

The Interpretive Process in Jungian Analysis: Art and Technique



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Overview and Context

Interpretation expands symbolic possibilities by cultivating greater awareness of the *symbolic aspects of the analytic interaction*.

Creativity, Technique and Interpretation





Goals of the Seminar

- Differentiating between an interpretation and other non-interpretive interventions in therapy/analysis.
- Exploration of the origins of the interpretive process within the psychoanalytic world.
- Differentiating various levels of interpretation.
- Examining uses of language in interpretation.
 - Active language
 - Affective language

What Constitutes Technique?

- Beginning and terminating the analysis
- Establishing and maintaining the analytic frame
- Interpretation of the analytic interaction (including the analysis of the transference/countertransference)
- The analysis of defenses and resistance
- Interpretation of dreams

Interpretation and Technique

Certain principles of technique and especially systematic interpretative inventions remain at the core of all clinical psychotherapeutic and psychoanalytic work.

Steven Levy, 1990, p. viii

Why Interpretation Still Matters

Interpretation Matters

It is on the whole probable that we continually dream but that consciousness makes such a noise that we do not hear it.

C.G. Jung quoted in *The Psychology of C.G. Jung* by Jolande Jacobi, p. 73.

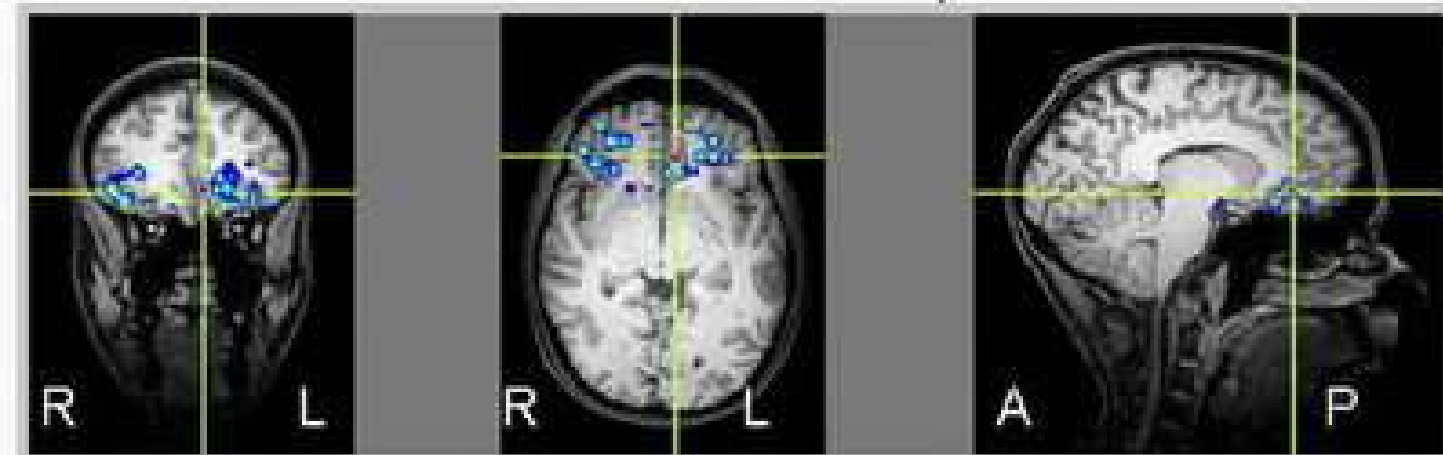
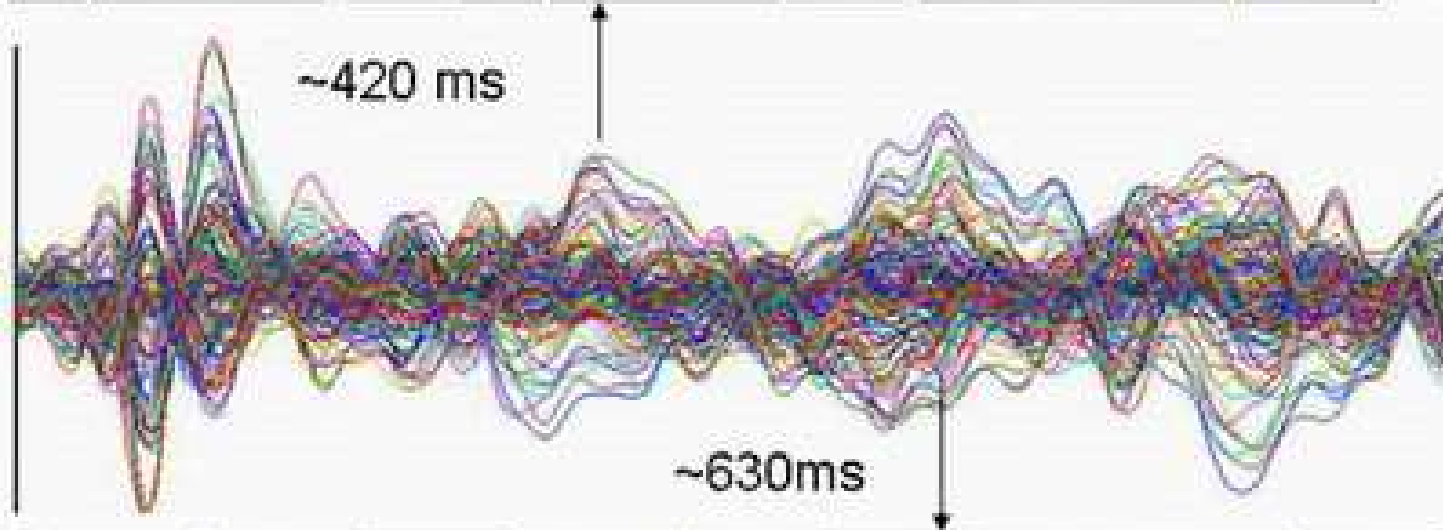
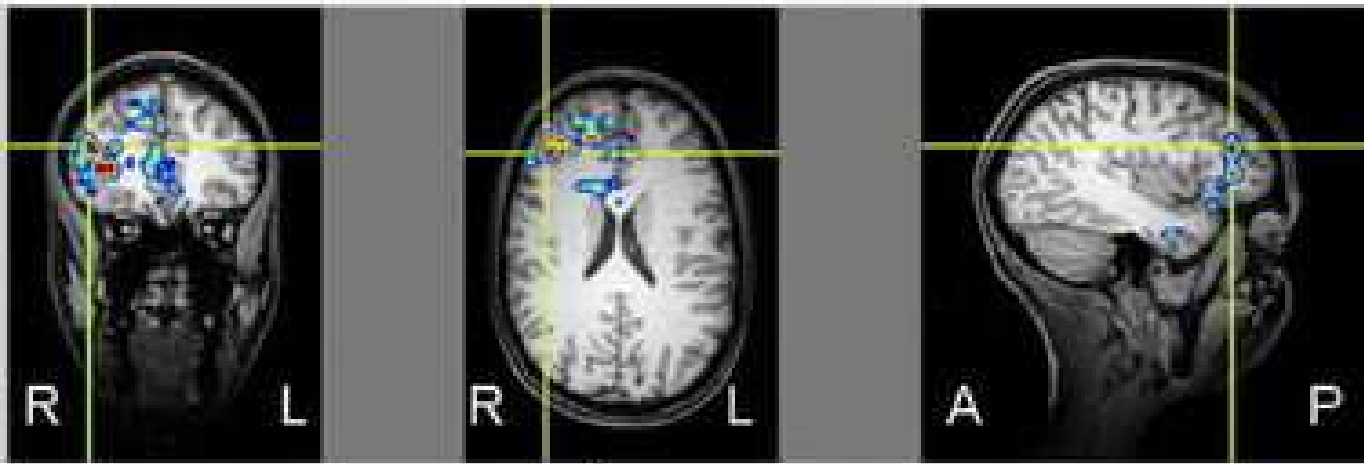
Interpretation Matters

