Transference Trashed and Transcended PCO 2005?

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Just as the concept of the earth as flat became trashed to be transcended by the concept of it as a sphere; just as Newton's concept of gravity became trashed to be transcended by Einstein's concept of curved space; so the psychodynamic concept of transference has become trashed to be transcended by the concept of the schema.

This is the headline story of the superseding of transference, a concept originally devised by Sigmund Freud in 1895, whose 'use...makes it one of the most distinct features of psychodynamic theory and practice' (Jacobs, 1999: 16).

'Trashed' is, admittedly, an exaggerated term. The concept of the earth as flat and Newton's concept of gravity continue to be useful in guiding our conduct in the world. While, as already noted, psychodynamic therapists continue to find the concept of transference useful in guiding their therapeutic practice. From the transcendent perspective, however, such usefulness has its limits and can result in decidedly superstitious behaviour—as when 'flat-earthers' avoid travelling too close to 'the edge', or when psychoanalysts 'interpret' an outstretched hand rather than shake it (Malcolm, 1982).

Here are some key details of the story behind the headlines?

A shift of paradigm

The general context to the switch from transference to schema is the fundamental shift that is currently taking place in our scientific understanding of the world. A paradigm shift is in progress, a Gestalt switch from a Cartesian-Newtonian worldview to a worldview labelled holistic, process, organismic (Capra, 1982). The physical realm is no longer viewed as ultimately made up of solid bits of stuff (matter) different from the energy or force that controls their activity. Rather it is considered composed of patterns of energy—of activity, per se, activity whose individual units (events) interlock to form an overall field as waves form the sea. So construed, what appears to be stuff-like and unchanging arises from rhythmic repetition of the same pattern in a sequence of events, like the unchanging image produced by sequential flashing of the same pattern on a movie screen. Consciousness, too, is no longer considered to be a defining attribute of a separate kind of stuff (mind) or governed by different operational principles. Instead it is seen as the subjective experiencing of complex patterns of activity.

With regard to transference, the relevance of this paradigm shift is that transference is essentially a would-be scientific concept of Newtonian vintage, whereas the schema is a concept of organismic pedigree.

Transference is a concept not a phenomenon

It is vital to realize that,

transference isn't...a phenomenon. It is a concept. We never see transference at work. It is an idea about something we observe. (Thompson, 1994: 175-6)

Which is equivalent to saying that transference isn't a phenomenon but a *theory* (Schachter, 2002), the terms 'theory' and 'concept' both referring to an abstract formulation. The same equivalence applies when we speak either of Newton's *concept* or his *theory* of gravity—whether termed a scientific concept or theory, such ideational notions aim at precisely characterizing an abstract order or pattern that transcends/underlies phenomenal appearance. We see apples falling and the moon not; make orderly sense of these two different phenomena (explain them) in terms of the single concept of gravity.

A Newtonian notion

The primary phenomena that Freud aimed to make abstract sense of when he fashioned transference were those phenomena that everyday language explains in terms of the idea of 'falling in love'. How, specifically, is one to provide an abstract, scientific explanation of the underlying processes that are involved when a female 'patient' falls in love with her male psychoanalyst (the archetypal psychodynamic therapist)? This was the fundamental question Freud sought to answer by generating his Newtonian notion of transference.

As a student at the University of Vienna, Freud had spent six years in Ernst Brücke's laboratory mapping the nervous systems of such creatures as crayfish. Subsequently, despite becoming a psychotherapist and having given up his neurological research, Freud continued to view himself as a scientific researcher and to be influenced by the Newtonian views of Brücke. As a psychoanalyst, 'Freud's laboratory was his couch' (Gay, 1988: 245), and in accord with Newtonian 'atomistic' science Freud presumed 'a strict atomistic distinction between doctor and patient' (Jones, 1991: 22). 'Just as the billiard balls of matter could be separated from each other and the forces that acted on them, so scientists could be seen as separate from the objects of their research'. Through deference to this Newtonian philosophy, 'the aloof and uninvolved scientist became the aloof and uninvolved analyst whose presence did not disturb the forces going on in the patient'. Both scientist and psychoanalyst, in Freud's view, are governed by a fundamental principle of 'neutrality', a principle that the analyst realizes by being 'opaque' and 'like a mirror' (Freud, 1912b), out of sight of the patient and mostly silent.

