

## Relational Psychoanalysis and the Inner Life: Commentary on Cooper, Corbett, and Seligman

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Relational analysts know that their experience feels private and contemplative during a significant portion of their working hours. A consideration of the inner life, both the analyst's and the patient's, is part of relational praxis. Yet relational analysts also recognize that they are continuously involved with their patients, even at those very same quiet moments. Cooper, Corbett, and Seligman recognize both these parts of relational clinical work and argue that both are necessary. Making this argument explicit is important for its own sake, but also because analysts from other schools sometimes write as if there is no place in relational clinical practice for a quiet consideration of the inner life. Two examples of such criticism are offered, in both of which relational analysts are described as being too focused on social interaction and too little on the inner life. I offer my own version of the kinds of arguments about privacy and contemplation offered by Cooper, Corbett, and Seligman. I then make the case that all psychoanalytic theories come with risks of excess. Relational and interpersonal theories come with the risk of an overenthusiastic embrace of clinical interaction, whereas more intrapsychic theories carry the risk of attending too little to the impact on their patients of present-day relatedness—which is just as likely to have unconscious roots as the inner life.

These three essays were written by three of my favorite analytic writers. Two other favorites of mine are writing the introduction to this symposium and the other discussion of the essays. I'm in good company and happy to be.

But even more notable than the fact that we know and admire one another's work is the congruence of our views. Our point of agreement is not controversial, at least not to us. In fact, it is integral to our vision of psychoanalysis. It is this broad agreement among us that accounts for the existence of this symposium. But we are all very much aware that relational psychoanalysts are frequently portrayed by analysts of other persuasions as if we do not take this perspective. I return to characterizations of this kind later in these remarks.

What central attitude am I referring to? Well, let me describe it generically as a belief in the significance of the analyst's psychic privacy, inner life, or interiority in the conduct of clinical work, and an awareness of the analyst's dependence on this aspect of her subjectivity. Cooper, Corbett, and Seligman all offer us an examination of this part of the analyst's experience, each from a different perspective. Each writer accepts, as one expects from relational analysts, that the mind or the psyche can never be considered in isolation from other minds. All accept some

version of the kind of inevitable, conscious and unconscious involvement that is the common root of the work of Sullivan, Winnicott, and Mitchell. And so, to conceive psychic privacy and the inner life, the three writers in this symposium needed to rethink the problem. Let me illustrate.

Steven H. Cooper discusses “the analyst’s self-reflective participation,” “the analyst’s illusion of privacy,” and “self-care,” and offers this lovely passage:

I use the word *privacy* (Cooper, 2008) to refer to a place for the analyst’s self-reflective activity. The fact that it is a private place as conceived by the analyst does not imply that the patient doesn’t read and experience us in a variety of ways. Just as the patient’s private space is never entirely private in the analytic setting, the analyst’s private space is also never entirely private. *Instead, patient and analyst share illusions about privacy.* The analyst and patient’s privacy and illusory privacy exist in their individual imaginations and is a shared part of the psychical field. (p. 631)

Ken Corbett writes about “the analyst’s private space” and how ritual can be a kind of self-care, and has this to say, sounding the same note about privacy as an essential illusion:

We are, none of us, ever one. Still, I believe there is room—room that has been neglected in recent discourse on psychotherapeutic action—to consider the analyst’s private space. This space is to be distinguished from the impossibility of the analyst’s private mind. (p. 637)

Referring to “contemplative and containing modes of listening, reflecting, and speaking,” and citing Cooper (2010), Corbett goes on later in his essay to ask us,

What of our efforts to carve out the psychic space and time needed for listening? What of the analyst’s quest for the breather of mental freedom? What of the value of unknowing? What of the analyst’s need for and experience of being alone in the presence of another? (p. 638)

And Steven Seligman, addressing “paying attention,” “feeling puzzled,” and “inaction” as important parts of “the analytic mind-set,” at one point in his essay summarizes his themes as follows:

The relational revolution offers the liberating destruction of the idealization of the analyst’s mind as disembodied. Although this may seem tragic or even heretical for some of our more nostalgic colleagues, we have led the way in bringing reality to bear on the analytic myth. We should stay involved with what we know about the virtues of doing nothing when it supports our paying attention, since paying attention is not doing nothing, at all. Our paradoxical interest in getting involved while valuing attention and inaction can be a steady, but disequilibrating factor which can facilitate change if things are working out right. (p. 661)

### THE SHARED THEME OF COOPER, CORBETT, AND SELIGMAN

The attitude these three writers have in common is one that I consider to lie at the heart of the relational perspective. Cooper, Corbett, and Seligman all believe that the analyst’s conscious and unconscious engagement in therapeutic relatedness is inevitable but that the analyst’s capacity to access contemplation, privacy, and an immersion in the inner life nevertheless remains crucial. Relational analysts know perfectly well that their experience feels private and contemplative during a significant portion of their working hours. Yet they also recognize that they are continuously

involved with their patients, even at those very same quiet moments. Enactments, after all, can be quiet, too.