“Dreaming the Analytic Session”

Thomas Ogden (2017)

Neuroscience, Metaphor, and Interpretation

Functional Shift Condition



Non-Metaphorical
Language
Response

Metaphorical
Language
Response



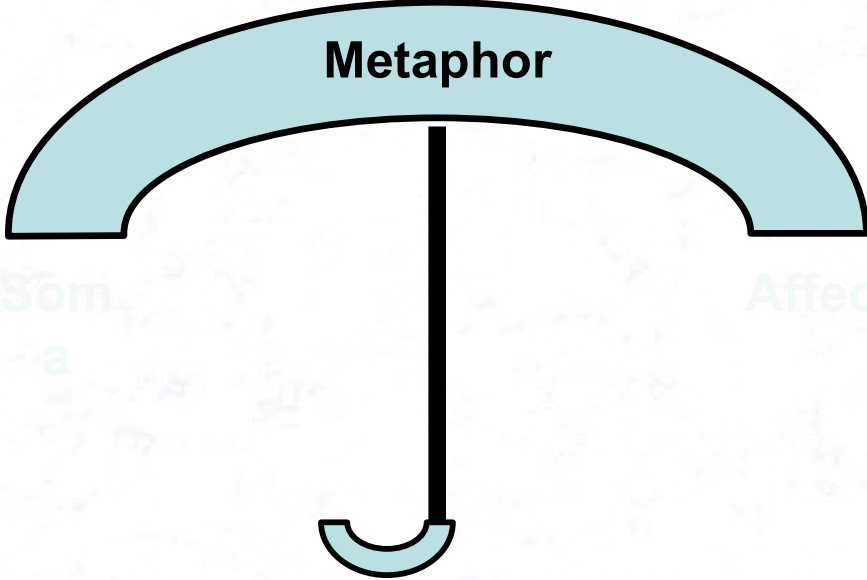
Green = regions of the brain activated by textural metaphors.

Yellow & Red = regions activated by sensory experience of textures visually and through touch

Metaphor - definition

A figure of speech in which a word or phrase literally denoting one kind of object or idea is used in place of another to suggest a likeness or analogy between them.

(Merriam-Webster)



- Myth
- Fairytales
- Religion
- Alchemy
- Film
- Literature
- Etc

*Metaphor is at the very
heart of interpretation.*

What is an Interpretation?

