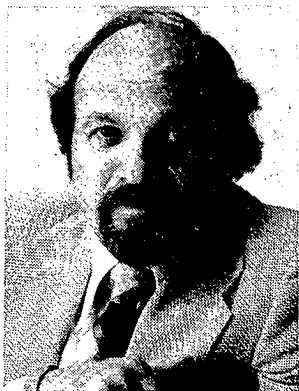


Reuven Bar-Levav

Nurturing the Brain May Starve the Heart



The wisdom of old proves itself anew as my life proceeds. Although I am a wiser man and a better therapist than I have ever been before, I am repeatedly awed by discovering new vistas that I have not known to exist. As I crave and need less of all the good things in life I have more of them, time being the only exception. The gift of good health is the one appreciated the most. I literally count my blessings every day.

823 Fisher Building
Detroit, Michigan 48202

My supervisor was unquestionably the brightest psychoanalyst in town. He was exquisitely intuitive, and on many occasions he could correctly predict the contents of dreams that my patients would dream the following night. I was fortunate, for I had the chance to visit with him one evening a week for two years, and together we would go over my voluminous notes, typed in single space. The patient said so-and-so, and I did such-and-such. Could I have said it differently, why didn't I, what did I hear, what was the theme of the hour, what should I have said? He was generous with his time. His services were volunteered to the hospital, and I did not have to pay for it. Gradually I learned to understand patients better, to hear more, and to make the right interpretations.

Many years later, when I felt especially grateful, I sent him a very meaningful, personal gift. I had generally expressed my thanks to him at the time, but this was extra. Although he probably received the gift, he never thanked me nor did he ever acknowledge receiving it. We had no personal disagreement, and in fact I often spoke of him with the highest regard. What happened? During our few, short meetings over the years, he was always proper but distant. It became evident in retrospect that this is how he was even then, when I visited him at his home. Not once in all those many times had he offered me a cup of tea, for instance. It did not seem strange then; our cool and cordial relationship seemed rather appropriate, for this was the type of atmosphere that prevailed in my residency program, and I was led to believe that such a formal and constricted stance was necessary for professional success and for maintenance of the analytic neutrality. That was the way *he* was, and in many ways, I modeled myself after him. Only much later did I begin to question the underlying assumptions of our approach to patients and of our relationship. After all, I was not his patient, so, why the cool cordiality, why the

distance, and why the "analytic neutrality"? I was privileged to have the opportunity to learn from this brilliant man, and I did not then realize that it was not without cost. The very manner of his being and the way he was with me discouraged my asking the real questions. Years had to pass before I allowed myself to wonder: Do interpretations cure?

To interpret means to clarify meaning. Can clarity of meaning overcome preverbal hunger, lifelong depression, murderous rage and hurt that begins at birth and reaches to the core? In the *Encyclopedia of Psychoanalysis* (Eidelberg, 1968) I read that "interpretation denotes the analyst's *explanation* (emphasis is mine. RBL) to the patient of the unconscious meaning of the neurotic manifestations . . . and, ultimately, to the reintegration of the patient's personality" (p. 202). I read it, and I believed it. I was told that increased understanding of unconscious processes leads to personality change. I did not ask why. It was stated as dogma, and naively I answered: Amen.

That was many years ago. Since then I have learned much about therapeutic and other relationships and how change really occurs. I also wondered about the real characteristics of my ex-supervisor and his relationships with patients. Could they be qualitatively different from his relationship with me, perhaps exemplified by his lack of acknowledgment of my gift? I had always known him to be sensitive and superficially gracious, but I did not realize that his aloofness and distance, like those of several other psychoanalysts of my acquaintance, were manifestations of his personality, not a professional pose. The personality of the therapist in any psychotherapy system clearly fits the particular working model upon which it is based. The psychoanalytic model does not really require aloof distance, but Freud himself was a reserved and proper person and very much the child of 19th-century Vienna with its strictly defined and formalized code of human interactions. He was uncomfortable with a direct I-thou encounter, and he constructed for himself a model in which he would be most comfortable, for it minimized his exposure to fit his fears. Now legitimized as professionally valid, many gravitated to this model for similar reasons, for the fear of intimacy still present even after a training analysis can now safely be overlooked. The need for self-change is obviated.

My ex-supervisor (I always have and still do address him as Dr. S.; I never heard him called any other way) can obviously not be more deeply involved with his patients than he was with me. Intellectually he is very much there, and sitting in the unexposed safety of the analyst's easy-chair, he may sometimes even allow himself temporary excursions toward his patients. This may occasionally even be true with colleagues who share his reserve and assumptions, but not with others, such as me. He makes correct and helpful interpretations, but these usually are *content* interpre-

tations, directed at the ego, and less often do they address themselves to the *process*, to what happens in the relationship. He could offer elegant and succinct theoretical justifications for such a position, but in reality he is uncomfortable in intense relationships, which would be the result of repeated process interpretations. They address the resistances thrown up by the patient against making *real* contact and allowing *real* involvement with significant others, including the therapist.

I remember my own two analyses. The first one with a kind and competent man whom I liked very much, and who probably liked me, too, or else why would he see me at 6:50 a.m.? I do not believe it was greed. But, after four years of therapy, four or five times a week, he remained a stranger, although a consistent, punctual, empathetic, and reasonable one. To the extent that my therapy was helpful, it was not because of the relationship nor because of his interpretations, but because of my own readiness and need for a parent-like relationship, coupled with the supplies the analyst provided. This was the pivot upon which the psychotherapy turned. I was very eager, almost like a little boy even though I was in my thirties, and he essentially gratified many of my wishes for support, understanding, and succor. His infrequent interpretations were sometimes correct, and in accordance with classical theory, they were sometimes confirmed by the production of suppressed memories. The analysis helped me understand myself better, and generally I felt comfortable in his presence.

