Clinical Case Seminar

Initiating Psychoanalysis: Creating Analytic Space

How to Think About Initial Meetings

The initial meetings between patient and analyst can be fraught with anxiety for both members of the analytic dyad. Acknowledging and understanding this anxiety as part of an inchoate and unfolding process can bolster the analyst’s ability to contain primitive and as yet unnamable anxieties as well as foster a richer and deeper analytic process.

During the initial sessions an abundance of affective material is introduced, which may leave the analyst unsettled and psychically disturbed. Conscious and unconscious forces, including unidentifiable and non-verbal transference and countertransference experiences, may be evoked. Since this takes place prior to the establishment of a secure holding environment between patient and analyst neither has, as yet, a context in which to meaningfully understand and work with this material. Both analyst and patient can feel flooded and overwhelmed.

Failure to recognize the destabilizing impact of the initial meeting, which Bion has expressively referred to as an “emotional storm” (Reith, Vermote, Skale, 2012), may derail the initiating process or lead to premature closure of treatment options and possibilities. Creating an opportunity to reflect on the consultation process may help the analyst establish and maintain an analytic identity in the face of these powerful destabilizing forces.

This seven week one-credit clinical case seminar will provide an opportunity for candidates to present process from their own clinical experiences providing consultation to potential patients. We will utilize the group process to attentively listen to the material and learn from situations in which the patients then went on to engage in treatment as well as from those when the patient did not. Many of our readings will be drawn from the groundbreaking work of the WPIP(Working Party on Initiating Psychoanalysis) ¹ as well as other contemporary authors from diverse theoretical backgrounds.

¹ I am indebted to Nancy Wolf, Chair of the North American Working Parties Steering Committee and Chair of the North American Working Party on Initiating Psychoanalysis, for her important role in promoting and developing this work.
References:


Overall Learning Objective:
At the end of this course, candidates will be able to approach an initial consultation with the knowledge that first meetings activate profound anxieties in both analyst and patient and will develop increased confidence in their ability to identify and contain those anxieties for both of the members of the dyad. Candidates will be able to utilize their increased capacity for self-reflection under stressful circumstances to enhance the consultative process, assess analyzability, and create a therapeutic alliance. Candidates will be able to formulate an appropriate recommendation for treatment and use clinical data to assess the likelihood of the patient’s participation in ongoing treatment. Skillful consultation will lead to appropriate sorting of treatment recommendations with the potential for a greater frequency of initiated treatment.

Weekly Learning Objectives:
Class 1: Candidates will develop an appreciation for the mobilization of transference prior to the initiation of actual patient-therapist contact.

Class 2: Candidates will learn to assess internal and external data as cues for understanding what is bringing the patient to the initial consultation.

Class 3: Candidates will focus on listening for cues about the patient’s anxieties about entering into treatment.

Class 4: Candidates will focus on transference and countertransference as cues about the structure of the patient’s object relations.

Class 5: Candidates will make note of how frequently enactments enter into initial consultations and how to utilize the information that is thereby generated.

Class 6: Candidates will identify resistances in the analyst about recommending psychoanalysis and/or recommending increased frequency of sessions.

Class 7: Candidates will identify concerns about converting patients from psychotherapy to psychoanalysis.

Class 8: Candidates will assess prognosis and determine how to make treatment recommendations.