

Hyman Spotnitz: Recollections

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In this personal account of a relationship with Spotnitz that spanned much of a lifetime and many psychoanalytic settings, the author explores the various theoretical and interpersonal motivations behind Spotnitz's interventions and methodology. The paper also traces the sources, including Spotnitz's own early supervisions, that influenced and informed his work.

In nearly 50 years of working with Hyman Spotnitz in individual and group analysis and in supervision, I learned a great deal not only about myself, but also about the way in which Spotnitz worked. I hope that recounting my thoughts and experiences will help those who did not know him to gain a sense of him as an individual and group analyst.

Although I have tried to report my experiences as objectively as possible, the reader should keep in mind that my account is filtered through multiple transferences, selective reporting, defensive maneuvers, and the vicissitudes of memory. In observing how he treated others in groups and in discussing Spotnitz with some of his analysands, I discern considerable similarities, but also vast differences, in how Spotnitz was perceived and how he functioned. Moreover, there were notable differences between his written word and his practice with me, and his outlook seems to have evolved over time.

I hope that my efforts will prompt Spotnitz's other analysands to share their experience so that modern analysts maintain a well rounded view of the man and his work. If we have a multitude of reports, the effects of unique transferences will be diminished and a more objective

image may emerge. Since psychoanalysis remains more of an art than a science, what transpires between master and apprentice should be preserved.

Some analysts may question the motives of discussing one's analysis—and rightfully so. I believe there is validity in maintaining mutual confidentiality especially in the first few years of analysis. However, after decades of individual and group analysis with Spotnitz, wherein we examined my penchant to understand and to write, I feel I can publicly discuss my work with him without compromising my analysis, especially by emphasizing Spotnitz's activity. Moreover, in writing this account, I have visited old emotional grounds, gained new perspectives, and realized that analysis is truly interminable.

I have considered the possible impact on Spotnitz's patients if they should read my account. There may be some negative effects—there may be positive ones. On balance, I hope the dissemination of information about Spotnitz will prove helpful to interested readers.

Despite the reluctance of analysts to discuss their analysts and their analyses, there is considerable precedent for writing about one's therapy. Freud himself acknowledged that many of his dreams and clinical dynamics were self-referential. Guntrip (1975) discussed many issues involved in writing about one's own analysis in his book about his analyses with Fairbairn and Winnicott. The psychoanalytic world was startled when it was revealed that Kohut (1979) was the Mr. Z. who underwent an analysis with a classical analyst, Ruth Eissler. Esther Menaker's (1989) autobiography is largely devoted to her analytic experience with Anna Freud. Roazen (1995) interviewed several of Freud's analysands, including David and Mark Brunswick, Edith Jackson, James and Alix Strachey, and Kata Levy. Certainly, I was influenced by the fact that one of my analysts, Abram Kardiner (1977), wrote and talked extensively and meaningfully about his contacts with Freud. *The Festschrift* (Sheffel, 1991), which includes autobiographical material from Spotnitz and reports from his analysands and supervisees, also gave me direction. And, when I asked Spotnitz if I should publish this paper, his answer was an immediate, "Yes."

The Beginnings

While working as a clinical psychologist in the "assault and suicide" building at Veterans Administration Hospital in Montrose, New York, I frequently complained to a mentor/friend about the confusion, emo-

tional strain, and sometimes dread of working with severely disturbed patients. His advice was: "If you want to understand schizophrenia, go see Hyman Spotnitz." Shortly thereafter, I attended four workshops conducted by Spotnitz. The confrontational and experiential nature of the workshops opened my emotional eyes. The interchanges between Spotnitz and some of the members absolutely amazed me. I had my first lesson in maintaining the frame, working in the here and now, and conducting character analysis without genetic interpretations. In one instance, a woman lit a cigarette. As Spotnitz announced the no smoking rule, the woman insisted on her right to smoke. The confrontation escalated rapidly. Spotnitz announced that she was breaking the rules and was killing him and the group. In the face of the member's recalcitrance, Spotnitz ordered her to stop smoking or leave the group. She remained as a grumbling but contributing member.