***Interpretation is an invitation
for the patient to see their
world in a new way.***

"If we are always arriving and departing, it is also true that we are eternally anchored. One's destination is never a place but rather a new way of looking at things."

Henry Miller, novelist

May my mind come alive today
To the invisible geography
That invites me to new frontiers,
To break the dead shell of yesterdays,
To risk being disturbed and changed.

John O'Donohue, poet



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Definition of Interpretation – Levy (1990, p. 4)

“Interpretation is the verbal expression of what is understood about the patient and his problems.”

Expansion of Levy Definition

Interpretation is the verbal expression of what is experienced with and understood about the patient's psychological situation, including the field constellated by the analytic dyad.

Michael Fordham – SAP London

- It connects together statements of the patient that have a common source unknown to the patient. So when the analyst tells the patient about the source he makes an inference that goes beyond the actual material at hand. (1978, p. 113)
- An interpretation is composed of that part of the patient's unconscious digested and thought about by the analyst. The result is then communicated to the patient in such a way as to give meaning to the patient's material. To do this it must have a clear structure and contain a verb. (1991, p. 209)

Supportive versus Interpretive Interventions

- Supportive techniques are aspects of therapeutic interaction which reinforce the patient's perception of the relationship as helpful, accepting, understanding, and supportive - *these are not intended to or expected to increase insight.*
- Even when utilizing supportive techniques there is still an absence of advice giving, suggestion, problem solving, etc., which are the domain of counseling situations – not analytic psychotherapy or analysis.
- Interpretations are specifically intended to increase insight, expand consciousness, and provide an experience of being known and understood.

Analytic versus Supportive

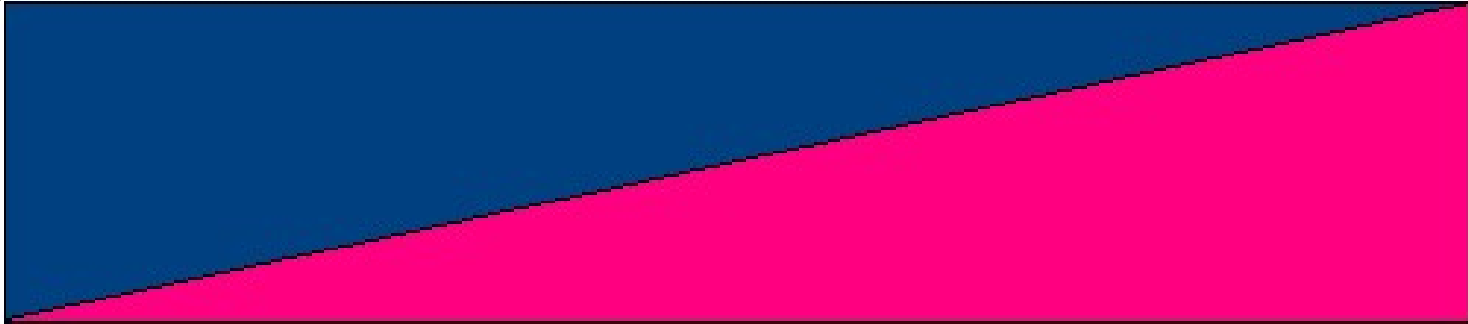
Psychoanalytic therapy is interpretive rather than suggestive. . . . Principally, the therapist helps through making interpretations . . . The warm relationship is the necessary context for the interpretive actions of the therapist, because interpretations necessarily involve some narcissistic affront to the patient.

Auld & Hyman, 1991, p. 19

Supportive - Analytic Continuum

Supportive

Analytic



Case Example

P: Oh, you remembered. (from supportive standpoint could have stopped here, or I could have said "Of course, I remembered" but it would not help him know anything about himself or how he utilizes me)

T: You seem surprised that I remembered.

P: I didn't mean any offense. I just meant that none of my therapists before have ever remembered what I've said from week to week.

T: I didn't think you were making a negative comment about me.

P: Good, because I wasn't. This therapy is really important to me.

T: I think you were telling me that you don't feel memorable so it surprises you that I could hold you in my mind.

P: (he grins somewhat sheepishly as though he has been caught doing something) Well I know that you see a lot of patients and it must be hard to keep all of this stuff straight.

T: You seem to be wondering whether you're important enough to me for me to remember you as an individual among the other people who come into my office.

