

Short Communication





The boundaries of the clinic in the practice of online psychoanalysis: beyond distances, the possible and the impossible?

Abstract

The contemporary rhythms of life and constant interaction with technology had favored the emergence of new resources for psychoanalytic work at a distance. However, the COVID-19 pandemic forced the speed of some changes to accelerate: resources used for teaching or exceptional cases, suddenly become overcrowded in the face of restrictions on physical contact. This leads to think the clinic and its borders, starting from a different configuration of the analytical field, being conditioned the communications by ways that do not cover all forms of the face-to-face, having to consider new criteria and limitations for this modality of work, which could represent a different analytical situation, marked in many cases by the cross-cultural and the migrations of patients and analysts.

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Daniel Castillo Soto

Associated member of the Uruguayan Psychoanalytical Association (APU), Uruguay

Correspondence: Daniel Castillo Soto, Associated member of the Uruguayan Psychoanalytical Association (APU), Member of FEPAL and IPA, Uruguay, Email danielcastillo.psico.u@gmail.com

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Introduction

To begin my presentation, I must mention that at the time when I originally considered writing this work, at the beginning of 2020, I did not imagine the validity and massification so abrupt and necessary that the exercise of online psychoanalysis could reach, in our context. Suddenly and transcending the borders of the imaginable, last March (2020) we were surprised by a pandemic, which, although it has been handled in different ways in our countries, has had the common factor of physical distancing and with it the urgent reinvention and readaptation of the everyday, including human forms of communication, from the most private to the institutional; from the familiar to the corporate.

This is how in few weeks, we suddenly began to have remote analysis and supervision, seminars on virtual platforms, teleworking, scientific meetings of psychoanalytic organizations by video calls and an endless number of unexpected movements that have been thought out on the fly, in order to be able to sustain a continuity that would allow us to continue working, finding and thinking," despite the non-presence. This situation has directly touched the psychoanalytic world and has forced to confront restrictions and resistances both personal and institutional, at a speed that would not have been imagined even in the most optimistic of dreams of an avant-garde psychoanalyst of these times.

We have witnessed the fall of walls and prejudices: at the private level, analyst and patient have had to begin to meet in a new modality, different from the office, and have had to quickly couple to a space on which they could have some reservations more or less marked, depending on each case, and that even some would have preferred not to choose; however, this way of working has emerged as an alternative to continue treatments that otherwise would have had to be suspended for several months, without knowing when they could be resumed. At the institutional level, travel requirements for condensed analysis, as well as the obligation of supervisions and face-to-face seminars that some institutes firmly supported, as a result of instructions from the IPA, disappear immediately, when before such a possibility was denied even in cases of justified need. The same fact of the format of the FEPAL Congress that was also forced to change to a virtual modality; gone are the trips, hotel expenses, food and tourism that

we allowed ourselves to meet again in an event with the warmth and proximity of the meeting between colleagues. New forms of relationship and communication, perhaps different, but no less valid than the face-to-face.

This context leads us to consider a novel psychoanalysis, but not without criteria and a framework with its own characteristics, but always necessary to enable its operation, and leads us to think almost obligatorily about something that was already being implemented: the psychoanalytic practice at distance and in line, with its variants, possibilities, limitations and particularities.

Thinking the clinic: field and borders

The notion of a two-man dynamic field introduced by Willy and Madelaine Baranger¹ in the early 1960s, in the midst of a rioplatense psychoanalysis of notorious Kleinian influence, would mark a novel milestone in the theorization of the time and take into account both the phenomena observed by them in their previous work with groups, as the productions of previous years on countertransference. The approach would be that of a context of its own, given by the same analytical situation, which would involve analyst and analyzed in a relationship of two linked and complementary people, who cannot conceive of each other without the other, as well as the encounter around a shared unconscious fantasy; it is a field of the couple where this production does not belong to the analyzed but to both and before which, the task would not only be to take record of it, but to understand it as something that arises from the interaction in the session.

