Psychoanalysis: Theory and treatment

Freud's ideas about treating the troubled mind continue to influence our thinking about human behavior.

🐧 igmund Freud was born 150 years ago this year, and his contributions are being debated, discussed, and celebrated from Vienna to New York at conferences and in publications ranging from news magazines to scholarly journals. Freud's writings about psychoanalysis helped define the field of psychology in the 20th century and are objects of study in such diverse fields as literature, intellectual history, and the history of science. Repression, denial, dream analysis-these are all familiar concepts, thanks to Freud and his contributions to our views on human nature.

The rise of pharmacological treatments for emotional distress and psychiatric conditions has led some to proclaim the end of psychoanalysis—or to dismiss it as having an insufficient basis in scientific data. But it would be a mistake to count this form of talk therapy out. Current research suggests that the psychoanalytic approach still plays an important therapeutic role. And today Freud's theory of mind remains a fundamental part of many talk therapies, including psychoanalysis.

Nobel prize-winning psychiatrist and neuroscientist Eric Kandel, for one, hopes to see a "rapprochement between the biological sciences and psychiatry." In Psychiatry, Psychoanalysis, and the New Biology of Mind (2005), he contends that we're just beginning to discover the biological underpinnings of psychoanalytic theory. In particular, he aims to reinvigorate research into memory, desire, and other aspects of how the mind works.

So for Freud's sesquicentennial, here is a review of psychoanalysis—what it is, how it's done, and what to expect.

What psychoanalysis is

Psychoanalysis is a method of treating emotional difficulties that involves communication between a psychoanalyst and an individual, with the goal of gaining insight into the individual's inner world and how it affects his or her emotions, behavior, and relationships. Psychoanalysis is also

a system of ideas about the human mind and personality. Although both the method and the theory have advanced since Freud's day, some of his basic ideas continue to shape our thinking about human behavior and functioning.

One fundamental Freudian concept is the powerful effect of the unconscious part of the mind on our feelings, actions, relationships, and endeavors. Unconscious conflicts can cause anxiety, moodiness, or depressive thoughts; troubling personality traits; or difficulties at work or in finding or maintaining long-term relationships. Many such problems have their roots in past experiences and relationships.

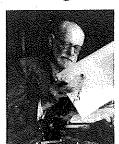
Psychoanalysis seeks to bring troubling unconscious forces into conscious awareness. With the insights gained during analysis, the patient can work at improving relationships and productivity, interrupt self-defeating or self-destructive patterns, and perhaps even unlock creative potential.

How it works

The psychoanalyst and patient meet three to five times a week. This intensive schedule of one-on-one sessions helps establish the psychoanalyst's office as a place where the patient can safely free-associate—that is, talk about whatever comes to mind, whenever it comes to mind—and develop a deep bond with the analyst. The frequent meetings also encourage the emergence of the patient's full range of personality traits and behavior patterns, an important step on the path to self-understanding. Use of the couch, a holdover from Freud's day, is no longer required. Some people find that lying down facilitates free association and helps them focus their thoughts inward. Others find it more helpful to sit face to face with the analyst.

Psychoanalysis is a collaborative effort. As the patient free-associates, the analyst listens carefully and helps her grasp the underlying unconscious sources of her difficulties. To encourage this awareness, the analyst not only interprets

Who is Sigmund Freud?



Sigmund Freud grew up in Vienna, where he attended medical school and spent most of his professional career. First drawn to neurology, his interest soon shifted to psychology and therapy.

To appreciate his influence, think of all the New Yorker cartoons where the patient lies on the couch and the therapist-with neatly trimmed beard

and cigar—sits listening with a scowl. The beard and cigar (and scowl) are Freud's. He also invented couch therapy and, in 1896, the term "psychoanalysis."

Freud was then 40. His father had recently died, and Freud experienced a series of disturbing dreams. His analysis of those dreams led to the writing of his first masterpiece, The Interpretation of Dreams (1900), in which he began developing his ideas about the unconscious mind.

Today, few psychiatrists label themselves Freudians, and most of us aren't experts on Freud. But many of us still use terms that Freud introduced to help make sense of our feelings and conflicts—especially our inner conflicts—such as "defense mechanisms" (like denial, repression, or projection), the "Oedipal complex," the "pleasure principle," and, of course, the ego, id, and superego.

