

Howard S. Baker

**Shorter-Term
Psychotherapy:
A Self Psychological
Approach**

*Handbook of Short-Term
Dynamic Psychotherapy*

Shorter-Term Psychotherapy

A Self Psychological Approach

Howard S. Baker

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Contents

ORIGINS AND DEVELOPMENT OF SELF PSYCHOLOGY

SELECTION OF PATIENTS

GOALS OF THERAPY

THEORY OF CHANGE

TECHNIQUES

CASE EXAMPLE

EMPIRICAL SUPPORT

CONCLUSION

References

Patient: You bet.

Therapist: So what are you going to do?

Patient: Nothing. She can call me.

Therapist: And if she does?

Patient: (Snarling) I'll tell her, "Thanks for calling Sunday."

Therapist: And how will she take that?

Patient: I don't care. Don't you think she could have called?

Therapist: I don't know, but you sure do. (This leads to several interchanges about what could have excused her failure to call, all of which he had considered and dismissed.) So you want to get even with her for humiliating you like that.

Patient: You bet. She deserves it. . . . Well, don't you think so?

Therapist: That's up to you, but I think what you really hope will happen is that she'll say she's sorry and almost plead with you to go out.

Patient: Sure, I guess so.

Therapist: Well, if that is what you want, I mean if you want to find out if she likes you, then it seems to me that if you sort of snarl "Thanks for calling," it might screw things up.

Patient: Yeah, but she deserves it. She didn't call and there's no excuse.

Therapist: I understand what you're saying, that if she put you down she deserves to get it and you deserve to get even. But if you talk to her like that, that doesn't come for free. You'll have an effect on her—and that effect will screw up finding the answer to the Does she really like you? question.

Patient: I don't understand. She deserves it.

Therapist: That may be, but if you snarl at her when you're trying to find out if she likes you, you're changing things. Look, it's sort of like doing an experiment. The experiment has two parts. One is to find out if she likes you and the other is to get even. But the get even part is sort of like spitting into a petri dish when you're doing a microbiology experiment. If bugs grow there, you don't have any idea why because you spit in the dish. Your experimental technique fouled up the experiment.

Patient: You mean, if I say, "Thanks for calling," she takes offense?

Therapist: (laughs) Well, yes, wouldn't you?

Patient: Yes, I suppose. But she deserves it and I wouldn't.

Therapist: (Both chuckling) Of course, you'd never make a mistake. But the point is that when you do that, you'll probably make her want to say, "Screw him." And then you'll never find out why she didn't call, and you'll never find out if she likes you.

Patient: Well, I suppose.

Therapist: And it's kind of like with God. You don't trust Him, and you approach Him in a way that makes it hard to find out about Him.

Patient: Well, what should I do? I mean, what should I say to her?

Therapist: I think you could figure that out if you realize that you're angry because you feel rejected. That makes you want to get even, and then you're likely to treat her in a sort of nasty way. If you do that, it has an effect that is likely to screw up your ability to find out why she didn't call or if she really would like to go out with you.

Patient: You mean I'm not supposed to get angry.

The exchange led to a discussion of how he could express some anger without getting so angry that he spoiled his chances to find out what he wanted to know. We also thought more about the source of the anger—his feeling rejected—and how what he did next would either clarify or obscure his finding out if he was, indeed, rejected. I told him: "This is a tough message. You want to get even and to find out if she likes you. There may

not be a way to do both, so you have to make a choice." It was important not to contradict his belief that he was wronged, sticking instead to the idea that there might be another explanation or that he might, in fact, be right.

When he left, he was determined to ask Sarah what happened and to say that he felt bad about her not calling. He returned the next week saying that I would be angry at him. He had spoken to Sarah, she had come over to his apartment, and they had ended up in bed. This led to another opportunity to explore his expectation that my opinions would be the same as God's. We began to relate this expectation to other relationships, making particular reference to what he might anticipate when he went to professional school in the fall. He thought that he had learned a general principle from the interaction with Sarah.

The goal had been to help Mike understand that when he felt dropped from a relationship that met mirroring selfobject needs, he felt a narcissistic

insult that precipitated rage. This fury led him to want to get even, but he realized that he needed to exercise some caution about how he expressed anger lest he create a self-fulfilling prophecy that proved no one liked him or would help him. These and the other main themes of his treatment were explicitly reviewed during his last appointment. At that time we also agreed that he should continue to think about these concepts.

When he terminated he felt better, and, more important, he had some understanding of how he dealt with relationships. A consistent focus and a supportive relationship that acted as a splint for his self-esteem combined to enable him to reorganize much of his thinking in a remarkably short time.

