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### **Creating a Psychoanalytic Mind: A Psychoanalytic Method and Theory** *by Fred Busch*

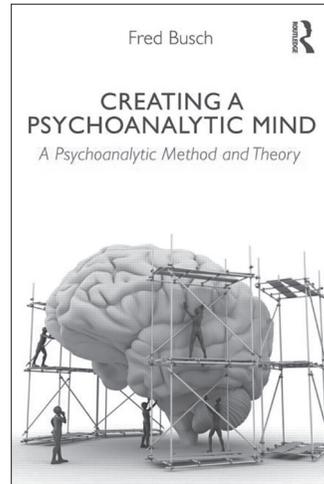
London: Routledge, 2014, 182 pp.

The title of this slim but concentrated work reflects the essential idea that animates it, the value of the process by which the analyst helps the patient reflect on and come to understand his own mind. Busch raises that process to a significant level and states that the ability to think about one's thoughts, and to come to understand them as subject to unconscious forces, is as important an element in the therapeutic process as what those unconscious forces are about. While this idea of greater attention to the process has found its way into many of our theories, for this author it begins with the analyst paying closer attention to the surface narrative, the way the story is told, the tone, the shifts, the stops and starts, the repetitions, and so on. The surface is readily observable to the patient and becomes a manageable starting point and a stimulus for further interest in his inner life, allowing access to the underlying forces in a more convincing way. Busch argues for

a greater appreciation of the need for authenticity in the patient's way of participating in the analytic process and respect of the analyst for the analysand's potential and emerging capacities to think and feel for himself.

Freud recognized the intimate connection between form and content in relation to dreams; psychoanalysis has had, from that time onward, an interest in the relationship of unconscious fantasy to resistance and defence. So, too, the idea of self-reflection as the complement to the flow of the free associative method, and of the value of finding the material closer to the surface that the patient can utilize, have appealed to many analysts. Indeed, analysis has a long history of clarifying the techniques by which attention to the unconscious in the form of interpretation is brought about. Bibring's (1954) introduction of the idea of clarification as setting the stage for a greater recognition of the ways in which the analyst prepares the patient for interpretation, is one example. Clarification is used to describe a broad range of activities by which the analyst brings together and clarifies data for interpretation proper, and is explicitly related to material that is conscious or preconscious, and therefore not liable to stimulate resistance in the same way as interpretations of unconscious forces.

Still, there is debate about the role and nature of the preconscious, and the importance given to the role of this kind of knowledge, and more broadly, of a coherent self-understanding by the patient in bringing about change—a kind of subset of the broader issue of the therapeutic value of insight. In a sense, this book is an extended argument against the alternate view in which the idea of an observing ego is a misleading fiction, and that speaking directly to the deeper layers of the mind is the essential therapeutic influence. Busch believes that what is important in the here-and-now with the analyst can be widely divergent from the actual content, but needs to be more carefully restricted from the point of view of the process, by paying attention to what is preconsciously available to the analysand. This applies, for example, to presenting interpretations of the transference prematurely. When the analyst strains to keep the transference at the forefront, one of its advantages, its immediacy, can be obviated. Our ideas of transference have expanded and adapted over time, so that resistance and



defence can be understood—much as unconscious fantasy has been—as a constant activity, more readily observable and potentially useful at certain junctures. Busch offers many clinical vignettes to demonstrate the technical approach of staying close to these moments when they appear, and of noticing how, over time, that process begins to enlarge the analysand's capacity to view her thoughts as mental events rather than concrete representations of reality, to self-observe and to develop the ability to “think about their thinking.” Busch tracks these changes as they occur through the middle and termination phases of treatment as the patient's capacity for self-reflection and self-inquiry, and more elaborate and sophisticated capacities for self-observation, grow exponentially.

Busch makes the case that there is a convergence in some of our theories on greater emphasis on the role of the preconscious, more broadly defined as something that partakes of aspects of both of the other systems. In chapter 4, “The Transformative Power of the Analyst's Words,” Busch situates his approach alongside that of other theorists who have emphasized the failure of representation and the importance of creating and building representations in the effort to contain the urge to action.

