The psychoanalysis of narcissism and the inevitability of "postmodern" psychoanalysis

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I have decided to approach the issue of postmodern psychoanalysis through an exploration of the diversity of psychoanalysis in contemporary society, particularly as regards the analysis of narcissism and the discussions and difficulties that lie at the heart of this diversity.

When I examine my own experience of psychoanalysis in this day and age -- as I listen to foreign colleagues during international conferences or think of my experience of discussions with such colleagues whenever their Societies invite me to speak at their meetings -- two elements in particular strike me.

The first is that I am impressed by the diversity of psychoanalytical practice -- we could almost talk of different psychoanalytical "cultures". It is as though history had produced different ways of interpreting psychoanalytical practice, of practising psychoanalysis and perhaps also of understanding the ways in which unconscious psychical reality can be expressed. This is noticeable above
all with respect to the psychoanalytical setting -- and I mean by that not only the number of sessions, a feature about which much has already been written even though it may not be the most important aspect.

It is obvious that psychoanalysis is not carried out in exactly the same way in all countries and on every continent. There is, for example, a "Brazilian" style of psychoanalysis -- and perhaps even many such styles: I am not sure that certain elements of the setting that are commonly found in Rio de Janeiro would also be typical of Brasilia, Salvador de Bahia or even Porto Alegre. There are also (several?) "English" and "Lebanese" forms of psychoanalysis, and these diversities give rise to inter-analytical discussions within psychoanalytical Societies that are also very different and do not focus on the same major themes.

Some psychoanalytical cultures seem to me to pay particular attention to the relationship between mind and body, between mind and sensoriality, and between mind and sensorimotor functions. Others pay more attention to the social and group-based aspects of processes of symbolization. Some countries that have been ruled by dictators or totalitarian regimes, where psychoanalyses were carried out under a political system of terror, remain in the long term marked by that
experience; in others, it is religion and its multiple aspects that cannot be ignored.

Nevertheless, I have also often had the impression that the cultural diversity which I could see in psychoanalysis had to do with something more than the "climate" or the specific aspects of the societal history of groups of psychoanalysts. The influence of certain founding members, the immigration of some theoreticians or the impact of standard texts of reference must also be taken into account with respect to this feeling of diversity. Sometimes this gives rise to a theoretical melting pot in which creativity and unexpected influences can always be found. The way in which Klein, Bion and Winnicott influenced South American psychoanalysis is just as important as, conversely, the way in which their writings were understood according to the specific characteristics of the countries concerned. Often, I have been unable to see "my" Winnicott or "my" Bion -- which are, of course, French-style -- in the way in which those colleagues seem to be making use of them. And what are we to think of the Deleuze-style psychoanalysis found in Sao Paolo for example, and which would be inconceivable as such in France?

I am simply pointing out here a few examples of that diversity, no doubt highly subjective and personal, picked up
in different encounters and based on my impressions of these. They would undoubtedly need to be looked at in more detail in order to appreciate them fully, but I hope that they will suffice to lend some weight to the feeling we may have that, on a manifest level, there is no longer any such thing as a single form of psychoanalysis -- we have to take into account the existence of several kinds of psychoanalysis. It is probably that diversity which explains the postmodern development of our conception of psychoanalysis and of the work of psychoanalysis itself.

That fact is certainly true to some extent, but this general overview must be qualified by a more surprising element; in every case, I had all the same the impression that I could enter into a true psychoanalytical dialogue with my foreign colleagues. I did, of course, have to put aside any idea that my way of thinking was the only correct and relevant one, while all others were simply heresy or dissidence and deserved only to be subjected to the "good" kind of criticism that comes from France. I myself am absolutely convinced that mental life is inherently complex and that if a clinical element looks as though it can be interpreted in only one way, this implies that it has been constructed in an ad hoc manner and that in reporting it
everything that could open on to other kinds of interpretation has been faded out.

Different psychoanalytical cultures have, for reasons no doubt circumstantial and related to specific elements in their history, developed and explored certain clinical or theoretical aspects to a greater extent than elsewhere, where different cultural or historical circumstances prevailed. As regards theory, discussions are often very difficult and sometimes create the impression of not being at all on the same wavelength; clinical discussions, on the other hand, are always highly productive. Were we to limit ourselves to clinical discussions, this could perhaps be a better way of establishing more productive kinds of dialogue and of catching hold of postmodernism while it is actually being expressed. It is worth emphasizing that most Societies that issue invitations want to discuss clinical themes or clinical cases with their guest speakers, as if this were indeed the best way of evaluating what they might contribute.