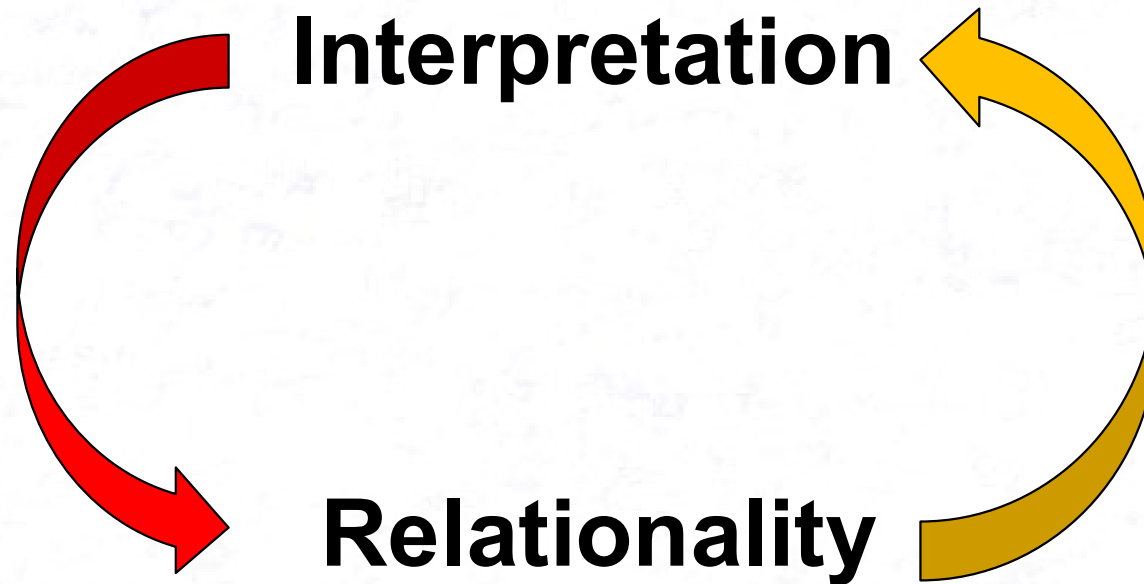
P: (becoming tearful) I know I'm important to you and its really important that I stay with this and finish therapy this time. I've gotten started and quit so many times. I can't do that again.

**Interpretation and
Jungian Psychology:
The Background**

Boston Change Process Study Group

- Utilizing research from infant observation, developmental studies, systems theory, attachment theory, neurosciences and clinical experience the BCPSG has proposed that there are only two primary “mutative phenomena” in analytic psychotherapies:
 - **Interpretation**
 - **Moments of Meeting**
 - Moments in the clinical setting which are implicit but which are affectively alive and experienced at the sensory-affective level rather than the explicit, declarative, “known level”.

Interpretation and Moments of Meeting (i.e. Relationality)



Goals of Freudian and Jungian Analysis

- **Freudian** - the resolution of psychic conflicts through the use of interpretation to promote affectively engaged insight which in turn leads to lasting structural change. Traditionally, this is largely seen as being accomplished through insight.
- **Jungian** - uses insight as a tool for increasing consciousness and out of consciousness then arises the possibility of individuation. Part of this process would include the de-potentialization of complexes which interfere with the individuation process.
- **General** – the promotion of psychic structural change brought about by means of interpretative interventions.

Freud on Interpretation

The Unconscious – 1915, p. 176

“To have heard something and experienced something are in their psychological nature two quite different things, even though the content of both is the same.”

James Strachey

Mutative Interpretation

“Every mutative interpretation must be emotionally *immediate*; the patient must experience it as something actual. Interpretations must always be directed to the *point of urgency*.”

The Nature of the Therapeutic Action of
Psychoanalysis, 1934, p. 149

James Strachey

Interpretation Process

- Interpretations should focus on the defense first before interpreting what is being defended against
- Interpretations need to be specific
- Interpretations should avoid theoretical explanations
- The analyst should give highest priority to transference interpretations because those are the experiences of greatest emotional urgency in any session – because the emotional object or focus (the analyst) is actually present.

Consciousness

“The purpose of human life is the creation of consciousness.”

Edward Edinger,
The Creation of Consciousness, p. 57

"Man's task is ... to become conscious of the contents that press upward from the unconscious...As far as we can discern the sole purpose of human existence is to kindle a light in the darkness of mere being.”

Jung, *MDR*, p. 326

Intention of Jungian Interpretation

- To create an opening in consciousness that permits unconscious contents to enter into awareness.
- Increase the tension of opposites between consciousness and the unconscious to facilitate the activation of the transcendent function which in turn generates symbols to foster the individuation process.
- To enable the patient to understand unconscious contents symbolically and assimilate those contents.

Interpretation in Kohutian Self Psychology

- Accepting
- Understanding
- Explaining

The Cycle of Interpretation

- ***Confrontational Observation***

A calling of attention to an act or utterance by the patient

- ***Inferential Clarification***

Combines confrontation with an identification, by the analyst, of a possible unconscious process.

