

The background of the cover is an abstract painting with expressive brushstrokes in shades of blue, yellow, and orange. The top and bottom sections of the cover feature this artwork, while the middle section is a solid dark red color.

THE TECHNIQUE OF PSYCHOTHERAPY

IDENTIFYING IMPORTANT TRENDS AND PATTERNS

THE USE OF FREE ASSOCIATION

LEWIS R. WOLBERG M.D.

Identifying Important Trends and Patterns:

The Use of Free Association

Lewis R. Wolberg, M.D.

e-Book 2016 International Psychotherapy Institute

From *The Technique of Psychotherapy* Lewis R. Wolberg

Copyright © 1988 by Lewis R. Wolberg

All Rights Reserved

Created in the United States of America

Identifying Important Trends and Patterns: The Use of Free Association

Free association is rarely employed in psychotherapy, except in some forms of reconstructive therapy especially classical psychoanalysis in which it may constitute the primary kind of communication. The use of the couch position, the extreme passivity of the therapist, and the removal of the therapist from the line of vision of the patient reduce the influence of reality to a minimum. This encourages internally inspired stimuli. As a result, thought images reflect unconscious dynamic conflicts and impulses that come to the surface in a more or less direct form. The therapist listens to these with what Freud referred to as an “evenly-hovering attention,” without selection of material. The therapist sensitizes himself or herself to what is behind the verbalizations and to the appearance of unconscious derivatives.

Free association also encourages transference reactions, grist for the psychoanalytic mill. Patients must be trained to associate freely. Verbalization of thoughts without restraint is often very difficult, because obscene ideas, distressing recollections, and offensive notions concerning the therapist may press for expression. As a defensive gesture, patients may exhibit blocks in their stream of thought, or they may try to protect themselves by going off into reverie. Impulses and strivings even at the periphery of awareness may be so repulsive that the person may not dare to permit himself or herself to think of them.

Some resistances to free association are relatively superficial. Patients may believe that the therapist considers their fears and fantasies absurd because they, themselves, consider them ridiculous. They may want to analyze their impulses and actions beforehand, since they anticipate censure, or they may feel that the therapist will think more of them if they analyze their problems without help. There may be a conscious need to maintain control, with resistance extended toward the revelation of significant material. An intense fear of failure may foster an

inability to utter what comes to mind.

By far the majority of resistances to free association are unconscious in nature. Patients may want to cooperate, but whenever they attempt to verbalize fantasies and thought images, they experience, to their consternation, anxiety that blocks their efforts. They may not even be aware of anxiety because memory of the traumatic material is so fleeting that it never actually occupies the field of attention. In some cases the character structure acts in resistance to free association. The individual's pattern of life, for instance, may be so stereotyped that little or nothing spontaneous is allowed to intrude itself. Fear of expressing hostile or erotic impulses may prevent letting oneself go, or that exposing one's thoughts will reveal one's ineptness or contemptibility. On this basis, one may exhibit a mental or vocal inertia that can develop into mutism.

The following example of free association demonstrates how a 38-year-old female patient with a phobic disorder gains an understanding of certain unconscious conflicts.

Pt. So I started walking, and walking, and decided to go behind the museum and walk through Central Park. So I walked and went through a back field and felt very excited and wonderful. I saw a park bench next to a clump of bushes and sat down. There was a rustle behind me, and I got frightened. I thought of men concealing themselves in the bushes. I thought of the sex perverts I read about in Central Park. I wondered if there was someone behind me exposing himself. The idea is repulsive, but exciting too. I think of father now and feel excited. I think of an erect penis. This is connected with my father. There is something about this pushing in my mind. I don't know what it is, like on the border of my memory, *(pause)*

Th. Mm hmm. *(pause)* On the border of your memory?

Pt. *(breathes rapidly and seems to be under great tension)* As a little girl, I slept with my father. I get a funny feeling. I get a funny feeling over my skin, tingly-like. It's a strange feeling, like a blindness, like not seeing something. My mind blurs and spreads over anything I look at. I've had this feeling off and on since I walked in the park. My mind seems to blank off like I can't think or absorb anything. *[This sounds like a manifestation of repression, with inhibition of intellectual functioning, perhaps a way of coping with the anxiety produced by a return of the repressed.]*

Th. The blurring of your mind may be a way of pushing something out you don't want there.
[interpreting her symptoms as resistance]

Pt. I just thought of something. When father died, he was nude. I look at him, but I couldn't see anything, I couldn't think clearly. I was brought up not to be aware of the difference between a man and a woman. I feared my father, and yet I loved him. I slept with him when I was very little, on Saturdays and Sundays. A wonderful sense of warmth and security. There was nothing warmer or more secure. A lot of pleasure. I tingle all over now. It was a wonderful holiday when I was allowed to sleep with father. I can't seem to remember anything now. There's a blur in my mind. I feel tense and afraid.

Th. That blur contaminates your life. You are afraid of something or afraid of remembering something. [focusing on her resistance]

Pt. Yes, yes, but I can't. How can I? How can I?

Th. What comes to your mind?

Pt. Sunday I got stomach pains. I was depressed and frightened. I started crying. I wanted to hold onto mother. What is the use of becoming aware of needs if you can't satisfy them. I had a dream that night. A group of army officers in my sister's room. I felt jealous. They weren't interested in me. Then I was on the water. One man was walking on water with no legs. He walked confidently. I asked him where his legs were, and he said that when he had legs, he felt strong and masculine. Then I see flowers and I feel lost. Then I am on a ruined street. I see an old horse, emaciated, waiting to be slaughtered. I'm horrified, sick, upset. I have flowers, but everybody criticizes them. I felt they weren't good. And that's all.

Th. What do you associate to the dream?

Pt. I felt the officers kissed my sister and mother and not me. I feel father give my sister and mother everything and not me. I wanted to look into the room where the officers were with my sister, but my mother wouldn't let me. I was mad. I remember a part of the dream where I saw condoms in a box. I felt my sister could have it and not I. I feel deprived and helpless, like a mutilated person. That must be me walking on the water. I walk, but like a cripple. I want to be strong and not weak. Men are strong. My father wouldn't let me grow up. My sister has a husband and I don't have one. She has everything. I have nothing. Not anything that is worthwhile. What I have is not much. I always wanted to be strong. I used to fantasize being a boy and having a penis. I suppose the flowers in the dream are my femininity. I put little value on myself. I realize now how bitter I feel toward father for not devoting himself to me. [*The patient goes on to*

correlate her incestuous wishes, her castration fears, and her penis envy.]

Free association, despite its serious limitations (Marmor, 1974), is one avenue to unconscious sources of problems that may be essential in the more formal analytic procedures.