

The Fate of Ruthlessness in Analysis

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I find myself at an unexpected destination of late: frequently, wondering about the fate of ruthlessness in analysis. More often I have the sense that what is needed in the analytic moment is something that will penetrate the patient's psyche and the interactive field. With greater frequency I find myself in a more active, engaged stance in relationship to what is emerging in sessions. This isn't the destination I expected to arrive at when I first felt called to the Jungian journey so many years ago. My early analytic fantasy was that as I developed as an analyst I would become ever more adept at working through the potential mishaps of analytic work and thereby avoid constellating difficult situations while blithely dispensing analytic wisdom from an unflappable position of maternal holding. Upon reflection, my early fantasy wasn't solely based on naivety - I hadn't yet fully grasped the truly interactive two-person nature of Jung's model of the psyche in which both patient and analyst impact each other. Over the years I've come to revise that original naïve image of analytic arriving. With experience comes the awareness that analytic development frequently means a greater capacity and willingness to enter into and navigate darker emotions and suffering while also embracing a wider range of approaches for engaging the patient's psyche. Over the years I've developed a greater awareness of the patient's defensive operations by which they seek to maintain their psychic equilibrium, a deeper appreciation for the pervasiveness and complexity of their defensive operations, and a more profound respect for the power of those defensive operations to interfere with the efforts of the analytic dyad to stimulate growth and transformation.

In this paper I argue for the importance of cultivating the analyst's capacity for ruthlessness in analysis. By ruthlessness I don't mean the analyst's potential to act out a sadistic process with the patient. Nor am I referring to the tendency to fall into the power

shadow as Guggenbühl-Craig cautions against in *Power in the Helping Professions* (1971). Etymologically, ruthless originates from the 12th century English word *reuthe* meaning "pity or compassion" formed from the verb *reuwen* "to rue" meaning to "feel regret." Therefore, ruthless refers to acting without compassion or acting without regret. It is in the context of the later, "acting without regret," which I will be referring to. It is this attitude of ruthlessness which treatment professionals in hospital burn units must adopt during the process of debridement - the painful process of removing of a patient's dead, damaged, or infected tissue to facilitate the healing potential of the surrounding healthy tissue. A significant danger emerges in the debridement process if the treating professional acts too conservatively, out of concern over inflicting too much pain on the patient, and fails to excise all of the dead tissue resulting in the wound becoming necrotic – i.e. the death of the living cells and healthy tissue.

By ruthlessness I mean a compassionate use of the term in which the analyst must sometimes be persistent or even pressuring in the face of defenses, resistance, patterns of being, and attitudes which limit the patient's functioning and meaning in life. As Joseph Redfearn (1982, p. 234) points out, "...caring by no means precludes ruthlessness, but rather demands it." At times a ruthlessness attitude must be adopted, not out of the will to power or a desire to wound, but out of compassion for the patient's suffering and their imprisonment by their current psychic reality. In this context, the attitude of ruthlessness is not intended to shame, embarrass, or belittle – even though a compassionately ruthless interpretation might evoke some of those reactions from the patient. It is an attitudinal perspective that goes beyond the concerns of the patient's ego perspective to the needs of the whole individual and, when utilized appropriately, is an attempt to work synergistically with the teleological thrust of the Self and in primary service to the analytic process. I'm sure everyone here has had times where they felt they have had to be firm or even ruthless with a particular patient but I'm referring to the conscious psychological acceptance of ruthlessness as a necessary and consciously held quality for the analyst who is engaged in working in depth.

Conceptual Parallels

This analytic stance, which I'm referring to as ruthlessness, has parallels to discussions from other theoretical perspectives. There are certainly areas of conceptual overlap between the exploration of hate in the countertransference as discussed by Winnicott (1949), Epstein (1977), Micati (199), and Frederickson (1990). Each of these analysts highlights the necessity of the analyst becoming aware of, metabolizing, and utilizing their own experience of hating the patient in the service of the analysand's development and in facilitating the mutual capacity for empathy in both the analyst and analysand. They also emphasize the potential dangers which emerge when the analyst defends against or fails to acknowledge this hatred. Pursuing other facets of the analytic process, Anton Hart (1999) speaks of the need to "reclaim the analyst's disruptive role in analysis" and Thomas Ogden (1997) highlights the disruptive impact of the analyst's use of language on the patient's conscious beliefs and narratives. Similarly, Richard Kradin (2005) uses the term "analytic aggression" to describe the necessary activities of the analyst, often involving the interpretation of defenses systems and resistances, which have a propensity to evoke negative feelings in the patient.