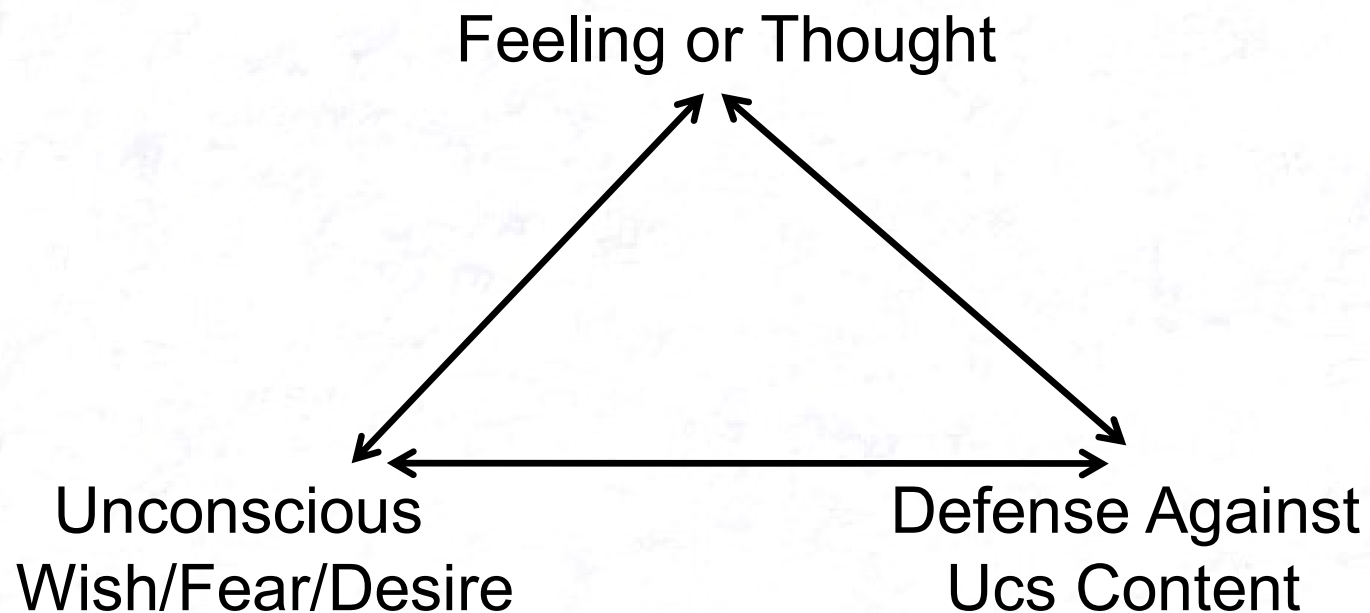
- ***Interpretation***

Gives meaning to events, feelings, or experiences which previously had no conscious meaning or for which the meaning was hidden. Essentially saying, "This is how I understand what you've said to me and how I understand how it relates to your interior world."

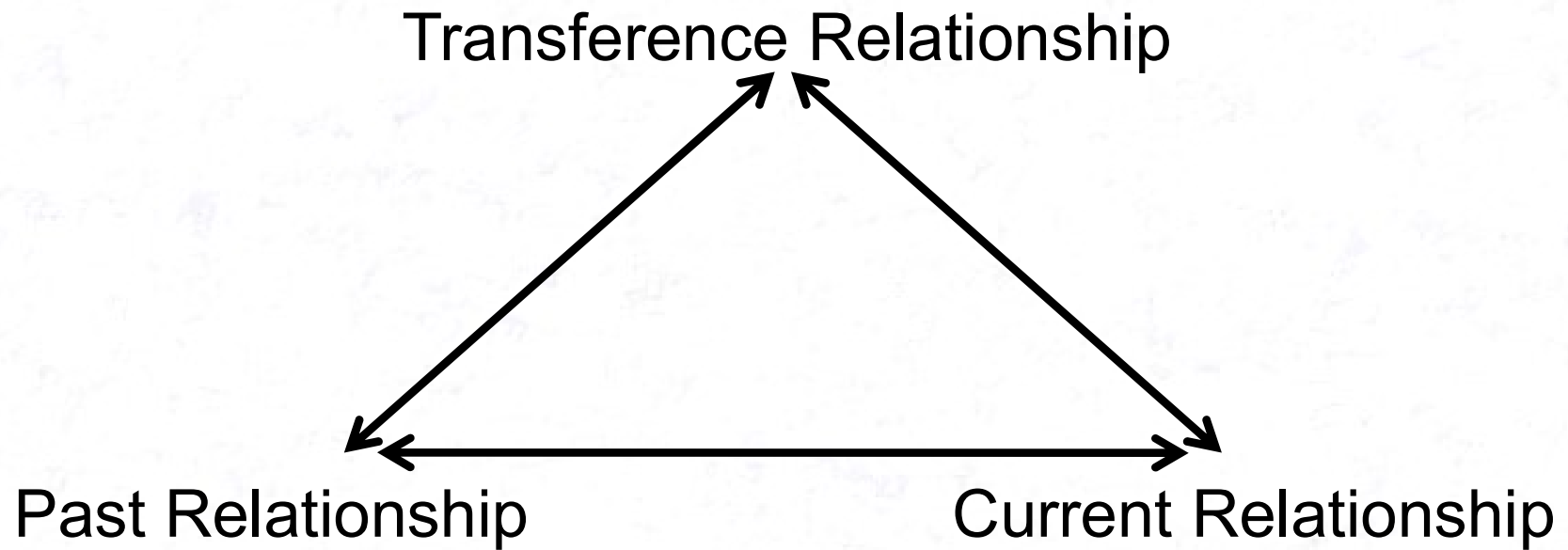
- ***Construction***

Is a pattern of interpretations, extending over time, which give a larger pattern of meaning to a patient's life. In Jungian terms this would be referred to as the creation or discovery of the personal myth.

