

# PSYCHOANALYTIC RESEARCH: PROGRESS AND PROCESS

## BRIDGING THE GAP BETWEEN PSYCHOANALYTIC RESEARCH AND PRACTICE: HOW, WHEN AND WHY?

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*Editor's Note: This section of the newsletter typically focuses on introducing and reviewing empirical research with a psychoanalytic focus. In this issue, however, we are fortunate to have a paper from three esteemed psychoanalytic clinician/researchers focusing on the importance of collaboration between clinicians and researchers conducting psychoanalytic research. Drs. Luyten, Blatt, and Corveleyn all have distinguished careers as clinicians, researchers, and professors. These authors review some of the historical factors that have contributed to a divide between clinicians and researchers within the psychoanalytic community, make a compelling case for why clinicians and researchers should be interested in building bridges across this divide, and provide some concrete and creative suggestions for how to span this chasm. Dr. Luyten has kindly provided his e-mail address at the end of this article for those interested in corresponding with him. We are also eager and interested in any feedback as well*

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Over the last several decades, debates over the role and nature of empirical research have led to a divide within psychoanalysis between two predominant cultures. As we have discussed in detail elsewhere (Luyten, Blatt, and Corveleyn, 2006), one culture, often more clinical in orientation, maintains that psychoanalytic research should focus on meaning, interpretation, and narration, relying primarily on the traditional case study method as introduced by Freud. The other culture, often more research oriented, argues that psychoanalytic research should adopt a (neo)positivistic stance focusing on cause and effect relationships, probabilistic (statistical) statements, relying on methods derived from the physical and social sciences including experimental designs. Although these two depictions represent extreme points of a continuum, the distinction between these two cultures has some validity as illustrated by recent debates regarding the role of empirical research within psychoanalysis (e.g., Sandler et al., 2000; Shedler, 2004; Wallerstein, 2005).

In this paper, we briefly describe the origins of this divide, presenting arguments intrinsic and extrinsic

to psychoanalysis on the importance of closing this gap. In addition, we formulate a number of principles that the psychoanalytic community and psychoanalytic institutes in particular could implement to close the gap between these two cultures in order to safeguard the rich heritage of psychoanalytic thought for the future.

### THE ORIGIN OF TWO CULTURES WITHIN PSYCHOANALYSIS

The current divide between these two cultures within the psychoanalytic community partly stems from criticism from outside psychoanalysis (Luyten et al., 2006). Psychoanalysis has been criticized since its inception for being a “pseudo-science,” “old-wives psychiatry,” or as being “pornographic” (Kiell 1988; Turner 1996). In the early 1980s these criticisms intensified as a result of the contributions of some serious scholars such as the philosopher of science Adolf Grünbaum, as well as so-called Freud-bashers including Crews, Farrell, and MacMillan. A common theme that ran through these criticisms was the assumption that the entire psychoanalytic edifice rests on shaky empirical foundations. The famous behaviorist and personality researcher Hans Eysenck (1985), for example, concluded that “there is no evidence at all for psychoanalytic theory,” while Torrey (1992, p. 221) even propounded that psychoanalysis has to be situated “on precisely the same scientific plane as the theory regarding the Loch Ness monster.”

Although these criticisms often rested on distorted presentations of psychoanalysis, they led to a growing concern within segments of the psychoanalytic community about the empirical status of psychoanalysis. Indeed, the growing number of Freud critics forecasted the downfall of psychoanalysis precisely because of its refusal to engage in empirical research. This reinforced the growing divide within the psychoanalytic community between those arguing that the traditional case study method is sufficient to validate psychoanalytic concepts, and those that increasingly considered this method to be limited because of its many methodological pitfalls, not the least of which is the issue of confirmation-bias. Unfortunately, this resulted in these two cultures drifting apart, and the rare debates between proponents of these cultures amply illustrate how they consider each other's beliefs and assumption often so wrong that any attempt to establish communication between these two cultures is destined to fail.

### WHY SHOULD WE BRIDGE THE GAP?

Signs indicate that this situation may be changing as a growing number of people within the psychoanalytic community realize that this divide between two cultures is not only to a large extent arbitrary, but also false (Luyten et al., 2006). Generally speaking, two sets of reasons indicate why an increasing number of psychoanalysts consider it important to bridge the current divide within psychoanalysis. The first set of reasons have more to do with politics and power and are thus to a certain extent external to psychoanalysis. Psychoanalysis is increasingly pressured by managed health care to prove its efficacy in controlled studies. And although some psychoanalysts remain indifferent to these issues, many others feel that these pressures may threaten their own personal future as well as that of psychoanalysis more generally. Hence, these analysts are becoming increasingly interested in learning more about systematic research of psychoanalytic treatments and concepts in order to support their use of psychoanalysis and psychodynamic psychotherapy. In the meantime, and often as an unanticipated result, these analysts have also become curious to learn how these studies might influence their clinical practice. Research concerning Transference-Focused Psychotherapy (TFP; Clarkin, Levy, & Schiavi, 2005) and Mentalization-based Treatment (MBT; Fonagy & Bateman, 2006), for instance, have not only led to these treatments being considered as evidence-based psychodynamic modes of treatment for borderline patients, but also stirred up discussion concerning technical treatment issues for these patients.