At a more primitive level, we attempt to build a simple representation from what is poorly represented and often expressed in the language of action . . .  
At a more neurotic level, we help to build more complex representations by understanding the meaning in preconsciously formed associative links. (p. 38)

Busch argues that we rely on higher-order ego functions to analyze more regressed levels of ego function; he sees similarities in the work of Bion and Green in their emphasis on the need to link representations and monitor the ego's capacity to do so. The readiness to observe and to think about oneself is highly variable and requires inner poise and interest. As the scope of analysis has widened, the analyst's confidence in being able to find a reasonable part of the mind of the analysand with which to ally has become more suspect. Busch struggles to adapt his method to more disorganized, or action-oriented, patients, ending his chapter on countertransference with

working with what is preconscious . . . is especially hard to do with severe character disorders where . . . a way of being is enacted . . . that touch[es] off parts of the analyst's unconscious that are difficult to contain. (p. 130)

The value placed on the associative process runs throughout part 2, titled “Clinical Reflections.” Busch, grappling with the perennial ques-

tion of questions, feels that essentially the analyst's questions interrupt the associative process and work against the exploration of resistance that stimulates them, preferring what he calls, following Ferro, "unsaturated questions"—meaning more open-ended questions that ask the patient to observe something together with the analyst in the here-and-now. The chapter on working-through emphasizes the original meaning of working through the resistances. The underlying fears that prompt restrictions on thought have to be given their due and the "adversarial" view of resistance left behind. Busch argues that often the effort to get at the feelings—the strangled affects and unconscious fantasies that are being defended against—takes precedence over the dangers that keep them in place. He illustrates the usefulness of working with the transference in displacement, what he calls the "lateral transference," if it is more salient and available, alert to the moments when the bridge to the transference proper occurs, often within the same session or even alternating within a session.

The use of the counter-transference is understood, as it is widely, as an essential means by which to enter into this welter of forces and to determine the workable surface. As he points out and Mittelman (1949) demonstrated, the telling of a dream can elicit very different feelings, depending on how the dream is situated. Busch emphasizes the importance of making the material that is stimulated in the analyst digestible to the analysand by offering observations that stay close to the patient's spoken words, tone, and phrasing as a first step in helping. This has the advantage of leaving room for the unexpected. He argues that the counter-transference, too, is often at the source of the need to interpret more deeply, but that the deeper interpretations are a way of more forcefully pushing back into the patient and demanding that she own aspects of her inner life that make the analyst uncomfortable. What we may characterize as our special knowledge of the deeper layers restores our own equilibrium and feelings of control. Finally, Busch emphasizes that the capacity for self-analysis, often viewed as a harbinger of termination, is not acquired only in passing by an identification with the analyst's analyzing function, but is a result of the approach the analyst advocates, as something built up in collaboration with the patient's own curiosity, emotional engagement, and self-understanding.

This book might give the impression at first of being a primer of psychoanalytic technique, albeit a very useful one with special emphasis on the dangers of forcing the transference prematurely. However, it might elicit the feeling in the reader that the slow approach is too laborious, and that the focus on sequence and surface comes at the expense of less rational

processes, placing too many demands and restrictions on both patient and analyst. There seems to be a skill required and developed over time, involving the ability to identify, track, and relate themes and their variations, including their affective quality and charge, as they come and go, so that this can occur relatively automatically. There is certainly a danger of one-sidedness if the analyst stays close to the patient's preconscious. Debates in the literature over the role of empathy have presented similar concerns—that empathy becomes an end in itself and the deeper connections are not made. What is understood as material that requires deep interpretation can suddenly become conscious if the proper connections have been made. This touches on the broader question of how to respect psychic reality while introducing the analyst's alien views, and can vary in the degree to which the analyst is comfortable in the role of disrupter of psychic equilibrium. Rappaport (1992) has written on the dangers of staying too close to the psychic surface and becoming so identified with the patient in the empathic immersion that the capacity to maintain alternate views becomes compromised. In this, he follows many who have argued that we make judgments influenced by and about our and the analyst's sense of reality, and their degree of correspondence, and that sometimes in our thinking and in our communications we are moved to address aspects of the disparities. Grossman (1996), for one, demonstrates the vital importance remaining (benignly) skeptical in our attitude when he writes about patients having a perverse attitude to reality, "who disavow important aspects of reality and treat it as irrelevant, whose own criteria of reality are being violated" (p. 510).

I think Busch would agree that understanding unconscious forces in all their layered variability are at the heart of our work, and that our knowledge of unconscious content can only add to our appreciation of form. He would want those who employ his methodology to feel that the field of interest has been enlarged, and the range of therapeutic possibilities expanded, that ideally, as we would all wish, the surface and depth work are bound together in a more complete understanding. In choosing a clear focus for this book, he has provided a clarity that appeals to all students of psychoanalysis, and a depth and sophistication in his treatment of his subject that will satisfy an experienced practitioner. He is thorough in his explanations and presents his arguments by increments and with care, and this thoughtful, mindful approach to the reader has an apt resonance with the story he is telling.