Even although clinical manifestations are no doubt influenced by cultural diversity, it is probable that psychical reality itself contains enough transcultural elements and complexity for a fertile productiveness based on shared clinical experience to be set up, thereby making possible shared forms of thinking and fruitful discussion.
Let me try to describe this "fertile productiveness" of shared experience or problem structures. I am struck by the fact that, in one sense or another, it involves -- I shall put this in my own words, but other modalities, depending on one's prevailing theoretical options, are of course possible -- clinical issues and problems that tend to motivate analysts the most, whatever their psychoanalytical culture or school of thought; these issues involve the vagaries of the psychoanalysis of narcissistic problems and their implications for the sense of identity of patients in analysis. By "sense of identity", I mean that the question of differentiating between the ego and what is not the ego, between self and other, is one of the elements that lie at the very heart of the analysis of these patients. That issue is often hidden behind problems that have to do with sexed identity or with the way in which the patient sees him/herself with respect to the difference between generations; sometimes it is expressed openly in the patient's relationship to other people or to his/her own body.

The great variety of these standpoints seems to me to be directly related to the fact that one aspect of narcissistic and identity-related problems is that it is directed towards the psychoanalyst as a person and in highly specific way; in
addition, these issues give rise to various kinds of response, as I shall try to show later in this paper.

These various ideas led me to what I would now like to suggest, in an attempt to define, on the one hand, the clinical issues that lie at the heart of the theoretical and clinical debates that are so much part of contemporary psychoanalysis, and, on the other, the way in which these issues call into question the feeling of unity in psychoanalytical practice, thereby requiring us to accept some degree of theoretical and clinical relativism. My aim here is not to offer "my" solutions to the questions that arise -- at least, as far as I can refrain from so doing, for it is obvious that the way in which I formulate these is already indicative of a certain way of thinking -- but to express the clinical and theoretical issues that, in my view, underlie the postmodern development of psychoanalysis.

The diversity that is an integral part of this postmodern psychoanalysis raises the question of the unity of psychoanalysis -- or, at least, of the unity of psychoanalysts' responses -- as well as inviting us to bring together the entire area of interest of this debate in terms of the theoretical and clinical issues common to the various ways in which psychoanalysis is practised. The answers may well be varied or diffracted, but the questions themselves
are perhaps shared by all and the issues with which analysts are confronted -- on condition that they try to be consistent with themselves and refuse any a priori militant standpoint -- are perhaps the same, even though the manner in which they are formulated may be different (because this aspect is inevitably related to each specific cultural background).

In order to formulate them, I of course am faced with the question that I raised earlier -- that of the choice of what kind of theorizing or formulating of the issues to adopt. This therefore brings me up against the limitations of my own psychoanalytical culture. That difficulty is unavoidable, and I do not see how I can get round it completely.

Thinking about how to narrow this down as much as possible, I came to the conclusion that I would find it easier to immerse myself in what is shared by most psychoanalysts if I based my explorations on the traces left by these issues in Freud's own writings. Although reading Freud may not be a central part of the training or theorizations of all psychoanalysts, there is all the same some hope that his role as the founding father of psychoanalytical thinking endows his work with sufficient value as a benchmark for it to lend support, in as open-ended a way as possible, to the points that I shall be developing here. However, I do not want to over-estimate that possibility; I hope that the clinical
horizon of the points that I shall raise here will help to bridge any gap between those for whom it is not (or is no longer) the essential reference point.

**Melancholia and the impasse of a "unified" form of psychoanalysis**

My first suggestion is based on the fact that in 1915, once he had introduced the idea of the issues involving narcissism, Freud tried to set out in approximately fifteen papers what had been at that time understood; this was in the context of what I like to call his "first metapsychology". That project came to an end with "Mourning and Melancholia" (1917e [1915]), where he had begun to tackle the question of what at that time he called the "narcissistic neuroses".

In my view, that was not by mere chance, because I think that Freud was beginning to feel that, in spite of the undoubted developments which that paper brought, his theorization and the attempt to present a unified theoretical corpus came up against one major difficulty -- one that would lead him to a paradigmatic evolution that remains to this day at the very heart of our thinking.

To summarize how I see that difficulty, I would say that not only does Freud quite clearly focus the issue of mourning on that of the lost object -- as so many papers since then
have come to call it -- but also he explores melancholia in terms of what I have suggested could be seen as the "primary narcissistic disappointment" in the relationship with the object, and in particular with the primary object. Thereupon one fundamental alternative comes immediately to the fore in our theoretical and clinical viewpoints: has the object been lost, or is it disappointing? Is it a matter of an absent object or of one that, in its very manner of being present, has proved disappointing? The alternative is between searching for a lost object that is impossible to find again as such and searching for one that had never actually been found, one that disappoints because it could not be found or encountered in one of its fundamental aspects.

