

Worth the Bother: A Response to Carmel Flaskas

Don Meadows

I read Carmel Flaskas' paper with a sense of pleasure and recognition. At the same time I received a quick update on the state of family therapy, much needed since my last active contact with it at the end of the 1980s.

I was not surprised at her discussion of the distancing from psychoanalysis that characterised systemic family therapy in its first decades of life. It seems to me that there were good reasons for this act of individuation.

Much of it stemmed directly from disillusionment and disappointment with attempts to work psychoanalytically with families, explicitly so in the case of Mara Selvini Palazzoli (1989). Although there was, and continues to be, a stable psychoanalytic family therapy, many pioneer family therapists who came from a psychoanalytic background, such as Murray Bowen and Salvador Minuchin, felt the need to adapt and change their ideas when working with families. A couple of features that characterised US psychoanalysis seem relevant here.

One feature was epitomised in the comment made recently by a visiting US analyst: 'Psychoanalysis, the only business where the customer is always wrong'. The assumption skewered by this critical comment is that psychoanalysis generally has human mind and behaviour taped, and that it is basically a matter of applying the model and filling in the details. This tendency was much more the case in the US than in the UK. Until the emergence of self-psychology as a cohesive movement in the late 1970s, the ego psychology of Freud, as codified by his daughter Anna, reigned virtually unchallenged. Alternatives such as Harry Stack Sullivan's interpersonalist approach were marginalised and a psychoanalytic orthodoxy prevailed, a strongly intrapsychic model.

This was reinforced in the US by the requirement that to be an analyst, one had to be a medical practitioner, a position only modified in very recent years. Class, status, power and ideological inbreeding reinforced the prevailing orthodoxy (see Kirsner, 2000). In

such an environment, it is not surprising that the developing systemic family therapy movement left home so emphatically.

The situation in the UK was rather different. Diversity had been introduced with the arrival of Melanie Klein in the 1920s and was institutionalised in the British Psycho-Analytical Society after the controversial discussions of 1942–1944. Training came in three varieties: Kleinian, Anna Freudian and middle group or independent.

Not only was there no received orthodoxy but, despite Ernest Jones' endeavours, the profession of psychoanalyst was open to people from backgrounds other than medicine. Psychology, social work, occupational therapy, theology, philosophy, anthropology, literature have all contributed significantly to UK psychoanalysis. These differences contributed to a more tolerant attitude within psychoanalysis, perhaps like cats and dogs that share the same household. I suspect they also contributed to the less distancing attitude on the part of systemic therapy in the UK and Australia noted by Flaskas. There was not the same need to draw such emphatic boundaries.

At the same time that systemic family therapy was growing and developing, changes were also occurring in psychoanalysis. In fact, looking down the list of 'central practice ideas in contemporary systemic therapy' noted by Carmel Flaskas, it is fair to say that all the items feature in the contemporary practice of psychoanalytically oriented psychotherapy. Thus the notion of repetition now includes 'patterns-across-time';



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Ferenczi's original concept of the line of development has been amplified into a full-blown developmental perspective, strongly reinforced by the greatly expanded interest in infant observation. The construction of meaning is now routinely located in contexts of society, politics, gender, race, culture and class. Language has become of primary significance, especially among those influenced by Lacan, and the importance of narrative is widely recognised, but especially among practitioners such as Russell Meares (2000), dealing with the fragmentation consequent upon trauma. Even the cybernetics-based notions of feedback have gained new prominence in the work currently being done on the borderland between psychoanalysis and neurology, mind and brain (e.g. Pally, 2000; Schore, 1994; Siegel, 1999).

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The different disciplines retain their distinct modes of practice and pursuits of theoretical cohesion, but the territories they examine overlap more than they used to.

