The Discrete and the Continuous in Freud's "Remembering, Repeating and Working Through"

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THE DISCRETE AND THE CONTINUOUS IN FREUD'S "REMEMBERING, REPEATING AND WORKING THROUGH"

There are two crucial passages in Freud's "Remembering, Repeating and Working Through" that require the analyst to think about entities in the mind while at the same time thinking about the mind as a continuum of activity. Although that is a challenging paradox, the passage that allows the analyst to find discrete memories in the patient's continuous behavior was easily absorbed into psychoanalytic custom. In the reverse direction, however, the description of the patient finding his way from the analyst's discrete interpretations to his own continuous experience of strain was most often pasted over with superfluous platitudes. A practical reason for this aversion is suggested.

Keywords: working through, resistance, Freudian theory, philosophy

Although it is a bit irregular to begin a formal essay with a declaration of personal feelings, I have learned that readers need to know my motive in order to catch the drift of my argument. Without such a declaration they are likely to imagine a grander critique than I intend, and even some sort of partisan campaign. Here, then, is how the paper came about.

I have had the experience of trying unsuccessfully to convince colleagues that they are misreading Freud's comments on working through in his *Papers on Technique* (1911–1915). Since my reading seemed to me fairly plain, I was puzzled by why it was so hard to make my point.

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I asked myself what might be the good reasons for the "resistance." I thought I found the answer in the inherent difficulty of imagining at once both discrete units and continuous process, as Freud was demanding of analysts. That double vision is something that long ago had fascinated me in Freud's theory (Friedman 1988.) But there was a problem with that answer. The same cinching together of units and continua was evident in an earlier part of the same paper, and analysts never balked at that. Why was the one instance accepted by all, while the other has been steadfastly ignored by many? Then I noticed that the two instances differ as to which member of the treatment couple was presenting a continuum, and which one was transmitting discrete units. It seemed that analysts can comfortably picture themselves fielding unitary messages that emerge from the continuum of the patient's activity, and yet find it uncongenial to imagine their own discretely crafted responses dissolving into a river of the patient's continuous experience. Overall, I thought, analysts were wrestling here with a fundamental philosophical problem, and I thought it would be reassuring to recognize that the difficulty is ancient and honorable, and a conundrum for all thinking beings.

Thus, I am not campaigning for or against any practice or theory. In a certain sense, my goal is to justify a common misreading. Further, I wish to make it clear that this is not a paper on technique; it is a paper about a paper on technique. I don't know how to avoid the paradox I am pointing to. I am trying to answer a question about the community's reception of an idea, and dwell a little on the nature of the problem as it is written about in this one text. I add some comments on the psychoanalytic literature and the philosophical background, in order to "naturalize" the conceptual difficulty, but I make no effort to trace the history of the problem in either discipline.

THE CONTEXT OF THE TEXT

Readers might find it hard to join me if they are familiar with the Working Through paper only as a free-standing essay like the bulk of Freud's work. My discussion of two passages in "Remembering, Repeating and Working Through" is based on a particular reading of the whole book in which they appear, Freud's *Papers on Technique* (1911–1915). I believe that this slight and early-conceived book is often misunderstood because analysts, when not actually discounting it as theoretically unfinished, often read back into it what we all know to be Freud's general outlook,

and ask not what Freud says in a particular passage but what he must have meant there in view of what everybody knows to be his general model of the mind and treatment goal. I have argued (Friedman 1991a, 2008, 2009) that the technique book is not an application of theory. It stands alone among Freud's works as a chronicle of successive efforts to wrestle with the raw experiences that led him to adopt the principles of psychoanalytic technique, in the process layering sometimes divergent conclusions one on top of the other without retraction, each understood only by grasping a specific difficulty he was wrestling with at that moment in his practice.[1]

[1] *Papers on Technique* does not pull together scattered contributions bearing on the subject; it is a consecutive series of installments written between 1911 and 1915 that chart in real time the progressive discovery of the ingredients of psychoanalytic treatment. The series of papers, supplemented by six other technique papers, was ultimately published along with metapsychology papers as a book, *Zur Technik der Psychoanalyse und zur Metapsychologie* (Freud 1924). Although the tone of the *Papers* is didactic and deceptively settled, each one of the series is just the report of that moment—one stage of an ongoing investigation that takes its leave from suggestion, catharsis, and dream interpretation, and journeys onward to psychoanalysis proper. Although Freud uses an exploratory question-and-answer style that elsewhere serves as a teaching device for expounding already achieved conclusions, in *Papers* this is not a rhetorical artifice, and its progression reveals it as Freud's conversation with himself. The book is best understood by reading the individual papers consecutively as though they were a file of undoctored laboratory notes, recording the attitudes and behaviors that were found to turn on or turn off the new psychoanalytic phenomenon. The overall discovery required a progressive working out of puzzles and challenges presented by patients' behaviors. Most of the discoveries were learned from untoward consequences of analyst actions that would thenceforth be regarded as errors. Freud conveyed this experimental data in the form of warnings of the sort "If you do such-and-such, you will experience the following difficulties." The ways Freud works out the dilemmas constitute psychoanalytic technique. The "mistakes" are mostly natural behaviors of any therapist. That fact reveals the unique character of psychoanalysis and explains a peculiarity of *Papers* that has misled many commentators: It is assumed that, no matter what it's called, a list of warnings about mistakes cannot be a primary text on technique. But this *is* the primary text on technique, and it does proceed very largely—though not exclusively—by saying what not to do, and then providing a way of thinking that makes that discipline feel reasonable. As Freud works out the reasonableness of the odd interaction, the nature of the analytic interaction and the analytic process gradually comes into view. His solutions are conveyed in reproducible images, pithy phrases, and colorful metaphors for analysts to use as reminders of how to evoke an analytic process and avoid scuttling it. (Unfortunately, these terms and metaphors are often more memorable than their original meanings.) Two of the hallmarks of psychoanalytic technique are apparent here: its inhibition of natural response, and its paradoxical ideals. Freud published this progressive series of papers together as a book, the unmodified early solutions sitting side-by-side with later revisions, leaving the impression that an