I was impressed with the fact that Asa Kadis, who was one of my favorite American Group Psychotherapy Association instructors, attended the meetings. When Spotnitz asked her why she was there, she responded, "I want to see what the guru is up to these days." Harold Leopold was a respectful, curious attendee. There seemed to be a warm collegial respect among them, save for some good-natured sparks between Kadis and Spotnitz. I received my first lesson in "contact function" in that Spotnitz seemed to mirror my quiet, hopeful, emerging interest in him and his work.

As a consequence of these workshops, I used some of his techniques with varied success. Determined to find the rationale for the interventions rather than following a cookbook, I decided to enter analysis with Spotnitz. When I first called him for an appointment, I believe he was in a group session. In trying to make the appointment, I explained to him that I lived and worked 40 miles from New York City and had a tight schedule. Sensing my ambivalence and resistance, he abruptly told me, "Call me when you're in town," and hung up. I felt affronted by Spotnitz's rudeness and wondered to myself why I would ever want to work with such a gruff person. Little did I know that he was mirroring an unrecognized part of me. When I discussed with my mentor/friend Spotnitz's "rudeness" and my inclination to drop him, he merely said, "Just call him again." In retrospect, I believe Spotnitz was testing my motivation for treatment with him.

I finally worked out a schedule with Spotnitz, and the Veterans Administration (V. A.) graciously granted me educational time off to travel twice a week to attend my sessions. The sessions were salutary in that I felt better, my work with psychotics and supervisees felt more stable, and more importantly, my wife noted positive changes. Thereupon,

I concretized my plans to leave the V. A. and train at a psychoanalytic institute.

In the prior decade I had had three previous satisfactory psychoanalytic experiences with analysts trained at the William Alanson White and Karen Horney institutes. But there was something mysterious about Spotnitz that aroused my curiosity about him and about the therapeutic process. In retrospect, I believe it was the fact that he could work with my previously unanalyzed preverbal self. His extended silences and my talking, as in previous therapies, were familiar to me. But the sudden sharp emotional interchanges that emerged were different. For example, after talking for an extended time, I fell silent and said to him, "You're on." His immediate question was, "Is that an order?" I denied that it was an order, but rather a request. His reply was that I had sounded like a dictator. Again, I denied any authoritarian intent. Interrupting me, he asked, "What's wrong with being a dictator?" I set about giving him standard societal reasons why dictators and arbitrary authority are bad. As I began talking about having been an officer in the U. S. Army, I became aware of my dictatorial ways and realized that I relished the feelings of being an absolute authority. I was able to see how I enjoyed that aspect of being a father and how I might abuse the power. That line of thought led to my examining my relationship with my father. The memory of that interchange has remained with me and crops up whenever a conflict around authority arises. My surprise and Spotnitz's incisiveness made for emotional learning and working through. This example typifies Spotnitz's best work with me.

In general, whenever I labeled myself negatively, for example, "ignorant," his standard question was, "What's wrong with being ignorant?" This question stumped me and frequently led me to arguing for the virtues of being ignorant, e.g., realizing the limits of my knowledge and providing an opportunity for learning. When my self-attack was more vicious, he would ask, "Why are you attacking yourself now?"

As I walked into his office one day, he asked, in an interrogating manner, "What have you been up to?" I was startled because I had been steeling myself to reveal an embarrassing jam I had orchestrated that day. In another instance, as I walked into his office, perhaps mumbling a greeting, he asked somewhat demandingly, "Don't I get a 'hello' today?" After I fumbled with an excuse, he lectured me to the effect that I was to talk like a well-mannered person in his waiting room, but that in the office I could say what was on my mind.

During a session, Spotnitz answered a telephone call from my wife. He asked if I wanted to speak to her and gave me the phone. After the conversation, Spotnitz instructed me that neither she nor anyone else

was to interrupt our sessions. His tone made me feel that his office was a special place insulated from the world. On the other hand, he would answer telephone calls, but have only brief conversations. When I pointed out his inconsistency, he indicated that I and others could call him 24 hours a day. He went on to say that very few patients abused this rule and that offering this service prevented many calls and provided security to his patients. When he answered the telephone, he was usually brief. He generally told the caller: "Bring this up at our next session." or "Why can't this wait until our next session?" or "Call me back at such-and-such a time." His manner and tone discouraged discussion. He indicated to me that a phone call should not last more than five minutes. Once during a session, a patient called two or three times, at which point he bellowed, "Stop calling me, or I'll call the police!"