Flaskas points out that systemic therapy has not turned to psychoanalysis as such but rather has shown interest in specific psychoanalytic ideas. Of these, the unconscious is undoubtedly the most important, together with transference and countertransference. This is not surprising when one considers that although the family is physically excluded from psychoanalysis, this is not the case psychologically. For psychoanalysts, especially those working in the object relations perspective pioneered by Klein and Ronald Fairbairn, the family is firmly ensconced in the patient's mind. Flaskas has her own interesting take on projective identification (projection by the patient is met with identification by the therapist) — not quite what Melanie Klein had in mind (hers was a one-mind theory), but an idea with the potential to be clinically useful.

It is interesting that Flaskas includes attachment theory as a psychoanalytic idea without any qualification. I would do the same, but a lot of psychoanalysts would not. There has been a historic gulf between psychoanalysis and attachment theory that is only beginning to be bridged (Fonagy, 2001).

To this short list she adds Bion's ideas about emotional containment and thinking. She particularly stresses the importance of not-knowing and the thinking space it both demands and provides. She does not mention Bion's adoption of Keats' concept 'negative capability' but may well have it in mind: '... when a man is capable of being in uncertainties, mysteries, doubts, without any irritable reaching after fact and reason' (Bion, 1970).

I was struck by the three areas Flaskas thinks are 'not met particularly well by systemic understandings'. They are power, emotional experience and the therapeutic relationship. I am not convinced that psychoanalysis has paid sufficient attention to power, perhaps because Adler, one of the early departures from the Freudian circle, made it the centre of his concerns. The other two items have been at or near the centre of psychoanalytic thinking since the beginning. Recently the therapeutic relationship has been radically re-examined by the intersubjectivist branch of psychoanalysis so as to replace the traditional transference/countertransference distinction with the concept of cotransference, mutually constructed by therapist and client (see e.g. Stolorow, Atwood & Brandschaft, 1994). The main impetus for this development seems to be abolition of the old ideal of the neutral therapist and the recognition that it is simply not attainable. So one of the key elements of Freud's 19th century science has been removed and, as family therapists would expect, the system is in change.

Freud's theory of emotions was not developed; he saw affect as a concomitant of drive and never elaborated on it further. Since his time, and especially in the last four decades, it has been much more closely studied (e.g. Tomkins, 1962, 1963) and affect modulation now is a main concern of psychoanalytic practitioners and researchers (Schore, Siegel). Systemic therapists may find this research of great interest and practical use.

This raises a final issue in this brief response. A contemporary of Freud's was the sociologist Max Weber. Among his prime concerns were the nature of science and the forms of power. In *The Protestant Ethic and the Spirit of Capitalism* and other writings he created a method of historical explanation that made *verstehen* (understanding) the priority rather than

causal linear explanation. It was not that he did not believe in causes but rather that they are so bound up with each other in interlocking networks that it is more appropriate to display the connectedness and bring about an understanding, rather than to create a causal chain in the manner of 19th century determinist science. The latter was Freud's model, but there was a contradiction in Freud himself at this point. On the one hand he is the hard-line determinist, tracking the causal chain back to its origin; on the other he is a precursor of systemic thinking in pointing out the recurrence of the family experience in transference and countertransference. There is ongoing debate about whether psychoanalysis is a science and, if so, in what sense (e.g. Symington, 2004). In my view we could take Max Weber and his concept of *verstehende soziologie* as a model rather than nineteenth century physics: psychoanalysis is not primarily about cause and effect, it is about understanding patterns of meaning. Such a view was set out some time ago by Charles Rycroft (1966) and enhances a perspective that can be shared by psychoanalysis and systemic thinking.

That leaves the question of power, and I suspect that Weber has much to teach us here too. He saw it as wielded in three main modes: charismatic, traditional and bureaucratic. We live in a world shaped by the third and most recent of these modes. We have learned to be suspicious of both the charismatic figure

and the reliance on tradition, but we need the openness of the one and the stability of the other. If I can conclude with a paradoxical prescription, we must both forget our roots and constantly renew them.

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