

PURE GOLD OR THERAPEUTIC ALLOY?: SOME ISSUES RAISED BY THE CONFERENCE “CHANGE: PSYCHOANALYTIC PERSPECTIVES”

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Change was the fitting theme for the first international psychoanalytic conference in Africa, held in Cape Town over the first weekend in April, 1998. Whatever the expectations of the international guests, nothing prepared them for the ambivalent welcome and three days of drama to which the natives subjected them. Despite the genteel surroundings of the four-star Arthur's Seat hotel, this long-awaited conference was no sedate affair. After the second day's proceedings the collective tension had reached such a pitch that the organising committee was compelled to arrange an extraordinary group therapy session for the delegates. The urbane British group analyst, Malcolm Pines, contained the group's palpable aggression with a masterful intervention disguised as an introduction. With an airy wave of his hand, looking more like an orchestra conductor than the man in the middle of a hostile psychoanalytic horde, Dr Pines announced, "Let the blood flow"! The informal group therapy managed to diffuse some of the tension, but delegates spent the remainder of the conference trying to understand the underlying dynamics behind the emotionally charged conference atmosphere.

In order to make sense of the group dynamics, the conference's social and historical importance needs to be understood. Contrary to the beliefs of many foreign delegates who appeared to believe that South Africa was a stranger to psychoanalysis, this conference was not this country's first formal introduction to the discipline. The history of South African Psychoanalysis began in the 1940s when a South African training analyst of the British Psycho-Analytic Society, Dr Wulf Sachs, founded a South African branch of the Society. A psychoanalytic training was initiated by Sachs in 1949, but was terminated shortly after its inception when Sachs died a few months later. Without a training analyst the South African Psycho-Analytical Society dissolved, and many of its members left for London to further their training. During the 1970s local philanthropist and businessman, Sydney Press, sponsored the psychoanalytic training of a number of young South Africans in London, hoping that they would return with their skills. This never happened and, until recently, local people interested in psychoanalysis have informally practiced a self-styled psychoanalytic therapy based on knowledge acquired from reading groups, therapy and supervision from more experienced colleagues, and sporadic visits from overseas analysts. A small nucleus of overseas trained

psychoanalytic therapists have since returned, but none with the status of training analysts.

In 1995 the South African Psychoanalysis Trust (SAPT) was formed by a group of British psychoanalysts and therapists of South African origin. The aim of this trust is to promote the development of psychoanalysis and psychoanalytic psychotherapy in this country. The SAPT, assisted by local psychoanalytically oriented therapists in Cape Town and Johannesburg, initiated and organised the conference. Given this background, the historical significance of the first International Psychoanalytical Association-sponsored conference in Africa may be appreciated. For the first time South Africans were exposed to the psychoanalytic luminaries they had only read about, and were surprised to discover how many of them were of South African origin. For the *émigrés*, especially those who had not visited since leaving many years ago, the homecoming was a powerful experience.

Most psychoanalytic conferences proceed from a foundation of shared assumptions about the nature and relevance of the psychoanalytic worldview. These shared assumptions were conspicuously absent from this conference, and it soon became apparent that the diverse interests, perspectives, and ideologies of the local conference delegates would throw into question the desirability, let alone shape, of psychoanalysis in South Africa. The conference was opened by Chabani Manganyi, Director General of the Department of Education. Manganyi, who originally trained as a psychologist, noted that the first “miracle” of democratic change in 1994 was followed by a second, and less desirable miracle, “hysterical amnesia and self-exoneration from our racial past”. Pursuing the analogy between neurotic forgetting and the social forgetfulness of past injustice, Manganyi noted that the recent South African emphasis on human liberty “has erased history and memory. Our constitution has turned us all into non-racists and non-sexists. But is this for real? And how deep is all this political correctness”? Although we “cannot put the country on the couch”, Manganyi claimed that psychoanalysis could play a key role in the transformation process in South Africa because change was the “central preoccupation of psychoanalytic discourse and practice”. But, he observed, “There is a distressingly low skills base for a lively psychoanalytic tradition to emerge”.

The stated aim of the conference organising committee was “to reach out to as wide a South African audience as possible in order to spread awareness of psychoanalytic thinking, and to provide a setting in which its relevance in present day South Africa may be considered”. It is questionable, however, how much the broader South African community wants to be reached by psychoanalysis. Fakhry Davids, London-based member of the SAPT, and ex-University of Cape Town lecturer, noted that psychoanalysis as a profession “does not travel well and is a Eurocentric activity”. His first impressions of psychoanalysis’ interest in Africa, before his own psychoanalytic training, was that it was an “exotic safari to show how even savages had an Oedipus complex”. “Does this conference”, he asked, emerge from “a need by psychoanalysis to spread a form of colonialism, to spread its universalist credentials”? As a psychoanalytic psychotherapist, and member of the conference organising committee, Davids obviously believed that psychoanalysis did have something to offer the South African community. The puckish Don Foster, local doyen of critical psychology, was skeptical. After cheekily arriving late for a plenary session where he was the chief discussant, he further provoked delegates by reminding them that psychoanalysis had been largely irrelevant to the democratic struggle in South Africa. He disputed Dr Anton

Obholzer's notion that psychoanalysis, by concentrating on larger group processes, had a valuable social contribution to make. "Groupiness does not guarantee a more critical psychoanalysis", he stated, before challenging psychoanalytic "universalist, essentialist truth claims about group dynamics". Many of these so-called psychoanalytic "truths" might be far from useful in other cultures. Moreover, psychoanalysis had become "overconcerned with the technical aspects of interpretation and in so doing had missed the bigger picture of its own responsibility to advancing human freedoms". Psychoanalysis had betrayed Freud's radical heritage by failing to adapt to changing political currents and ideologies. In order to establish some social credibility it would have to become more "politically and culturally sensitive".