Hate, disruption, and aggression all bear on the issue at hand. Hate speaks to the analyst's emotional reaction to the patient, aggression speaks to a quality of the analyst's actions toward the patient, and disruption speaks to the patient's reaction to the analyst's actions. However, despite the areas of overlap with the authors mentioned above, I prefer the phrase "analytic ruthlessness" because I believe it highlights an important aspect of the analytic attitude and is therefore directly connected to the overarching work of the analytic endeavor. Incorporating and embracing ruthlessness as a quality of the analytic attitude facilitates a willingness to acknowledge hate in the countertransference, to act in a therapeutically aggressive manner towards the patient, and to tolerate the patient's experience of disruption in the face of the analyst's interventions. Utilizing a military metaphor, Jung (CW 16, 1954, para

315) addresses the importance of incorporating a degree of analytic ruthlessness in the cultivation of consciousness when he states that the analyst must "*believe implicitly in the significance and value of conscious realization, whereby hitherto unconscious parts of the personality are brought to light and subjected to conscious discrimination and criticism. It is a process that requires the patient to face his problems and that taxes his powers of conscious judgment and decision. It is nothing less than a direct challenge to his ethical sense, a call to arms that must be answered by the whole personality.*" Elsewhere, speaking of the experience of god, Jung (CW 11, 1952, para 562) adopts a similar position: - "It is far better to admit to the affect and submit to its violence than to try to escape it by all sorts of intellectual tricks or by emotional value-judgments."

In practice, the emotional experience of ruthlessness is most frequently connected to the act of confrontation. Auld and Hyman (1991) indicate that confrontation is simply the process of calling the patient's attention to a pattern that is not yet conscious but they point out that the act of focusing attention on these patterns can be experienced as threatening to the patient. Adler and Myerson (1983), in their edited volume, *Confrontation in Psychotherapy*, indicate that confrontation refers to a forceful way to intervene as a means of unmasking denial and uncovering hidden affects, as well as transference fantasies, memories, unconscious attitudes, patterns of behavior, the impact of the patient's actions on others, needs and wishes constellated by regression, and resistance to becoming involved in the therapeutic relationship.

Clearly Jung (1965, pp. 170-199) understood the importance of confrontation to the analytic process, having referred to his own descent experience during the years 1913 through 1917 as his "confrontation with the unconscious." Elsewhere (Zofingia Lectures para 202) he quotes Jakob Boehme who says: "Without opposition no thing can become apparent to itself; for if there is nothing in it which resists it, it goes forever outward and does not enter again into itself."

Archetypal Aspects of Ruthlessness:

We can see numerous examples of the presence of ruthlessness in the archetypal realm. In Analytical Psychology, archetypal material is often interpreted from an intrapsychic perspective, e.g. reflecting the dynamic relationship between the ego and the Self. However, as Jung (CW16) convincingly demonstrates in his analysis of the *Rosarium philosophorum*, archetypal themes can also be utilized to understand patterns in the analytic field, including attitudes, such as ruthlessness, which it may be necessary to adopt in the face of certain manifestations in the intersubjective field.

The Bible is replete with examples of ruthlessness in the service of transformation. Yahweh certainly demonstrates ruthlessness in his confrontational stance with Adam and Eve by casting them out of the Garden of Eden for eating from the tree of the knowledge of good and evil (Holy Bible, Genesis, Chap. 3). It is in their painful experience of being cast out which results in their differentiation from the Godhead and a coming into consciousness. Similarly, we can see a ruthless confrontation occurring between Jacob and an angel as they wrestle throughout the night resulting in injury to Jacob's hip (Holy Bible, Genesis, Chap. 32). Out of this conflict Jacob not only survives the conflict but is transformed. His transformation is symbolized by the angel bestowing a new name upon Jacob - Israel which means "the one who wrestles with God." It is important to recognize that in this ruthless conflict between Jacob and the angel there was no winner – the emphasis is on the experience of the confrontation or struggle. Certainly, there is also an attitude of necessary ruthlessness depicted in the willing sacrificial crucifixion of Yahweh's son, Jesus, which is seen as the central transformative moment by which Jesus becomes the Christ figure (Holy Bible, Luke, Chap. 23).

We can observe a ruthlessness pursuit of knowledge in Odin's willingness to sacrifice himself on the world tree Yggdrasil for nine days and nights. He is pierced by his own spear in order to learn the wisdom of the runes that would give him power in the nine worlds and he

willingly sacrifices an eye for a single drink from the spring of Mimir in order to gain the wisdom of ages (Crossley-Holland, 1980).

