (On the other hand, too many aesthetic styles within a psychoanalysis would feel unseemly.)

I am not trying to suggest a nihilistic relativism about psychoanalytic technique or nosology. I am not trying to suggest that any aesthetic psychoanalytic style is valid. Rather, I am suggesting a conceptual framework for reasoned discourse about aesthetic psychoanalytic style and its associated technique. My hope is that by turning to other aesthetic forms, whether literature or other fine arts, we will increase our conceptual vocabulary for a more reasoned discourse about what would be best for our patients.

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