His interventions were pithy, to the point, sometimes forceful, sometimes with humor. For example, when I told him I wished I could be "true to myself" and tell everyone what I thought of them, he replied, "That's the surest way to get into trouble. Would you tell a nasty cop what you thought of him?" We frequently discussed what constituted appropriate behavior. At one point, he announced, "If you want to know what proper societal behavior is, consult the precepts of the Catholic Church." In time, I determined that I should operate in my best interests as well as in the best interests of those I cared about.

Spotnitz was not averse to giving advice. For example, I had been having problems with the head nurse of a psychiatric ward I was administering. After listening to the issue, he asked me why I was rejecting her. After hearing my explanations, he told me that the nurse had a crush on me and was hurt by my cool, professional response. He suggested that I be flirtatious and give her the impression that I liked her. We again argued about hypocrisy and truthfulness to oneself. Nevertheless, I followed his suggestions with remarkably good results. The nurse became friendlier and made life easier for me on the ward.

In another instance, I complained about a psychiatrist who was treating the mother of one of my child patients. I felt he was giving her inappropriate advice relative to her handling of the child. I wanted to confront the psychiatrist with my presumed superior knowledge. Spotnitz recommended that I treat the psychiatrist like a patient. Furthermore, he counseled me to ask the psychiatrist how to treat my patient. I was stunned, and I objected, but I carried out the intervention with considerable success and overall improvement in my relationship with the psychiatrist with whom I shared many cases. Spotnitz had introduced me to the technique of consultation with the patient, a technique I have continued to employ in my practice.

I had been invited to give a lecture to a large audience at a prestigious organization. In the face of my anxiety Spotnitz told me I should treat the audience like a patient or a therapy group. At some point I realized he meant I should get the audience to talk. He also advised me about discussing my fees and travel expenses for lecture engagements. In another instance where I discussed my fear of an audience and insecurity about what and how to present, he pointed out, "Audiences like to be entertained."

Invited to join a small group practice as a child and adolescent therapist, I was uncertain about my assuming that responsibility given my limited training with children. Spotnitz told me about his limited exposure to group therapy when Sam Slavson asked him to supervise group therapists at the Jewish Board of Guardians. Slavson (who himself had no formal training in individual or group therapy) said that he would provide some direction, but basically told Spotnitz to just go out there and do it. I committed to the new position, and with Spotnitz's supervision, conducted myself well enough. Years later I asked Spotnitz, "Who supervises you?" His response startled me when he said he relied on his patients and groups for supervision. "I just ask them what I should do." This process is similar to his technique of consultation with the patient.

In the main, I felt Spotnitz sought to maintain the frame. The deviations, which might have been object-oriented joining, were frequently followed by a return to classical neutrality. In retrospect, his style reminds me of Ferenczi's (1928) "principle of elasticity." For example, after many months, I determined that my insurance plan would pay for a portion of the analysis. When I asked Spotnitz to provide me with bills, he indicated that he did not write bills. With great consternation and annoyance, I agreed to pay for an hour with him wherein he and I would review our records, and he would sign the insurance forms I had prepared. I learned it was to my advantage to promptly fill out the monthly forms for his signature. There were many lessons to be learned from this incident that served me well in my own practice. Perhaps the most important one was maintaining the frame. I was led to believe that his job was to analyze me, and that his doing anything else constituted a counter-resistance. It was at this point that Spotnitz remarked that he did not have to go out of his way to mobilize hostility because the inherent nature of the modern psychoanalytic frame provided sufficient frustration and aggression.

Spotnitz frequently asked me about my feelings. I recall that I arrived late for an appointment because my train had stalled for a considerable time. When he asked me what my feelings were on the stopped train, I responded, "Anxiety." Further inquiry revealed that I was furious at the

railroad. I began to learn that anger was frequently the other side of anxiety.