In the Grimm's fairytale of Snow White (Manheim, 1977) we see a ruthlessness which moves in two directions. Initially, there is a ruthlessness by which the wicked step-mother queen, who experiences Snow White as a narcissistic threat, sets out to murder Snow White. However, Snow White escapes this fate with the assistance of a prince who then proclaims she will become his bride. At their wedding the evil queen recognizes Snow White and is immobilized with both rage and fear. Red hot iron slippers are brought in with tongs, set before the evil queen, and she is forced into the red-hot shoes causing her to dance until she falls down dead. In this scene, the objective psyche clearly meets ruthlessness with ruthlessness in dealing with the jealousy and envy personified in the evil queen.

In a final example, we can see that the theme of ruthlessness is clearly invoked in the service of transformation in the fairytale of *The Bewitched Princess* (von Franz, 1970). In this tale, a young man named Peter falls in love with a princess who has been bewitched by a mountain spirit. Peter's companion advisor is a ghost who provides Peter with an iron rod and instructs Peter to pummel the princess with the iron rod causing her to flee to the arms of the mountain spirit. Peter follows her to the home of the mountain spirit and is then equipped with two iron rods and a sword. He utilizes the sword to cut off the head of the mountain spirit and throws it at the feet of the princess, releasing the princess from her enchantment. Again, ruthlessness is central to the process of transformation depicted in the fairytale.

If we accept that Jung was correct in his assertion that psyche interacts via a process of mythopoesis and there are hundreds of examples in which ruthlessness plays a transformative role in these archetypal narratives, then we must also accept that not all instances of ruthlessness can be interpreted in terms of hostile complexes or negative archetypal energies. Clearly there are instances in which the archetypal narrative is calling for ruthlessness in the service of progression, adaptation, or transformation.

Ambivalence about Ruthlessness:

Analytic ruthlessness seems to be one of the areas that we, the analyst/teachers, are seemingly the least comfortable with ourselves. We might question why this area of confrontation, ruthlessness, and disruption is uneasy for us. Perhaps we feel we have the fewest tools and wisdom to share in regards to entering into positions of ruthlessness with our patients. Perhaps there doesn't appear to be sufficient psychological space separating a compassionate use of ruthlessness from the sadistic identification with ruthlessness in which case the goal of ruthlessness becomes the infliction of pain without an accompanying movement towards growth. Indeed, it is a difficult tension for the analyst to hold – not knowing in the moment whether one's ruthless analytic intervention is an abuse of the patient or an attitude adopted in the service of the analysis. In the Inter-Regional we do seem to encourage a discussion of the negative transference, particularly during the writing of the candidate's final case examinations, but in our seminars we seem to offer little instruction or guidance about how that might look or be experienced. It also seems a rare occasion when negative transference/countertransference reactions or strong confrontation is a central focus in our collegial case presentations.

It may be that the struggles we experience around ruthlessness are indicative of the kind of individuals frequently drawn to analytic or therapeutic work. Nancy McWilliams (2004, p. 105) says, "According to my informal observations, most people who are attracted to being psychotherapists like closeness, dislike separation, fear rejection, and suffer guilt readily. They tend to be put other people's needs before their own." Similarly, Karen Maroda says (2010, pp. 179-180), "From my experience working with therapists, many suffer from being too passive, masochistic, and conflict avoidant....therapists gravitate toward soothing and peacemaking behaviors...a wide variety of other attitudes and interventions are therapeutic yet may not be part of the repertoire that many therapists established in their childhood training as caretakers." Maroda goes on to say that therapists often fail to develop their capacity to engage with

negative affects because their own analyses are frequently conducted by an analyst who is also not comfortable with conflict or confrontation. Stephen Levy (1990) and Richard Kradin (2005) both observe that many therapists have conflicts around their own sadistic urges, fear of hurting patients with their words, and guilt around seeing and knowing too much about their patients which the patient considers taboo. Levy goes on to say that the therapist will often fall into a pattern of pseudouncertainty; becoming overly speculative and/or tentative in their interpretations when these internal conflicts are prominent.

