

***Power games: Influence, persuasion, and indoctrination in psychotherapy training*, Richard Raubolt (Ed.), Other Books, New York, 2006, 352pp.**

What we need...is a new orientation of our training system which must aim less at establishing a new and firm super-ego but more at enabling the candidate to free himself and to build up a strong ego which shall be both critical and liberal at the same time (Balint, 1948, p. 170)

In his edited book, *Power games: Influence, persuasion, and indoctrination in psychotherapy training*, Richard Raubolt provides the reader with a window to therapists' subjectivity through their emotionally charged interactions in different training programs. The book is organized into three sections: Personal Reflections, Theoretical and Technical Considerations, and Supervisory Alternatives.

Charles B. Strozier focuses on two stories in his Introduction. First, he describes Robert Jay Lifton's personal experience at the Boston Psychoanalytic Institute in the late 1950s. Strozier quotes the many questions Lifton raised. One of the questions is relating to the structural problem of institutes that requires many roles that trainees (patient, student, and candidate) as well as analysts (teacher, supervisor) carry. The second story is Strozier's experience in the late 1970s at the Chicago Institute for Psychoanalysis in which two camps, the Freudian and Kohutian, divided the institute. Strozier, who moved to Kohut's camp, acknowledges that even though the group was cultic in many ways he appreciated the "level-headed and professional" Kohut. Strozier emphasizes the creativity and hope that psychoanalysis can generate.

### **SECTION I: SUPERVISORY EXPERIENCES: PERSONAL REFLECTIONS**

In chapter 1, Annette Richard describes her professional journey, focusing on her traumatic experience in Center for Feeling Therapy in Los Angeles, a training that led to "indoctrination, fanaticism, and abuse of power." Her struggle to reveal the painful experience eventually resulted in disclosing parts of her personal life that affected her professional choices and the breakdown she had suffered. Theoretical arguments accompany her exploration of her experience of "extreme submission to abusive treatment" towards "desired truthful and authentic free living."

Linda Raubolt offers a unique view of her journey through her husband, Richard Raubolt's, painful struggle during his group training. Both of them were traumatized in different ways: they both expected to experience tenderness and caring in the hands of the faculty members but instead were treated as their extension, what Ferenczi called the Confusion of tongues (1933). Linda Raubolt at one point realized that what was considered a recommended group training program turned out to be a cultic and

hypocritical group of clinicians. Unfortunately, for a long time there was no one to validate this realization. It was interesting that Richard Raubolt joined his wife in this realization during the Ferenczi Conference in Sao Paulo, a breaking point toward his recovery. Richard Raubolt, in Chapter 3, brings us his own story and the choices he made. Like the previous authors, Richard reveals his heart-wrenching personal background that led to his involvement with Bar Levav Education Association, cultic training.

In Chapter 4, entitled "Narcissistic Authoritarianism in Psychoanalysis," Daniel Shaw writes about two authoritarian supervisory moments "good and bad." He advocates for the supervisor as well as the supervisee to negotiate and regulate their narcissistic vulnerability in order to deal with shame and imperfection.

Following Shaw, in Chapter 5, Livingston discusses this section and suggests that charisma invites vulnerable moments that are windows for change. He discusses emotional moments with two significant men in his life, his father and his analyst, supporting his arguments.

## SECTION II: THEORETICAL AND TECHNICAL CONSIDERATIONS

In Chapter 6, basing his discussion on Langs' (1978) description, the three modes of communication, Theodore Dorpat argues that clinicians use unconsciously covert methods of interpersonal control in order to create a pathological symbiotic mode of interacting through assuming "the right to control the conditions and content of the dialogue" with their patients.

In Chapter 7, Patrick B. Kavanaugh focuses on historical and philosophical views of ideology and power in psychoanalytic education. Kavanaugh believes that psychoanalytic education, following the Berlin Institute model of education since 1920, "became institute-centered as opposed student-centered" and infantilizing the candidates. He points out certain institutional theoretical and philosophical assumptions of positivist view that interweave ideology and power.

In Chapter 8, Michael Larivière argues that Lacan suggested that the International Psychoanalytical Association founded by Freud paradoxically survived preserving his theory and method by misinterpretations and even distortions, especially in America.

Richard Raubolt begins his theoretical exploration by defining the concept of indoctrination in psychotherapy training programs in Chapter 9. He examines the essential components of indoctrination such as cycling of trauma and retraumatization, theft of language, and dichotomous and stereotypical thinking.

Molyn Leszcz, in Chapter 10, discusses chapters in section II. As these theoretical chapters may induce hopelessness in the reader about

psychotherapy trainings, he tried to balance this view by suggesting that these chapters have the positive potential of learning about the influence, persuasion, and indoctrination in psychotherapy training so this awareness will ensure that our trainings will meet our objectives of “promoting growth, learning, and autonomy.”