Is mourning impossible in melancholia because the individual cannot be satisfied with a partial re-finding of the lost object, because he/she is searching endlessly for a complete reunion with the object and cannot mourn the loss of that total recovery? Or because it is impossible to mourn the loss of something that has never been found, something that one has never possessed -- so that it has to be found "at any cost", it has to be made to appear?

What belongs to one or other of these situations in the melancholic depths of narcissistic issues? What can we see of the mixture of the two in the actual clinical presentation of
a given individual? Is it the object that has been lost or the individual him/herself? Is the individual lost in his/her search for an object that cannot be found? That is one of the very first questions that arise in contemporary discussions between those who emphasize the lost object that cannot be found again and those who highlight what did not take place in the encounter with the object -- and it is often part of the debate that takes place within every psychoanalyst.

In his brilliant way of putting it, Freud said also that, in melancholia, "the shadow of the object falls upon the ego" (1917e, p. 249). This was another great suggestion that he put forward in that paper; he may not have fully realized at the time all the consequences of this, although we may well think that he did have some inkling of these.

The shadow is not the object; it is not even a representation of the object -- it could be seen rather as the negative of the object. What then is the negative of the object, of the primary narcissistic object? The idea of a shadow would seem to indicate that it is something that the primary narcissistic object did not reflect back to the individual, involving precisely an aspect in which the object put at risk the individual's narcissism, leaving in the dark some of his/her fundamental aspects.
That idea immediately gives rise to another question: what becomes of the shadow when it "falls" upon the ego? Is it taking the metaphor a bit too far to ask that question? I am not thinking here of what Freud (in *Inhibitions, Symptoms and Anxiety* [1926d (1925)]) said as regards the ego -- in a return to the kind of question that was in his mind in the 1890s when he wrote of "assimilatory delusions" (Freud 1950a [1887-1902]) -- that is, that it tends to assimilate and internalize whatever falls upon it.

When the shadow (negative) of the object "falls upon the ego", the ego tends to assimilate that shadow. The ego and the "shadow" of the object, mixed together, would tend to give rise to the threat of some confusion between ego and object, one which lies at the very heart of the "narcissistic neuroses". That threat of confusion opens up the question as to whether the transference brings us face-to-face with a process in the individual or with one that comes from the incorporated object. Therein lies the basic issue of the nature of the process of identification -- which becomes all the more complex when we realize that it brings into play not only the nature of the process that it triggers (introjecting or incorporating, for example) but also the specific aspects of the object with which the individual identifies (a helpful object or an aggressor).
In 1921, in Freud's description of the process of identification, with the nucleus of incorporation that he sees in it, the theme of the assimilatory procedures specific to the ego's narcissistic functioning is already very much present. In melancholia, identification is more of an incorporation than an introjection and it is narcissistic; yet it involves a process that negativizes the individual or part of him/her, a process that does not recognize the individual as such, leaving him/her in the shadow cast by the object's silence and blindness -- those of an object that is perhaps lost to itself.

From this, Freud drew two conclusions with respect to what becomes of destructiveness, firstly in 1915 in "Mourning and Melancholia", then in 1921 in his Postscript to Group Psychology and the Analysis of the Ego (Freud 1921c), once again suggesting alternative interpretations.

Either the individual's destructiveness aimed at the object (1915) is turned back on the ego when it incorporates the object, or the object's destructiveness (1921) aimed at the individual is unleashed from the inside, against the ego that assimilated it. In each case, any attempt by the individual to process it alone is in an impasse, and there is no ready-made and unequivocal interpretation at the psychoanalyst's disposal.
The three "character-types" that Freud described the following year (1916d, p. 309) are also in an impasse. They represent the kinds of narcissistic pathologies that are still very much part of our clinical work: first of all the "exceptions" (p. 311), who feel themselves to be above the law; then "those wrecked by success" (p. 316), who present a negative therapeutic reaction during their analysis -- still very much a problem for contemporary psychoanalysis, giving rise to a great deal of contradictory publications; and thirdly "criminals from a sense of guilt" (p. 332), who open up the very difficult question of the psychoanalysis of some forms of antisocial behaviour and of unconscious guilt feelings -- leading to the kind of masochism the analysis of which even today is very difficult and perhaps highly controversial.

When he went on, in 1920, to add to that list the idea of traumatic neuroses, Freud realized that he would have to expand upon the fundamental paradigm of psychoanalysis -- that of the basic principles of "mental functioning" -- even although this was somewhat heartbreaking for him; other psychoanalysts at that time also found that hard to accept, as do many present-day psychoanalysts.

