Psychoanalytic Case Formulation

By Nancy McWilliams

Reviewed by Robert L. Stewart, M.D.

To formulate, according to the dictionaries, is to apply concepts in a systematic way. Psychoanalytic case formulation, in its customary sense, is the use of psychoanalytic theory to understand all, or nearly all, of the data gathered in the initial contacts with a potential patient in order to understand the patient’s problem and how best to help him or her. Such a formulation should be comprehensive, including not only observations and inferences about the presenting problems, but also about how natural endowments and past experiences have shaped the person having the problems. It should take into account the realities of the patient’s present circumstances in planning appropriate treatment choices. The data should not be limited to the patient’s words in the “official” part of the sessions, but should include his or her behavior both inside and outside the interviews, as well as the therapist’s responses to the encounter.

Formulation in this sense can be a difficult task for an unseasoned psychotherapist. Asked by a supervisor or conference leader to organize clinical material in a meaningful way and to make a recommendation for the next step, the inexperienced therapist frequently deals with only a few aspects of the material while ignoring other data that might be crucial for interventions. The interplay of affect between patient and therapist, for example, is often suppressed in clinical discussions, to the detriment of diagnostic accuracy and treatment planning. But perhaps a more important problem is that the new therapist is expected to apply concepts about which he or she as yet has little knowledge. It is not always easy for students to get help in learning this part of being a therapist, and one suspects that their teachers may be sending mixed messages about formulation. A recent study1 of psychiatrists and training directors found that whereas 80% of those surveyed considered conducting individual psychodynamic psychotherapy to be an important skill for a psychiatrist, only 50% thought that it was important to be familiar with psychoanalytic theory to be able to do so!

Psychoanalytic Case Formulation, by Nancy McWilliams, Ph.D., addresses this problem in an engaging, sophisticated, balanced, and accessible way. McWilliams, who teaches psychoanalytic theory and therapy at the Graduate School of Applied and Professional Psychology at Rutgers and is a senior analyst with the Institute for Psychoanalysis and Psychotherapy of New Jersey and the National Psychological Association for Psychoanalysis, is clearly no fan of DSMs (they increase reliability but not validity) or HMOs (they unscientifically devalue good psychotherapy). But DSMs and HMOs are a part of the contemporary psychotherapeutic scene, and their presence makes it doubly important to “get it right” in one’s initial diagnostic understanding. “If a client is restricted to a short-term therapy relationship,” she writes, “it is more important, not less, to operate from a sound diagnostic basis. If the job the patient wants done cannot be done under the conditions that a paying third party insists on, it is up to the therapist to be honest about that and to know how to convey to the client an understanding of that person’s particular psychology and its therapeutic requirements.” Her book has a slight “polemical edge,” as she puts it, which understandably derives from the plight of psychotherapy in today’s health care delivery system.

McWilliams discusses the initial encounters with a prospective patient and gives useful suggestions for conducting intake interviews. Although she is guided by her knowledge of analytic concepts, the intake interview is free-form, not the rigid filling out of a checklist. Diagnosis and treatment according to a manual are not for McWilliams.

She presents basic analytic concepts in a series of excellent chapters: assessing what cannot be changed, developmental issues, defense, af-
ffects, identifications, relational patterns, self-esteem, and pathogenic beliefs. She thinks “it is hard for new therapists to understand the evolutions and transformations of classical psychoanalytic theory without having some sense of Freud’s original hypotheses.” She follows classical concepts of analytic psychology with other, more contemporary analytic ideas about the subject, then shows how these concepts apply to the therapist’s choice of interventions. Clinical vignettes bring the material to life.

McWilliams’ orientation is “classical,” but it is integrated into a subjective/empathic tradition. In each of the areas she covers, she discusses the use and misuse of the subjective reactions of the interviewer and their diagnostic importance. To illustrate: a therapist’s awareness of feeling duped or contemptuously bested might be the key to recognizing that the therapist is dealing with a psychopathic person. But the therapist should strive to be as objective as possible about his or her subjectivity, because subjectivity, if undisciplined, can go awry. McWilliams warns, for example, against automatically assuming that a therapist’s affect has been “put into” the therapist by the patient. This is a common enough formulation about some counter-transferences, but it can become a “malignant kind of projection” instead of a useful empathic counter-response. McWilliams hopes that the therapist’s own therapy or analysis will be helpful in refining the use of empathy and subjectivity. Supervision and consultation with colleagues also help.

Psychoanalytic Case Formulation should be of great value to seasoned therapists as well as to beginning therapists trying to find their way in a complicated discipline. Psychoanalytic concepts are presented clearly and in sufficient detail to be understandable and useful, with abundant references for those who want further information. It should also be very useful for psychoanalytic candidates, who today often bring less clinical experience to their training than was formerly the case. And it should also be helpful to the teachers and supervisors of therapists of whatever ilk. It’s a good book.