Firmly convinced that the neutral analyst 'does nothing to provoke' the female patient's falling in love with him, Freud judged such love to be neither real, genuine nor appropriate (Freud, 1915,1926). It is, he pronounced, 'transference-love', 'erotic transference': the manifestation of a neurotic illness within the psyche; a symptom of the malfunctioning of the patient's 'mental apparatus', the workings of which Freud aspired to explain as a physical Newtonian machine. Freud's conception of transference is thus bound up with his presuming (a) that mental functioning can ultimately be explained in terms of the functioning of the body (specifically of the

nervous system), (b) that such neurological functioning is explainable in Newtonian terms of atomic particles and the energetic forces of attraction and repulsion, (c) that such a manner of explanation is paralleled in the case of mental functioning.

When modelling neurological functioning Freud thus postulated a fluid-like nerve-force or 'quantity' that moves around a network of material particles (neurons), charging up (cathecting) some and being discharged from others; sometimes enjoying free passage along tubular paths between neurons; sometimes having such passage blocked and consequently *transferred* to a substitute neuron (Freud, 1954). While, in his parallel conception of mental functioning, Freud on the one hand refers to 'ideas' as unitary entities that are 'associated in various ways with other such units' (MacIntyre, 1958: 11); and on the other adopts the 'working hypothesis' 'that in mental functions something is to be distinguished—a quota of affect or sum of excitation—which possesses all the characteristics of a quantity...which is capable of increase, diminution, displacement, discharge, and which is spread over the memory-traces of ideas somewhat as an electric charge is spread over the surface of a body' (Freud, 1894: 60). 'This hypothesis,' declares Freud, 'can be applied in the same sense that physicists apply the hypothesis of a flow of electric fluid' (p. 61).

It is this Newtonian mind-set that underlies Freud's attempts to make conceptual sense of the female patient's falling in love with her analyst. Dubbing this occurrence 'transference', he first defines it as a 'false connection' onto the analyst (Breuer & Freud, 1895: 302). To him it is 'a particular instance of displacement of affect from one idea to another' (Laplanche & Pontalis, 1973: 457), of a certain quantity of an electricity-like fluid/charge flowing from one receptacle to another. The true ideational container for such affect is the idea of a man in the patient's past. But due to the repugnancy of consciously entertaining romantic feelings towards this individual, the repelling force of repression has caused this idea to be 'relegated to the unconscious' leaving the path clear for the affect to flow along an associated path and into a substitute, the conscious idea of the analyst.

In his subsequent formulations regarding transference, Freud went on:

- (i) to label such quasi-electrical energy 'libido', viewing it as sexual and instinctual in nature as evidenced by the sexual nature of the patient's feeling for the analyst.
- (ii) to posit from his own self-analysis and the analysis of his patients that the repressed ideas were ideas from infancy
- (iii) to conclude that the patient's sexual feelings towards the analyst were nothing but an 'unprovoked' repeat edition of sexual feelings towards her parents, such repetitions being generated by the attachment of libido to unchanging prototypical ideas of parents (stereotype plates) formed in infancy.
- (iv) to similarly conclude that the patient's feelings of repulsion and hatred for the analyst were indicative of 'negative transference', again repeat editions of infantile feelings. (The dichotomy of love/hate was that of the Oedipus Complex and mirrored the physical forces of attraction and repulsion).

(v) to propose that 'positive transference' is comprised of both an original, erotic form (transference-love) and an affectionate, sympathetic, 'unobjectionable' form that has 'developed from purely sexual desires through a softening of their sexual aim' (Freud 1912a: 105).