The question of the meaning of repetition -- and, therefore, of the transference, which is one of the main
aspects of repetition in psychoanalytical treatment -- thus became fundamental in psychoanalytical practice, particularly in the analysis of problem complexes involving narcissism and the sense of identity. In my view, there is no easy answer to that question; indeed, present-day psychoanalysts would probably not all agree on any one particular answer. I tend to think that, combined with the idea of destructiveness, this is one of the most fundamental and debatable issues that are both internal to each analyst and inter-analytical; any interpretation of it that is put forward must of necessity be highly complex.

It sets up a contrast between, on the one hand, a point of view that inherits some of Freud's pessimism at that time and his concept of the death drive as being a fundamental element in everything that is drive-related, and, on the other, one which takes its inspiration from some of Freud's later work, in 1937-38, in which repetition is seen as the post-traumatic indication of a difficulty in integrating something in the mind.

On the one hand, unbinding and envy are seen as underpinning the disastrous fate of those who do not accept any primary mourning for the object or the thought identity that accompanies this, while, on the other, what is emphasized is the traumatic character of some non-integrated
experiences that attack the processes that are already in place, searching for some space in which to fit in. We could here recall what Freud said in 1920 about the death drive, or perhaps emphasize his later notes, written in 1938 when he was in London, in which he mentions the "weakness of the power of synthesis" (Freud 1941f [1938], p. 299) in infants as being the fundamental reason for repetition.

Here again interpretation creates some degree of conflict in the attempt to take into consideration the complex nature of mental life and the many levels upon which it functions. It becomes even more complicated when we realize that, in attempting to control the processes at work, the individual may try to attack them actively if he/she cannot keep them in check. Psychical material can no longer simply be interpreted in a single way; the psychoanalyst has to deal with the question of the choice of the level of interpretation in keeping with the specific nature of the processes that are unfolding.

The function of the object and, beyond that, the function of the analyst

The impasses and problems that occur in the analysis of the "narcissistic neuroses" and of their underlying melancholia also give rise to questions concerning the role and function
of the object in regulating destructiveness -- in other words, those involving the "reality" of the object.

Integrating the question of the object with that of narcissistic regulation implies an attempt to specify the role of the history of the encounter with "real" objects in the construction of narcissism, as well as an attempt to measure the impact of the objects' response on the process of drive integration within the individual. It also opens up the question of the reality of the object for the individual, as well as that of what, in his/her perception of that reality, has to do with his/her own projections as compared to the perception of the specific features of the object seen as another subject with that subject’s own particular characteristics. This leads also to the question of the reality of the object in accordance with the individual's age and psychical structuring at the time when that experience was registered as such.

Once again, historical relativism seems inevitable here and raises the question of what point of view is adopted by the psychoanalyst: that of the here-and-now of the session, or that of the other place and other time when the initial experience that is being transferred took place? On a more fundamental level, this has to do with the reality of the analyst and with how he/she chooses to interpret.
Nowadays, at least in theory, everyone agrees that real objects and the manner in which they respond to the individual's mental functioning do have some importance for his/her psychical structuring. We can also all agree that the reality of the analyst must be of some importance in the unfolding of an analysis. The question is what impact does that acknowledgement have on the practice and technique of psychoanalysis -- and that question is currently one that is crucial to our discussions.

On the one hand, we could argue that it does not matter how the objects with whom the individual constructed him/herself behaved in the past -- what is important is what the individual made of this; consequently, in our work as psychoanalysts, it is that point and only that point that we have to deal with. This implies that we emphasize the projective dimension of the transference and focus on what unfolds in the here-and-now of the session.

On the other hand, we could say that if we always adopt that attitude in the course of the session, the analysand would feel locked inside a kind of solipsism in complicity with the fantasies of auto-engendering that are typical of narcissistic defences. In a kind of reversal, this argues in favour of at least acknowledging the historical "failings" of the primary objects and their possible shortcomings as
regards their parental functions -- and perhaps also acknowledging that the analyst too may be lacking something in his/her present-day functioning. We could then take support from what Freud said in "Constructions in Analysis" (1937d)\(^1\) -- "[...] the recognition of its [i.e. that of the delusion] kernel of truth would afford common ground upon which the therapeutic work could develop" (p. 268); I would add that the kernel of truth contained in the patient's present transference may also be of help here -- together with Winnicott's idea of "the use of the object" (1971) in an attempt to reconstruct the historical background to the traumatic situations encountered by the analysand. In such a case, the "here-and-now" aspect can come fully into play only if it is dialectalized with its "elsewhere-and-formerly" counterpart; the transference is thus no longer simply the patient's projections -- or, rather, if it is indeed a projection in the present time (and it may well take some support from what is at present taking place), it carries

\(^1\) It is certainly not by mere chance that Freud, after debating in 1920 the question of the compulsion to repeat and the death drive, began *Group Psychology and the Analysis of the Ego* by acknowledging that "from the very first, individual psychology [...] is [...] social psychology as well" (1921c, p. 69), an aspect that has too often been ignored in psychoanalysis. It was via his acknowledgement of the importance of the other person that he introduced the concept of identification.
with it the trace of the historical object’s actual responses and reactions.