FIRST EXAMPLE OF THE MERGER OF DISCRETE ITEMS AND A CONTINUOUS PROCESS

> We must still be grateful to the old hypnotic technique for having brought before us single psychical processes of analysis in an isolated or schematic form. Only this could have given us the courage ourselves to create more complicated situations in the analytic treatment and to keep them clear before us [Freud 1914a, p. 148].

This is a remarkable confession by Freud. Does he really mean it? "Only this could have given us the courage. . . ." The need for courage testifies to the dizzying dilemmas, practical and cognitive, that Freud was struggling to master in the *Papers on Technique*. But by the same token, the passage is also a tribute to *a certain kind of preliminary thinking* that one needs in order to get a purchase on those difficulties.

We can be sure that it is not a confession of cognitive weakness. Excessive modesty and fearfulness were not notable characteristics of Freud. Although it is mostly the editorial "we" and "us" (i.e., himself) that he speaks for, one suspects that he regards himself as the best of Everyman on this journey, summoning his followers along the path (the sort of thinking) that leads to the summit. And if one still suspected that Freud was confessing his personal need for a simple-minded myth to reassure him on his way to a tougher truth, that suspicion would vanish on noting that the new, complex truth *includes* the preparatory simplification, for in the passage that leads up to what might seem a sentimental farewell to the early model, he has actually promised it lifetime employment. The old terms will remain in place forever: "The aim of these different techniques has, of course, remained the same. Descriptively speaking, it is to fill in gaps in memory; dynamically speaking, it is to overcome resistances due to repression" (pp. 147–148).

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analyst must replace his social responses with several difficult and contradictory attitudes, and Freud sometimes says as much (see Friedman 1991a, 2008, 2009). It is sometimes necessary to look behind Freud's rhetoric. If instead of being read as a record of Freud's own mistakes, *Papers on Technique* is read as random corrections of miscellaneous howlers perpetrated by stupid or unethical students, reining them in with rigid rules to match their dull wit (as Freud did indeed sometimes suggest), a unique insight into the discovery and rationale of psychoanalytic treatment will be lost. To counteract this, educators should make use of Ellman's astute, paragraph-by-paragraph commentary to *Papers* (1991), which is ingeniously accompanied by a point-for-point comparison with some contemporary theorists. Ellman's reading is very close to my own, though he retains a bit more of what generations have layered over the original meaning of working through.

What, then, is that simpler kind of thinking that allowed Freud to venture into the forbiddingly complex scene of the analytic encounter? It is the kind of thinking that finds "single psychical processes of analysis in an isolated or schematic fashion." The operative words are "single," "isolated," and "schematic." That's the old way. And what, by contrast, is the complexity that continues to need those single, isolated, and schematic elements as a counterpoint? It is the progressively layered "takes" on the phenomenon of analytic treatment that make up the *Papers on Technique*. As Freud's thinking develops in the pages of that book, the plot thickens: transference is a prime example. Transference morphs from the simple slippage in *Studies on Hysteria* (Breuer and Freud 1893–1895) into a general human function. And yet it is not just a general human function, because in treatment it has certain peculiar features—or perhaps it doesn't. Analytic love is as realistic as any love but yet somehow more devious and intense. That's a typical, self-contradictory complexity in the new model. Complexity is rife in the new notion of memory. Here memories are retrievable episodes, but yet memories are often not anecdotal, not naturally segregated, not articulated, not calling up the past, often not thoughts (just connections), frequently not incidents (but habits and character), sometimes not even actual (but just virtual). Complexity now afflicts the analyst's attention: it is *unfocused,* floating attention, but yet a laserlike *focus* on resistance. Most fateful, perhaps, is the new complexity Freud faces up to in the analytic relationship: Who is on whose side in this project; is it or isn't it a battle? These are just a few of the many examples of complexity in *Papers on Technique*.

If we position ourselves alongside Freud in 1914 and look with him at what he is facing as he writes his report, we can easily sympathize with his astonishment that he had been able to master so much complexity. We may even wonder whether he had come upon character analysis earlier than supposed, and lacked only the nosology. The true shift is that now he is not looking at a symptom (such as a stifled memory) or an avenue for its removal (like abreaction). He is seeing—or rather experiencing (and sometimes fighting)—a whole person. And that person is behaving this way and that from moment to moment, all the while claiming something personal that Freud had not originally been hired to provide. Freud could thread his way through that formidable scene only with the courage provided by a manageable earlier vision of simple parts (specific memories) and process (conscious recollection).

Analysts still find that view daunting and must, like Freud, project parts and processes into their experience of a patient's organic wholeness,

conceptually freezing his slippery, variable behavior into some kind of mental portrait. Like all human beings, but more urgently because of their heavy obligation, analysts have an insatiable need for stencils to mark out simple units from the continuum in front of them. Nothing is more characteristic of the analytic literature than the drive to name things. A new term, a vivid image, a portable phrase—these are what we all hunger for and count as progress.

Such is the heritage of the many doubled visions prescribed by Freud throughout *Papers on Technique*. In imagining and conducting treatment, we must in general think two ways at once—as though looking at discrete objects "inside" the patient, and also as though confronted with a whole organism that exhibits itself in a somewhat unpredictable process.

