Psychoanalysis! Is that still around? I thought it was dead.

Who can afford to go lie on a couch five times a week where the shrink hardly speaks and nothing happens! And wasn't Freud proven wrong anyway – they should have called him Fraud. Also, I've heard that it's painful. Who needs that!

OK. I get your point and I can see where you're coming from. But here's what you might want to know. For starters, yes, psychoanalysis is still around. And yes, it can be expensive. But you'd be surprised at the availability of low cost treatment. And many analysts believe that the work can happen at three times a week. It's a decision for the analyst and patient to make together. Lying on a couch is not necessary – some feel that it is useful and others prefer sitting in a chair. I know someone who paced around the room at times. And things do happen and shrinks do talk – more about that in a minute.

As for Freud, yes, he was wrong about a lot of things. But give him a break – he did give us a whole lot to think about. In fact, he inspired all kinds of people, not just clinicians. Some of his ideas made so much sense that we have incorporated them into our every day lives, ideas like the Freudian slip, a slip of the tongue in which a word that the speaker was subconsciously thinking about is substituted for the one that he or she meant to say.

And on top of all that, psychoanalytic theories have developed, grown, and some
have been discarded, and replaced by current thinking. Among others, Melanie Klein's work, so long ignored by the classical analysts is being revived in light of new studies about the infant mother relationship by Daniel Stern who filmed babies with their mothers. Hans Loewald gave us the idea of the analyst's role as new object instead of blank screen. Ferenczi spoke about the importance of love, and Mitchell gave evidence that a relational approach made great sense. There are others like Kohut who focused on empathy and brought us self-psychology, and Fonagy with his attachment theory. Lacan, Bion and others also added ideas that are being revisited today. Furthermore, what was once referred to as a one person psychology where the analyst made interpretations based the analysand's free association has changed. Today there is a more interpersonal approach where the two parties contribute their thoughts and feelings in order to find out what stands in our way of a fuller, richer life. So psychoanalysis, while using many of Freud's theories, has gone far beyond him making the profession highly relevant to the present century.

Basically, Freud recognized, explored, and gave some evidence for the fact that a part of what motivates and even bothers us takes place at the UNCONSCIOUS level – that is, unknown to the person, but highly influences the persons actions, memories, relationships, decisions, etc.

In current life, we are so used to the concept of the unconscious that it goes largely unnoticed and is incorporated into our culture. A ball player having a slump started talking to a therapist and discovered that he was conflicted about success because his brother was failing in business. This surprised him because he was not aware of this
before talking. In fact his dreams had been about this brother for several weeks. Today, we take the unconscious for granted and accept that it exists.

But let me speak for myself now. I am a social worker/analyst (yes, not only MDs offer psychoanalysis) in practice for 30 years. I graduated from two post graduate institutes and attended many post graduate seminars with some of the heavies in the field. In 1979, along with three colleagues I founded an institute for studying psychoanalytic psychotherapy, which is still going strong. By the way, the difference between psychotherapy and psychoanalysis has been debated for many years. My experience has been that many people who begin what they often refer to as counseling deepen their understanding by talking to a non-judgmental professional and usually increase their sessions along the way. A psychoanalyst is best equipped to help the deepening process due to her training. But, and this is big news, even once a week regular contact can be meaningful.

Money is not the biggest obstacle. There are experienced, well trained analysts who accept reduced fees and there are students in supervision who will accept low fees. Time seems to be a bigger issue in today's world – but many analysts offer telephone or skype sessions when necessary.

So, what do you do and how does it help?

First of all, it's really what we do together. I may be an expert at understanding how human beings develop and what makes them tick, but everyone ticks differently and it's what you say and how you say it that helps me tune in to you.

Let me start at the beginning. When someone calls for a consultation I return the
call promptly, and try to work out a convenient time to meet. If asked how much I charge I tell the prospective patient that I prefer to discuss that when we meet. I try to limit the phone call to setting up a time. Why? I have a sliding scale of fees. There are many circumstances that determine my fee. Can the prospective patient afford my normal fee? If more than once or twice a week is indicated (and it usually is) I will consider lowering that fee if I have time available. Analysts have different policies but remember, you are hiring and you can find a qualified therapist to work with your needs. Qualified is important! Ask questions about the analyst's training and whether she is part of a recognized institute. Membership in the IPA (International Psychoanalytic Association) means that the analyst has completed the most rigorous training and meets the highest standards.

