

**“...BUT AT THE SAME  
TIME AND ON  
ANOTHER LEVEL...”**

Clinical Applications in the  
Kleinian/Bionian Mode



VOLUME 2

**JAMES S. GROTSSTEIN**



**“ . . . BUT AT THE SAME TIME  
AND ON ANOTHER LEVEL . . . ”**

VOLUME TWO

**“ . . . BUT AT THE SAME TIME AND ON ANOTHER LEVEL . . . ”**

VOLUME ONE

Psychoanalytic Theory and Technique in the Kleinian/Bionian Mode

VOLUME TWO

Clinical Applications in the Kleinian/Bionian Mode

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AND ON ANOTHER LEVEL . . .”**

VOLUME TWO

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in the Kleinian/Bionian Mode

*James S. Grotstein*

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I dedicate this work to Wilfred Bion, Ronald Britton, Albert Mason, Thomas Ogden, and Antonino Ferro, each of whom has been inspirational to me in countless ways in writing this work.

I also dedicate it to my wife, Susan, who has long and patiently endured being a “literary widow” while I was engrossed in writing it. I am profoundly grateful to my patients from across the years, to those whom I have helped and especially—but regretfully—to those I have not. It was the latter who helped push me to reflect upon myself (with four psychoanalyses and many elective supervisions) and to consult many different schools of analytic thought, until I became immersed in the Kleinian—and now post-Kleinian—as well as the Bionian, while still honouring and using the wisdom of the other schools in which I had been trained and/or to which I had been exposed. My professional journey has been an exciting one, but it is constantly informed by the need to make reparation for my failures and then rededicate myself to the psychoanalytic task once more.



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# CONTENTS

<i>ACKNOWLEDGEMENTS</i>	xi
<i>PREFACE</i>	xiii
<i>ABOUT THE AUTHOR</i>	xvi

## PART I Psychoanalytic technique

1	The consultative interview: initial session	3
2	The analysis begins: establishing the frame	6
3	Recommendations on technique: Freud, Klein, Bion, Meltzer	20
4	How to listen and what to interpret	29
5	Termination	60



- 6 The psychoanalytic treatment of psychotic and borderline states and other primitive mental disorders 65
- 7 Basic assumptions of Kleinian/Bionian technique: a recapitulation 73

PART II  
Case presentations

- Introduction** 81
- 8 Clinical example 1 83
- 9 Clinical example 2 113
- 10 Clinical example 3:  
brief case illustration  
of the predominantly "Bionian" mode of technique 134
- 11 Clinical example 4:  
a patient analysed in the style (my version)  
of the Contemporary Kleinians 137
- 12 Clinical example 5: "bicycles"  
*presented by Shelley Alhanati, supervised by JSG* 148
- 13 Clinical example 6  
*presented by a supervisee, supervised by JSG* 156
- 14 Clinical example 7  
*presented by a colleague* 167
- 15 Clinical example 8  
*presented by a colleague* 176
- 16 Clinical example 9  
*presented by a supervisee, supervised by JSG* 180
- 17 Clinical example 10  
*fragment of a session from a colleague's case* 185

18	Clinical example 11 <i>from a colleague</i>	193
19	Clinical example 12: psychoanalytically informed psychotherapy <i>presented by a supervisee, supervised by JSG</i>	202
20	Clinical example 13 <i>from a colleague</i>	207
21	Clinical example 14: dream analysis in an analytic session	213
22	Clinical example 15 <i>Albert Mason</i>	218
23	Clinical example 16 <i>Albert Mason</i>	222
24	Clinical example 17 <i>Ronald Britton</i>	225
25	Clinical example 18 <i>Ronald Britton</i>	228
26	Clinical example 19 <i>Antonino Ferro</i>	234
27	Clinical example 20: "The woman who couldn't consider" <i>Thomas Ogden</i>	240
	<b>Epilogue</b>	263
	REFERENCES AND BIBLIOGRAPHY	265
	INDEX	275



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## PREFACE

In Volume One my wish was to review selectively Kleinian (mainly traditional) and Bionian theory in such a way so to present the more prominent aspects that underlie and inform their clinical technique. It is not meant to be a textbook on theory per se. I have also included some theoretical ideas that I believe constitute hidden orders of their technique, such as “the once-and-forever infant of the unconscious”.