But there are also reasons intrinsic to psychoanalysis that could lead to a bridging of the gap between these two cultures. Indeed, as noted, we believe that this gap not only is to a large extent artificial, but also false. Clearly, no single method or approach is “uniquely suited” to investigate psychoanalytic assumptions. Hence, we believe that the future of psychoanalytic research lies in methodological pluralism, ranging from single ( $N=1$ ) and multiple case studies, to the study of narratives, questionnaires, and observational and experimental studies, as all these methods can potentially contribute to approaching the complexity of psychoanalytic hypotheses and ultimately of human nature. For example, recently developed complex statistical methods (e.g., growth curve modeling; survival analysis) facilitate the modeling and testing of both idiographic (individual) and nomothetic (group) trajectories over time, while ecological momentary assessment methods and narrative approaches also allow for the investigation of complex dynamic processes over time. Clearly, the time has passed when statistics were only able to model simple linear, unidirectional relationships that were quite foreign to psychoanalytic assumptions

concerning complex and recursive cause and effect relationships.

Furthermore, it is now common to assume that any type of research involves interpretation and meaning, just as any type of research should include a process of systematic testing and falsification. The criticism that quantitative research neglects meaning and interpretation is clearly incorrect because the entire research cycle is permeated with interpretations made by investigators. And research over the last several decades has dramatically improved our appreciation of the importance of processes involving the construction of meaning (Luyten et al., 2006; in press). Similarly, research that does not include a process of systematic testing of alternative hypotheses can result in self-fulfilling prophecies and pseudo-science. Furthermore, idiographic and nomothetic approaches should also not be seen as opposite but as complementary approaches. Much is to be gained from testing nomothetic findings at the idiographic level and vice versa (Ablon and Jones, 2005; Hauser et al., 2006). Such an exchange can only lead to better theories, to a fuller understanding of individual patients, and thus resulting in gains for all involved. In particular, “master narratives” identified in nomothetic research can be further refined and qualified in idiographic research, and subsequently re-evaluated in group designs. Several methods have already been developed in this area (Ablon and Jones, 2005; Josephs et al., 2004), and provide the means by which both researchers and clinicians might collaborate in efforts to bridge the gap between the two cultures within psychoanalysis.

In addition, and perhaps most importantly, the ethics of psychoanalysis clearly imply that our knowledge and interventions should be based on clinical experiences *as well as* systematic scientific knowledge derived from the study of human nature. The sources of these insights, whether from the study of individual cases or, for instance, wide-ranging genetic research, are to a large extent irrelevant as Freud (1926) already pointed out. It is the knowledge that counts, not where it comes from.

There is yet another important reason why the interpretative and (neo)positivistic cultures within psychoanalysis are complementary, as each culture provides the basis for bridging the gap between psychoanalysis and other disciplines. The interpretative culture provides a bridge with the humanities, which have always played an important role in psychoanalytic thought. The neopositivistic culture provides an important link with the natural sciences, a link which was emphasized by Freud and others within the psychoanalytic movement, but which has remained controversial. We now live in an epoch in which the neurosciences are increasingly moving into the study of the *relational* brain, considering the brain

as experience-expectant, focusing upon gene–environment transactions involving the study of the impact of early childhood adversity on vulnerability and resilience, and the link between life history and the development of both somatic and psychiatric disorders (Luyten & Blatt, 2007; Luyten et al., in press). Psychoanalysis might play an important role in developing this new neuroscience provided the response is not one of orthodoxy or self-sufficiency. As Fonagy (2003, p. 220) argued: “The mind remains the mind whether it is on the couch or in the laboratory,” and these new developments in the longitudinal investigation of transactions among genetic, biological, psychological and environmental factors now promise to lead to a more comprehensive model of the functioning of the human mind based on longitudinal multidisciplinary studies of which Freud could have only dreamt (and of which he probably did).

#### HOW SHOULD WE CLOSE THE GAP?

Before tackling the question how the current divide within psychoanalysis can be bridged, we have to examine the reasons why this gap exists. As noted, we are arguing that both cultures can make legitimate contributions. Whereas the interpretative culture of the psychoanalytic community is mainly concerned that the recent increase in empirical research on psychoanalytic concepts risks creating an empirical one-sidedness driven by the externally imposed need for empirical research in the context of managed care, the neopositivistic culture is mainly concerned that not engaging in systematic empirical research can lead to intellectual isolation, stagnation, and orthodoxy. Both concerns are fully legitimate. Thus, the future lies in taking these concerns into account, which also necessitates considering the many personal, social, and economical forces that continue to reinforce the current divide.