Triangle of Conflict



Triangle of Relationship



Types of Interpretations

- Trial Interpretations
- Dream Interpretations
- Interpretation of Fantasies
- Interpretation of Behaviors (both public and private)
- Transference Interpretations
- Countertransference Interpretations
- Interpretations of Defenses
- Interpretations of Resistance
- Interpersonal Interpretation (i.e. objective level)
- Intrapsychic Interpretation
- Situational-Environmental
- Archetypal
- Termination

Definition of Defense

- In the traditional Freudian perspective, defense describes the ego's active struggle to protect against perceived dangers and limit.
- Newer psychoanalytic schools have modified or expanded this view to include other perspectives on the motivations and activities of defenses.
 - For example, in Self Psychology the defenses are seen as structures which protect the vulnerable self structure against further selfobject failures.

Definition of Resistance

- Resistance describes the tendency of the patient to interfere with the analytic process and defeat or slow the process of change (despite a conscious desire for change).
- It can be anything which obstructs awareness of unconscious processes and/or the development of the analytic relationship (i.e. resistance to the development of the transference).
- Resistance is the systematic use of defensive operations applied to the therapeutic situation.

Preparing for Interpretation

- ***Gathering Data*** - Listening, Observing, Feeling, Imagining, & Reverie
- ***Organizing Data*** with Knowledge of Patient, Theory and Archetypal Patterns
- ***Generating a Hypothesis*** in the Form of an Interpretation
- ***Return to Data Gathering***

Listening - Attending - Observing

- Verbal behavior (or lack of)
- Non-verbal behavior
- Emotional shifts
- Fantasies
- Slips of the tongue
- Dreams
- Alterations to the frame of the analysis
- Changes in the field of the session
- Shifts in physiology of the patient or analyst

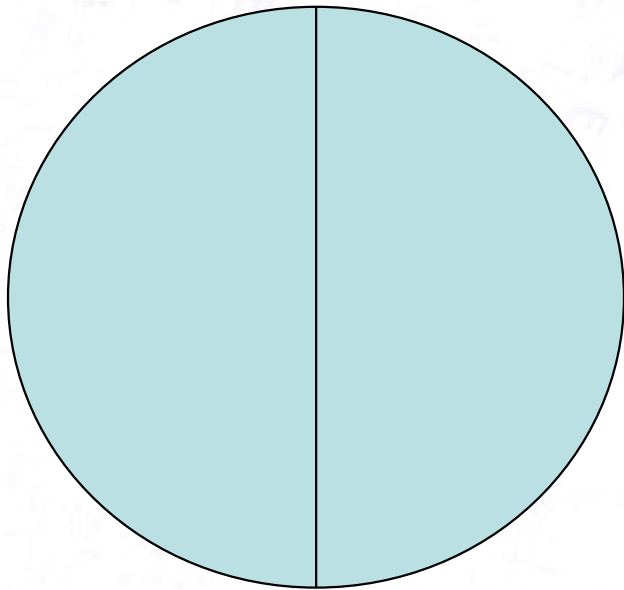
Listening - Attending - Observing

- Patient's perception of the therapist
- Recurring patterns of behavior, verbalization, or imagery
- Temporal contiguity of thoughts or events
- Analyst's reverie
- Basically, attempting to attend to the whole of the analyst's experience of the patient and themselves.

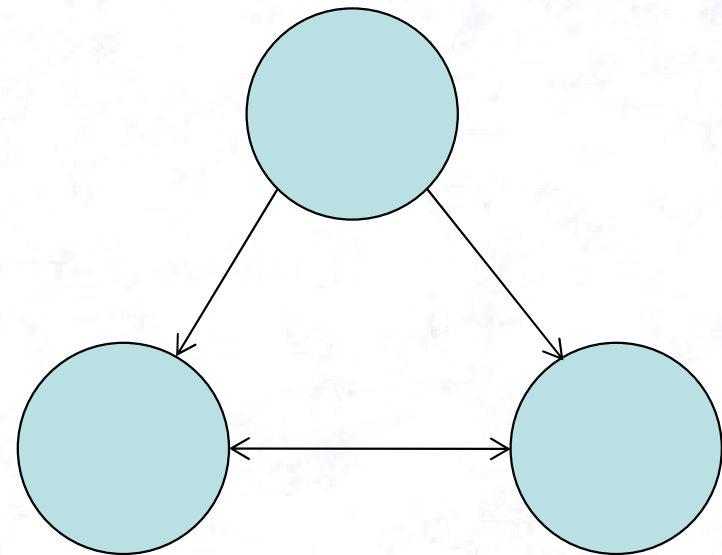
The Analytic Ego

- Also known as the working ego or observing ego
- Essential to being able to work interpretively