In Volume Two I describe in detail *my impression* of specifically how to understand and to interpret in an analytic session. The reader will note that I present clinical sessions in stenographic detail and display complete sessions. It will be noted that I do not include past history but do make reference to it when it is necessary to understand the text. In the sessions of my own analysands and in those of others, I go to great lengths to detail my private observations, reveries, and countertransferences as well as my thinking about how, when, and what should be interpreted.

I wish to reiterate what I stated in the Preface to Volume One with regard to the focus of this text in connection with “classical” infantile, part-object Kleinian thinking as more and more differentiated from the later post-Kleinian emphasis on the analytic process (transference/countertransference) in the here and now—all conceived in a whole-object perspective.

This work was written during the heyday and then twilight of “classical” Kleinian theory and technique, which deals with infantile states of mind accompanied by part-object designations and focuses on the analytic *text* of the analysand’s associations and on reconstructions. The Contemporary London post-Kleinian oeuvre has arisen in the meanwhile. Their followers have gradually differentiated themselves from that classical oeuvre and have begun to think, speak, and interpret in a newer argot—one that focuses on the complexities of the transference/countertransference *process in the “here and now”*, with emphasis assigned to enactments by either analysand or analyst. It is a whole-object perspective—not a part-object one. As I point out later in the text, to me it closely resembles a serious theatrical passion play in which analysand and analyst often play out hidden roles, which Sandler (1976) long ago adumbrated and which are now the focus of attention of the Betty Joseph Workshop (Hargreaves & Varchevker, 2004).

Notwithstanding this subtle but substantial change in theory and technique and in the language with which to express them, it is my understanding that they, the Contemporary London post-Kleinians, are trained in and thus well-versed in classical part-object, infantilistic theory, and that it effectively occupies the background, if not also often the foreground, of their thinking and of their interpreting styles. I believe, in other words, that it constitutes an important part of their basic psychoanalytic training before they put it aside for their new orientation.

I wish at this juncture to offer a caveat. In Volume Two I focus closely on concepts of psychoanalytic technique. My recommendations constitute both *my version* of what I believe are generally accepted views and my own personal suggestions. I suggest that the reader, consequently, should view what I present as *suggested guidelines* from both sources with the understanding that clinically bidden situations might frequently require justifiable departures.

*Caveat.* In my original version of this work I attempted to even out gender use by employing multi-gender pronouns like “(s)he”, “his/her”, and “him/herself”. I was, however, told by many of those to whom I have given this text to critique that such terminology, though accurate and appropriate, is found to be disturbingly cumbersome and uncomfortable for readers to read. I have therefore reluctantly resorted to employing the masculine pronouns and adjectives at the expense of the feminine, for which I ask for the latter gender’s pardon. Psycho-

analysis was once dominated by males. Now the trend is towards female domination. The predominant patient population, then as well as now, may well have been and still be feminine. Thus, my apologies all the more, and my regrets!



## ABOUT THE AUTHOR

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VOLUME TWO

It is the cleverest achievement of art to keep itself undiscovered.

John Dryden

Memory knows before knowing remembers.

William Faulkner, *Light in August*

And, as imagination bodies forth  
The forms of things unknown, the poet's pen  
Turns them to shapes, and gives to airy nothing  
A local habitation and a name.

Theseus in *A Midsummer Night's Dream* (Act V, Scene 1)



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PART I

# PSYCHOANALYTIC TECHNIQUE



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## The consultative interview: initial session

When interviewing the prospective analysand for the first time, experience seems to suggest that it may be better for the analyst not to confuse the consultation with psychoanalysis itself. Etchegoyen (1991) believes that a marked distinction should be made between the realistic, face-to-face consultation and the future analysis so as to allow the prospective analysand to develop a semblance of the reality of the analyst's presence—at least as much as he can glean during the consultation. Klein and her followers, including Bion, seem often to do otherwise. They consider that the analysis has already begun with the beginning of the consultative interview and, while interested in past history, do not especially ask for it but allow for it to emerge of its own accord. In other words, they follow the prospective analysand's free associations and interpret transference from the beginning. The latter was my experience in my Kleinian (Albert Mason) and Kleinian/Bionian (Bion) analyses. Yet Mason (personal communication) has made the point that he likes to take some history of the analysand's past so as not to be surprised by the emergence of psychosis, addictions, and other disorders of this kind.

The consultative interview allows for an evaluation for the prospective analysand's suitability for analysis and constitutes the best opportunity for the analyst to explain the nature of the analytic procedure, the rationale for the use of the couch, the setting of fees, the

schedule of appointments, and the presentation of the analyst's policy on absences.