Fairly early in the therapy, he described the value of experiencing all feelings. For example, he pointed out that not feeling pain when someone kicked you in the shins would be abnormal. The experience of pain had survival value. He asked me if I knew what happened to people who on a genetic basis could not feel pain. He explained that they tended to have serious medical problems and to die early because they might not be aware of the symptoms, say of a heart attack. He seriously addressed his belief that all feelings had survival value and that verbalizing the feelings was curative. He also indicated that optimal behavior in the session was to lie on the couch with arms at one's side. But his main exhortation was: "Come on time, leave on time, pay on time, and say everything." He made the frame clear.

It was customary for Spotnitz to end the session by getting up from his chair and walking about and chatting in a pleasant manner. When I asked him why he did this, he readily indicated that patients needed time to transition from the regression of the analytic hour and to restore cognitive functions so that the patient could leave the office ready to face the real world.

An Interruption

I had evolved a plan of training at the Postgraduate Center for Mental Health where, according to its bulletin, Hyman Spotnitz was a training analyst. The screening process went well until the final interview with the director of training, Emanuel K. Schwartz, who announced to me that Spotnitz was no longer an approved training analyst. He asked me if there were any other analysts I would work with. The three analysts I would consider (Asa Kadis, Larry Wolberg, and Schwartz) had full schedules. When Schwartz dictatorially recommended that I work with a certain analyst, I vented my frustration and anger saying, "You know little about me and have some nerve to choose an analyst for me." Moreover, I told him that I had to discuss the matter with Spotnitz. As I walked out I realized that I had probably ruined my chances of being accepted as an analytic candidate.

In discussing this personal and professional dilemma with colleagues and with Spotnitz, it became apparent that Schwartz and Spotnitz had had a recent falling out that precipitated Spotnitz's termination as a Post-

graduate Center faculty member. There was no way that I could realize my dream of training at the center with Spotnitz as my analyst. I could not make a choice. While analyzing the situation, Spotnitz asked, "Why let yourself be bamboozled and steamrolled by a bully?" He suggested that I register instead in a new psychoanalytic institute, the Manhattan Center for Advanced Psychoanalytic Studies (MCAPS), later renamed the Center for Modern Psychoanalytic Studies (CMPS). Since MCAPS was an unknown quantity and the Postgraduate Center had an excellent reputation, I told Spotnitz not to try to influence me, just analyze me. Spotnitz never made any other encouraging statements relative to my affiliation though I sensed he wanted to continue working with me and wanted me to be a part of MCAPS. He pointed out that MCAPS was a therapeutic community that would supplement my analysis.

Within two weeks, Dr. Schwartz called me, and in a warm yet abrupt manner announced, "Abe Kardiner has time for a bright, impertinent young analysand. If you're interested, call him." I was thrown into greater turmoil because Kardiner had been an analysand of Freud and had co-founded the Columbia Psychoanalytic Institute. Also, during my undergraduate work, I had studied with the anthropologist Ashley Montague who had a comprehensive knowledge of psychoanalysis, especially Freud, and admired Kardiner. At his weekly four o'clock teas he invited students to discuss their interests. When I indicated my penchant for bridging anthropology and psychoanalysis, he recommended that I study the works of Abram Kardiner. Our discussions of Kardiner's work sometimes extended to a local pub for a hamburger and a beer. In graduate school, I took advantage of a university custom of requesting a tutorial of any willing professor about a topic of mutual interest. When a new anthropologist came on the faculty, I asked him if he would offer me a tutorial about the works of Kardiner. He agreed to meeting bi-weekly for a year.

My intellectual and emotional attachment to Kardiner intensified my conflict about continuing my work with Spotnitz. After many heart-wrenching sessions with Spotnitz and discussions with family and colleagues, I reluctantly decided to leave Spotnitz and go with Kardiner at the Postgraduate Center for four years.

After graduating from the Postgraduate Center, I felt the need to continue group analysis, precipitated by salutary group experiences at Postgraduate, especially with Asa Kadis. She accepted me into one of her groups after graduation, but prior to the first meeting she died suddenly. Recalling my first workshop experience with Spotnitz and having read *The Couch and the Circle* (Spotnitz, 1961), I called him for an interview. He told me he had no openings. I told him I didn't blame him

for rejecting me after I had abandoned him. In turn, he proposed a colleague's group. But I was so insistent about working with him that he offered me a trial place in a group: "Come in and see what happens." I think what turned him around was my telling him that my analysis with Kardiner for four years at the rate of three times a week did not match the gains I had made with him over a much shorter time frame.