### SECTION III: SUPERVISORY ALTERNATIVES

Paula B. Fuqua opens this section, in Chapter 11, sharing with us the change of her point of view from a classical Kohutian perspective to an intersubjective one in which supervision is perceived as a co-created mutual situation, although not symmetrical. Fuqua discusses difficult moments as a supervisor. Her genuine openness in sharing with us her concerns, conflicts, and multiple questions about working with her supervisee led to her choices in resolving the impasse.

Conrad Lecomte, in Chapter 12, points out the different focuses and recommendations of training and supervision approaches: (1) knowledge of the patient’s characteristics; (2) clarification of the parallel between the therapist–patient relationship and that of the therapist–supervisor; and (3) exploration of the therapist’s subjectivity. Lecomte, however, comments that many argue that supervision should avoid discussion of the supervisee’s personality. Lecomte suggests criteria of a thorough integrated supervisory model and provides us with lively supervisory vignettes.

In Chapter 13, Joan E. Sarnat creatively offers us a contemporary view of supervision and discusses the origins of the relational approach’s point of view in terms of authority in supervision. Sarnat discusses on how relational approach differentiates from other supervisory models. Her clinical illustrations focus on how relational view of power and authority shapes the supervisory process. She follows Aron’s (1996) argument in terms of differentiating symmetry from mutuality. Despite the asymmetries that include the supervisor’s responsibility to manage the boundaries within the supervisory situation, modeling ethical practice, and evaluating the supervisee’s clinical work, she argues for mutuality. This mutuality involves the acknowledgment that the supervisee as well as the supervisor struggle with unconscious conflicts. Thus, she believes, using this model, the supervisor’s power is less abused.

Arthur A. Gray, in Chapter 14, discusses a format of creating efficient group supervision, focusing on a six-step model. A description of these steps is accompanied by clinical supervisory examples. It is unclear what Gray’s view of power and authority within the supervisory situation is.

I read and reread Gershon J. Molad and Judith Vida’s interesting Chapter 15 in order to understand the multiple meanings of their

correspondence in terms the move “from Identification-Relations (of power) to Introjection-Relations (of Love): The case of identification with the aggressor.” They offer the concept of “autobiographical dialogue” that perceives as their personal story of what they say, do, and write on theory or their clinical practice. Through their correspondence, both of the authors work through concepts such as introjection and identification with the aggressor.

Irene Harwood, in Chapter 16, discusses the five chapters of section III on supervision. She is open and honest in discussing her view. She agrees with the authors and reinforces their arguments in addition to raising questions about the authors’ clinical illustrations, pointing out definitions that are missing, etc.

In Chapter 17, Richard Raubolt concludes and reflects on his long journey of writing his edited book, and the variety of experiences of its authors. He comes up with his recommendations of creating trainings through instructional/interactional processes.

Throughout the 17 chapters, I felt respect and appreciation for the authors. Their willingness to open up their experiences in psychotherapy/psychoanalytic training helps provide therapists with the companionship they need in difficult moments within their training programs. Different authors explore their dilemmas and their complex understanding of their theoretical, personal, and clinical decisions, which they share with the readers with honesty and sensitivity.

In summarizing with personal notes, many authors of this book take many risks in exploring their personal experiences in their training, risks that most of us are unwilling to take. When writing my own book (Cohen, 2003) on the treatment of traumatized adolescents, I struggled with the question of how many of my feelings and how much of my personal life I was willing to share with the reader. Was it a question of concerns about the effect of my disclosure on my patients who may read the book, or was it concern for “being known”? I still do not have an answer. I remember asking my editor to omit two pages of my manuscript just prior to publication.

In their generosity, many authors of the book share with the readers, hopefully therapists, their own personal and professional background in order to help us understand the depth of their traumas, and their inner struggles with different training programs, and the journey they went through.

I am, however, debating with myself regarding the effect of Raubolt’s book on the authors’ patients who may read it. Will the authors’ self-disclosures disrupt the transitional space of their patients’ treatments as it makes concrete what ought to remain symbolic (Aron, 1996)? Do some of their

patients need to be given room to not know about their life? The authors' self-disclosure may interrupt these needs. It would be very useful to learn more about how patients react to their analyst's self-disclosure through the analyst's writings.

Finally, I recommend Raubolt's book for more thorough reading; a brief review is insufficient to understand the full meanings of the authors' presentations to the reader through their personal experiences and clinical illustrations.

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DOI:10.1057/palgrave.ajp.3350050