Leslie Swartz (University of Cape Town), in a paper entitled "Mental health in South Africa", stated that the "importation of conventional psychoanalysis would make the South African situation worse". He noted that psychoanalytic training is a "form of enculturation" which makes it more difficult for psychoanalysts to move from their individualist and elitist situations into the community, where mental health workers are desperately needed. "What we don't need", he added, "is to bring the psychoanalytic exile home, internally". Posing the question, "How can psychoanalytic thinking make a difference?" Swartz noted three potentially valuable contributions. Firstly, it is useful in providing training and support to those "front line workers" actively engaged in community mental health. Secondly, psychoanalysis can help us "think reflexively" about the production of knowledge about mental health. Thirdly, psychoanalysis, helps us "confront and deal with the pain of limitations". In this regard, he noted, the conference was "emblematic of the experience of exile and return". Ironically it was Swartz, who is not a psychoanalytic theorist or practitioner, who explicitly addressed one of the key group dynamics of the conference. He noted the tension between those who left South Africa to pursue psychoanalytic training abroad, and those, equally committed to psychoanalytic thinking, who stayed behind during the bitter apartheid years. "Why speak of the return of psychoanalysis? Psychoanalysis has never left". With regard to these two groups, he warned of the temptation to idealise or denigrate the other's experience. These two groups represented conflicting forms of authority – overseas psychoanalytic expertise versus local knowledge of community experiences, needs, and dynamics.

It was inevitable that the relationship between the locals and the "foreigners" would at some point be couched in the parent-child transference metaphor. Cape Town therapist, Martin Miller, outlining the local history of psychoanalytic thought, identified an explicitly unacknowledged intention behind the IPA-sponsored conference. The conference, he said, is an indication of "reparative overtures from the parents in London". This observation carried two accurate insights. Firstly, that self-styled psychoanalytic locals have unconsciously related to their properly trained emigrant colleagues as abandoning parents; and, secondly, that the "parents" have begun to acknowledge their parental obligations by returning, albeit briefly, to nurture the children. However, cautioned Miller, "We will not be saved or transformed by omnipotent parental figures. And they always go away again". It was clear, however, that if the offspring left behind were helpless infants, they have grown somewhat, and are not easily mollified by the perceived meagerness of the parental offerings. In his plenary paper, "Psychoanalysis and South Africa: Building bridges", Fakhry Davids devoted a good portion of time to a pedestrian explanation of the terms conscious, preconscious, unconscious, transference and countertransference. Local delegates,

many having spent years in psychoanalytic reading groups and supervision, grew visibly restless and agitated. That afternoon an observation from the floor drew applause from other local delegates: “Why offer us a bottle when we’re ready for solids”? The visitors may not have consciously intended to be condescending or pedantic, but that is how many locals experienced them. The visitors, on the other hand, may have been forgiven for experiencing the locals as greedy, spoiling, and envious of what they had to offer.

It was clear from the first day of the conference that conventional psychoanalysis was in for a drubbing. Even Professor Joseph Sandler, one of the most internationally revered psychoanalytic figures, observed that psychoanalysis “as a treatment will not accomplish very much. It is in the approach, as opposed to the method, that the hope lies”. In other words, we should emphasise the broad psychoanalytic understanding of psychic conflict, applied in different settings, rather than the circumscribed procedure of interpreting unconscious processes in the psychotherapy setting. Not all of the delegates were happy to concede that psychoanalytic thought and method can be so easily separated, let alone opposed. In a seminar on “Psychoanalysis and psychotherapy in South Africa”, Tony Hamburger, co-editor of the journal **Psychoanalytic Psychotherapy in South Africa**, emphasised that “the analyst’s couch is our laboratory”, and any form of psychoanalytic psychotherapy is inextricably related to psychoanalysis proper. A consequent difficulty for South Africans interested in psychoanalytic therapy is that there are “no formal definitions of ourselves, only self-definitions”. For this reason, South Africa needs a formal psychoanalytic training that meets the stringent requirements of the International Psychoanalytic Association (IPA). It is the absence of an “institutional container” like the IPA that “promotes anxieties and defences”.