A Return to Modern Psychoanalytic Work: Group Analysis

The group that I joined consisted largely of faculty members and founders of CMPS and a few students who were long-term analysands of Spotnitz. Shortly after entering the group, I reread *The Couch and the Circle* (Spotnitz, 1961) and thought that I recognized some of the members. A curious component of the group was three married couples, all of whom were or had been in individual and couples or family therapy with Spotnitz. Coming from a more orthodox orientation in graduate and psychoanalytic training, I was at first appalled by the relaxed boundaries. I still am amazed at how well the group functioned given the outside contacts. The group's efficacy was a product not only of Spotnitz's skill, but also of the psychoanalytic sophistication of its members. I felt that one could hide nothing from the group, and that when the group gave serious consideration to a problem one of its members was having, they showed excellent judgment.

Spotnitz's role in the group was largely one of watchful waiting. He practiced what he preached. That is, he advocated that the analyst's job was to get the group to talk and to intervene only when major group resistances emerged. He would respond when contacted, but generally he turned the contact over to the group by analyzing why the person was not using the group. For example, if I wanted to ask something about one of my children, Spotnitz would reply, "Why don't you ask, Dr. X? He's an expert child therapist." From time to time I or someone else would ask him why he made an intervention. He would anger me by saying, "I'm just doing research. I'm not interested in curing people." I didn't know what to make of this remark. In retrospect, I know he was interested in both endeavors.

Another remarkable area that opened up for me was that of filial therapy. I was familiar with the practice established by non-directive therapists who taught parents how to conduct play therapy sessions and respond therapeutically to their children. I had not known at the time

that Freud had analyzed his daughter, but I did know that Spotnitz instructed parents to conduct analytic sessions using the couch and had written about these bold experiments. I was not willing, however, to subject my children to such a procedure. My estimate of filial therapy is that it is a powerful modality, but must be used with caution. For example, if the parent interprets too much, the child can be overstimulated and decompensate. All the precautions that Spotnitz recommends in working with a narcissistic patient must be observed. In a general sense, Spotnitz trained his group patients to engage in filial therapy with each other. For example, when a group member realized that I was functioning out of a parental transference to her, she was guided by Spotnitz to use her contacts with me therapeutically. Later, I engaged her as a supervisor for my child, adolescent, and family cases. Despite the extension of boundaries, the system worked for me.

Spotnitz, while adhering to some strict boundaries such as fees and times, seemed to waive traditional boundaries that I believe allowed him to experiment with methods intended to resolve very difficult individual, family, and group problems. In retrospect, this was the essence of Spotnitz: the clinical researcher, whose pragmatism and enterprise made him controversial. The seeming lack of boundaries allowed for a freedom and creativity of expression that in some circles may be considered acting in. For example, at the end of the last session before the August break, it was customary for one of the members, who was an opera buff with a trained voice, to sing an aria that brought tears to everyone's eyes. Ultimately, that process was subjected to individual and group analysis. This example also revealed another one of Spotnitz's beliefs. That is, given a preverbal trauma or conflict some acting out had to occur in order to bring the problem to light and then analyze it. Ferenczi and Rank (1925), in a landmark paper that Spotnitz knew, were the first to propose this process.

One of the overarching principles of the group was that members were to be therapeutic not only to the group members, but also to family members. The prime goal was to allow the experience of and judicious expression of all feelings toward self and others. The atmosphere of the group allowed not only for the experience of, but also for the verbalization of these feelings. Sometimes the expression of these feelings hurt others, but Spotnitz would not allow abuse in the group. He usually analyzed a person's penchant to hurt, or he might directly command, "This is not a place for hurting people!" He might add brusquely, "If you can't control yourself, get out and come back when you are in control." If he thought someone was feeling hurt, he would ask the aggressor if she meant to hurt. Sometimes he would get the aggressor

to turn the hostility away from a particular member and direct it to the group as a whole or to him. For example, he might say to the offender, "How come I [or 'this lousy group'] have not helped you to express your fury at Mary without hurting her?"