What I want to call attention to at this point is that, although these paradoxes were so formidable that Freud needed the aid of a simple memory-retrieval model to lure him into the complex treatment event, the final, tangled vision was effortlessly adopted by generations of practicing psychoanalysts, as were many other impossible paradoxes in Freud's recipe for producing an analytic process. Daunting though it is to perceive memories and behavior as the same thing, analysts received the injunction almost without noticing its paradoxical nature. They observed behaviors, and they translated them into memories as a matter of course, and although much more went on in treatments, they felt this aspect to be perfectly natural. In practice, at least, the double vision was routine. (When this stance is criticized lately, it is more for being unrealistically pretentious than for being paradoxical.) Theorists, as we know, recognized that the whole-person aspect of the model (and therefore its process aspect) needed some further work, a job that was undertaken by the misleadingly named "ego psychologists." (One thinks of Hartmann [1951], Waelder [1930], and Schur [1966].)

I now ask the reader to contrast this smooth reception of a hybrid vision of discrete units and continuous process with the profession's very different reading of the last pages of the same 1914 paper, where a similar challenge is presented.

SECOND EXAMPLE OF THE MERGER OF DISCRETE ITEMS AND CONTINOUS PROCESS

> I have often been asked to advise upon cases in which the doctor complained that he had pointed out his resistance to the patient and that nevertheless no change had set in; indeed, the resistance had become all the stronger, and the whole

> situation was more obscure than ever. The treatment seemed to make no headway. The gloomy foreboding always proved mistaken. The treatment was as a rule progressing most satisfactorily. The analyst had merely forgotten that giving the resistance a name could not result in its immediate cessation. One must allow the patient time to become more conversant with this resistance with which he has now become acquainted, to work through it, to overcome it, by continuing, in defiance of it, the analytic work according to the fundamental rule of analysis. Only when the resistance is at its height can the analyst, working in common with his patient, discover the repressed instinctual impulses which are feeding the resistance; and it is this kind of experience which convinces the patient of the existence and power of such impulses [Freud 1914a, p. 156].

Here Freud tells us that all the analyst need (or can) do is to prime the patient's attention with words, and then follow the patient's reported experience. Only the patient is in a position to notice and therefore feel acutely his *good reason* (his passionate incentive) for fudging his honesty. He meets that counterinterest for the first time as it squeezes him against his pledge of honesty, and makes brutally clear what he's giving up by being honest. Freud is neatly describing a process with two stages: One (objective) is the naming of an obstacle, presumably the behavioral evidence of interference with the process. The other (subjective) is the patient's discovery of the personal interest that is at risk, which is the specific, personal *meaning* of the phrase, "the resistance" (i.e., the *reason* for noncompliance). That discovery is made as the patient works stalwartly right through the sacrifice toward the fulfillment of analytic openness. Note that the term *working through* is expressly coined to refer to an action on a *resistance,* because the "through" depicts a rough trip under assault from a countervailing barrage. One can work *on* many things but, as the term is used here, there is nothing one can work *through* other than a resistance. The term is invented to give that activity both a name and a picture.

It is worth asking why the plain meaning of this passage is regularly ignored in favor of any and all associations that an analyst may have to the English words, "working" and "through." Admittedly, the terms and metaphors of *Papers on Technique* have all suffered wear and tear as guild passwords while their meaning has been assimilated to that of everyday speech. And how could it be otherwise? Having entered the general language, these terms and images can claim whatever meaning is bestowed on them by common usage, just like any other term in a natural language. Thus one frequently hears, "On personal reflection, I think *it* means this . . ." instead of "I think *Freud* meant that. . . ." And even when

marking it specifically as Freud's invention, some analysts may start from its widespread meaning and try to imagine why the Freud they imagine *would be likely* to use such a word, rather than looking at why he *did* use it. (The metaphor of the "surgeon" in *Papers* a good example.)

But even allowing that to be the common fate of so many terms from *Papers on Technique,* in the case of "working through" the degree of resistance to Freud's actual expression is striking. Indeed, the tradition of misreading starts with the translator. An analyst who consults the main text of the *Standard Edition* will not be reading what Freud wanted him to read. There is nothing covert in Strachey's choice. His footnote (Freud 1914a, p. 155) describes and defends his act of overruling Freud.

Strachey thinks Freud wanted to say that the analyst acquaints the patient with a resistance by giving it a name. That would seem to be the implication of Freud's original versions, written before 1922. Strachey acknowledges that Freud changed this wording in a second edition (published in that year) of what I presume to be the *Sammlung kleiner Schriften zur Neurosenlehre* (1918)—the only form of the paper that went through two editions. From then on, Strachey tells us, Freud's preferred expression (which Strachey rejects as senseless) is what we find on p. 118 of the *Gesammelte Schriften* (1925) and p. 118 of *Zur Technik der Psychoanalyse und zur Metapsychologie* (1924). In these later versions, Freud changed "nun bekannten Widerstand" (the resistance with which [the patient] is now acquainted) to "unbekannten Widerstand" (the resistance with which [the patient] is not [yet] acqainted). So Freud finally wanted the sentence to read "Man muss dem Kranken die Zeit lassen, sich in den ihm unbekannten Widerstand zu vertiefen . . . [The patient must be allowed time to immerse himself in the resistance that is unknown to him . . .]" (1925, p. 118). That seemed plainly senseless to Strachey, who wondered how Freud could say that the patient is unacquainted with the resistance after it has already been named. Unable to account for Freud's revision, and thinking to rescue him from self-contradiction, Strachey refused the new wording and substituted the one that Freud had erased.[2]