I trusted him, even though, in retrospect, I never once felt more protected or safer simply because of his presence. I brought such ready trust with me, or else I would have been angry when he was willing to see the woman I was then divorcing. I wanted to please him and to be liked by him, and it was important for me to seem beyond hurt and fear. So I did not protest. Why should he not see her? But I was hurt and angry. Without my consent and not in my presence, as if behind my back, he spoke about me to a person who was my adversary in life and in a court of law, and he did not bring the issue up and allowed me to act as if it were an unimportant matter. Even correct interpretations were not powerful enough to overcome such improper violations of our relationship. When soon thereafter he moved out of town, we parted as friends. But, although many years have passed, I have never written to him, have never missed him, and not even once have I wished his counsel since. Much later did I learn painfully that ours was only a pseudo-relationship and that my real dependency and other needs were not tapped in spite of his correct observations and interpretations. As described in "Do You Love Me, Yafah Booltyanski?" (Bar-Levav, 1975), an entirely different intensity was required to bring these up from the hidden crevices of my personality.

My second analysis was similar in type. My analyst was a revered,

old and dear man, a pupil of Freud, and at one time part of the inner circle of the Vienna Psychoanalytic Society. I liked him very much, but this, too, turned out to be only a relatively superficial relationship. He was kind, he meant so very well, and he did his best. He also tried hard never to antagonize and never to provoke, not a single harsh word spoiled our idyllic coexistence until the incident which brought our relationship to an end. On that occasion he forbade (sic!) me from speaking up in a professional meeting, claiming that the subject belonged in our analysis. I obeyed (sic!) him dutifully and tried to work it through, but sadly realized that he simply was hiding behind the analytic posture to get his way. He preferred a chance to reminisce about Vienna and his personal experiences with Freud to teaching a previously announced course in which I was a registrant. His authority as a grand old man was such that he could do what he wished without open objection, and he did not want me to complicate matters by questioning the change. I liked him enough to agree, but not without losing respect for this mild-mannered man who unexpectedly acted with the autocratic reasonableness of an infant. He, too, wanted what he wanted without delay or interference. Our work together was doomed. His interpretations lost their effectiveness since his way of being was much more telling than his words. The relationship, obviously, is the key.

Traditionally the therapist advances the patient to look for meaningful satisfaction in the therapeutic relationship. Once this happens, and s/he experiences these yearnings, the therapist *interprets* these as infantile, thus helping the patient to renounce or alter them. Perhaps not quite accurate, yet largely still true. The term "interpretation" remains as a vestige of Freud who believed that if only the psychologically unsophisticated would become aware of their unconscious wishes, yearnings, and fears, they would neither need nor want to continue their "neurotic" patterns. Such assumptions have never been proven to be right. Interpretations, a first step in the process of psychotherapy, only make the unsophisticated more receptive to a psychological view of the world, and then the real work must begin. Interpretations that interpret can be interesting, sometimes even fascinating, but they are only marginally helpful in effecting character reorganization, unless they provoke *tissue* changes within the patient.

Sharon knew that "from the moment I was born I must have felt that I wasn't wanted." It took her long before she found enough strength within herself to consciously acknowledge this much, but even now it remained essentially divorced from any accompanying affect. I said, "Perhaps you were not even wanted before that time." Was this intervention an interpretation? In any event, it could not bring forth any memories for it dealt with an aspect of life long before the ego function of memory

even existed. "Don't continue . . .," said she, literally choking and gasping for air. Her eyes widened with panic, and she was coughing and choking as if she were literally drowning. She struggled to sit up, pale as if all the blood were drained from her face. She eventually lay back down on my couch, a long silence following, and tears rolling slowly down her cheeks. She was sobbing quietly, uncontrollably. Was this a confirmation of my intervention on a tissue level? "My lungs hurt. It is so painful to breathe. It seems I was choking and coughing like this a long, long time ago." Her pain was profound as she pressed her hands onto her chest to minimize the torture.

To me, her whole demeanor was a confirmation, and her silent speechlessness dated it. Her lifelong fear of not being was reexperienced in response to my words, but this time in an environment which she knew to be safe. Much later did she describe the recurring sense of pain in her lungs and the imminent sense of choking that she feared throughout life. She was taking another step toward individuation.

Interpretations that are simply explanatory tend to take patients away from their feelings and into their head. The fears of the therapist are often in collusion with those of the patient as they both feel safer in an interchange on that level. Such interpretations maximize comfort but minimize change, and they are mostly useful in the service of maintaining the status quo.

REFERENCES

- Bar-Levav, R. Do you love me, Yafah Booltyanski? *VOICES*, 1975, 11 (3), 16-22.
Eidelson, L. (Ed.). *International encyclopedia of psychoanalysis*, New York: The Free Press, 1968.
-

Conflict, suffering, psychotherapy—all these lead us to look again at ourselves, to look more carefully, in greater detail, to find what we have missed, to understand a mystery; and all this extends awareness. But whether this greater awareness will increase or diminish freedom will depend upon what it is we become aware of and how we use it.

ALLEN WHEELIS

What we think is less than what we know; what we know is less than what we love; what we love is so much less than what there is. And to that precise extent we are so much less than what we are.

R. D. LAING
The Politics of Experience

A man who desires to help others by counsel or deed will refrain from dwelling on men's faults, and will speak but sparingly of human weaknesses. But he will speak at large of man's virtue and power, and the means of perfecting the same, that thus men may endeavor joyously to live, so far as in them lies, after the commandment of reason.

SPINOZA