Over and beyond the idea of projection, what shapes the debate about, and uncertainty of, the level of interpretation that is adopted has to do with what appears to be or to have been traumatic and the impact of such an occurrence on the impasses and destructiveness that are part of the clinical picture; this has to do with the impact of the reality of the objects seen as other-subjects in "mental functioning". This leads to another fundamental issue -- the impact of the "reality" of the psychoanalyst in his/work of analysis.

"Becoming conscious" and the work of construction

Another debate was at that time also taking place, one that was totally in keeping with the clinical ideas that Freud had concerning "beyond the pleasure principle". That highly important debate had to do with the unconscious and the nature of unconscious processes.

In his introductory chapter to The Ego and the Id (1923b), in which Freud was still investigating the idea of the paradigmatic development adumbrated in 1920, he asks whether it is still possible to speak of "the unconscious" as if there were only one such element, always built up in the same way -- as if there were only one way to be unconscious. He
goes on to list the various clinical forms of the unconscious: those that have already been identified -- the Ucs-Pcs components that can easily become conscious and the unconscious in the sense of something repressed, that is, something that in the past was conscious but was secondarily repressed because of some conflict -- to which he adds a third kind. This one is of a quite different nature, because it refers to things in the mind that cannot become conscious in that shape or form. That variety in the kind of unconscious processes and contents opens up a further debate on the choices that the psychoanalyst has in his/her work of interpretation.

Thus there is not only a "beyond the pleasure principle" but also a "beyond repression". A "beyond repression" that is not projection, denial or what Freud would later call splitting, even although it may merge with those various kinds of defence mechanism. The "beyond repression" involves the very nature of raw psychical material, one that cannot become conscious in its original form; this is no doubt related to what Freud would call drive-related impulses or the "psychical representative" of the drives.

One of the effects of this increasingly complex way of looking at unconscious processes can be immediately experienced in the work of analysis -- the psychoanalyst's
choice of the level of interpretation that he/she adopts. This is because, in Freud's description, the various modalities of the unconscious are not mutually exclusive -- in fact, quite the contrary: they may well coexist and even coincide, be superimposed on one another.

In thinking about how to intervene, the analyst may continue to adopt the repressed / return of the repressed model, or perhaps pay much more attention to what has not been sufficiently transformed by the analysand's mental work for it to become conscious.

The idea of traumatism and its possible deferred and retroactive impact [après-coup] can again be seen as one of the problem areas in this debate.

The analyst may base his/her remarks on what Freud had to say during the time when the first metapsychology was prevalent, and emphasize the importance of the deferred and retroactive impact, together with the re-interpretations that this makes possible. Here, the truly primitive dimension of the traumatism is necessarily seen as being taken up again and reinterpreted in accordance with later psychical structurings that make use of those earlier traces. From that point of view, the existence of traumatism does not change to any significant degree the way in which the work of psychoanalysis is thought of.
If, on the other hand, the analyst has recourse to Freud's later writings, he/she may well be of the opinion that some traumatisms have not been subjected to the deferred and retroactive impact of a mental process, because they have become split-off from the historicizing process of the individual-as-subject.

In this view, the traumatism paralyses the mental apparatus and leaves the raw material of the experience untransformed (or only slightly transformed), so that it cannot become conscious in its primary and non-repressed form. In this definition, what remains unconscious will have to be transformed in order for it to become conscious -- but the individual cannot carry out that transformation by him/herself.

In that model, when the raw material of the experience re-surfaces, it does not come in the shape of a fantasy representation, that is, one that is at least in part symbolized; it does not carry along with it any affect structured in terms of an “affective signal” (Freud 1926d, p. 126). It returns rather as a kind of hallucinatory perception (Freud 1937d) or as a primitive kind of affect that constitutes a “traumatic disturbance” (Freud 1926d, p. 136) of the whole being, an affect of passion that is subjectivized only to a very limited extent, if at all.
Present-day psychoanalysts who have studied these issues in this way have added to Freud's own list everything that has to do with sensoriality and even with sensorimotor functions. They have emphasized the emergence of mental content that appears to have no subject -- indeed, sometimes, no subject and no object -- mere traces of the sensory experience of some movement or collapsing, of a feeling of something that has a form or is formless, of something escaping, sliding, an elusive whirlwind, something very vague...