In addition to these self-selecting characterological factors, the fields of Analytical Psychology and Psychoanalysis have been significantly influenced by a large shift in the gender composition of the analytic profession, object relations theories, the relational analytic movements, post-modern philosophy, intersubjectivity, feminist theory, and infant observation. All of these influences have resulted in a much needed compensatory move away from the traditional view of the analyst as an objective, detached, cold, authoritarian, and withholding presence who only rarely speaks and then only when interpreting. What has emerged is a field in which there is a greater appreciation of the mutuality of influence in analysis, a greater emphasis on utilization of the metaphor of the mother-infant dyad to understanding analytic interactions, and a general questioning of the position of authority of the analyst in the analytic dyad.

However, we might wonder whether our assimilation of these compensatory influences has resulted in throwing the baby out with the bathwater. Hart (1999), Kradin (2005), Kernberg (1996), Imber (2000), and Tuch (2001) all point to new imbalances that have emerged as we have sought to correct old patterns of one-sidedness. Hart (1999) warns (p. 198), "The analyst who defensively identifies with the maternal role may turn the analytic relationship into a single-parent family where "the father" (representing the capacity for analytic disruption) has been banished because he threatens the safety of the two." Christopher Bollas (1996) says that unless the analyst finds a way to move between the maternal and paternal, our analytic

theorizing and practice will be carried out in a matricidal or patricidal manner, resulting in an analysis that is conducted from the perspective of a single-parent family. The opposing parental principle is then dismembered by the principle being embraced in a one-sided manner. By striving to embody the mother, we slay the father, and in any attempt to completely embody the father we slay the mother. Finding a combination of analytic values that derive from both mother and father allows the formation of an analytic syzygy (Jung, CW9ii, para 20 - 42) that can facilitate the analytic process.

Tension of Opposites

The preceding passage illustrates how intimately the issue of ruthlessness is connected to the Jungian concept of the tension of opposites. As Jung (CW 7, para 34) states, "...all energy can proceed only from the tension of opposites," and elsewhere he says (CW8, para 189) "The confrontation of the two positions generates...a living, third thing...a movement out of the suspension between opposites...The transcendent function manifests itself as a quality of conjoined opposites." The analyst working within the tension of opposites will always be considering what is missing, what is out of balance, or what has yet to be developed. From a Jungian perspective shouldn't we always be aware of, or attempting to hold, the tension of the opposites; not just the emergent tension of opposites discovered in the patient's material but the tension of opposites embodied in our analytic activity?

At times, it seems analytic activity can become stuck in a one sided approach to the session – that of passivity, receptivity, holding, and containing – what some term the Eros or maternal function of the analyst. Fordham (1979, p. 637) warns against the tendency to fall into such one-sided analytic functioning: "If an analyst believes that being loving, tolerant, kind, understanding, and long-suffering is enough for the relationship he is mistaken." Melanie Klein (1950, p. 80) adopts a similar position "Idealization is used as a defense against persecutory anxiety and is its corollary. If the analyst allows excessive idealization to persist – that is to say, if he relies mostly on the positive transference – he may, it is sure, bring about some

improvement...It is only by analyzing the negative as well as the positive transference that anxiety is reduced at the root.”

Often sessions characterized by such one-sidedness can become stuck in a cycle of asking question after question; creating a false impression that the asking of questions alone will somehow lead to transformation. In our well intentioned efforts to be kind, understanding, empathic, warm, and supportive we can forget that there is a tension of opposites to be found in our analytic activity as well – a balance between the fundamental activities of passivity, receptivity, holding and containing, and the necessary influences of discrimination, differentiation, activity, and penetration. In this vein, we could also include the balance between hardness and softness, knowing and not knowing, questioning and interpreting, particularity and wholeness, personal and archetypal, and masculine and feminine.

Jeffrey Seinfeld (1993) describes this reciprocating process of interpreting and holding as the paternal and maternal functions of the psychotherapist. Seinfeld sees the paternal functions of the analyst as originating with Freud’s model of analytic activity and associates the maternal mode of engagement as emerging from Donald Winnicott’s modifications to the psychoanalytic model. In like fashion, Lawrence Josephs (1995) speaks of balancing empathy and interpretation, wherein the analyst pursues parallel analytic paths of understanding from both objective and subjective perspectives. From a Jungian perspective Kradin (2005, p. 431) points out that “empathy is a cardinal feature of Eros. But it should be recognized that empathy is invariably ego-syntonic, so that critical unconscious factors operating beyond consciousness cannot be directly accessed via this approach.” Kradin goes on (p. 447) to say, “Although consciously repelled, the hard-minded and tender-minded approaches are unconsciously attracted and depend upon each other. The Greeks resolved this problem by imagining the offspring of Love and War as Harmony... Empathy and interpretation, love and aggression, all contribute to the fullness of experience. Only by carefully and appropriately balancing empathy with analytic aggression, without overtly or subtly valuing one over the other, can the tension

engendered by their aims be appreciated as complementary in the service of promoting psychological freedom."