[2] Strachey's misunderstanding of Freud's message goes beyond a single word. In this paragraph, Freud first says that the analyst apprises the patient of the resistance. Freud's verb is *mitteilt*. Further down, Freud writes that the analyst should realize that it isn't sufficient to name the resistance (the verb is *benennen*). In other words, the analyst has *apprised* the patient of the resistance by *naming* it. Then, in effect, Freud

It is an unusual lapse for Strachey. Common sense says that there is absolutely no way an author can make his meaning clearer than by going to the trouble of altering an expression for a new edition. When he does that, he is saying as emphatically as possible, "I'm afraid I made you think XYZ in my first edition, and I now want to be sure you do *not* get that impression." If a word can be read in two ways the author might let the reader fend for himself, but he would not let it rest if a substantive issue was at stake. Therefore, if an author goes to the trouble of changing his wording, it behooves the translator to try to fathom what that issue is. It wouldn't have taken much thought, either, in this case. Obviously, Freud was going out of his way to emphasize that referring to something is not the same as being acquainted with it. One thinks of Bertrand Russell's distinction (1940) between knowledge of fact, which can be learned second-hand, and knowledge by acquaintance, which cannot.[3]

Strachey can also be excused for tripping on the ambiguity of the term *resistance*. Suppose one said (just for fun), "The resistance that motivates the resistance is part of the patient's resistance." The layman would laugh but every analyst would know what was meant. In one sense, "the resistance" is an omnibus term referring to the collection of conservative forces that oppose treatment. In another sense, "resistance" is an operational term for a move in a direction opposite to the analyst's aim. In a third sense, "the resistance" refers to the highly specific, personal state inside the individual's mind that accounts for those other two. It might be said that knowledge of the existence of a resistance in the first of the meanings is beyond observation; it's an a priori, theoretical

[3] Some people associate "acquaint" mainly with the word "acquaintance," as in "He's not really a friend—just an acquaintance." But, as the *Oxford English Dictionary* indicates, being acquainted specifies empirical knowledge, not superficiality.

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wants to say in the second edition that this activity of the analyst (*mitteilen* by *benennen*, or apprising by naming), while alerting the patient to the resistance, leaves the resistance still unknown, or unfamiliar (the adjective is *unbekannt*). The patient will yet need the actual experience of the drive that feeds the resistance, and only then, presumably, will he have become acquainted with it.

Instead of following the logic of this passage, Strachey first promotes *mitteilt* to *acquainted*, and then ignores the further specification that it is mere naming. That specification should have sent him back to retranslate *mitteilt*, but he lets it stand as *acquainted*, which, then, renders senseless Freud's substitution of *unknown* for *known* a few lines below. In short, it is Strachey's own mistake that forces him to "correct" Freud. In contrast, Riviere, in her translation (Freud 1914b), gets it exactly right.

premise of treatment, almost the justification for undertaking treatment. In its second meaning, the analyst knows there's a resistance from his *observation* of blockage in the flow, and from that he can *infer* a resistance in the third sense that underlies it. But he would not have knowledge of resistance in that third sense (knowledge by acquaintance), since he hasn't (and cannot) personally meet the patient's internal event. Only the patient can be *acquainted* with resistance in the third sense.[4]

Freud is telling us that the patient, in order to work through the named resistance, must contribute something the analyst doesn't initially have and can't give him. The analyst can only point the way to the living experience of conflict. As already mentioned, it is a two-stage process, the first part of which is the analyst's (directing attention), and the second part—the working through part—requires the patient's struggle. As the patient becomes aware of his counter*motive* he can let the analyst know more about the particularity of the resistance, beyond the visible consequence of it that the analyst had spotted. We can see why Freud thought that the naive analysts in this passage who complained to him about the ineffectiveness of their interpretation were counting on suggestion rather than psychoanalysis to do the work. In contrast, Freud depicts the analytic mechanism of cure as the blunt, personal, conscious experience of—indeed, the forced "acquaintance" with—internal conflict: "it is this kind of experience . . . which convinces the patient of the existence and power of such impulses. . . . From a theoretical point of view one may

[4] Actually, this distinction precisely reflects one of the changes undergone by the concept of resistance in the course of these papers. Originally "resistance" designated a phenomenon that the analyst did know by (bitter) acquaintance. He could feel it in his muscles (so to speak) as it pulled against him when he tried to drag traumatic memories out of repression. Had Freud retained that original sense of resistance from pre-psychoanalytic treatment, Schafer's criticism of the term (1992) would be well founded: "resistance" would simply reflect Freud's countertransference. But Schafer's criticism is not valid against the radically changed concept in the mature psychoanalysis established by Freud in 1914. Indeed, Freud's new meaning is exactly opposite to the one Schafer criticized, since it is designed to bolster the analyst's *patience* while he lets the analysand be the one who feels the struggle. It is a testimonial to the strength of the age-old misunderstanding that even a fair and empathic reader like Schafer finds the "pressuring sense" of the term in his close reading of this paper, and can allow only one point at which a "slight but significant revision of wording . . . [is] the beginning of his transition to the modern understanding of the idea" (p. 225). It is not a slight revision of wording; it is the sense of the whole paper—indeed of the whole book. Schafer's "modern meaning" is the express meaning for which the term *working through* was devised.

correlate it with the 'abreacting' of the quotas of affect strangulated by repression . . ." (pp. 155–156).[5]