I have also found it useful on some occasions to extend the consultation over as many as six consecutive sessions for further evaluation, principally for suitability for analysis—with me. I vary from prospective analysand to prospective analysand about taking a detailed history. Generally, I prefer not to—I would rather see the history as it emerges during the analysis. At other times, however, I may in fact focus on history because I believe at the time that I need to: or, to coin an apocryphal Bionian joke: “It’s alright to take a history as long as you quickly forget it!”

Once psychoanalysis has been agreed upon and I suggest that optimally they should come five times per week, analysands-to-be may be shocked and frightened, especially by associating this frequency with the degree of their psychopathology. I explain that the frequency has nothing to do with their illness but constitutes the nature of the procedure that works optimally under these conditions. I go on to say that when the analysand is seen that often, then emotions and thoughts that an analytic session may evoke can then be dealt with in the following session and/or sessions. Otherwise, they would return to the unconscious and not be dealt with.

The analysand will soon learn, once the analysis is under way, that the frequency results in the establishment of a “rhythm of safety” (Tustin, 1990, p. 160): an invariant cycle that corresponds to the infant’s experience of the optimal congruence of two cycles: (a) the coming and going of his appetitive neediness, and (b) the coming and going of mother to satisfy his neediness. When there are alterations or breaks in the schedule, the “rhythm of safety” is ruptured (“catastrophic change”: Bion, 1970): this experience represents an important aspect of the *adaptive context*<sup>1</sup> (Langs, 1976a, 1976b) and/or the *analytic object*<sup>2</sup> (Bion, 1965).

Formerly, also, the use of the couch was recommended only for four- to five-times-per-week treatment. Currently, many psychotherapists as well as psychoanalysts use the couch for once-, twice-, and three-times-per-week sessions. I believe that each analyst or therapist must use his own discretion about this issue and also may seek consultation—but that, irrespective of frequency, the analyst and/or therapist must assume and preserve the analytic stance with the patient.

In my own practice I explain the use of the couch as follows:

Freud seemed to have thought that he was a cryptographer of sorts for the secret code of the unconscious as it emerged in the analysand’s free associations. He found himself to be so intensely concentrated on the cryptographic function that he felt intruded

upon when the analysand, who was sitting opposite him, stared at him. He thereupon, for his convenience, instituted the procedure of having the analysand look the other way, and while he was doing so, they might as well lie down so as to be more comfortable. Freud had no idea at the time that, by positioning the analysand in such a way, i.e., eyes averted and assuming the supine position, he had actually uncovered right cerebral hemispheric functioning, which is non-linear, less organized, field-oriented, and more emotional and day-dreamy in nature. [Grotstein, 1995c]

My experience informs me that suggesting the use of the couch should not be dogmatic. I have come across analysands in whom I have seen *poor attachment*, and they often seem to prefer to sit up so that they can use their eyes to attach to the analyst. I think one should bear this caveat in mind.

I also explain to the prospective analysand how he is to proceed once the analysis commences: that the fundamental rule (Freud, 1913 [1912–13], p. 207) requires him to say everything that comes to mind, no matter how seemingly irrelevant or embarrassing. With regard to how I shall proceed, I explain that my task is to listen to his freely formed utterances until I have an idea about what the unconscious part of his personality is trying to convey to us. My interventions will mainly be interpretations—that is, my impression at the moment of what their own “interpretations” about themselves seem to be. I may also ask questions about information that is not at my disposal. Sometimes I may try to clarify. I also explain that their own questions to me are to be considered as free associations and may therefore not necessarily be answered directly or perhaps even at all, that this practice is not evasive or rude on the part of the analyst but is due to the fact that a thought, statement, or phantasy had been operant before the question was posed, and that this forerunner of the question (why was this question asked?) takes precedence for analytic consideration.

### Notes

1. The adaptive context connotes any or all the factors in the external environment and/or in the analysis to which the analysand is adapting (Langs, 1976a, 1976b). Any “emotional turbulence” (Bion, 1965, p. 157) due to “catastrophic change” (Bion, 1970) becomes part of the adaptive context.

2. The “analytic object” (Bion, 1962b, p. 68) constitutes the quintessence of the patient’s maximum unconscious anxiety, i.e., it represents the expression of the analysand’s principal underlying narrative theme of the session. It is detectable, according to Bion, through “sense, myth, and passion”, by which I believe he means observation, unconscious phantasy—or personal myth and the general myth to which it may correspond (i.e., Oedipus myth, and the felt emotions associated with the theme).



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