The Analytic Contract and Analytic Authority

In the analytic relationship there is an implicit contract to assist our patients in cultivating a relationship with their psyches despite the pain, discomfort, and dis-ease that may be created in the process. Isn't there also an implicit ethical responsibility to be ruthless at times if we are going to plumb the depths of our patient's psyches? In entering into analysis aren't our analysands asking us to take on certain responsibilities, both consciously and unconsciously? When we don't act ruthlessly when the analytic moment asks us to commit to the analytic process in this manner, aren't we shirking our responsibility? Shouldn't our patients be able to trust us to interact with them in whatever manner serves their transformation, even if it is painful or uncomfortable to both us and them? Fordham (1947, p. 157) speaks to this necessity when he writes, "Nor is it desirable to become excessively passive or guilty at the amount of pain, terror and dread that the patient asserts the analyst causes...It is important also to recognize a feature of the pain: it is a sign that the patient is struggling and of his will to live. It is even secretly valued by the patient as such, so it is mistaken to try and take it away from him." Or as Jung (1954, CW 17, para 331) states more succinctly, "There is no birth of consciousness without pain."

The capacity to tolerate and generatively utilize analytic ruthlessness in a session always involves a degree of trust or therapeutic alliance (Hart - 1999, Kradin - 2005) which permits both the patient and the analyst to move into new configurations of their role relationships. Optimally, these new configurations will result in a realignment (i.e. an experience of emergence or transcendence) of the previous habitual relationship patterns (Stern et.al., 1998) which is better suited to progressive movement in the analysis. But often the patient's comfort must be sacrificed for this process to occur. For example, there is a patient who regularly retorts "you're just being nice" when I say something which acknowledges some

progressive movement she has made. In an effort to confront her defensive maneuvers to avoid internalizing a positive feeling about herself I've made the following interpretation, "I'm wondering if you really experience me as being inauthentically nice or whether you have experienced me as reflecting things to you that are actually painful and difficult to face or take in. In which case, I wonder why you would accuse me of lying to you unless that makes it easier to keep any positive experiences of yourself out of your awareness." I believe this patient has a sense that my confrontational stance is adopted to help her access and encounter deeper emotions, both positively and negatively valenced, which she actively defends against experiencing.

As I pointed out earlier, the analytic profession has undergone a massive paradigm shift around issues related to the analytic dyad, including notions about objectivity, authority, power, influence, and knowledge. These developments in the various analytic fields have certainly caused us to re-examine our perspective on analytic authority and the potential dangers and difficulties associated with it. It seems clear to me that if we are indeed ethically compelled to act, at times, with a degree of analytic ruthlessness, then we must also examine our relationship to analytic authority.

First, there is the question as to what analytic authority is, whether we should embrace it, and whether it can be abused. Kernberg (1996) draws a distinction between authority and authoritarianism. He indicates that authority refers to the functional exercise of power in a social setting to carry out necessary tasks. Kernberg terms this functional authority. In contrast, he describes authoritarianism as the illegitimate use of power beyond what is required for the sanctioned task. Friedman (1996) distinguishes between authority as rightness and authority as influence. He goes on to state that authority as influence is an inevitable and unavoidable part of any analytic relationship. This is similar to the position taken by Imber (2000, p. 623) who says, "No matter how much mutuality and democracy have replaced authoritarianism in the consulting room, the analyst is still the professional and the patient is still the one who comes

seeking help,”; a position also advanced by Fordham (1979). Imber (2000) points out that every analyst, even those attempting to relinquish their position of authority and create a feeling of mutuality with the intention of facilitating the patient’s development and autonomy, are still making an authoritative decision about what they believe is best for the patient.

Even our association with our analytic societies and institutes creates a form of institutionally sanctioned authority. The institutionally sanctioned terms we use, "certified Jungian analyst" or "diplomat Jungian analyst" imply that we have a particular type of knowledge and with that knowledge comes authority, whether we desire it or not. Don't our propeadueticum, thesis, and final case examinations constitute an assessment of clinical, theoretical, and personal knowledge which implies a certain level of authority? In their volume *What Do Psychoanalysts Want?*, Sandler and Dreher (1996) convincingly make the case that every analyst acquires, through their training and experiences, a set of implicit and explicit ideas about the nature of therapeutic change. They go on to argue that no analyst, regardless of the analyst’s desire or intent, is capable of “turning off” that knowledge base which forms the foundation of their functional authority in the analytic dyad.