We need to conceptualize the two forms of participation—involvement in clinical process and involvement in the inner life—simultaneously and to contextualize those quiet, private, contemplative moments within continuous analytic relatedness. Seligman describes particularly well this contextualization of privacy, contemplation, and analytic self-reflection in the continuous engagement with the patient.

Relational analysts have highlighted that a central skill for the contemporary analyst in all cases is *to get involved while paying attention*. Since these elements strain against one another, this can be both paradoxical and difficult. The contemporary relational approach is best rooted in the same commitment to attention and understanding that has appeared in “classical” analytic orientations, with the more realistic idea that there is no choice but to embody these virtues in the midst of our own transformation in the analytic field. (p. 649)

Most of us have probably heard colleagues with different orientations portray relational psychoanalysis as if its theory, and especially its practice, allows too little room for the inner life. Let me offer an illustration of that kind that appeared in print. I recently read a very interesting collection called *A New Freudian Synthesis: Clinical Process in the Next Generation*, edited by a number of well-known Freudian writers at the NYU Postdoctoral Program and the Institute for Psychoanalytic Training and Research (IPTAR; Druck, Ellman, Freedman, & Thaler, 2012). The two excellent introductory essays by Druck (2012a, 2012b) distance this group of Freudian writers from the conflict theory of ego psychology, often identified with Charles Brenner, and then identify the work of this IPTAR/NYU Postdoc Freudian group with what Druck calls “structural theory”—by which he does not mean Freud’s structural theory, but theories of developmental difficulty and arrest, heavily influenced by writers from the object relations traditions, especially Winnicott. These “new Freudians” see psychoanalytic treatment as the kind of response to the patient that rekindles the growth and development of mind, which has been inhibited or stymied by the life the patient has led up to that time. The focus is not on interpretation and genetic reconstruction but on the analyst’s clinical responsiveness to the patient’s narcissistic states of mind. Therapeutic action is understood in most of these chapters as the internalization, and therefore the structuralization, of key aspects of the therapeutic relationship.

I read this book with a group of colleagues in a study group. We were all impressed with a problem that keeps popping up in these essays. Each writer tries to make the case that their way of thinking remains distinctively Freudian—by which they mean not only that all the chapters rest on a common core of principles that are identifiably Freudian but also that this common core is not relational. This is a difficult task, because most of the chapter authors also accept that relational psychoanalysis has made significant contributions that are closely related to their own. And, in truth, many of the chapters, even most of them, are not difficult for a relational analyst to embrace. But because of the problem of maintaining theoretical identification, most of the writers, in one way or another, argue that what they have to say is *not* relational in certain key respects.

Norbert Freedman (2012), in one of his last contributions, wrote the book’s final chapter, which was intended to pull together the book and summarize its message. Tackling the problem I’ve just described, he wrote,

Inherent in this new version of a “Modern Freudians” vision is also both an appreciation and a differentiation from the contribution from recent relational analysts (cf. Aaron (sic), Benjamin). The role of intersubjectivity as a defining baseline for all analytic work, so much emphasized by these authors cannot be gainsaid. (p. 252)

So far, so good. But then Freedman goes on to set up a straw man in order to knock it down: each of the “new Freudian” writers in this volume, he says, “advanced a distinct line of differentiation that eschews *the intrinsic narrowness inherent in the exclusive reliance on action and interaction* [emphasis added]” (p. 252). It is clear that we are meant to understand an exclusive reliance on action and interaction to be a characteristic aspect of relational psychoanalysis.

The three papers by Cooper, Corbett, and Seligman are contributions, in and of themselves, to relational thought. But could there be a more eloquent demonstration than Freedman’s argument of the *other* reason why the argument of these papers must continue to be made? Keep in mind that Freedman and his colleagues in this issue are hardly conservative Freudians; they represent the liberal, progressive wing of Freudian psychoanalysis. We might expect, therefore, that, if anything, they would be *more* accepting of the relational contribution than their more conservative colleagues. And perhaps they are—perhaps that is exactly the source of the identity problem they are grappling with.

I certainly agree that the task of differentiating the schools of psychoanalysis is worthwhile. I have made a number of those comparisons myself (e.g., Stern, 2013a, 2013b). But Freedman’s differentiation is not really an attempt to distinguish different views of psychoanalysis.<sup>1</sup> In my view it is, rather, caricature, created in the service of maintaining a sense of separate and superior professional identity; and the identity problem, in turn, is created by the influence that relational and interpersonal thinking have had over the last decades on much of North American psychoanalysis, including the contemporary Freudian group that authored this book.

