I liked your paper on psychoanalysis in crisis, Arnold. I see it as a continuation of the ideas you articulated in your collected papers – from early on. That paper depicts psychoanalysis today. And your muckraking of the New York, the American, and the International Psychoanalytic Associations was great. You certainly documented the hypocrisy of the members of those institutions who teach that psychoanalysis fosters freedom from unconsciously imposed restraints and then run the institutes like “oligarchies” imposing restraints and intellectual intolerance on their members. I hope you too heard Barack Obama’s speech on courage last week. He praised courageous politicians who opted to do the right thing even if it costs them their seat in Congress. We have, as you noted, very few such courageous voices in those institutes. Good for you for outing the institutional cowards.

Ralph Greenson wrote a great paper on the fate of new ideas in psychoanalysis. An equally great paper can be written about the fate of old ideas in psychoanalysis. Remember when the Freud archives were opened and the findings, published in JAPA, revealed the horrendous back-story of the Little Hans case, Little Oedipus as Freud called him? Herbert Graf, little Hans, was an abused, seduced, traumatized little boy, hardly an illustration of the universality of the Oedipus complex. So, what happened then to the concept of the Oedipus complex? Nothing!!!

You state that it does not really matter whether we consider psychoanalysis a science, an art, a philosophy, or a weltanschauung. and draw psychoanalysis into the sciences. I don’t think we have to choose one or another. I see psychoanalysis as sharing aspects of all these domains.

Science and the arts are synergy rather than disparate domains. The practice of psychoanalysis is, in my view, first and foremost an art. For a painter or musician, to create a work of art, tools such as paint, colors, instruments, and knowledge of the sciences of optics and acoustics are necessary, but not sufficient, Similarly, psychoanalysis depends on the creativity of the therapist who wields empirically and anecdotally acquired knowledge, and technical recommendations that comprise the training of a psychoanalyst. These tools are also necessary but not sufficient for the art of psychoanalysis. However, there is a close connection between science and art as charmingly illustrated by Jonah
Lehrer in his book: *Proust was a Neuroscientist*. And don’t forget that Helmholtz’s research in optics contributed to the development of pointillism and impressionism in art.

It takes a person with empathy, curiosity, creativity, and a sense of humor to practice psychoanalysis. You advise us to “reclaim our citizenship in the larger intellectual world of curiosity, creativity and freedom.” Some of our prerequisite overlap, I think of freedom as being implicit in curiosity but freedom, and I believe curiosity, are systematically suppressed, as you documented, in psychoanalytic institute training. You ascribed the current crisis in psychoanalysis to the rigid, authoritarian attitudes fostered in these institutes. That is why I believe a sense of humor is crucial in undercutting the pompous, self-important authoritarian stance that has given analysts such a bad name. By a sense of humor I mean both Charles Dickens observation: a sense of humor is a sense of proportion as well as a recognition of the absurdities of life and the human condition.

Being supervised and being in analysis, are necessary for acquiring knowledge and feeling for analytic practice. However, how to engage another person in a therapeutic process is a procedure we acquire from birth on, through the quality and styles of our attachments. From such engagements, we acquire a capacity for empathy, an unquenchable curiosity about life, our world, and it’s wonders, human and inanimate, and a potential for creativity. Lou Sanders placed the roots of creativity in the early months of life when the fed, secure, satisfied baby lies on its back and begins to examine and play with his toes and fingers.

The requisite capacities and potentialities cannot be acquired through psychoanalytic training. However, such training can further them, but only interactively, that is, if the teachers, supervisors, and training analysts, and the members of the Institutes also possess these qualities: empathy, curiosity, creativity and a sense of humor.

Today we have many psychoanalytic theories. I believe none as yet has cornered the market of understanding all there is to know of human nature. But, our open-minded curiosity enables us to understand what a theory can add to our analytic repertoire. Our empathy, our ability to understand a patient’s specific, unique experience is thereby enhanced. In familiarizing ourselves with the breadth of the psychoanalytic literature, past and present, we are thus contributing to our professional future and the future of psychoanalysis. By increasing
our capacity to understand and empathize with the diversity we find in our patients and their unique life experiences, and we can engage our patients creatively thereby increasing the effectiveness of our clinical interventions.

For many years I attended one of Martin Bergmann's study groups. Martin was my most influential teacher and among other benefits, I have tried to adopt his attitude toward reading the psychoanalytic literature: Everyone can teach us something, let’s see what this author-analyst has to say that is of value.