First, as psychoanalysts, we need to be aware of the psychological forces that maintain this divide. In this respect, both idealization and denigration can be observed in how the two cultures describe each other and interact. Another personal factor that may be involved is the prospect of having to give up cherished ideas, which may entail the fear that research will increasingly intrude upon well-established psychoanalytic traditions. And conversely, empirical investigators may fear that using methods other than quasi-experimental designs may lead to the loss of a still precarious respectability of psychoanalytic research as an empirical science within the scientific community.

Hence, this debate is not purely theoretical, but involves issues of power, politics and economics. Many practicing psychoanalysts not only have had little exposure to research in their training, but have built a professional identity around a model that emphasizes meaning, interpretation, the study of individual cases, and supervision as methods of scientific inquiry. Moreover, they may feel threatened by a managed care system that does not fully appreciate the complexities of clinical reality.

The only way to bridge the current divide is to try to bring the two cultures together by facilitating exchange in a number of ways so that proponents of both cultures may begin to respect each other, recognize the legitimacy of each other's concerns, and subsequently discuss the future of psychoanalytic research. We believe that much

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more is to be gained from dialogue than from opposition, and from complementarity rather than conflict. Although these goals might sound difficult to reach in the near future, there are a number of initiatives that may facilitate such process:

One of the best ways to reduce the current divide is

to include research experience in psychoanalytic training. Much of the resistance within psychoanalysis against research rests on unfamiliarity with the sophistication of current research efforts and what these findings may offer to practicing clinicians. Part of this process would also entail realizing the limitations of research findings, without considering these findings as totally irrelevant for clinical practice. Furthermore, this could lead to a totally different model of the relationship between research and clinical practice than the one that is currently espoused in many psychoanalytic institutes. Psychoanalytic institutes should critically study the rationale and value of other models of the relationship between research and clinical practice, such as the scientist-practitioner model, and adopt and/or adapt such models for their training programs. Ideally, this could lead to a new generation of psychoanalysts who are at least familiar with research methods and findings, and have the ability to critically evaluate the value of research findings. In this respect, much can be learned from experiences gained from the New Haven Psychoanalytic Research Training Program, which builds upon the model of the IPA-sponsored Research Training Program hosted by the University College London. Both highly successful research programs each year attract a diverse group of international scholars, many of them psychoanalytic candidates, interested in psychoanalytic research. More



efforts in this area, however, are needed.

Similarly, more room should be given in psychoanalytic conferences for research, and particularly presentations that involve discussions between researchers and clinicians, or discussions of the clinical implications of research findings. As most psychoanalytic researchers are also practicing clinicians, this should be easy to implement.

More funding of research by psychoanalytic organizations is needed. Many psychoanalytic researchers have difficulty finding funding for their research, and often are forced to resort to more "mainstream" research proposals to get funding. Although several psychoanalytic organizations, such as the American Psychoanalytic Association (APsA) and the International Psychoanalytical Association (IPA), fund research, compared to other funding agencies, their financial possibilities are quite limited. A dramatic increase in research funding is therefore needed, to ensure that funding for specifically psychoanalytic research remains possible. And including practicing psychoanalysts familiar with research in funding committees could contribute to making psychoanalytic research more "clinician-friendly," as is for example done by the IPA Empirical and Conceptual Research Committees, the IPA Research Advisory Board, and the APsA Fund for Psychoanalytic Research. Likewise, establishing practice research networks consisting of both clinicians and researchers should contribute to closing the gap between the two cultures.

In sum, efforts are needed to develop and strengthen collaborations between the two cultures within psychoanalysis, i.e., to develop collaborative efforts between clinicians and researchers, between those embracing more qualitative and interpretive approaches and those favoring more quantitative methods, and between psychoanalytically trained scholars and researchers/clinicians belonging to others schools of thought. Ultimately, these efforts may lead to a different and probably more encompassing model of the relationship between science and practice as the one that is currently adopted within psychoanalysis.

#### CONCLUSION: WHEN SHOULD WE BRIDGE THE GAP?

Reconciliation between the two cultures within the psychoanalytic community is urgently needed in view of the external pressures threatening psychoanalysis and the current internal divide. Such reconciliation could end our isolation from each other within psychoanalysis as well as our "not-so-splendid isolation" from other branches of science (Fonagy, 2003). In our opinion, the stakes are high enough to warrant that psychoanalytic organizations take these issues seriously, and act upon them promptly and with strength and vigor.

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