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REFERENCE


Pathways into the Jungian World: Phenomenology and Analytical Psychology

Edited by Roger Brooke

Reviewed by Melanie Starr Costello, Ph.D.

In these days when biomedical explanations of affect and behavior threaten to overshadow our collective interest in the meaning of human experience, it is refreshing to be reminded that epistemological certainty is unattainable. In this excellent collection of essays, theoretical and philosophical assumptions about world and mind are held up for scrutiny as contributors explore areas of intersection and incompatibility between existential phenomenology and analytical psychology.

Since its origination with the philosophical works of Edmund Husserl, phenomenology has aimed at descriptions of occurrences, events, experiences—in short, of world—that are not obscured by theoretical, philosophical, or cultural assumptions. C.G. Jung claimed to have based his discoveries on this approach. He insisted that he was an empiricist, and that his psychology constitutes a record of his observation of psychic phenomena as they presented themselves to him. The theoretical components of his psychology—the idea of the objective psyche with the archetypes as organs of the collective unconscious, for example—he considered postulates based on his observations of the effects of the unconscious on consciousness.

Several contributors approach the topic by comparing works by phenomenologists (Heidegger and Merleau-Ponty, in particular) with works of analytical psychologists (such as Neumann and Hillman). These articles promise to challenge readers who have limited exposure to phenomenological tradition and language. The collection also contains articles by Jungian analysts and scholars that approach a range of phenomena—Eros, play therapy, memory, even television—from a phenomenological perspective. These works of phenomenological psychology portray areas of intersection between the two traditions as fertile ground for the re-envisioning of psyche and for the enrichment of consulting-room culture.
Take, for example, Mark Welman’s “Thanatos and Existence: Towards a Jungian Phenomenology of the Death Instinct.” Welman applies a hermeneutics that navigates a course between purely literal and purely metaphoric expressions of meaning. He relates the impulse toward death to forms of experience that led Jung to posit the Self, not just as an organizing center of psyche, but as something that transcends the individual: a transpersonal ground residing in all things and where all things reside. Descriptively linked with the phenomena of the Self, death, in Welman’s formulation, “is the proper home to the imagination,” something encountered when one is free of the rationalizations of the ego and where “images can emerge in their own light.”

Rejecting radically subjectivist views of perception, phenomenologists set their sights on the meeting place between consciousness and world. Of particular concern is the severance of self and world implicit in any psychology that uses the construct of projection. This is the topic of an especially inspiring piece by Robert Romanyshyn, “Alchemy and the Subtle Body of Metaphor: Soul and Cosmos.” The author notes that in his early works Jung accepts the Cartesian separation of the knower and the known; indeed, Jung insists there is nothing that is directly experienced “except the mind itself.” Romanyshyn asks us to be mindful of the consequences of an overemphasis upon projective processes, noting that the Cartesian dream of reason has us placing all animation in the mind and thereby robbing the world of its soul. He shows how Jung’s later studies in alchemy lean toward a mending of the mind/matter separation in his psychology. Romanyshyn then develops the theme of the subtle body, relating this alchemical notion to imaginal processes. Taking the products of imagination on their own terms rather than reducing them to “mental products,” he points to metaphor as a space “between things and thoughts.” The implications of his approach for the practice of analysis are vast: through the imaginal, we enter a cosmology where “soul finds its home again in the order of creation.” In Romanyshyn’s view, this journey is the heart of Jung’s psychology.

Considering the complexity and importance of archetypal theory to analytical psychology, an essay exploring in depth phenomenological critiques of Jung’s essentialisms would be useful. As Professor Brooke notes in his introductory essay, the phenomenologists’ search for the immutable “essence” of a phenomenon has shifted to an interest in the contextual and historical constitutions of meaning. To this end, Jung’s archetypal theory has been subject to criticism for “substituting hypostasis for meaning” and “failing to understand the historical horizons in which the phenomena occur in the way they do.” On the basis of the works included, it is not clear whether critics of archetypal theory have grasped the distinction between archetype as a structuring organ and the representations it organizes. To posit the archetype as an unconscious structuring factor does not imply that the meaning derived by a perceiving consciousness resides in the structuring organ itself. Indeed, archetypal theory acknowledges the role of the personal, cultural, and historical in the composition of representations as well as in the derivation of meaning.

This collection of essays is to be commended, however, for eliciting such concerns. It is sure to leave theorists as well as psychotherapists wanting more, not because of its omissions, but because the inclusions are stimulating and imaginative. Contributors do more than remind us that we cannot overestimate the impress of ontological and epistemological assumptions on psychotherapeutic practice; they inspire us to re-envision experience as the meeting ground of consciousness and animate world.

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