Strachey's mistranslation is a harbinger of the many arbitrary meanings later attributed to the term. As against them, and at the cost of repetition, let me summarize my reading of the concept in this paper: Working through does not mean working out an issue. Nor does it mean ironing out a resistance. It means working in the teeth of the resistance. The patient must continue to carry out his analytic duty in the face of the resistance. Then he will have the something else that is needed besides the analyst's interpretation. What would that be? He will experience the impulse that is the source of the resistance. Only the patient can feel that impulse; the analyst can only name it, and then hear about it from his patient. What is the feeling the patient will have? I think it is obvious when you consider what a resistance actually *is:* The patient will feel the interests that would ordinarily turn him away from declaring themselves. Reading a thermometer is not the same as making the acquaintance of burning heat. Fidelity to the fundamental rule requires a patient to work through his resistance as one would walk through fire, and thereby feel the heat. The patient will feel both sides of a conflict at once; he will explicitly experience the incompatibility of conflicted interests. Working through a resistance, the patient will be working against half of himself, and he will not escape conscious awareness of what it is inside him that the "against" is against. Freud's reply to the inexperienced analyst is that a patient does not endure that experience no matter how plausibly informed, as long as he is acquainted only with his presented and presentable self.

[5]Freud seems to have been straining his eyes to spot an organic, shape-shifting power within the seemingly ideational or intellectual new treatment he had discovered. I have the impression that he could not mollify his own skepticism until he identified an engine within the new treatment equivalent to the old blast of hypnotic catharsis so obviously commensurate with its claimed effect. He knew that discovery was his main interest, not treatment, and it would be all too easy for him to gloss over the question of healing. At the end of this paper, almost as an aside to himself, Freud adds (with a sigh?) that he has at last found that sort of force in the concept of "working through" (p. 156). How far he would have been from being able to check off the missing explosive factor if "working through" merely meant patiently wearing down a resistance by repeated interpretations! In passing, one may observe that Freud's biologism is not confined to a hypothetical and presumably discredited energy hypothesis, but extends to the commonsense experience of push and torment and the stubborn strength of motivation. "Working through" is better thought of as "suffering through" than as diligent repetition.

FROM INFORMATION TO EXPERIENCE

Instead of this meaning, why has so much of the usage reduced the term *working through* to one or another tediously banal homily? Bear in mind that, along with two other terms, *working through* is the very *title* of this paper. The purpose of the paper is to transform the psychoanalytic meaning of remembering and repeating and make them the famous pillars of psychoanalytic thinking. But what of the title's third element? Should Freud have called the paper "Remembering, Repeating and Repeating?" Ask yourself how likely it is that Freud would dedicate one of his few papers on technique partly to the profound principle that analytic treatment takes a while. Or that once isn't enough for an interpretation. Or that patients should work hard. Or that treatment should be complete. Could any serious writer fill a full page with such an instruction? Why not six words? How was it possible for analysts to picture as an exercise in plodding patience what Freud found comparable to a cathartic explosion? Analysts must have some strong incentive to turn away from the gist of Freud's discussion of working through, and it is that *incentive* for misreading (not the misreading itself) that I am concerned with here. (As I will note below, there are within the Freudian tradition exceptions to this avoidance, notably Ellman [1991], Schafer [1992], though somewhat hesitantly, and Loewald [1960] in his grand scheme. But it seems to me that these have not influenced the general discussion of working through among Freudian analysts.)

I suggest that the two passages from Freud's 1914 paper present analysts the same underlying problem (discrete items vs. the continuum of life), but the form of the problem in the first excerpt is easily handled (how to think of a patient's continuous action as discrete memories), while that in the second (how to make discrete, repeatable interpretations inform a patient's ongoing experience) seems almost untouchable. I will look at the common problem, and then ask why they are so differently received.

THE UNDERLYING PROBLEM: ISLANDS IN THE STREAM

Analysts want to be able to target their attention and speech to specific items so they can know what they're doing and do what is best. An amorphous flow of experience threatens to undermine their control and their objectivity. (The flow literally takes the object out of objectivity). And yet

what their patient offers them as behavior is not a text but a seamless flow of action. At first they looked at words and associations, which seemed tidy enough, but in *Papers on Technique* the material had come to embrace, in addition to not talking, talking too much, symptomatic gestures, the direction and misdirection of the patient's yearning, and, as Freud finally noted (1914a, pp. 155–156), everything about the patient that is related to his troubles.

That's at the level of practice. On the level of theory, the corresponding problem is how to squeeze together knowledge of fact and knowledge by acquaintance. Knowledge of fact can easily be captured in words and concepts. It grasps something delimited—something with borders—something nameable. It uses adjectives that can be "downloaded" into various times and places. A fact can come out of the analyst's head, so to speak, and go into the patient's head. Knowledge by acquaintance, by contrast, is gained by a unique, private experience over a stretch of time, and shares with time the quality of flow. Declarative memory is associated with the first; the second has more to do with recognition, and its description is somewhat arbitrary. I need hardly add that these are rough classifications: there is no knowledge by acquaintance that isn't permeated by a myriad of unworded background descriptions and vice versa. In other words, there is no theory-free knowledge, and no purely abstract theory. Theory is always absorbed, and gets part of its meaning, from a background of the familiar world, while, from sense perception on up to thinking, the "blooming, buzzing confusion" of the familiar world is being unceasingly coded into theoretical concepts.

WHY IS FREUD'S CONCEPT OF WORKING THROUGH UNWELCOME?