EMPIRICAL SUPPORT

There have been scores of excellent case studies on self psychology, and self psychologists are generally agreed that this theory has yielded superior results. We have found that we are able to help most patients more effectively and that we can treat patients previously considered unreachable. However, there are no experimental outcome studies, and all descriptions of the therapeutic process are merely anecdotal. There are several reasons for this serious shortcoming. Self psychology is a relatively young area, and most of its practitioners have been engaged in psychoanalytic or other intensive treatment approaches. Research on long-term therapy is, of course, fiendishly

difficult. There has been little systematic work applying the theory to brief models of treatment, and there is no manual that defines the method.

Despite this regrettable situation, several facts derived from existing research beg for a self psychological analysis. Many researchers (for example, Strupp, 1989; Luborsky, Crits-Christoph, Mintz, & Auerbach, 1988) find that a positive therapeutic alliance correlates with a good outcome. Does the concept of the selfobject transference help clarify this most consistent and robust finding of existing research? Robert Wallerstein (1986) comprehensively studied the intensive psychoanalytic individual treatment of forty-two seriously troubled patients. He found that some of those who gained great insight did well, but others with good insight did not do at all well. Still others with superior outcomes had gained little insight. These data raise the serious question whether traditional psychoanalytic insight (insight related to drive-based conflict) produces therapeutic gain.

Crits-Christoph, Cooper, and Luborsky (1988) have found that there is a good correlation between positive outcome and Core Conflictual Relationship Theme (CCRT) interpretations that are accurate. The content of CCRT interpretations is at least similar to what self psychologists might say. Did their patients gain insight from these interpretations? If so, one could also speculate that CCRT insight is, in fact, useful. At the least, accurate CCRT interpretations help create a sense of being understood that enhances the

empathic bond; and the empathic bond is central to all self psychological theory. Does the self psychology help explain why the CCRT works, and might the modest alterations that self psychologists could add yield still better outcomes?

These questions are pregnant with research promise, but the best that can be said is that the answers remain a gleam in the eyes of some self psychologists.

CONCLUSION

The great German physicist Werner Heisenberg (1958) realized that it was possible to locate an electron in space or to determine the amount of energy it contained—but that the process of establishing one destroyed the possibility of finding the other. Both procedures uncover elements of the “truth” while simultaneously obliterating other “facts.” Whatever procedure we undertake to examine anything, even an atom, irreparably alters it. We destroy one aspect of reality as we clarify another.

The same holds for psychotherapeutic interventions and theories. Although some hypotheses (such as phrenology) uncover very little useful information, others (such as traditional Freudian and self psychological metapsychologies) hold considerable explanatory power. Whatever theory we use to understand our patients clarifies some elements of their lives and

renders other facets opaque.

In this chapter, I have provided a description of how self psychological principles can guide brief psychotherapy. I have found this perspective useful—I think more useful than alternate approaches. Yet I am convinced that others have helped their patients with entirely different techniques. Robert Wallerstein (1986) demonstrated that psychoanalysis does not exist in a pure form in clinical practice. Likewise, I suspect conceptual purity is routinely abandoned in brief psychotherapy and that we all should and do borrow from other methods in order to meet the particular needs of individual patients.

Nonetheless, the Heisenberg principle applies: whatever approach we use inevitably alters the course of therapy. Patients may obtain positive outcomes from many different approaches. But these are different outcomes with different benefits and different shortcomings. It remains for future research to determine whether one approach is always best or is best for particular patients. Perhaps we will also discover that therapists have inherent styles that determine which methods they can use and which they do well to avoid.

References

- Alexander, F., & French, T. M. (1946). *Psychoanalytic therapy*. New York: Ronald Press.
- Bacal, H. (1985). Optimal responsiveness and the therapeutic process. In A. Goldberg (Ed.), *Progress in self psychology* (Vol. 1, pp. 202-227). New York: Guilford Press.
- Baker, H. (1979). The conquering hero quits: Narcissistic factors in underachievement and failure. *American Journal of Psychotherapy*, 33, 418-427.
- Baker, H., & Baker, M. (1987). Heinz Kohut's self psychology: An overview. *American Journal of Psychiatry*, 114, 1-9.
- Balint, M., Ornstein, P. H., & Balint, E. (1972). *Focal psychotherapy: An example of applied psychoanalysis*. London: Tavistock.
- Basch, M. (1983). The significance of self psychology for a theory of psychotherapy. In J. Lichtenberg & S. Kaplan (Eds.), *Reflections on self psychology* (pp. 223-238). Hillsdale, NJ: Analytic Press.
- Beck, A. T., Rush, A. H., Shaw, B. F., & Emery, G. (1979). *Cognitive therapy of depression*. New York: Guilford Press.
- Binder, J. L. (1979). Treatment of narcissistic problems in time-limited psychotherapy. *Psychiatric Quarterly*, 51, 257-270.
- Crits-Christoph, P., Cooper, A., & Luborsky, L. (1988). The accuracy of therapists' interpretations and the outcome of dynamic psychotherapy. *Journal of Consulting and Clinical Psychology*, 56, 490-495.
- Davanloo, H. (Ed.). (1978). *Basic principles and techniques in short-term dynamic psychotherapy*. New York: Spectrum.
- Deitz, J. (1988). Self-psychological interventions for major depression: Technique and theory. *American Journal of Psychotherapy*, 42, 597-609.