Trashing and transcending

Scientific concepts bring precision and coherence to our understanding of phenomena. Transference has brought the polar opposite. Today, despite strenuous efforts at clearly defining transference by Freud and numerous of his followers, 'the enormous literature on the subject involves an astonishing variety of contradictions, ambiguities and connotational disputes' (Clarkson, 1995: 62-4). Consider some of them:

- It is naïve to think that even the most neutral of analysts does not influence the patient's feelings in some way. Therefore Freud's 'one-person' model of transference, of such feelings being solely the patient's creation, must be discarded in favour of a 'two person' model (Gill, 1982).
- Freud himself proved unable to differentiate between the phenomena indicative of transference-love and those indicative of genuine, romantic love, i.e. 'what is essential about being in love' (Freud, 1915: 169)
- The analyst's non-judgemental understanding of the patient is an expression of love to which the patient's love is a real and genuine response.
- To regard an adult's feelings of sexual love towards another adult as identical to their feelings for their parents as an infant hardly accords with the views of contemporary developmental psychologists, let alone common-sense.
- Object-relations theorists and others posit the existence of transference-feelings repressed at earlier stages of infant development than Freud.
- The notion of a psychological sexual energy, of psychic energy, per se, has been widely debunked.

What such contrary views indicate is that as a would-be scientific concept transference is so full of holes that it comes close to being totally vacuous. Even so, some psychodynamic practitioners endeavour to keep their practice afloat employing Freud's definition of this leaky sieve; while others, aware of its porous nature, utilize the term 'transference' as quasi-scientific jargon for the client's relationship to the therapist as a whole. Most significantly, though, still others have begun to deploy a conceptual alternative fundamentally different from transference—albeit that almost without exception they apply the label of 'transference' to it to mask their infidelity to Freud (Grant & Crawley, 2002). This alternative concept is the 'schema. It is fundamentally different from 'transference' because it is a non-Newtonian, organismic/field theory notion. In relation to client-therapist relationships, different authors define the schema somewhat differently, as well as giving it different labels, viz. 'internal working model' (Bowlby, 1979); 'representations of interactions that

have been generalized' or RIGS (Stern, 1985); 'core conflictual relationship theme' (Luborsky & Crits-Chistolph, 1998); 'I-schemes' (Fast, 1998); 'habitual relationship patterns' (Schachter, 2002).

However labelled, the schema is a term that refers to the interactional process that puts the pattern in patterned activity: the flexible blueprint, code, plan, recipe, template, whose operation over time is responsible for the characteristic manner by which we 'grasp' our own being in relation to that of others and that of the world.

Jean Piaget is renowned for his explication of the schema with respect to human cognitive development—of its involving an interaction between an initial subact of assimilation (of aiming to grasp what we encounter in terms of an existing pattern) and a subsequent sub-act of accommodation (of adjusting our grasping pattern according to the form of what we encounter) (Lovell, 1963). Paul Wachtel (1981) has pointed out how Piaget's explication of the schema can be generalized to cover those phenomena that Freud referred to under the heading of transference; how 'transference' can be interpreted as the predominance of assimilation over accommodation. Further, for Piaget infantile schemas are taken up into the formation of ever more complex levels of schemas. Thus, assimilation can predominate over accommodation on many levels. True love, that is to say, along with any deviation from it, has to be viewed as a many-levelled 'thing'.

There is not the space here to further elaborate upon such transcending of transference by the schema. What can be said, though, is that in replacing Freud's notion of transference by the schema we are:

- (a) developing a better understanding of how our feelings for one another are a product of the moment and of what the other brings.
- (b) realizing how past experience has helped form the manner of our experiencing of the other in the moment; how the schema or recipe for our feelings may have been largely formed in the past, but not the feelings themselves. In other words, feelings for the therapist are not like dumplings formed in infancy that were then put in the deep-freeze of the unconscious to be later retrieved and de-frosted in adulthood. Rather they are the product of a recipe or schema originally created in infancy, but modified in varying degrees apropos the reality of subsequent interactions.
- (c) encountering fruitful possibilities for the integration of psychodynamic theory with other theories of psychotherapy that employ the concept of the schema, viz. cognitive-behaviour therapy, Gestalt therapy, person-centred and experiential therapies.
- (d) casting aside false modesty and openly acknowledging that as effective therapists we really are loveable.

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