Analytic Ego Participating Ego



Analyst's Analytic Ego



Patient

Analyst's
Participating
Ego

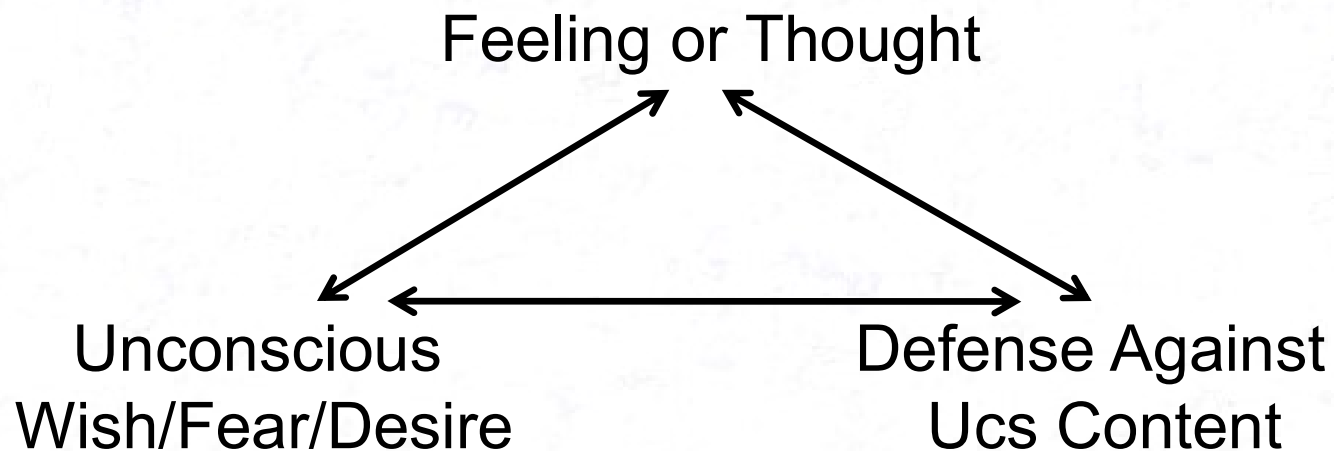
Conceptualization

Sample Conceptualization

- I feel angry
- I expect others will hurt me or reject me
- Other people will hurt me or reject me if I am angry
- I should hurt myself instead of expressing my anger