Whether or not we click is a most important factor in continuing. Much has been written in the analytic literature on the importance of the fit, or the match, and this is usually an intuitive decision made by both parties. And even if there are problems aside from the fit, they can be looked at. For instance, once, during the first consultation session a person said she hated my waiting room. When we talked about it we learned that the real issue for her was waiting. She had been kept waiting all her life – and the very idea of a room for waiting was upsetting. My waiting room is pretty comfortable – magazines, bathroom, closet etc. and no one had ever complained before – so the first consultation gave us both a big clue to her whole life – from starting school, work, friends, and even sex. This lady in waiting became fascinated as she began to explore the myriad feelings that waiting evoked.
Oh, by the way, many people thought Freud was fixated on sex and that psychoanalysis focussed on it exclusively. Not true. When a person chooses to do psychoanalytic work there need be no specific focus. I tell my patients who say they do not want a silent therapist that before I can say anything meaningful I want to get to know them. I often begin by asking what brings them. I explain how free talk can help and how saying whatever comes to mind will give us a good idea of the territory we need to explore. Analytic work is a journey and each person charts their own map to reach their destination. The analyst is like the guide whose job it is to clear the paths the patient decides to travel. As we go along we will make new paths. As we travel relationships change and a sense of safety increases. Sure, sex comes up usually – but nothing is pushed by an analyst. Many people come with high anxiety and if it seriously prevents functioning, medication can be discussed. Every decision however involves the two parties. Psychoanalysts are not advice givers (there are plenty of places to get advice) – but they do help the patient make her own choices by encouraging the gathering of knowledge and the exploration of impulse, for action based on impulse alone can lead to pain and trouble. Waiting, slowing down, looking around, are inherent in doing psychoanalytic work. If I see a patient about to hurt himself I say so and ask him to figure out why. (Of course, if someone talks seriously about suicide or homicide more active measures such as notifying family or even hospitalization become necessary.)

Who is a good analyst? In my mind a good analyst is someone who knows how to listen with non-judgmental ears. Benevolent curiosity is the most precious tool an
analyst has and if the patient can practice it, half the work is done.

How many of us have trouble connecting? A major aspect of psychoanalytic work is the connection between patient and analyst. As that connection grows and deepens it effects outside relationships. What happens in the office is in some way a microcosm of what happens in life. Love, hate, rage, fear of trusting, admiration, envy, passionate feelings, erotic ideas, separation difficulties, boredom, all of these and more come to life in treatment. The analyst becomes a stand in for many people and many aspects of people. This is why the analyst has had her own analysis – and long years of education including supervision. Her ability to greet these often raw emotions is key. She provides a safe, confidential setting, with appropriate boundaries where whatever happens can be tolerated and understood. Frequently, the understanding comes from connecting the present to the past and allowing the feelings once experienced to surface. If a child felt abandoned or felt left alone consistently, this will impact his present life in unique ways. One way might be difficulty in ever trusting another to be there.

But, you think to yourself, I can't blame my parents. They were OK and they had their own problems. Yes, parents usually do the best they can but the child does not and should not be able to understand why parents behave as they do. Children have reactions to being left (emotionally as in the depressed mother, or literally when a parent dies) and those reactions are often stored away. But even in storage, those reactions haunt us. We pay for storage space. These stored reactions play a big role in who we become and what problems we encounter along the road of life. Sometimes those reactions, if not
expressed, take the form of physical illness and self-destructive behavior.

Inhibitions are another common problem that analytic work can effect. Figuring out what an inhibition accomplishes is the first step in conquering it. Inhibition is a way of hiding out. One reason for hiding out is fear of what we imagine others will think of us or our actions. But all too often, the fear of what we imagine others think is a reflection of what we think of ourselves. We call it projection. We all use this to avoid knowing our own unconscious wishes. And we all have unconscious wishes. That's what makes us and life interesting. Psychoanalytic work assists us in uncovering what has been pushed under the rug, causing us to trip throughout life and so uncovering is exactly what frees us to move on and to pursue our wishes.

In today's world, psychoanalysts come in all stripes. Gay, straight, transgender, classical, contemporary, all colors and nationalities, older, younger – you name it. None of them are perfect but they do know a lot about what makes us tick. There are Jungians, Freudians, Alderians, Spotnitzians, Bionians, Klienians, Interpersonalists, Self Psychologists, Lacanians, Object Relationalists, and eclectics. One thing they have in common is their deep and sincere interest in helping us search out what troubles us and to lighten the burdens we carry.

One more thing. Psychoanalytic work is tailored to the individual. Some people take to it quickly, others go slowly. But there seems to be a force in all of us that wants to explore and the analyst makes a good guide.