Difficult as it is to think of description and acquaintance together, that difficulty did not keep analysts from accepting Freud's demand that they think of memory as both reportable units (discrete memories) and a continuous flow of life and behavior. But when, analogously, they were asked to equate their categorized target—an observed resistance—with the patient's flow of live experience (his inner struggle), analysts on the whole turned a deaf ear. They preferred to hear a simple encouragement to keep on urging their interpretations. Why was the tension between description and experience so much harder to accept when *making interpretations* than when *grasping phenomena?*

Freud gives us a clue in our first citation. His original confidence came from the memory-retrieval model of treatment. There the analyst is free to follow along with the unarticulated flow of process, waiting for defined memories to emerge from the *patient* of his own accord. Without that picture to start with, Freud would have been as helpless as any other untrained beginner to parse the continuous display in front of him. When he learned that things were not that simple, Freud saw that the helpful, articulated map of memories could be accommodated to the new complexity by layering it translucently over the picture of patients' action. The resulting equivalence allowed the analyst to spot discrete memories emerging, encoded, from the patient's action. By this equation, the analyst still imagines himself "fielding" discrete information thrown out by the patient. In the notion of working through, however, the translation from a continuum to discrete units goes the other way. Freud is asking the analyst to recognize that *his own* discrete message (his interpretation of "a" resistance) is tossed into the patient's unarticulated experience, with which it must find a way to blend. The kind of "resistance" that an analyst is able to capture in a common description is just a *clue* to an intensely *individual need,* which is the resistance in its personal specificity.

Both memory-equated-to-action and interpretation-tied-to-working-through are examples of the many paradoxes that characterize *Papers on Technique.* To be sure, Freud does not present them as paradoxes. Instead he persists in referring to "the" resistance as though it were a barricade, a *thing*—something that can be captured in a word, just as he insisted that behavior is *really* remembering. But right from the first of the *Papers,* the expressive nature of resistance was becoming more and more prominent, starting with the discovery that patients are not just *hiding* their wishes but *acting* on them. (One could say that the *Papers,* as a unified project, is a treatise on the positive aspect of resistance, in all the senses of "positive.") In Freud's depiction of working through, the resistance-as-named is just a tag—a describable, public trace of the patient's private visceral experience of wishes that are frustrated by cooperating with the analyst. Those wishes (including wishes for protection) constitute the real-time, intimately personal cost of free association.

So now we can see why the relatively simple and commonsense conception of working through in *Papers* was nevertheless difficult to digest: On the one hand there's the individual gut reality of a resistance inside a suffering patient. On the other hand there's an articulated interpretation, a description so generalizable that it can be duplicated here and

there, now and then, sometimes identically in hundreds of copies of a professional journal. How could such a contrast be welcome to analysts? Does an analyst really want to brood on how those two things manage to get together? On what common ground can they meet? Why even pose the bewildering question of how a detachable, generalizable, repeatable description can match up with an ongoing flow of subjective experience in time? Would it help our work in any way to start groping for subtle threads that tie the patient's inner flux to our fixed words? Is it wise to open the door to doubts about whether there is any specific connection at all between the analyst's interpretations and their intended target? It might make us think that it's all just the impact of one person on another. This is no longer a matter of contemplation; it hits the analyst where it hurts. Unlike Freud's double vision of the patient's action as being also his memory, this idea seems to insert a lot of intervening processes and variables between the analyst's words and his impact. It does not merely superimpose one *vision* on another; it raises doubts about the analyst's own *action*—his act of interpreting. It was one thing, as described in the first passage, for the analyst to tolerate a lot of continuous and variable living by the patient, since it's draped over the patient's own neat, well-articulated memories. It's a different story if we're required to picture the patient's unique, continuous, amorphous processes dissolving the analyst's neat, defined capsules of fact. And it poses a question: If patients' action is regularly translated into words by the analyst, are the analyst's words likewise received by the patient as actions? And does that mean that the analyst's interventions are not capsules of fact but mere gestures toward a patient's subjective experience, both of them being continuous processes with blurred outlines that only the patient can experience? Of course, Freud wasn't picturing such an extreme situation. But his explicit and all-too-plausible two-stage formula of "working though" is unsettling enough, and analysts would naturally feel safer fusing it into a single compound made up of the analyst's verbal gesture and the patient's phenomenological experience, thus collapsing inner fact, public name, and process function into one term: The Resistance. By treating resistance as a single unit (and ignoring Freud's distinction in the passage we have examined), analysts could, like Strachey, suppose that both parties became acquainted with the resistance in the act of naming it. In other words, it was more practical to think of the process of the patient's mind as being already frozen into units. When Glover (1931) found reason to doubt the automatic identity of interpretations-made and

interpretations-received, he had the saving grace to treat divergence as an exception rather than the rule, but analysts probably realized that he was opening a can of worms. To this day, the question of what is actually produced in the patient's mind as a result of an analyst's intervention (and the concomitant question of what the interpreting analyst's action actually is) is an unaskable question for some classical analysts. (For others, it can be mooted by talking about "bypassing" the ego, or by relying on the unconscious telephone metaphor.)

What, after all, *is* the nature of communication, analytic or otherwise? What, exactly, happens when you say something to somebody about himself? My conclusion is that practicing analysts have good reason to steer clear of this speculation. Start down that path and paralysis threatens (like the famous centipede's crippling self-reflection). There are enough problems to contend with in practice without such distractions. A practitioner may be well-advised to turn away from that and tend to business—refuse Freud's emendation and restore his first wording. Even if Freud didn't want to let us off the hook, he had inadvertently made it possible by allowing readers of his original misphrasing to comfortably assume that the patient has become acquainted with a resistance upon hearing the analyst's interpretation. It's not that analysts require simplicity; after all, they ceaselessly and nimbly negotiate the intricate commerce between the patient's action and its meaning. But practical dangers lie in wait with Freud's concept of working through for a practitioner who wants to know what he has done to his patient.