Although I am arguing in favor of acquainting ourselves with all psychoanalytic approaches, I am not in favor of integrating them. Recall when the United States was called a "melting pot." Immigrants would be encouraged to become citizens of one nation. Later the term was changed to a "mosaic." That captures better the diverse contributions each immigrant can make. Integration of theories carries the danger of smoothing edges and thereby diminishing the unique contribution of any theory. Knowing the different theories and appreciating their specificity enables us as artist-clinicians to better captures the nuances of each patient's unique experience.

But, wait, you say, “Didn't you and Beatrice Beebe try to integrate finding from empirical infant research into adult psychoanalytic treatment? No, rather we showed that these findings challenged numerous assumptions inherent in classical psychoanalysis and we proposed other ways of organizing the patient-analyst system. That’s not integration,

Dan Stern refers to, “the empirical infant” derived from the empirical studies of infancy in contrast to “the clinical infant” as reconstructed from the analyses of adults and as embodies in “psychosexual development. The empirical 4 to 6 month old infant is a vastly different baby – highly competent, able to differentiate self from other, and able to remember simple procedures already 4 minutes after birth. And that baby is an excellent detector of contingencies for whom, according to Dan Stern, secondary process precedes primary process in development.

Through frame-by-frame analysis of mother-infant face-to-face interactions in 4-month old infants, Beatrice Beebe and I have documented that the two partners, baby and caretaker, co-create and expand their interactions. This body of research challenges the drive rooted psychoanalytic motivational theory but is not an integration of it.
Every aspect of psychoanalysis can be challenged, overthrown, or altered by the process that patient and therapist co-create, even the concept of resistance. Remember that during World War II the French freedom fighters who courageously opposed the Nazis were called the Resistance. You draw the parallel to a patient’s experience when the patient is described as “resisting.”

Arnold, I agree with you that to build walls around psychoanalysis allegedly to protect it from misuse, deprives analysts of the kind of dialogue and cross-fertilization with other disciplines that you argue for. Dialogue with other theories can enrich all participants, especially in that it continually forces questioning one’s assumptions. I am sorry that you renamed Heinz Kohut, Contra Kohut, since I find dialoging with his writings of enormous benefit in shifting the analytic atmosphere and process in a direction that would benefit many patients.

During my psychology internship at Bellevue Hospital I attended a seminar run by a notable analyst from New York Psychoanalytic Institute. Other members of the seminar were psychiatric residents and psychiatrists already in training at the Institute. All were well-versed in Freudian theory. The analyst opened one meeting of the seminar by asking us, “Tell me what you think of this. Last Saturday my wife and I, and some colleagues from the Institute, went to a restaurant for dinner. At a nearby table sat a patient of mine. We greeted each other through eye contact. When he left, he came over to our table and said it was good to see me. When we were ready to leave and we asked the waiter for our bill, we were told that it had already been paid for all of us by the gentleman who had just left. What do you all think of this?”

Very privately I thought to myself that this patient must have liked his analyst very much. Fortunately I kept quiet. The next thing I recall is that terms were flying past me. This patient was narcissistic, grandiose, competitive, controlling, demeaning, hostile, and destructive. The analyst was very pleased with the display of psychoanalytic knowledge. I was glad I said nothing because obviously I would have been all-wrong.

But this experience stayed with me. Who was “wrong?” Fifteen years later, in the seminar with Martin Bergmann I discovered Heinz Kohut’s paper on the psychoanalytic treatment of narcissistic personality disorders. I had found my answer. There is more to psychoanalysis than confronting a patient’s grandiosity with reality testing, and assuming that aggression lies concealed behind generous
acts. Self-psychology was just emerging. Perhaps the patient described by the Freudian analyst was trying to bond with his idealized analyst rather than trying to destroy him. I thought that this patient and perhaps others as well, were not being understood properly. My tilt toward Kohut had been evolving from my growing interest in Leo Stone’s work and Ralph Greenson’s papers on the therapeutic alliance.

From my evolving perspective I took to Kohut use of empathy as a way to better understand and treat narcissistic pathology in particular, but to some extent, all patients. It made the analytic relationship far less authoritarian, not necessarily democratic because there is a hierarchy built in, but certainly more dialogic. Furthermore, Kohut proposed that interventions can be formulated as leading edge or trailing edge interpretations.

Leading-edge interpretations address what the patient is trying to attain, retain, or maintain through symptomatic behavior, fantasies, and associations that may indicate pathology to the observing analyst. However, for the patient they may serve as a crucial way to bolster a vulnerable sense of self, retain an attachment, and regulate states of over- or under-stimulation, excitement or boredom. To find a way to formulate leading edge interpretations is one way in which the analyst’s creativity finds therapeutic expression.

Trailing edge interpretations address what the patient is defending against, warding off, or trying to deny. Such interpretations are important, but I believe psychoanalysis has traditionally privileged them to the neglect of leading edge interpretations.