The interpretative standpoint based on the repression / return of the repressed model consists in waiting for these unconscious contents to unfold in the course of the analysis and in not intervening at that level of mental functioning in order to enable the analysand to transform little by little the raw material of his/her earliest experiences.

In the other way of interpreting -- or in other cases -- the analyst may come to the conclusion that a great deal of that psychical material will never spontaneously be able to take shape in such a way as to become conscious -- otherwise it would already have done so -- and that it will be subjected to de-cathexis if the analyst does not intervene at that level also. He/she may well feel that this primitive material, which, as M. Fain put it, acts as a prelude to fantasy life, will become able to unfold and fully take on
some form of symbolic representation only if it is contextualized and illustrated through the psychoanalyst's work of invention, in an attempt to imagine the figures of subject and object that are absent from the analysand's representations.

The practical consequences of that approach -- which at times is unavoidable -- are immediate and far-reaching: if the individual cannot by him/herself transform part of the raw material of his/her own experience -- the part that has retained its status as post-traumatic or that of raw material -- the psychoanalyst will have to participate in that work of transformation. This can be accomplished only thanks to his/her own parameters and personal creativity; the influence that the analyst brings to bear -- and perhaps even the effects of suggestion contained in his/her interventions and creativity -- will become inevitable. I shall return to this point later, when I discuss synthesis; for the moment, it is obvious that, in this conception, the psychoanalyst is much more directly involved in the process and will have to take on board the effects of that involvement. There too a postmodern standpoint becomes inevitable in so far as diversity in the creativity of analysts becomes a fundamental element of the treatment.
Given that "the shadow of the psychoanalyst falls upon the treatment", seduction, suggestion and influence can no longer be avoided\(^2\) in the work of an analysis, otherwise the analysand would be abandoned to his/her distress and solitude of feelings. Even if these can be kept under control to some extent in their conscious and deliberate aspects, part of that unavoidable influence necessarily remains outside of consciousness and poses a threat to the work of psychoanalysis in terms of the kind of hold that the analyst has over it. That is when the threat of suggestion reappears on the scene.

In my view, Freud did have some intuition of the practical consequences that might follow on from the fact that a part of mental life cannot become conscious in its original form, as well as of the threat of suggestion that thereupon would haunt the practice of psychoanalysis. He left many indications of that in his writings of the time.\(^3\) The "stronghold" dream of the argument opposing psychoanalysis and suggestion, the supposed bastion of the individual's narcissism, dreamt during the night without the analyst being

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\(^2\) In fact, they could never anyway be avoided, given that the analyst's interventions are always taken in with reference to the transference and the role that, for the patient, this bestows on the analyst. It could be hoped, all the same, that transference interpretations might go some way to moderating that influence and enabling it to be kept under control.
present, the dream that appeared to establish the independent nature of the analysand's mental processes turns out to be in the grip of one possible influence: Freud discovered and went on to describe dreams of "compliance" (1923c [1922]), a dream that is dreamt in order to please the analyst, a dream that is dreamt in order to support the other person's narcissism. Are unconscious processes themselves therefore subjected to communication from unconscious to unconscious, one form of which is telepathy (Freud 1922a)? And are dreams -- and perhaps even psychoanalytical treatment itself -- the preferred ground on which this occurs? If so, the entire logic and legitimacy of the psychoanalyst's work will have to be re-examined.

If some psychical material can reach consciousness only if it is transformed through the combined work of psychoanalyst and patient -- through the psychoanalyst's work of illustration -- the work of analysis can no longer be thought of merely in terms of interpretation, one which, over and beyond the particular way in which it is formulated, remains relatively independent of the specific characteristics of the psychoanalyst's personality.

3 And also in his exchange of correspondence, for example with Ferenczi.
4 Cf. Freud's papers "Dreams and Telepathy" (1922a) and "Psycho-Analysis and Telepathy" (1941d [1921])
In 1937, Freud acknowledged this and suggested the concept of (re-)construction in an attempt to take into account this modulation of the psychoanalyst's work. His paper on "Constructions in Analysis" (1937d) begins by reminding the reader of the criticism aimed at psychoanalysis, alleging that it is simply a kind of suggestion that locks the analysand into a paradox of the kind "heads I win, tails you lose".

It is also the whole idea of assessing the relevance of the psychoanalyst's intervention that comes to the fore: the patient's direct confirmation or refusal cannot in any way be taken as bearing witness to the value or otherwise of the psychoanalyst's interventions; they may be caught up in some kind of suggestion, compliance or opposition linked to the transference. Freud realized also that the production of memories, in the shape of a return of the repressed that may legitimize the work of analysis and convince the analysand of this, does not feature to any great extent in the treatment process.

