

## Psychoanalytic Controversies

### On the idea that analysts should acknowledge to their patients that they have failed them: A clinical debate

#### An introduction

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The present controversy deals with the question of whether analysts should at times openly acknowledge to their patients that they have failed them in the course of the analysis. As will become immediately apparent, the debate sets out from within a very specific framework – that of Relational Psychoanalysis, a clinical and theoretical approach which has gained a large following in the USA in the course of the past two decades and which in recent years has also been expanding elsewhere. A leading proponent of this approach, living and practising in New York, Jessica Benjamin, argues for the value and necessity of such acknowledgement when the analyst fails to appropriately provide the patient with what she refers to as ‘recognition’. She first offers a theoretical overview in which this concept and others that are central to her thinking are described and then presents clinical material which to her mind demonstrates how essential is the acknowledgement of this failure. Vic Sedlak, a Training Analyst at the British Psychoanalytical Society (who describes himself as identified with the Society as a whole, rather than any specific sub-group within it), responds to Benjamin’s arguments. Ultimately he takes a critical view and explains how the theoretical claims and clinical approach on which her position rests limit analytic understanding and process. Jessica Benjamin then responds to this critique.

The topic of this controversy was chosen because it offers an opportunity to examine the relationship between Relational Psychoanalysis and more mainstream, traditional approaches to psychoanalytic thinking and practice to which Relational Psychoanalysis considers itself to be a response. Such examination may provide the many readers residing outside the USA who are not acquainted with the Relational trend some appreciation of the critical issues and fundamental shifts in perspective that this trend introduces. In light of its current expansion this kind of appreciation is of greater importance. Moreover, for those already familiar with the Relational approach and its critique within the USA, understanding is deepened by taking note of how it is viewed from within another analytic cultural context.

It was thought that the focus on a specific clinical issue and the use of case material would allow for a more immediate grasp of the differences between the approaches than that which could be obtained by purely theoretical discussion. But obstacles to dialogue still remain. In part, these are due to terminological problems: in Relational Psychoanalysis some common analytic terms are given new meanings and many new terms are introduced. While in the present publication there was an attempt to avoid or clarify terms that would be ambiguous to uninitiated readers there are many fine points that could not be overcome. In this context the readers should take note of differences in the precise meanings ascribed to terms such as 'the third', subjectivity, enactment, morality, containment, and acknowledgement and not assume that we are all speaking a shared language. As gradually becomes apparent in the dialogue between Benjamin and Sedlak the Relational emphasis on how analysis provides a new interpersonal encounter downplays the unconscious and intrapsychic aspects of these terms. Thus, for example, 'the third' seems to refer to a 'pattern of engagement', some co-created quality of intersubjective relatedness that is removed from the triangular nature of the oedipal constellation integral to the human mind and phantasy, and the analyst's 'acknowledgement' refers to an actual disclosure to the patient rather than only an act of self-awareness.

A closely related obstacle to dialogue is the presence of implicit assumptions, often taken for granted, regarding the very nature of intrapsychic processes and how they may be transformed in the course of an analysis. Most significant is the fact that Relational assumptions regarding the powerful influence of contemporary interactive processes, similar to the regulatory ones of mother and infant described in developmental research, play an important implicit role in the discourse. As a consequence, for example, while speaking in what seems to be conventional analytic ways of using enactment to allow for the integration of dissociated parts of the self it becomes apparent that Benjamin is actually referring to the analyst facilitating a dramatization of affective experience by providing a formerly absent 'witnessing function'. Traditional readers would then find themselves on unfamiliar ground and referred to many new concepts as well as scientific literature, which some may not find immediately relevant to their analytic work (e.g. from infancy research). Other assumptions regarding the central role played by actual trauma and the curative impact of the act of 'giving voice' to conscious experience also need to be taken into account in order to understand the positions that are put forth. These provide the grounds for Benjamin's basic position within this controversy, namely, that:

When we acknowledge to the patient the felt experience of having recreated the original injury we are in effect inviting the abandoned, shamed and wounded part to become more vocal. We thus avoid repeating the part where the original abuser or bystander adult denied the child's reality. ... [W]hat usually solidifies and makes intractable re-traumatization in the analytic dyad is not the enactment itself but the analyst's failure to acknowledge, which the patient correctly grasps as *avoidable* failure.

(p. 444)

In the course of this exchange it may be seen that the issue of acknowledging failure addresses essential questions regarding what it means to know and to fail to know within the analytic context. When the analyst acknowledges his failure to the patient, is he humbly accepting the limits of his knowledge and capacities or is he asserting sure knowledge of his moment of failure and that his failure is in fact only momentary? From an analytic perspective what does it mean to regard the analyst's responses to his patient as failures, in some sense moral ones, that can and should be acknowledged? What does this imply in terms of the analyst's role and commitment to the patient? These questions, while specific in nature, go to the very heart of the analytic stance, situation, and task and thus allow for a discussion of core issues that separate Relational Psychoanalysis from the traditional analytic approach represented by Vic Sedlak. But here too there seems to be room for misunderstanding. Are the moral positions and aspirations that each approach ascribes to the other fair descriptions or caricatures that give way to easy, yet unfounded criticism? At several points the reader of this 'controversy' will have to take a stance on questions of these kinds, especially (but not only) when faced with some explicit claims regarding misrepresentation.

It may be of interest that this controversy is based on a presentation and discussion that took place at the British Psychoanalytical Society in November 2007. In that context Jessica Benjamin presented a broader paper, which she described as an attempt "to expand the clinical value of the dynamic of destruction and survival, rupture and repair by emphasizing the co-creation of the third, specifically the analyst's responsibility for acknowledging her or his contribution breakdowns in recognition, to enactments, especially of old injuries, and to current power struggles and impasses". Drawing on concepts of multiple self-positions and bidirectionality, as well as "awareness of how analyst and patient together engage in dissociation in relation to troubling or terrifying feelings" she discussed at greater length "how the sense of a shared process and the patient's agency grows through reconnecting and surviving the mess those dissociations produce". But it was Vic Sedlak's response and the discussion that ensued that helped clarify for those unfamiliar with Relational texts both the essential nature of the claims being made and why they are controversial.

In the context of the present controversy we hoped to create a format that would allow these claims and issues to be more immediately accessible and open to serious debate. The readers are invited to join the debate and further contribute to our understanding of the issues by posting their reflections and questions at the IJPA site that has been designated for this. (See Internet Discussion Group section at <http://www.psyoanalysis.org.uk/ijpa/>)