I have no doubt that contemporary Freudians believe, just as the writers in this issue suggest, that their view is different from relational thinking. But it is very hard for these writers to specify those differences. However difficult it is to support these claims about relational psychoanalysis, though, such views seem not to be rare among psychoanalysts who do not identify as relational or interpersonal. See, for example, the recent exchange between Ferro and Civitarese (2013) and me (Stern, 2013c).

And so, in addition to the clinical contribution made by Cooper, Corbett, and Seligman, I value the affirmation of traditional analytic values in these papers. Just because values are traditional in psychoanalysis does not mean they cannot also be relational; and just because subjectivity cannot be isolated inside a single mind does not mean that interiority cannot exist and be valued.

#### CURIOSITY AND THE FORMULATION OF EXPERIENCE: ANOTHER WAY OF GRASPING THE SIGNIFICANCE OF THE ANALYST’S INNER WORLD

I mentioned earlier a remarkable degree of congruence in the views among us. I hope that, via the very brief citations of Cooper, Corbett, and Seligman I offered above, I have indicated the

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<sup>1</sup>Freedman does identify four principles that he feels make these papers Freudian—but these principles are not a coherent formulation of a theoretical core, but rather a re-presentation of the individual justifications offered by the chapter authors along the way.

congruence of their views with one another. I meant to refer, though, to all of us, including Bass, Harris, and myself. I leave it to Tony and Adrienne to say whatever they wish about their own thoughts about this matter. But I will say something about my own.

In developing my own version of the necessity for quiet and privacy in the midst of engagement, I have given special emphasis to curiosity. By curiosity, though, I do not mean a seeking after anything in particular in experience. Curiosity is not a matter of looking *for* something, nor is it mere inquisitiveness. It is an active attitude of openness. It can appear to be passivity, because there is a great deal of “waiting” involved. For what? Well, in my own experience with patients, I wait for my own unformulated experience to cast up tendrils into my consciousness, tendrils that will begin to bring to my awareness what it is that I am perhaps on the verge of thinking and feeling. I have no choice but to be patient. I could force the matter, of course; but making experience happen before it is ready to happen generally fails to reveal to me what I need to know. The result is intellectualization.

What I am trying to describe in characterizing curiosity in this way is the process of formulating experience. This way of understanding the process of formulation is well suited to Cooper’s, Corbett’s, and Seligman’s both/and attitude about private experience and engagement. Why? Because the process of formulation—the waiting, and the active attitude of openness—seems no different to me when the experience to be formulated concerns the nature of my involvement with my patient, or my patient with me, than it is when I am waiting to find out what it is I think and feel about anything else. Engagement, that is, remains engagement, whether the thing engaged is another person, another part of myself, a work of art, a story, and so on. Yes, I am always engaged with my patients, just as Cooper, Corbett, and Seligman write. But to be engaged is not necessarily to know the nature of that engagement. I find that there is generally good reason to imagine that my knowledge of any current engagement is only partial. And I cannot know it at will. I must wait for my own capacity to experience it to develop, and that development is on its own schedule. It takes its own time and comes in its own way. Usually, the best I can do is stay out of its way. Or perhaps better: The best I can do is to attend as closely as I can to recognizing whatever is arriving in the range of my knowing (see, e.g., Stern, 1990, 1997). It often takes what I (Stern, 2010, 2012) have called witnessing on the part of the analyst. In another book I happened to be reading recently, Ted Jacobs (2013), in describing the recapture of the past, and reminiscent of some of the notes sounded also by Cooper, Corbett and Seligman, also evokes the analyst as witness: Recapture of certain experience, Jacobs wrote, requires, “time, patience, silence, and the presence of someone who [understands]—as Christopher Bollas (1987) has reminded us—that news from within comes on its own terms” (p. 20).

Of course, none of this means that we can’t make consciously intended contributions to our work. Conscious, disciplined inquiry and inference play a role in every treatment, in every session. But we employ them only after the waiting and the receptive attention that allow novel experience to arrive unbidden. Inquiry and inference are tools that we use to shape and polish what matters. But what matters—*that* must come to us on its own.

#### RETRACING THE PATH: THE RISKS THAT COME WITH COMMITMENTS TO THEORY

I have taken issue with the characterization of relational psychoanalysts as excessively focused on interaction and insufficiently interested in the inner life. Now let me change course—or rather,

let me double back and retrace the same path differently. I want to acknowledge a certain aspect of the very criticism of relational psychoanalysis that I have rejected. To do this requires that I offer some background.

I did my psychoanalytic training at the William Alanson White Institute, which was then the home, and source, of interpersonal psychoanalysis. That was before relational psychoanalysis existed. Today White is still an interpersonal institute, although now most of us also identify ourselves as relational.