Photo courtesy of the Library of Congress, Prints and Photographs Collection

ongoing patterns (interpretations the patient is welcome to amend, reject, or supplement), but also encourages the patient to re-experience them in the safety of the analytic setting. In psychoanalytic parlance, this is known as "transference." The patient relives her life's story by transferring to the analyst feelings and attitudes she originally experienced in her relationships with other people.

For example, a woman consistently arrives 10 or 15 minutes late for her appointments, and the analyst learns that she also does this with her boss and her husband. By examining the feelings the analyst arouses as she talks about her reasons for being late—or perhaps realizing her anger with authority figures—she can begin to become conscious of her motives for wanting to make others wait for her or become angry at her.

Psychoanalysis is a lengthy process, usually requiring several years-5.7 years, on average, according to one survey-to resolve long-standing difficulties, such as self-defeating behavior patterns or problems forming personal relationships. One reason it can take so many sessions is that, like old habits, maladaptive life patterns "die hard." There may be many variations to work through. The hope is that over time, the individual can recover lost emotional connections, give up unhealthy ones, and adapt more effectively to her current circumstances.

Psychoanalysis may help with such complaints as "I have difficulty finding a suitable partner," "I never feel excited about my friendships," or "I keep missing deadlines at work and sabotaging my career." Less intensive psychotherapy may be more appropriate for short-term concerns such as "I'm very sad that my child is leaving for college," unless these feelings are related to longer-standing behavior patterns. Distressing symptoms such as phobias, anxieties, and depression also respond to psychoanalysis, sometimes with the help of a medication.

Health insurance may cover part—though given the current emphasis on short-term treatment, generally not all—of the cost of psychoanalysis. Treatment is often available for a reduced fee at a psychoanalytic training institute (see "How to find a psychoanalyst"). Also, the analyst and patient may work out a lower fee or method of delayed payments.

How it differs from other psychotherapy

There are many types of psychoanalytically informed psychotherapy, and many approaches used in psychotherapy today grew out of classical psychoanalysis. These variant forms are usually less intensive versions of psychoanalysis. Expressive and psychodynamic psychotherapy, for example, emphasize the importance of finding unconscious motivations and gaining insight into one's actions and feelings. By contrast, short-term structured therapies such as cognitive behavioral therapy, which is outside the psychoanalytic tradition, focus on resolving current symptoms and behavioral problems

How to find a psychoanalyst

The American Psychoanalytic Association has a list of members online at www.apsa.org. If you live near a major city in the United States or Canada, you may be able to find a local psychoanalytic training institute that offers consultations and referrals. Many such services are free or available at reduced fees. Depending on your needs, you may be referred to a graduate analyst, an analyst in training, or a qualified psychoanalytic psychotherapist. Most psychoanalytic institutes and societies offer treatment at reduced or adjustable fees.

Psychoanalytic training organizations apart from the American Psychoanalytic Association are located mainly in New York, Los Angeles, or Washington, D.C. In New York, for example, you can contact the William Alanson White Institute (www.wawhite.org), the New York Freudian Society (www.nyfreudian.org), or the Institute for Psychoanalytic Training and Research (www.iptar.org).

There are also psychoanalytic institutes and facilities in many major cities around the world. Analysts are listed in the directory of the International Psychoanalytic Association (www.ipa.org.uk). In most locations you can arrange a consultation to assess whether psychoanalysis would be appropriate for you.

without necessarily developing insight into their origins.

Psychoanalysis may not be for everyone, but many women with emotional difficulties can benefit from psychodynamic psychotherapy—that is, meeting with a therapist once a week to discuss painful feelings that may underlie a specific problem or pattern of thinking or behavior. Like psychoanalysis, it assumes that the unconscious is involved and that past experiences and relationships can affect the present. Psychodynamic psychotherapy can last anywhere from a few months to several years.

Both psychoanalysis and psychodynamic psychotherapy can be combined with medication, couples' therapy, group therapy, or family therapy.

Qualifications for psychoanalysts

For many years, psychoanalytic training in the United States was available only to medical doctors, but now there are several reputable psychoanalysis programs that don't require an M.D. for admission. They generally do require an advanced degree, however. Psychologists (Ph.D. or Psy.D.) and clinical social workers (M.S.W. or C.S.W.) as well as psychiatrists and other M.D.s are all eligible for training as psychoanalysts. The training includes four to five years of classes and supervised work with patients, and an aspiring psychoanalyst must undergo psychoanalysis herself.

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