What puzzled and shocked me was that Spotnitz would at times attack a group member. For the most part, the attacked person demonstrated pleasure in the assault, which was then subjected to analysis. I discovered that some people who had lived a life of reproach and rejection welcomed criticism as a familiar way of relatedness. For example, when his books were published, Spotnitz gave one to each member of the group. He stopped in front of a woman and said, "You really don't deserve anything, but I'll give you one anyway." The woman cried as if she were hurt but talked about how she felt Spotnitz understood the pervasiveness and depth of her feelings of deprivation.

Occasionally Spotnitz would try to denigrate me in ways in which I had previously denigrated myself. In experiencing his use of the toxoid response, I, at first, crumbled and felt depressed. But in time I became able to defend myself and to retaliate, telling him to "shut up" with his toxoid response which, at times, elicited a faint smile of satisfaction from him.

I recall an incident when a woman came to a session inebriated. After the group tried its hand at managing her provocativeness, Spotnitz got up from his chair and disappeared for several moments. When he returned, he handed the drunken woman a glass of honey and directed her to drink it. This seemed to me a nurturing act, rather than gratification of the patient, and it reminded me of Sechehaye's treatment of her regressed patients. On the other hand, Spotnitz, who seemed challenged and exasperated by this patient, periodically engaged in an interpretive exploration of her self-destructive behavior. In a later incident, when it was revealed that the woman had sent reams of letters to Spotnitz, the group agreed that Spotnitz should return the letters to her. Spotnitz left the room and returned with a very large carton of her papers.

Spotnitz employed his unusual interventions only after the person had been in treatment for a considerable time. He provided an important caveat in regard to forming an intervention, warning that the analyst must predict the patient's response to his interventions. Over time, I perceived that he functioned not only out of his theoretical system, but also out of the unique theory he fashioned for each patient. I conclude that following any cookbook formulation can be ineffective, if not dangerous, without a firm understanding of the patient and of the unique transferences, countertransferences, and resistances associated with the case.

Spotnitz (1976) wrote about an incident involving my interaction with the group at the time of my father's death. Spotnitz and the group were impressed that I left my father's wake and traveled several hours to attend a group session. It was a very emotional meeting wherein I was able to verbalize, without censorship, my feelings about my father. I recounted a central memory about my father who, sensing that his fishing days were over, gave me his fishing equipment and in particular a tackle box labeled "Old Pal." Spotnitz believed my release of affect was a critical event that allowed the group to become more emotionally expressive. When I first read the article and saw the reference to Old Pal, I was stunned and pleased to have done something for the group, at the same time, gaining Spotnitz's approval. In re-reading it, I re-experienced some of the old feelings and was pleased that the pseudonym he gave me was Henry, the name of his eldest son.

Spotnitz not only engaged in individual analysis in the group, but also analyzed the group as a whole—a much more difficult endeavor. On a fairly regular basis he asked group members, "What's going on with the group today?" Or toward the end of a group he asked skilled group therapists, "What went on today?" I think these questions were his way of analyzing the group process, i.e., "consultation with the group."

An important emotional facet of the group process was the range of emotions that were evinced. I cannot omit the humor, wit, and sometimes hilarity that characterized parts of the sessions. There were several witty people who contributed to the "fun" atmosphere. And as I recall, Spotnitz frequently had a twinkle in his eyes, ready to stir up mischief. If he did not intend to be humorous, he certainly enjoyed the humor in the room. I (Marshall, 2004) have discussed the role of humor in psychotherapy based largely on my experience with Spotnitz. Although he used humor to join and mirror resistances, some of his more powerful interventions evoked laughter. I believe that when a patient and therapist spontaneously laugh, defenses are melting and the unconscious is emerging.

Continuing Individual Analysis

Throughout the group era, I remained in individual treatment with Spotnitz on a once to twice a week basis. During this journey I continued to study him, his techniques, and his rationales. We analyzed the fact that my examination of his work and our interaction sometimes constituted a resistance to my own analysis. While writing this paper, I

am still pondering this question. Perhaps I have accepted a tradeoff. That is, I have been willing to sacrifice deeper self-awareness for an understanding of how Spotnitz worked. However, over the course of 50 years of collaborative work, I believe I have had a good analysis and have acquired a fair knowledge of Spotnitz's therapeutic approach.