The idea of analytic authority can bring to mind images of the stereotypical psychoanalyst of the past; the psychoanalyst who remains cold and unrevealing of his inner emotions, responding only through experience distant, meta-psychologically encoded interpretations which are delivered from a hierarchical position of objective knowledge gleaned from theory. Does the incorporation of ruthlessness as part of one’s analytic attitude suggest a return to these stereotypic patterns of analytic behavior of the past that impeded the maturation of the field of analysis for so long? I certainly hope not. Does the adoption of a stance of analytic ruthlessness reinforce the hierarchical relationship inherent in the analytic setting? Possibly, but another danger, as Richard Tuch (2001, p. 495) points out, is that “discounting the analyst's authoritative knowledge about the patient threatens to rob the analyst of the leverage needed to facilitate change.”

At times, in supervising control candidates, I'll observe that they can get caught up in asking their patient a long series of questions which don't appear to facilitate the emergence of meaning or experience. During these instances I'll often interrupt the recounting of the session to ask the candidate what they know about the patient or the interaction at that specific moment. Frequently the candidate is able to articulate something particularly useful. At that point I'll ask them why they didn't share that insight or observation with the patient through an interpretation. Often the supervisee will say, "I didn't know I knew that until you asked me," or "I've been told not to say things directly like that - that it is always better to ask a question." To my way of thinking, these statements reflect the difficulty involved with the incorporation and utilization of functional authority as part of one's analytic attitude. The candidates' comments also underscore how the assimilation of functional authority is sometimes inadvertently discouraged in our training process. Certainly there are many times throughout an analysis in which it is important to remain in a position of unknowing, to leave space for the teleological actions of the Self, and to remain in a receptive position to what is emerging in the analysis. But there are also many times when the analyst or candidate has an idea about what is happening with the patient but fails to share it because of a lack of well integrated analytic authority.

Those who question a position of analytic authority often point to the use of interpretation as the means by which the analyst imposes their views on the patient. Certainly there are analysts who experience a narcissistic or philosophical need to have their interpretations validated by the patient, which could result in authoritarian maneuvers to ensure that the analyst's views are accepted. However, the questioning of interpretation in general is a position which presumes that the analyst is delivering the interpretation in an overbearing manner in an attempt to force the patient to accept their "objective truth." This position also presumes that objectivity is the only basis by which an interpretation can be formulated.

Often, in our current state of analytic understanding, interpretations are framed from within the patient's subjectivity (Attwood and Stolorow, 1993) not from a stance of a detached

objective observer. The inherent tension between subjectivity versus objectivity is what Donald Spence (1982) refers as “narrative truth” versus “historical truth” with an understanding that any interpretation is offered as a hypothesis about the patient’s narrative truths and how those truths appear to be influencing the patient’s sense of self and functioning in life. Similarly, Covington (1995) speaks of the importance of listening to, understanding, and speaking to the patient’s narrative in the interpretative process. As Kernberg (1996, p. 150) points out, the “psychoanalysts' legitimate authority does not imply that they understand all the time what is going on, or that in their understanding and interventions, they are always doing ‘the right thing.’”

I think of interpretation, not as statement of objective truth, but as an invitation for the patient to experience their world in a new way. Ideally, an interpretation is a means of accessing and engaging an area of psychic experience which might otherwise remain split off and unavailable for transformation. Owning our analytic authority requires us to know what we can know in the moment - not holding it as absolute truth - but rather holding it as an ever evolving experiential truth. Analytic authority involves saying what needs to be said based on that truth as it occurs to us in the moment.

Let us consider whether we are in danger of diminishing a useful and sometimes necessary aspect of the analytic relationship during our attempts to increase the symmetry or equality of that relationship. In doing this, perhaps out of an identification with the collective therapeutic culture of our time, we may be disconnecting from our own sense of analytic authority and therefore making that quality unavailable for use by the analysand. Rather than fighting against the inherent functional and institutional authority associated with our position as analysts we should try to acknowledge it and attempt to utilize it to the benefit of the analysis. Do we have the courage to claim our authority in a way that is willing to risk wounding the patient as part of the process of healing? To paraphrase the inscription over the entry to Jung's house "invited or uninvited, authority will be present." The issue of analytic authority will be

present whether we have identified with it, whether it emerges out of the asymmetrical intersubjective matrix, whether it is projected onto us by the unmet needs and wishes of our patients, or whether it is conferred upon us by our training institutions and culture.