Hamburger was an unapologetic representative of that faction of the delegates in pursuit of conventional psychoanalysis, rather than some watered-down, politically correct version carrying the historically disadvantaged community stamp of approval. Realising that he was sticking his neck out, Hamburger half-heartedly sought to forestall potential criticism of his purist psychoanalytic agenda by suggesting that we “possibly bring psychoanalysis to a far wider and needier community”. The word “possibly”, however, gave the game away. This raises a question which was never uttered, let alone addressed, at the conference: “Why should psychoanalysis be morally obligated to take responsibility for community mental health when the South African government itself fails to do so?” Furthermore, the Jungians have established a formal analytic training in South Africa without any breast-beating about community needs, so why should we not do the same? Perhaps the answer to this lies in a long psychoanalytic history of commitment to the ideal of social justice. Rustin (1991:56-7) defines this in mental health terms: “The alleviation and overcoming of mental pain makes claims of the same kind as the relief of physical pain: it should be given in relation to the degree of suffering, and the possibility of help, not the possession of wealth or privilege”. While it might wish to, the South African government is clearly unable to meet the mental health needs of its people. This does not mean, however, that we can avoid the question of whether or not the presence of formal psychoanalytic training in this country will perpetuate or alleviate current inequalities in mental health provision. The pursuit of conventional psychoanalytic practice, focusing on the needs of the wealthy patients who could afford it, might further polarise the differential access of poor and wealthy to this privileged form of psychotherapy.

Martin Miller, co-presenter with Hamburger, emphasised the need to cultivate a form of psychoanalytic practice that addresses the needs of South Africa's "fourth-world" context. However, when pressed by a member of the audience to state what such an animal would look like, Miller had no answer. Nor, for that matter, did any of the delegates. This had less to do with a lack of sincere intent or intellectual resourcefulness, as it did with the possibly intrinsic mismatch between the South African mental health context and the formal psychoanalytic enterprise. The problem, very clearly, was that the SAPT was trying to be all things to all people. On the one hand, it was hoping to introduce an IPA-accredited psychoanalytic training at some future point. Were we able to entice training analysts to South Africa, this venture would involve the strenuous selection of candidates who would have to pay large sums of money for their extensive training analyses and supervision. Not only would this exclude potential candidates from disadvantaged communities, but the training would also not equip individuals with skills most relevant to the mental health needs of most South Africans. The psychoanalytic method essentially depends on the slow, painstaking examination of unconscious fantasies and defences, as these emerge in the therapeutic relationship. What real relevance does this have for the estimated fifty percent of South Africans who live below the poverty line, and whose psychological difficulties stem directly from the daily grind of unremitting socioeconomic misery? As one local delegate observed, "Can we afford to be providing food for thought when maybe we need to start by providing food"? Poor people, of course, need to be heard and need to be helped to confront and manage their problems in living, but is psychoanalysis the most appropriate therapeutic model for addressing these problems?

The SAPT was clearly sensitive to criticisms that psychoanalysis is predominantly an elitist and individualistic treatment modality. Many of the papers presented were germane to local community issues. Justice Richard Goldstone spoke movingly on the relevance of justice to the victims of human rights abuses, and other presenters addressed topics such as working with abused township children and dealing with victims of trauma and violence. In the official conference programme mention was made of the SAPT's intention to "establish a psychoanalytic clinic in South Africa offering subsidised treatment". While undoubtedly a well-intentioned gesture, this will neither legitimate a formal psychoanalytic presence here, particularly if imposed on some community, nor address the criticism that psychoanalysis is ineluctably a Eurocentric import, whose social conscience is essentially at odds with its methods. Even if it were desirable, it is unlikely that locally trained psychoanalysts would provide their unpaid services to community clinics. Especially when they have been trained to analyse the transference manifestation of unconscious meanings in those who can afford the frequent weekly sessions required by formal analysis. This confronts the SAPT with a moral dilemma. The formal psychoanalytic training that would meet the strict criteria of the IPA will produce psychoanalytic practitioners least likely and able to contribute to community mental health needs. If, on the other hand, individuals were to be trained in a form of psychoanalytic therapy modified to address community needs, these trainees would never be recognised as psychoanalysts or psychoanalytic therapists by the IPA.

The question of how to extend psychoanalytic treatment to disadvantaged sectors of the population has existed for as long as the discipline of psychoanalysis. In 1919

Freud, addressing the question of whether and how psychoanalysis might contribute to the psychological plight of the poor, had this to say:

"We shall probably discover that the poor are even less ready to part with their neuroses than the rich, because the hard life that awaits them if they recover offers them no attraction, and illness gives them one more claim to social help. Often, perhaps, we may only be able to achieve anything by combining mental assistance with some material support ... It is very probable, too, that the large-scale application of our therapy will compel us to alloy the pure gold of analysis freely with the copper of direct suggestion But, whatever form this psychotherapy for the people may take, whatever the elements out of which it is compounded, its most effective and most important ingredients will assuredly remain those borrowed from strict and untendentious psycho-analysis." (Freud, 1919:167-168).

One is struck by the last sentence of this paragraph. Unless we know and appreciate what "strict" psychoanalysis is, how can we presume to modify it as a therapeutic approach for those who cannot afford or benefit from the formal analytic method? The pure culture of psychoanalysis has never existed, and will never exist, outside of affluent societies. But unless we cultivate local psychoanalysis, with all its individualist and elitist baggage, aspirant local psychoanalysts will seek their training overseas. And what will entice them to return?

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