I have written considerably about Spotnitz's work, particularly articles comparing him to Kohut (Marshall, 1998) and Ferenczi (Marshall, 2000) on a personal and professional level. Whenever I gave him a manuscript, he thanked me for it. Whenever I asked for a critique, he answered with a positive generalization that indicated he was not about to reply to any of my questions. When I requested endorsements of my books, he asked me to write the review, which he approved without changes. I was puzzled and annoyed by his carte blanche approval of my efforts. When he returned a manuscript with the word "superior" written across the top, I never knew if he had read the material nor was I privy to his opinion. I was particularly pleased, however, when I saw the number of references he made to my work in his revision of *Modern Psychoanalysis of the Schizophrenic Patient* (Spotnitz, 1985). Over time, I came to believe his inscription in that book: "To Bob Marshall with much affection! Hyman Spotnitz."

At some point in time, we agreed to twice-weekly sessions in addition to a supervisory group and a therapy group, each of which met on a bi-weekly basis. These sessions were an amalgam of analysis and supervision. It seemed to me that neither Spotnitz nor I made any distinction between supervision and analysis. However, I do keep in mind that in a supervisory session, personal matters may be a resistance to supervision, and in an analytic session, supervisory problems may be a resistance to analysis.

I recall a critical incident that still reverberates within me. Shortly after I arrived for a session with Spotnitz, I remembered I had scheduled an appointment for a patient at about the same time. Since I had just moved my office, I did not know the doorman's telephone number. I was very distressed by my error and expected that Spotnitz would analyze my neglect. Instead, he suggested that we try to find the telephone number of the office building and inform the doorman that I would be late. I recall the focused calm and resourcefulness with which he set about finding the number. I asked why he helped me contact the doorman rather than analyze the situation. He explained, "You can't analyze a traumatized patient." We then proceeded to analyze the situation at great length. His calm demeanor was antithetical to the way I believed my father would have handled the situation. An immediate analysis of the incident would have meant a paternal scolding for a deficiency.

However, Spotnitz's response was aimed at resolving my fears and addressing my immediate need to act like a professional to the patient. Had I evoked an anaclitic countertransference? Was this an example of an "emotionally corrective experience"?

In writing this account it seems to me that I am citing incidents that to me are deviations from what Spotnitz has written and from what was taught to me by some supervisors. The deviations seem more in line with many of the practices of Freud, Ferenczi, and Kohut as well as Searles and Whitaker. Perhaps one can appeal to Spotnitz's pragmatism, i.e., do whatever works. It seems to me that Spotnitz created a balance between adhering to generally accepted canons of orthodoxy and completely personalizing his clinical work with patients. In Ferenczi's terms, he operated from the principle of elasticity. When I asked him what books he read, he replied, "I read everything." When I complimented him on his innovations, his response was, "I stand on Freud's shoulders. I am more of an integrator than an innovator."

I have begun to think that Spotnitz was influenced by the Hungarian school of psychoanalysis more than has been noted. Evidence for this point of view comes from the fact that Spotnitz's analyst, Lillian Delger Powers, was in control analysis with Sandor Ferenczi during the six months that Ferenczi visited America; Spotnitz was in analysis with Powers at that time. Sandor Lorand and Sandor Rado had supervised Spotnitz during his training at the New York Psychoanalytic Institute. Moreover, one can discern some similarities between Franz Alexander's "corrective emotional experience" and Spotnitz's anaclitic countertransference. Lorand, Rado, and Alexander were associates of Ferenczi in Budapest.

The Large Group Era

In the late 1980s, Spotnitz moved into an office that accommodated large groups. Overnight and with no warning that I recall, the groups swelled to 30–40 members. Apparently, he combined some of his small groups, which consisted of about 10 people, and opened his training and therapy groups to a long waiting list. I was outraged at this shift and seriously thought of leaving at least one group. Spotnitz seemed to weather the storm, perhaps propelled by the idea that he and modern psychoanalysis were more accessible to a wider audience, not restricted by the size of his smaller office.