This fantasy would have to be allowed and recognized by the analyst, although keeping a certain distance, in a kind of unfolding that would give him a second look at himself and the analyzed (that is, the field). By taking into account this fantasy, the analyst would intervene on the main or secondary point of urgency, from an unconscious place, through a set of projective and introjection identifications, given within an own environment in which important factors such as spatiality, temporality, the functional, an always triangular character (due to the presence of the absent third party) and an essential ambiguity without which the analysis would not exist.^{1,2} Just as the temporal structure, for example, would be given by the agreed duration and frequency of the sessions, when thinking about





the dynamic field, the spatial structure, was defined by the place where the sessions took place, that is, the analyst's office, with all the variants and modifications that it could suffer affecting the same field (even way in which the enclosure was arranged, eventual moves and other changes). It was a psychoanalysis conceived for face-to-face work theoretically and technically; by its time, moreover, it was the only one possible.

Beyond some criticisms that point to this conceptualization as symmetrical, although the authors defend the asymmetrical character of the field (since the analyst is involved in a different way than the one analyzed), this Latin American contribution is of great importance in the understanding of the transferential- countertransferential interplay of a session. The analysis, therefore, is a situation of two people, in which absent third parties are always present and what arises in the session is creation of both the patient and the analyst. However, the openness to new forms of work, beyond the conventional session in the office, leads us to question whether it is possible to experience the same field phenomenon despite the absence of bodies in the same physical space and with a very different configuration of the spatial structure. And why wouldn't it be possible even with its variations? At the end of the day, the analysis takes place in the exchange between analyst and analyzed, not strictly in the office, although this is an environment that facilitates analytical dialogue.

In an online session, analyst and analyzed meet, greet each other and work from different geographic locations. The setting is framed in different dimensions, but it is still fundamental to be able to sustain the analytical work. The boundaries of distance are crossed, however, we find other barriers typical of this type of work, such as the absence of body registration, less availability of nonverbal material and a partial image at best, since even using the camera, we can see only up to the torso of the other; on some occasions, connectivity difficulties or problems arise on the part of our interlocutor to get places and moments with enough privacy to enter their internal world. These are vicissitudes that derive from the absence of the common space given by the office. Other boundaries, perhaps given by the way in which transfer, countertransference and resistance can be established in this mode of work, will they have different ways when dealing with a different analytical situation?

Some criteria and limitations

Some time ago, the restrictions established by Freud,³ when he set out the criteria of analyzability in his writing The Psychoanalytic Method of Freud, lost strict force. The developments of modern psychoanalysis, in the middle of the last century, allowed us to enter the field of psychoanalytic treatment of psychoses, narcissistic disorders and enabled the emergence and development of psychoanalytic psychotherapies to address cases that it would not have been possible to face from the classical psychoanalysis, perhaps due to economic limitations, time constraints, the need to provide care in hospital contexts, or by factors specific to the patient that did not make him a candidate for a couch analysis four or five times a week. With or without a pandemic, the need to face this type of treatment remotely also implies variants in the criteria that we must manage to work psychoanalytically, taking into account the necessary limits to avoid falling into an omnipotent procedure on our part.

Privacy and adequate connectivity that allows you to see, but above all to listen clearly to the analyzed, are very important aspects to consider. Remote work, with a different configuration of the spatial structure, makes it necessary to include these elements as part of the framing; even enunciate them at the time of starting treatment with a patient that so far we do not know. In the office it would be obvious that we offer a space with the right conditions to be able to work, but at a distance, we have to help build a favorable situation. Likewise, the presence or absence of the camera in the call can be relative: if the patient works face to face in face-to-face mode, it usually maintains the same form during the video call. However, having the session only with voice, without making use of the video, should not be an impediment, rather it could encourage a greater association, such as if the patient were on the couch from where he does not see the analyst. Some colleagues report greater tiredness from attending through electronic devices, which may have to do with holding one's gaze on the screen or seeing oneself in the camera-mirror thrown by the video call device. This way of working would also favor the process of identification and symmetry⁴ and little ease and spontaneity on the part of the patient when the work is beginning, so there are analysts who prefer to work only with the use of audio.

Remote psychoanalysis was in its epistolary origins and in the most current times began to be by telephone. I have noticed as a common practice among analysts, that when the analysis took place on a couch, the call was usually initiated with a camera and then worked only with audio, thus seeking to combine presence and free association. Perhaps it is an artifice, as well as the couch itself, that facilitates working conditions, but often this choice is subject to the preferences of the analytical couple. Some patients work in a more spontaneous way in person and find it difficult to adapt to a temporary change of modality at a distance, but how many times are these resistances not their own and we transmit them to those analyzed? How many times is it not also due to our predilection for face-to-face or our own distrust of working by virtual means? Does it make you uncomfortable to stop being analysts in the office and be analysts online?