Language

While I'm sure most analysts would agree that a degree of ruthlessness is sometimes unavoidable I wonder if ruthlessness, as an analytic value, isn't experienced as an odd relative whom we wish wouldn't show up to the family reunions. Ruthlessness doesn't appear to be embraced within our community as an analytic attribute which needs to be attended, nourished, and cultivated in the same way we endorse the symbolic attitude as a mainstay of our analytic stance. We need only look to the language of our analytic theories and process descriptions to see the emphasis placed on the positive aspects of the therapeutic relationship: container/contained, holding environment, receptivity, maternal presence, Eros, *coniunctio*, therapeutic alliance, transference love, rapport, or good enough mother. In discussing language, I'm not only referring to the language used to speak with our analysands; I'm also speaking of the language we use to think about and reflect upon our analysands.

In contrast to the richness of our language around the more comfortable, positive aspects of the analytic relationship, can we say there is a similar richness of vocabulary around more confrontational aspects of the analytic relationship? Certainly, at times the language of confrontation is used to describe the patient's orientation towards the analyst, particularly in the case of patients with a borderline diagnosis and those patients who are significantly regressed. But it seems there is a poverty of language to describe the confrontational or ruthless aspects of the analyst's attitude, actions and affects directed toward the patient.

Ogden (1997, p. 11-12) points out the importance of the disruptive aspects of the analyst's language to the analytic process : *"The analyst relies on language to upset (unsettle, decenter, disturb, perturb) the given - the given of the patient's conscious beliefs and narratives by which he creates illusions of permanence, certainty, and fixity of the experience of self and of*

the people who occupy his internal and external worlds. A central part of 'the given' that is disturbed by language is the given of the patient's and the analyst's understanding of what is 'going on' in the analytic relationship...Language is at its most powerful when it disturbs, not by arriving at insights/understandings, but by creating possibilities." Hart (1999, p. 192) indicates that the very act of languaging experience in analysis is necessarily violating, "In a sense, putting the unformulated into words through interpretation amounts to a violation...As the analyst introduces language for experiences, the analyst intrudes on the analysand's private safety. Now experience that had been left disconnected is potentially connectable. Dreaded experience is no longer nameless, no longer isolated, no longer easily forgotten...The analyst violates with inquiring."

Analysis of Defense and Resistance

It is primarily in the confrontation of the patient's defense system and their resistance to analysis where an attitude of analytic ruthlessness finds the greatest utility. The essential presence of a safe, containing *temenos* is rarely sufficient to allow the emergence of many experiences which are actively defended against. A safe *temenos* is certainly a necessary condition for the analytic process but in many instances is not adequate in and of itself. Frequently these defensive processes must be actively engaged. It is most often the concerns about the patient's ego response which interferes with the analyst's expression of necessary ruthlessness. To become ruthless we often have to temporarily set aside our concerns about the reaction of the patient's ego to an interpretation so that an autonomous complex can be more fully engaged.

As Lambert (1981), Van Eenwyk (1991) and Kalsched (2010), among others, have pointed out there is a significant lack of emphasis on the analysis of defense and resistance in Analytical Psychology; primarily being limited to the group of Jungian analysts philosophically associated with the developmental trend in Analytical Psychology. There also exists in the Jungian world a more general lack of emphasis on the cultivation of analytic technique (see

Zinkin - 1969, Fordham – 1969, Charlton – 1986), especially the technique of interpretation, which is the main means by which ruthless confrontation of actively defended psychic contents and resistances occurs. Fordham (1995, p. 56-57) highlights the difficulties created in analytic work by a lack of focus on technique: “the methods used by Jung, and more so by his followers, were not applicable often in the rough and tumble of everyday psychotherapy when the careful analysis of sexuality and childhood was often needed but neglected.”

Similarly, Randolph Charlton (1986, p. 153) says, “Despite attempts at clarification, technique within Jungian analysis remains confused and confusing. There exists a wide range of acceptable techniques often without much understanding of the rationale for their use. There has been little discussion in the Jungian literature of the overriding parameters of analytic method in particular situations...” Louis Zinkin (1969, p. 119) indicates that “Analytical Psychologists as a group appear to concern themselves less with problems of technique than perhaps any other comparable group of therapists.” Finally, in addressing the importance of technique, David Kadinsky (1970) points out – technique isn’t simply a representation of mechanical processes to be carried out by the analyst with a cookie-cutter mentality. Rather he emphasizes that the very process of technique is a means of communicating symbolic material as well.