What are the alternatives? As a very rough working model, we may prefer to think that the living experience in the depths of the patient has the same generalizable form as the analyst's generalizable description. We might wish to imagine that the patient's experience of the resistance already includes his own interpretation, as though the patient had been talking to himself without paying attention until he hears the analyst whisper the very words in his ear that he has heard inside himself. We suppose that when the patient hears his analyst's interpretation, provided that it is correct, the sotto voce resistance recognizes its fortissimo echo and swims up to meet its twin. That may sound strange, but Freudian analysts, with the usual exception of Loewald (1960), have generally learned to live with it (jettisoning topographic gradations in the process). It is a cruder model, to be sure, but not necessarily incorrect. It is, in fact, the way we manage all conversation. And if we choose the model, we can disregard Freud's 1922 revision: If the analyst's interpretation reminds

the patient of his own unrehearsed interpretation, and if the resistance is a thing that analyst and patient can look at together, we can say that the interpretation has acquainted the patient with his resistance, and all that's left is to repeat it frequently in various contexts, that is, to "work it through" in the sense that Freud rejected and posterity accepted. What we lose in that option is what Freud wanted to add in this paper, which is a reminder that, besides being a name for a common obstacle, "the resistance" also names a highly individual motivation (something fed by an individual's personal "impulses"). And in practice we can correct for the error by following the advice of Schlesinger (2013) to focus on ensuing associations and of Faimberg (1996) to "listen to the patient's listening."

THE PROBLEM: THE HARD-TO-THINK-ABOUT CONTINUUM

Analysts have largely assimilated Freud's paradoxes into their peculiar workaday life with no need to engage in philosophical hairsplitting. But in recent years vexatious philosophical problems have buzzed into their consulting rooms. The reader will think of the mind-body problem, the question of the analyst's authority, worries about the analyst's subjectivity, and problems of free will. These are, like all philosophical problems, interwoven with one another. But the form of the problem that Freud's 1914 paper encountered overshadows them in scope and urgency. Analysts have always been aware of the tension between articulated thought, with its relatively neat definitions, and unarticulated experience that lacks a clear outline. They are aware of it because they characteristically deal in *units* of interpretations, and yet they hope to induce a transformative *process;* they engage in a cloud of relationship, but they deliver specific, propositional information. It can be argued that genuine theories of therapeutic action are rare because psychoanalysts don't want an image of transition (the *process* of change) to compromise their freedom to identify a variety of specific *forms* in the patient. Without forms to take a bead on and relate to one another in a variety of ways, an analyst might drown with his patient in the surge of shapeless process. He would prefer to stand lifeguard on the shore. Process represents change, which is therapeutic action, but it's objects that allow the multiple perspectives that bring about the change. (I have elaborated this elsewhere [Friedman 2007]). Loewald (1960) was a master synthesizer of parts and process, so

he was able to present a theory of therapeutic action by juggling continuities and states, process and structures (see Friedman 1991b), but the hostile early reception he received shows just how threatening that project is for the working psychoanalyst.

HOW DOES THE THEORIST WORK ON THIS PROBLEM?

As Ricoeur (1965) demonstrated, Freud constructed a theory that allowed for both psychic "things" (e.g., structures) and organismic process (e.g., drives, libido). Although in many ways these views are mutually exclusive, Freud recognized that both of them must figure in any true-to-life portrait of the mind. Thus Freud (1937) implied in his final paper that a mental "thing" (the ego) that figures so conspicuously in his model is not to be taken as more real than the process of the mind as a whole.

Nevertheless, it remains a challenge to us all, as is apparent in the resistance to Freud's corrected notion of working through. It is difficult to embrace in a single vision two disparate realities: There is the "thing" aspect of reality—items, units, foci of attention. And there is the "stream" aspect—the continuum, the unified flow of time and life, the passage rather than the stations. The problem lies in the heteronomy of such things as borders and field, the discrete and the continuous, definitions and objects, gradations and stages, parts and whole, structures and process, and (ultimately) change and identity.

The so-called ego psychologists (a better name would be holistic psychoanalysts), such as Kris (1950), Hartmann (1951), Rapaport (1960), Gill (1963), and Schur (1966), were in effect working on the contrast of the mental continuum with its definable contents. It should not be forgotten that Freud already carved a place for this kind of thinking by inserting a transformative category called "sublimation" into his theory of parts. Loewald (1960) saw that sublimation was no bit-player, and he moved it to center stage (see Friedman 1982). Kohut's "area of progressive neutralization" (1971) is another example. More recently, Donnel Stern (1997) has written about relatively amorphous, unformulated experience flowing into somewhat unpredictable explicit outcomes that are themselves open to various formulations. Wilma Bucci (2002) describes the transformation of unarticulated into articulated meanings. Bion (1962) added a "metabolic" process to KIeinian units. Fonagy et al. (2002) and

others focus attention on a process of mentalization and reflective functioning that precipitates definable units out of continua of awareness. These new trends join older ones: George Herbert Mead (1934) referred to an unarticulated source of initiative that gets its definition from external and internalized social coding (see also Bergson 1912; Bruner 1990.) These theorists join an existential-phenomenological tradition (see Merleau-Ponty 1962; D.N. Stern 2010). Gendlin (1962) typically used the gerund "experiencing" to escape from what he regarded as artificially static items of experience that analysts talk about. Loewald (1960) did the same thing for Freudian theory, putting the entire spatially visualized psychic apparatus into motion.