An interesting situation occurred that still puzzles me. A woman who had been in analysis for quite a while reported that her husband, who

also had been in treatment with Spotnitz, was in a heightened state of anxiety because one of his plays was to open in an off-Broadway theatre. Her concern about her husband's depression if the play was not well received induced the group to attend the play's opening night. Spotnitz did not seem to have any objection to the group's action, and I felt a great deal of group cohesion. Spotnitz did not attend, but a majority of the group did. What the group's action accomplished and what Spotnitz was up to in colluding with this massive group acting out still mystifies me.

A major disruption occurred in our training and therapy group when a senior member vigorously objected to the introduction of some of his students and analysts to the group and threatened to quit. The amount of turmoil and hostility generated seemed too much for Spotnitz. At this point there was a discussion of how much aggression and assault a therapist can take, and Spotnitz agreed that the therapist must protect himself against abuse. As I recall, in the face of the dilemma posed by the senior member to whom Spotnitz was attached, Spotnitz disbanded the group. His decision was a great disappointment to me, yet it taught me that Spotnitz had personal limits and propelled me to examine my own personal limits in being able to handle difficult situations analytically. During this period, I became convinced that in order to remain emotionally and physically healthy while working one must be in a therapeutic and/or supervisory relationship, be it individual or group.

Another type of deviation occurred when it was decided at two different times to professionally videotape group sessions. Although it was an interruption to group therapy, I went along with the idea because I realized that the tapes would have public relations value and contribute to the archives of modern psychoanalysis.

The large group was another experiment for Spotnitz that I believe had moderate supervisory and limited therapeutic value. Yet the large groups did have the virtue of exposing people to the way Spotnitz worked.

The Aftermath

After terminating his groups and closing his office in the late 1990s, Spotnitz retired to individual phone therapy. I chose to continue with him on a once a week basis on a free-ranging therapy/supervision basis. Lying on my own couch, I talked to him about health issues, family concerns, and patient problems. Over time, his startling and brilliant interventions came less often, and the laughter and ludicrousness

diminished. He began to rely more on familiar phrases. It was as if he were distilling all of his years of clinical experience into an increasingly concentrated, powerful elixir. In a way he seemed to become more classical in his approach. On the other hand, he became more self-disclosing, telling me snippets about his health, advising about nutrition (garlic and lecithin), and revealing some of past training experiences especially with Rado, Lorand, Nunberg, and Federn. He indicated that Rado gave him leeway. But others were authoritarian, and when he followed their direction, they "lost me all my patients."

At one moment he would be distant and neutral; in the next we might be chatting as friends and colleagues, swapping stories and discussing our health. For example, for years I had been suffering from undiagnosed restless legs syndrome. My research and discussions with colleagues finally helped me formulate the diagnosis. After I presented the evidence to Spotnitz, he started a session with, "Do you know who has restless legs syndrome? I do," and thanked me for the information I had given him. I chided him about all the time and money I had spent trying to analyze the ailment. He contributed no more information nor did I inquire. Was he joining and mirroring my resistance? Yes. Were we taking a few moments off to chat and have a pleasant time? Yes.

Sometimes I had the idea that Spotnitz might have fallen asleep or that he was in reverie. I found these states intolerable and objected when I thought he was not with me. He handled my objections in various ways. He might ask me what objections I had to his sleeping, or he might deny that he was sleeping and indicate he had been following me. I did learn that some of his reverie states consisted of his studying his countertransference reactions. At other times, however, he was vigorous and seemed to be enjoying our sessions.

Conclusion

In order to demonstrate how Spotnitz worked, it has been my intention to communicate more about him than about me. I learned from Spotnitz to stay out of the patient's way during productive periods, and I hope that I have not put too much of myself between Spotnitz and you, the reader.

In part, my writing about my experience with Spotnitz is a continuation of my analysis with him. Many of the old feelings emerged, and some new ones developed as I wrote. This is an essential part of the writing cure that Spotnitz frequently advocated, and it is no mean companion to the talking cure. I have visited my grief in not being able to

work with him as in the past, but I have re-experienced my deep satisfaction in having worked with a wise man of great stature.

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