- Gustafson, J. P. (1986). *The complex secret of brief psychotherapy*. New York: Norton.
- Heisenberg, W. (1958). *Physics and philosophy: The revolution in modern science*. New York: Harper.
- Kohut, H. (1957). Introspection, empathy, and psychoanalysis: An examination of the relationship between mode of observation and theory. In P. H. Ornstein (Ed.), *The search of the self: Selected writings of Heinz Kohut, 1950-1978* (Vol. 1, pp. 205-232). New York: International Universities Press.
- Kohut, H. (1966). Forms and transformations of narcissism. In P. H. Ornstein, (Ed.), *The search of the self: Selected writings of Heinz Kohut, 1950-1978* (Vol. 1, pp. 427-460). New York: International Universities Press.
- Kohut, H. (1968). The psychoanalytic treatment of narcissistic personality disorders: Outline of a systematic approach. In P. H. Ornstein (Ed.), *The search of the self: Selected writings of Heinz Kohut, 1950-1978* (Vol. 1, pp. 477-509). New York: International Universities Press.
- Kohut, H. (1971). *The analysis of the self*. New York: International Universities Press.
- Kohut, H. (1972). Thoughts on narcissism and narcissistic rage. In P. H. Ornstein (Ed.), *The search of the self: Selected Writings of Heinz Kohut, 1950-1978* (Vol. 2, pp. 615-659). New York: International Universities Press.
- Kohut, H. (1983). Selected problems of self psychological theory. In J. Lichtenberg & S. Kaplan (Eds.), *Reflections on self psychology* (pp. 387-416). Hillsdale, NJ: Analytic Press.
- Kohut, H. (1984). *How does analysis cure?* Chicago: University of Chicago Press.
- Kohut, H., & Wolf, E. (1978). The disorders of the self and their treatment: An outline. *International Journal of Psychoanalysis*, 59, 413-425.
- Lichtenberg, J. (1983). *Psychoanalysis and infant research*. Hillsdale, NJ: Analytic Press.
- Lichtenberg, J. (1989). *Psychoanalysis and motivation*. Hillsdale, NJ: Analytic Press.

- Luborsky, L. (1984). *Principles of psychoanalytic psychotherapy: A manual for supportive-expressive treatment*. New York: Basic Books.
- Luborsky, L., Crits-Christoph, P., Mintz, J., & Auerbach, A. (1988). *Who will benefit from psychotherapy? Predicting therapeutic outcomes*. New York: Basic Books.
- Malan, D. H. (1976). *The frontier of brief psychotherapy*. New York: Plenum.
- Ornstein, A., Gropper, C., & Bogner, J. Z. (1983). Shoplifting: An expression of revenge and restitution. *The Annual of Psychoanalysis*, 11, 311-331.
- Ornstein, P., & Ornstein, A. (1972). Focal psychotherapy: Its potential impact on psychotherapeutic practice in medicine. *Journal of Psychiatry in Medicine*, 3, 311-325.
- Orne, M. (1968). Anticipatory socialization for psychotherapy: Method and rationale. *American Journal of Psychiatry*, 124, 88-98.
- Shane, E., & Shane, M. (1989). Mahler, Kohut, and infant research: Some comparisons. In D. Detrick & S. Detrick (Eds.), *Self psychology: Comparisons and contrasts* (pp. 395-413) Hillsdale, NJ: Analytic Press.
- Siddall, L. B., Haffey, N. A., & Feinman, J. A. (1988). Intermittent brief psychotherapy in an HMO setting. *American Journal of Psychotherapy*, 42, 96-106.
- Sifneos, P. E. (1979). *Short-term dynamic psychotherapy: Evaluation and technique*. New York: Plenum.
- Stern, D. (1985). *The interpersonal world of the infant*. New York: Basic Books.
- Strupp, H. H. (1989). Can the practitioner learn from the researcher? *American Psychologist*, 44, 717-724.
- Terman, D. M. (1988). Optimum frustration: Structuralization and the therapeutic process. In A. Goldberg (Ed.), *Learning from Kohut: Progress in self psychology* (Vol. 4, pp. 113-126). Hillsdale, NJ: Analytic Press.

Wallerstein, R. S. (1986). *Forty-two lives in treatment: A study of psychoanalysis and psychotherapy*. New York: Guilford Press.

Winnicott, D. W. (1965). *The maturational process and the facilitating environment*. New York: International Universities Press.

Wolf, E. (1988). *Treating the self*. New York: Guilford Press.