In the past, many Freudian analysts shunned the process outlook because it did not seem to afford them a foothold for careful treading. We know how to respond to something only if we're able to determine that it is "a" something, and that it is the sort of something we can call up a response to. Freudian analysts wince when they hear talk about "ways of being with another" because they recognize that it opens the door to noncategorized (and therefore unmonitored) provocations and unprescribable responses. Partly for that reason, Freud wanted his followers to continue to think in terms of retrievable memories even while turning attention to living processes. For many readers of "Remembering, Repeating and Working Through," the first injunction overshadowed the second.

In our two quotations we have seen Freud enjoin analysts to look for repeatable memories (that have some generality), on the one hand, and continuous behavior (which is an immediate happening), on the other, as two sides of the same coin. Interpretations connect abstract knowledge to transient experience. And interpretations are just a small sample of the tacit formulations inside the analyst's head. For we must remember that in its broadest sense theory is simply a formalization of the working hypotheses everyone frames about everyone we deal with. And the analyst has an additional mandate: It isn't sufficient for him to recognize the person on his couch; he must also have many ways of thinking about him since he is not just dealing with his patient but trying to stay free of automatic "role responsiveness."

Newer theory, old philosophy, and recent research are struggling to complete Freud's task on a theoretical level. Some theorists clear the deck by simply abandoning discrete items of mind (see Friedman 1988). To some extent they are reacting to the opposite simplification of thinking only in terms of static items.

If an analyst leans strongly in one direction, he may despise talk of intrapsychic "objects" as being artificial distortions of the real, live human being. ("Life is green; theory gray, etc.") Existentialist psychologists voice that complaint. Much of the animus against "ego psychology" arises from those who prefer process. (They do not realize that the "ego psychologists," too, were engaged in restoring the organismic, process significance of the Freudian parts [see Friedman 1989].) Since people ordinarily recognize mental "objects" only in a casual, untheorized, taken-for-granted way ("He has no shame"), extremely detailed, conscientious efforts to explicitly work out the relationship between parts and process, aspects and flow, may look like obsessional scholasticism. Any effort to abstract "standard," constant parts from the unique flow of life is sometimes condemned as arrogant prejudice, disrespectful of individuality, and a grandiose pretense of expertise in the face of untamable novelty. (See Friedman [2002] on abstraction and [1999] on realists and nominalists.)

In turn, those who match their theory more poetically to the flood of life are sometimes deemed gullible and sentimental. We hear the complaint that a process theory cannot be considered psychoanalysis because it is not "conflict psychology." Of course that begs the question, but what it expresses is the fact that conflict is a way of isolating elements. Psychoanalysis defines elements by opposing them to each other. Without conflict, we might have only an impoverished description of a patient's general anguish. If parts are ruled out as artificial inventions of a prejudiced observer, it is hard to carve clinical phenomena into shapes.[6]

IT IS A PROBLEM FOR ALL KINDS OF THINKING

The history of this problem suggests that truth straddles the fence, and we must be able to think both ways. And there is nothing special to psychoanalytic thinking about the problem of lifting something unchanging out

[6]Brenner attempted to circumvent that difficulty by allowing all psychic phenomena to be simultaneously flexible and formed: "compromise formation" (see Friedman 2011). But if this formula were carried to its logical conclusion and all determinate parts, all structures and levels of awareness, were erased, the mind would be a featureless continuum. About such a mind all we could say is that everything about it expresses everything else about it. (In reality, most process theories smuggle defined entities back into the mind in the form of enduring dramas called fantasies.)

of the flow of time. (For a discussion of abstraction, see Friedman 2002.) One recognizes the antiquity of the problem. The river of Heraclitus that you can't step into twice is just the most familiar image of it. The entire history of philosophy can be seen as a study of this problem. Lifting something out of the flow of time is just what thinking does, and science does it with a vengeance (Meyerson 1908). What is special to the study of the mind is a certain desperation. In other domains, thing-making can use spatial location to orient definitions. Physical things transition in time, but they reassuringly stay within spatial envelopes. Things of the mind are different. Internal mental things do not occupy a given space at a given time, and so we cannot quite settle on them as things, even though we nominalize them as things when we talk about them (Bergson 1912). And we tend to picture them in spatial terms even though we don't take the picture literally. The only way Freud could dissect the mind was to lay it out on a spatial table. He never lost sight of the metaphoric nature of his maneuver, but Loewald (1960) was pilloried for ever-so-gently reminding analysts that the structural theory was a spatialized metaphor for something of a different sort. It must surely be one of the attractions that neuroscience holds for psychoanalysts that it provides spatial equivalents for mental things.

It would be an error to dismiss arguments about these difficulties as quibbling about language or indulging the narcissism of small differences. Taken to extremes, the polarity of concreteness vs. abstraction moves people to contrasting views of life and, perforce, professional practice. I have hinted at this above, but anyone who cares to tangle with the same issue writ large in philosophy or intellectual history may glimpse what is at stake in the balance between discrete thought and continuous experience by revisiting the 1928 face-off between Martin Heidegger and Ernst Cassirer in Davos, Switzerland (M. Friedman 2000; Gordon 2010).

THE MORAL OF THE STORY

As in most philosophical issues, the Zeitgeist (fashion) rules. But there is some room for individual choice. Analysts will, for characterological reasons, lean to one side or the other of these philosophical problems. The polarities cannot be avoided in practice any more than they can be settled in philosophy. There is something here to discomfort everyone.

The power of Freud's theory is that it lives awkwardly with both sides of the controversy, but no more awkwardly than necessary. One might say that Freud's theory of the mind is the paradigm of a theory that accepts the disharmony of the continuous and the discrete (Ricoeur 1965; Friedman 1988). It is therefore positioned to orient a practitioner who must deal with both worlds at once.

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