It is above all in the immediate potential for generating free associations -- that is, in the material that becomes accessible thanks to that intervention -- that Freud saw a path to indirect confirmation of the relevance of the psychoanalyst's intervention.
Thereafter, the unfolding of the process -- that is, the overall associativity of the analytical process -- would serve as the basis for validating the work of an analysis: "It will all become clear in the course of future developments" (Freud 1937d, p. 265).

A further validation is brought by the kind of confirmation that is expressed in terms of the raw material itself and in particular through the hallucinatory return of that raw material -- or, rather, the presence of a hallucination superimposed on a perception: a superimposing that makes the perception extremely clear. The process-related forms of the raw material of the experience come together with the ongoing psychoanalytical process, thus signalling the return of primaeval or post-traumatic experiences.

These various modalities of indirect validation are aimed at making sure that there is indeed some real work of subjective appropriation being undertaken by the patient -- the kind of work that conforms to the process which, for Freud, was the true vector of the work of the mind: "Wo es war soll ich werden".5 That vector describes the process through which the patient becomes an "individual-as-subject",

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5 "Where id was, there ego shall be" (Freud 1933a, p. 80). J-L Donnet has emphasized the fact that the superego also must be subjectivized, so that the phrase could then be formulated as "Where id and superego were, there ego shall be".
the new ultimate goal of the work of psychoanalysis. It is not enough for the analysand to accept consciously the content of the analyst's interpretative construction; he/she must truly introject it, that is, self-appropriate it.

**Construction and the analyst's work of synthesis**

With the concept of construction that bears witness to the inevitability of the analyst's work of transformation, the personality of the analyst becomes an actual feature of the analysis -- not only in the form of the counter-transference, but "in person". In this way, the diversity linked to the various types of personality that we encounter in analysts comes back into the practice of psychoanalysis.

However, the change of name that we use to describe the psychoanalyst's intervention -- the movement from "interpretation" to "construction" -- conceals another potential mutation in how we conceive of the work carried out by the psychoanalyst, another mutation that will perhaps enable us to define more accurately the specific nature of that work.

Human beings interpret what they are faced with: events, language, sensations... They must of necessity interpret, because the data that arises from their confrontation with both internal and external reality must always be interpreted
-- the raw data that the human mind must make meaningful. It is indeed thanks to this that re-interpretations can occur in the course of analytical treatment -- modifications in the meaning of a past history that, objectively speaking, has not in itself changed. On the other hand, the idea of construction -- and this becomes very clear thanks to the example that Freud gave us -- occurs much more infrequently in the everyday life of mental functioning; construction thus seems to be a more specific indicator of the psychoanalyst's major interventions.

There is, however, another hidden aspect in Freud's example. This is what he writes:

“Up to your nth year you regarded yourself as the sole and unlimited possessor of your mother; then came another baby and brought you grave disillusionment. Your mother left you for some time, and even after her reappearance she was never again devoted to you exclusively. Your feelings towards your mother became ambivalent, your father gained a new importance for you” (1937d, p. 261)

As we can see, the example that Freud gives is that of a work of binding, linking together several phases in the patient’s life, a binding construction that is also a work of
synthesis, like a narrative that synthesizes a whole movement in the mind.

The idea of synthesis in the work of psychoanalysis -- and therefore that of a whole new conception of the work of psychoanalysis -- is also one that is much debated when we look at the practice of psychoanalysis. On the one hand, we could reject the idea, taking support from Freud's unequivocally optimistic statement in "Lines of Advance in Psycho-Analytic Therapy" (1919a [1918]), where he says that the psychoanalyst's work is that of analysis, that is, of unbinding, of unbinding the false connections that the patient had made and which lie at the heart of his/her pathological state. The psychoanalyst has faith in the analysand's capacity for re-binding, for synthesis, for connecting in a different way what the work of analysis has just disconnected. Freud's optimism on this point is in accordance with the primacy of the pleasure/unpleasure principle and with that of Eros, which likes to "combine organic substances into ever larger unities" (Freud 1921c, p. 43). On the other hand, the possibility of something "beyond the pleasure principle" invites us to be more careful, because the forces of unbinding may hamper the work of synthesis and produce what, in 1923, Freud called "a pure culture of the death instinct" (1923b, p. 53). Here, the fact that the repetition
of the experience did not lead to satisfaction bears witness to the failure of synthesis.

Freud's point of view on that point did change, however. In the final set of notes that he made in London in 1938, he ascribed what he described in 1920 as the effects of the forces of unbinding more to the earliness of certain experiences and to weaknesses in the infant's capacity for synthesis.