Although my work with Beatrice Beebe, the empirical infant research, was not developed to demonstrate Kohut’s theory, we found a compelling concordance between self psychology and the finding derived from the empirical studies. We extrapolated from the three principles of salience that we culled from the empirical research to their implications for adult treatment. We thus proposed that the therapist-patient interaction is organized through processes of ongoing self- and interactive regulation, disruption and repair of ongoing regulations and heightened affective moments. From this perspective the analyst can better formulate leading edge interpretations. For example, think of a patient who avoids or makes only fleeting eye contact. From a leading edge perspective, this patient may be self-regulating states of over arousal by avoiding eye contact with the analyst.
We have come to recognize the bi-directionality and co-creation of the analytic interaction, the therapeutic process, transference, countertransference and enactments. Co-creation does not mean that therapist and patient contribute similarly, equally, or symmetrically but that each partner’s behavior, words, actions or silences, has made some contribution, some impact, on themselves, on each other, and thus on the process that emerges. This describes my take on psychoanalysis today.

A second fortuitous event occurred during my Bellevue internship. A lazy psychiatrist worked up one patient and whenever it was his turn to present a case, rather than availing himself of the knowledge of the various teachers and consultants who presided at the seminars, he presented the same case. Having been trained in research methodology in graduate school, it was an ideal experiment for me. An independent variable, the same case, and four dependent variables, the four discussants. It was an incomparable way of learning about the different consultants. The patient who was present, was a schizophrenic, homicidal and suicidal man. All the consultants delighted in demonstrating the various indications of psychopathology manifested by him, all the consultants except one. This consultant, a Freudian analyst like the other consultants, rather than exposing the patient’s pathology, had a conversation with him. It turned out that this schizophrenic man liked to go to the Metropolitan Museum of Art. The consultant and the patient spent the interview time talking about art – which artists the patient liked and which artists the consultant liked. I was amazed. This consultant found the area of intact functioning, of health, in this man. I thought this was much more creative than having him display how sick he was. I was determined that when I go into analysis it would be with this analyst. And later I did.

This analyst, European-born, knew German and that was very important to me because I did not want to have to translate my childhood experience in Germany into English. He also had a sense of humor and enjoyed my sense of humor. For example, in the course of my analysis I saw my analyst at a concert talking with Artur Rubenstein. At the next session I told him that I would never resist any of his interpretations again. “Why not?” he asked. I said, “I saw you speaking with Artur Rubenstein and anyone who knows Artur Rubenstein must be a truly great person,” We both laughed and went on. But, that we
laughed together, here and at other times, felt to me as empathy, his recognition that my sense of humor was integral to me.

Many of my papers and books were co-authored with Beatrice Beebe, Bob Stolorow, Lloyd Silverman, Joe Lichtenberg and Jim Fosshage, among other. So I was asked, “What’s the matter, can’t you write by yourself?” I immediately rose to this challenge and decided to write *Transforming Aggression*. Since self psychologists are so often accused of not knowing anything about aggression, I titled its first chapter “Self Psychology Strikes Back.” At first I thought I had just taken this title from the movie “The Empire Strikes Back.” But striking back at the critics of self psychology, has a personal meaning to me. Growing up in Nazi Germany I was not allowed to strike back when Nazi children threw stones at my friends and me as we played in the park. When, as refugees we came to New York, Americans yelled at me “Go back where you came from, ref.” Being an outsider continued when I became a psychologist among psychiatrists and then a self psychologist among the majority of classical analysts. But now when both relational and classical theorists attack self psychology and me, I can strike back. I enjoyed writing this book and so wrote a second book “Transforming Narcissism: Reflections on Empathy, Humor and Expectations.” The topic of “expectations” I took from infant research.

My fascination with expectations and their violation derives not only from my grown up in Nazi Germany but also from as the character of each of my parents as. My father was steadfast and reliable. He met and often exceeded expectations. My mother through her humor, and convention-defying, rule-breaking side, enjoyed violating expectations. My papers, in one way or another, have involved expanding or defying psychoanalytic conventions.

Over the years I have held on to my position as the “outsider.” Although a source of fear and embarrassment initially, it has offered me the opportunity to stand apart in many circumstances and to be critical and defiant, ironic and funny. It has enabled me to become a violator of conventions and expectations, but, and here is the more conservative influence of my father, maintain my respect for traditions, to seek a balance between innovation and tradition. When I have been asked, what do you call yourself? I say I usually call myself “a psychoanalyst” except when I am among people who are hostile to self psychology, then
I call myself “a self psychologist.” So Arnold how shall I refer to myself here.