The Curative Factor of Ruthlessness

Much of the curative factor associated with the incorporation of ruthlessness into the analyst’s activities can be attributed to the uncovering and engagement of various split off, hidden, dissociated, or repressed psychic contents - allowing them to become more available for conscious reflection and mentalization. However, this influence can be identified as a curative or transformative aspect of many analytic actions. Two factors associated more exclusively with the idea of analytic ruthlessness are the centrality of rupture to healing and the application of the *law of similars*.

The Centrality of Rupture: Much of our literature and training focuses on the importance of creating and maintaining a positive therapeutic alliance but there is comparatively little discussion of the progressive aspects of disruption and rupture in analysis. Self Psychology recognizes the potential therapeutic benefit of analytic rupture in their concepts of optimal frustration and optimal failure. Optimal frustration and optimal failure are experienced by the patient as disruptions in the therapeutic relationship. Through these experiences of rupture and subsequent reparative interaction, Self Psychologists hypothesize that progressive intrapsychic structuralization is occurring through a process of transmuting internalization (Lee and Martin, 1991). More recently the Boston Change Process Study Group (Stern et.al., 1998) have proposed that the “disjoining” experiences and “missed now moments” form a cyclical process in any functional transformative relationship. When these disruptive moments are recognized, acknowledged, and repaired through the interactions of the analytic dyad they ultimately contribute to the development of new capacities, intrapsychic structures, and interpersonal patterns. Infant observation researchers have also documented the developmentally progressive impact on the infant when ruptures are successfully navigated and repaired in caregiver-infant dyads (Tronick, 1998). In summary, Hart (1999, pp. 205-206) proposes, “... the analyst must attempt to hold, in her own mind, the sense that *analytic disruption is the basis for analytic creation*....Disruption is present in all instances of analytic work that feel alive, emergent, in motion.”

Law of Similars: In addition to the centrality of rupture for growth, I believe the healing potential associated with the adoption of ruthlessness as an attitude also reflects the *law of similars*, which states "let like be cured by like" (Latin - *similia similibus curentur*), proposed by Samuel Hahnemann, the founder of homeopathy. Jung (1960, CW 8, para 480) has proposed that the *law of similars* is often reflected in dream processes and Schwartz-Salant (lecture) has advocated “leaning into the pathology”; an activity of the analyst which can be seen as a behavioral application of the law of similars. We can also see an analogous idea being

expressed in the Axiom of Ostances: "A nature is delighted by another nature, a nature conquers another nature, a nature dominates another nature." As Kalsched (1996, 2010) has pointed out, the inner world can be ruthless in response to the analyst's efforts to connect and facilitate healing in the patient. Following Hahnemann's law of similars and the Axiom of Ostances, I believe both clinical experience and the archetypal patterns of the objective psyche provide support for the idea that there are times when ruthlessness is necessary in order to navigate the barriers which are constructed to protect the inner world of the patient and to maintain psychic equilibrium.

Conclusion

Warren Poland (2008, p. 557) tells us, "In agreeing to work psychoanalytically with someone, the analyst commits himself or herself to stay with that work with whatever ruthlessness honesty he or she can command." My intent is not to advocate for a return to the cold, unavailable stereotype of the classical Freudian analyst but rather a recognition that in our efforts to embrace the important and previously under-appreciated maternal functions of the analytic relationship it appears that we have also created an *enantiodromia* in which our current analytic culture has swung too far in the other direction. By making room for ruthlessness in our repertoire of analytic behaviors, we may initiate a movement towards a new position in which both ends of the maternal – paternal continuum can be embraced, appreciated and utilized; a center in which acting in the service of the analysis is the greater goal. Emmanuel Ghent states the case in a beautifully simple metaphorical image (1989, p. 196). He says, "My own view is that there is more than one way to help a flower grow. Sometimes selectively nourishing or watering it is what is required; sometimes clearing some weeds will be helpful." I believe that finding a balance between the maternal and paternal aspects of analytic activity is a cardinal feature that differentiates a process which is analytic from one that is merely therapeutic. In order to embrace ruthlessness as an analytic attitude we must become ruthless with ourselves, challenging our cherished roles, patterns and ideas. Each confrontation with a patient should

also be a confrontation of our own anxiety, our own fear of becoming a source of our patient's wounding. In this regard, it seems important to remind ourselves that as analysts we are, first and foremost, servants of the analytic process.

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