When the transference of such early experiences is not too intense, there is some hope that the individual's ego will henceforth be able by itself to integrate those primitive experiences that re-emerge from the distant past, that is, at a time when he/she was too immature to integrate them. On the other hand, when early experiences re-emerge in ways that are much too close to how they were originally felt, the individual finds him/herself faced with much the same kind of helplessness and distress as when they first occurred.

In such cases, the psychoanalyst cannot adopt a wait-and-see attitude, as Freud's 1918 optimism would have us believe; his/her empathy is appealed to in its most maternal of aspects. The analyst cannot avoid becoming implicated personally in how he/she responds; once more, the work of the analysis is faced with an unavoidable diversity of opinions
that depend on the theory that the analyst has constructed of the patient's needs in early life.

It is then that various standpoints confront one another depending on the analyst's level of information and the specific features of his/her own sensitivity. He/she may give some importance to the idea that there does exist a primary symbiosis and that consequently the most significant experiences are those of separation and differentiation; that analyst will therefore pay particular attention to everything that involves the absence of the object or manifestations of the object's otherness and difference.

An analyst may feel that the conditions under which the individual encounters his/her original objects are also very important for the construction of narcissism; that analyst will tend to focus on how the object made itself available to the patient's cries or tried to give the patient an echo or a mirror-image of what, in those states of mind, could be integrated. The analyst will therefore be highly sensitive to everything that involves the way in which those primary objects manifested their presence -- and, at the same time, to the way in which he/she, in the session, is present for the patient.

Of course, present-day psychoanalysts try to pay attention to whatever involves absence as well as presence -- and
perhaps even to the specific dialectics between presence and absence in the early history of the analysand, on the basis of which he/she had to become structured as a person.

What is unavoidable is the fact that the analyst's own particular features, early experiences and what he/she is most receptive to in the patient influence his/her interventions more in one direction than in another; this will give a particular tone to the atmosphere of the sessions and the development of the transference.

This leads me to one final point that I would like to make.

The person analysed "analyses" the analyst's style

When psychoanalysts intervene during a session, they do so in accordance with what they think they have understood of the mental functioning of their patient. However, as Devereux has quite correctly pointed out, "he who is observed observes the observer" -- in other words, analysands also "analyse" their analyst's style, they identify the kind of material that is usually chosen by the analyst in support of his/her interventions and that which is met with silence on the analyst's part or very rarely taken into account. All of this contributes to creating a certain kind of atmosphere in the session and encourages the patient to choose a certain type
of material or, conversely, to push into the background some other kinds.

This is inevitable, and if the analysand is able to say "no" or to make that "no" otherwise obvious -- via the lack of any generating of free associations following the analyst's interventions, by freezing the whole process, through a negative therapeutic reaction, not attending sessions, etc -- he/she conveys to the analyst some indication that a threat of alienating suggestion is hanging over the process and that therefore some adjustment has to be made; this, of course, might also be interpreted as a form of resistance towards making any progress in the treatment.

When the narcissistic / self-identity dimension is at the very heart of the transference process, that threat is much more important, given that the analysand is more or less "lost" in the relationship to him/herself -- and often in a climate of terror -- and is so much in search of identifying responses that he/she tends to "assimilate" the analyst's interventions -- all of them, no matter their degree of relevance, which in turn creates confusion in the analyst's own points of reference. In such a situation, the necessary element of suggestion required in order to break free of suggestion changes dramatically into those alienating kinds
of influence that give rise to what has been called the "psychoanalytical false self".

**Conclusion**

The postmodern standpoint in psychoanalysis -- and in particular that part of it which involves treating patients who present a considerable degree of distress related to problems with narcissism and the sense of identity -- is really quite uncomfortable, as we have seen in our exploration of the conflicts surrounding interpretation with which it is confronted. It cannot take as its basis any ready-made style of intervention in which conflicts between models would be immediately resolved. It cannot avoid calling on the psychoanalyst's creativity and giving rise to potential inconvenience with regard to the effects of suggestion that this involves. It therefore has to adopt a "modest" approach, one that remains hypothetical in tone and in shape, an exploratory style.

But it must also agree to enhance its models so as to make them compatible with the complexity of its object, it must refuse to lock itself into simplistic contrasts through attempting to be simple or simplified, and acknowledge that no single model or theory can cover the whole of what is alive, given the very fact that it is alive and therefore
contains something that remains unknown and as yet unannounced, even when we think that it is locked into the most devastating of repetitions.
References:


Freud, S. (1914g), Remembering, repeating and working-through (Further recommendations on the technique of psycho-analysis, II). *Standard Edition*, 12: 147.