When I trained, my teachers and fellow candidates, although they all identified themselves as interpersonalists, or at least acknowledged interpersonal thinking as a crucial influence, practiced in ways, and held theoretical and clinical positions, that ranged across the entire spectrum of psychoanalysis. Some were fairly conservative, preferring to think more along the lines of the intrapsychic world than the interpersonal one. They conceptualized transference as distortion, did not yet find much informational value in countertransference, and depended on free association, evenly hovering attention, interpretation, and neutrality. On the other end of the spectrum were those who were radically interpersonal, which meant that they tended to focus on present interactional events, especially those in the analytic situation. They were more likely than their conservative colleagues to encourage directness and spontaneity in dealings with patients, often eschewed interpretation for interventions with more explicitly relational aims, and understood transference as selective interpretation, not distortion.

But these were the extremes. Only a bare handful of my teachers were either intrapsychic conservatives or confrontational radicals. The majority recognized the significance of the analyst's subjectivity, and therefore felt that psychoanalysis took place between two people, both of whose experience was relevant. They believed that analysts needed to understand their patients in their patients' own terms, and needed to talk to patients in a way that their patients could hear. They recognized early the informational value of countertransference, and they emphasized it. Both empathy and the internal world mattered continuously. It was a little early, in the United States (this was the 1970s), for the recognition of the significance of the particular developmental perspective offered by British object relations; but my teachers were among the first to understand these matters, and teach them. They recognized the value of both the intrapsychic and the interpersonal positions, and they taught that to me.

I tell you all this for a reason: As I did earlier, I want to counter the suggestion, which I have so often heard, that interpersonal psychoanalysts—and relational analysts, in turn—have a long history of advocating a naïve, sociologically oriented interactionism that ignores the depths of the inner world. As a matter of fact, during my training I was always taught the value of reading *all* the literatures of psychoanalysis; at institutes that emphasize interpersonal and relational psychoanalysis, there is an attempt to present as many psychoanalytic positions as possible, and there is a comparative mind-set. This has not been the case in conservative institutes, in which candidates are seldom taught interpersonal and relational psychoanalysis. (This is perhaps beginning to change, but the history has been impossible to read any other way up to now.)

It is also true, though, that most of the analysts who have been most focused on the current interactional arena have been interpersonal and relational (I say “most” of these analysts have been interpersonal and relational, because there are exceptions, of course, mostly mavericks—Ferenczi, R. D. Laing, and Renik, e.g.). Now, I want to avoid any suggestion that an emphasis on interaction is necessarily excessive. I want to avoid that suggestion because I have learned from this emphasis ever since I was a candidate, and I have contributed to it myself, in my writings

(e.g., Stern, 2010), in the years after my training ended. But we can at least agree that, to the extent that an interactional focus *can* detract from our interest in the inner world, and thereby be excessive, it is interpersonal and relational analysts who are most at risk of working that way.

Intrapsychically oriented analysts, on the other hand, take a different risk: Their commitment to their theory leads them to risk ignoring the present-day impact of their conduct with their patients. Not infrequently I have seen patients whose previous analysts, competent as they otherwise were, simply could not see or accept their present-day impact on their patients. In the end, though, what they were missing was not just what was happening now. Ironically enough, because they could not accept their contemporary unconscious participation, they were missing the unconscious themes being expressed in the interaction.

I said that I would retrace my path differently. Now I have set myself up to do that. What I want to say is simply this: Every psychoanalytic theory comes with a different set of risks, risks of excess. Every theory comes with the risk of losing the forest for the trees in a different way. Interpersonal and relational theories come with the risk of giving the inner world too little emphasis; traditional psychoanalysis comes with the risk of giving the contemporary psychoanalytic interaction too little emphasis.

I am perfectly content with making the point this way. What I object to—the other way of treading the path—is the suggestion that each theory comes with *inevitable* excesses. Putting the problem this way leads to tendentious relations with those who espouse different ideas: You people do *that*. I find that approach disrespectful and inaccurate. Yes, it's true, we can find excess in certain parts of the work of practitioners of every stripe. But that excess is not an *inevitable consequence* of their point of view; it is a *risk* of adopting that point of view. And because it is a risk, it can often, or even usually, be avoided if it is recognized, and if we struggle with it.

Does it seem that I've strayed from the discussion of the three papers in this symposium? I believe I haven't. These three papers seem to me to be incontestable testimony that relational psychoanalysts maintain an interest in the inner life while acknowledging the inevitability of their involvement with their patients—and while maintaining their consequent focus on clinical process and enactment. Relational analysts may have to acknowledge that their perspective exposes them to a risk of paying too little attention to the inner life—but Cooper, Corbett, and Seligman show that risk is what it is, and all it is. Orientation is not destiny, at least not in this respect.

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