Cases should be considered when remote treatment would be contraindicated or simply would not work effectively. For example, decompensated patients who go through severe depressive conditions, or in acute psychotic episodes, would have to be seen in person. These cases require the close assistance of the psychiatrist, before they can be attended online. If it is a psychotic structure, although it is stabilized, it would also be more complicated to work with these patients and perhaps in the case of some other patients with narcissistic pathologies, nor is working remotely the appropriate means for their treatment, remembering that it may be better than not offering care, but that sometimes an additional support is necessary and that, before individuals with severe alterations, this method can be little continent. However, this additional support could be offered with a greater number of weekly sessions, close family accompaniment, or by liaison with a psychiatrist if medication is required.

Ricardo Carlino,⁵ author of the book Psychoanalysis at a Distance mentions that in principle only this modality is possible for neurotic adults and some adolescents. It adds among the contraindications the work with children, to subjects who threaten to kill themselves (due to the need for face-to-face containment and possible hospitalization) and has expressly mentioned that it would not attend to a psychopathic patient by this means - taking into account the possibility that the sessions may be recorded for malicious purposes – highlighting that, in conditions of distrust and insecurity, the only thing necessary and possible to analyze is this environment not conducive to analysis.^{5,6} A similar position has been maintained by Lutenberg⁷ when referring exclusively to telephone psychoanalytic treatment, which he has considered experimental and to which he prefers to conduct at least three face-to-face interviews at the beginning. Among the contraindications, in addition to those mentioned, it adds severe pictures of addictions and highlights that, in cases of psychosomatic patients, it is important to have a clinician in the place of residence, as well as when there is a need for pharmacological support, citing the case of bordering structures and the decompensations of mental emptiness. We might think that this type of remote treatment requires a certain ego strength and a psychic structuring that not everyone can have.

A cross-cultural psychoanalysis

One of the peculiarities of remote analysis is that it is increasingly cross-cultural. To this is added, that except for the pandemic situation that has limited life and human contact to as we were used to, almost always the remote resource has been used because one of the two members of the analytical couple cannot be present in the office where the duo would usually meet and the reasons almost always refer to transfers and migrations, sometimes of the analyzed, sometimes of the analyst, and sometimes of both.

"To leave is to die a little, it is to die to what one loves" said the poet.8 Certainly migrating is more than just moving from one place to another, or changing the place to live, since whoever does so is exposed to an extremely complex phenomenon that puts part of the emotional balance at stake.9 In the words of Carlisky and Kijak,10 migration is a phenomenon of such magnitude that it generates transient or permanent changes in the psyche. Whatever the causes of these decisions, online psychoanalysis makes it possible to transcend borders and continue treatments that at other times would have been destined to be interrupted, or at best, exposed to premature termination. It is currently possible that an analyst born in the Río de la Plata, who has lived much of his life in another Latin American country, but who has recently emigrated to North America, can attend in high frequency to an analyzed born in a different country and residing in Europe, even if they had not met before in person. Cross-cultural factors come into play, different accents, some expressions of common use and others different, but they are possible borders to overcome, if the effects that can be generated in the field are taken into account, they are taken into account and worked on, as another element of the analysis, as it is the connection via the Internet.

Different ways of manifesting transference, countertransference and resistance in a situation that may be different from the usual, but equally facilitating an analytical process. At the time, the effects of migration and exile were studied¹¹ and it has also been considered as a factor that affects the field, the fact that, for example, analyst and patient meet and work in person, being in both cases migrants or children of immigrants, even belonging to the same cultural-religious community; one could say: "traces coming from parents and ancestors, entering into resonance". ¹⁰ It is possible that with technological advances we must look beyond our more traditional procedure, taking

into account the possibility of meeting others, different and similar at the same time, as psychoanalysis has done since its origins, but this time considering the same factor of remote sessions and greater cross-cultural diversity. Perhaps instituting it as part of everyday practice takes time, but above all openness and a change of attitude in everyone as psychoanalysts.

Modality

Free Works Axis: Culturalities Transversal line: Clinic.

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Conflicts of interest

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