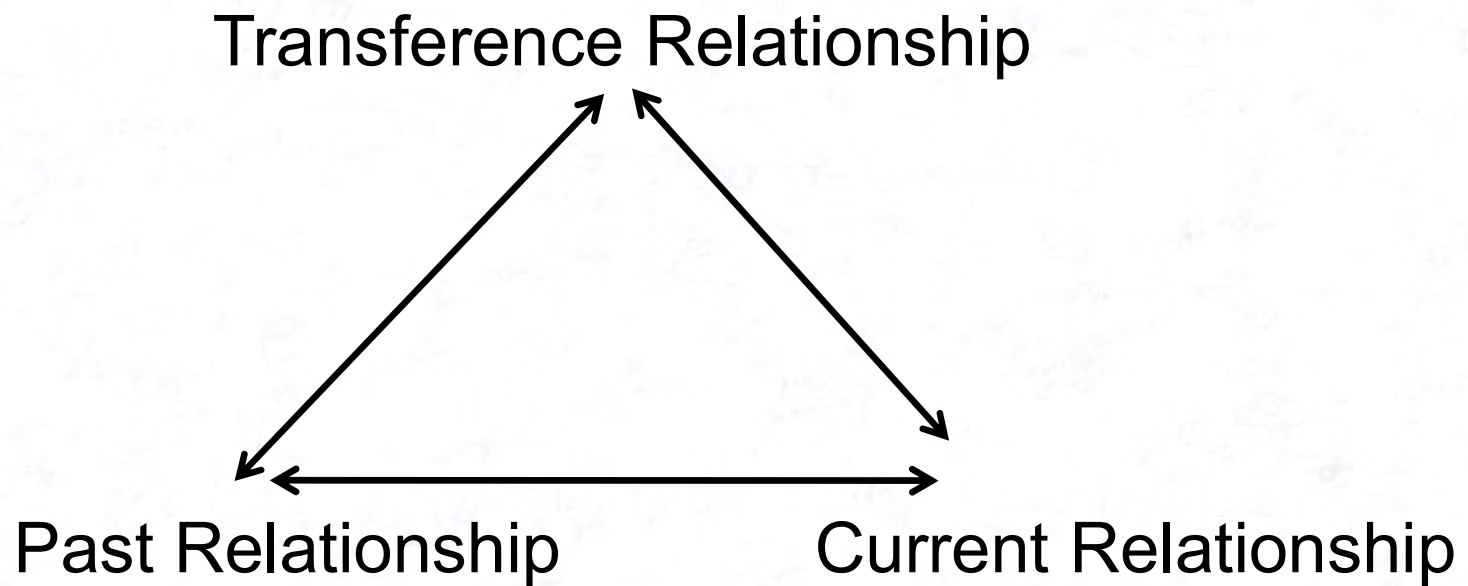
Generation of Hypothesis

Triangle of Conflict



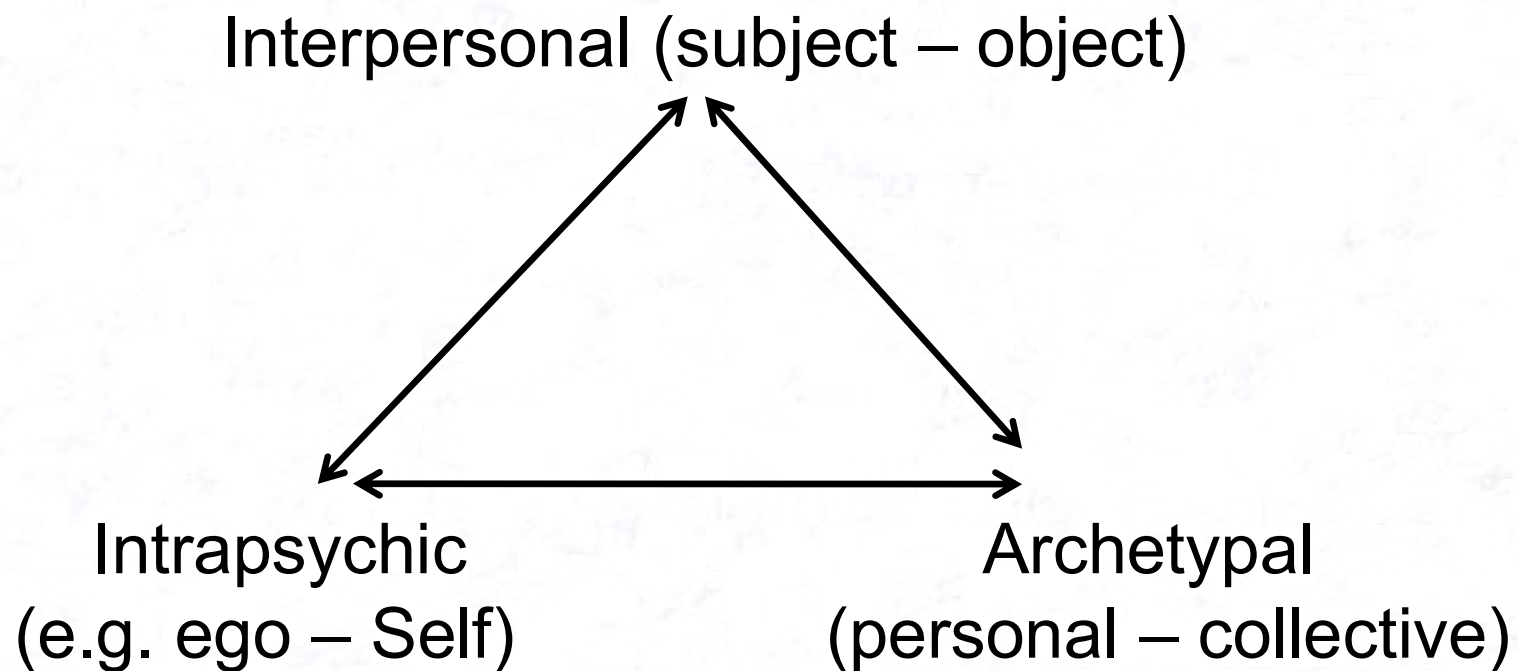
Generation of Hypothesis

Triangle of Relationship



Generation of Hypothesis

Symbolic Triad



Listening for Derivative or Encoded Messages

Robert Langs

W.H. Auden - from Twelve Songs

Song VIII

At last the secret is out, as it always must come in the end,
The delicious story is ripe to tell the intimate friend;
Over the tea-cups and in the square the tongue has its desire;
Still waters run deep, my friend, there's never smoke without fire.

Behind the corpse in the reservoir, behind the ghost on the links,
Behind the lady who dances and the man who madly drinks,
Under the look of fatigue, the attack of the migraine and the sigh
There is always another story, there is more than meets the eye.

For the clear voice suddenly singing, high up in the convent wall,
The scent of the elder bushes, the sporting prints in the hall,
The croquet matches in summer, the handshake, the cough, the kiss,
There is always a wicked secret, a private reason for this.

Symptom as Faulty Coping Mechanism

The outbreak of a neurosis is an attempt at self-cure - "It is an attempt of the self-regulating psychic system to restore balance, in no way different from the function of dreams."

Jung, CW18, para 386, 389

Gathering Data
Conceptualization
Interpretation
Return to Data Gathering

Interpretive Hypothesis

An interpretive hypothesis takes into account both the theory and data which will be communicated in the form of an interpretation (e.g. I believe the analysand does, feels, thinks, or experiences _____ because of _____).

General Guidelines for Interpretation

- Avoid becoming overly engrossed in the surface content of the patient's communications (often the responding primarily to the last thing the patient said). This the biggest obstacle to the interpretive process.
- Cultivate an internal space for reverie.
- Discern when you know enough to make an interpretation rather than asking another question.
- Interpret material that is most emotionally available and present in the session, i.e. when a complex is activated.
- Keep the interpretation experience near, especially when the patient's emotions are directed toward the analyst.
- Address core complexes and associated symptoms.
- There are always several possible interpretations.
- Over-interpreting is as problematic as under-interpreting.

General Guidelines for Interpretation

- Be selective about what to focus on in each session.
- Attempt to incorporate the patient's images and language.
- Work from surface to depth – interpret the defense before the content that is being defended against.
- Try to work just a half-step ahead of where the patient is.
- The best interpretations come as a surprise, first to the analyst and then to the patient.
- Interpretations can be, and often are, built up over several exchanges. As Strachey points out, effective interpretations produce change through the accumulation of many small shifts over time.
- Mild anxiety and a feeling of risk in the analyst are associated with effective interpretations.

Analyst Anxiety and Interpretation

In every consulting room there ought to be two rather frightened people; the patient and the psycho-analyst. If they are not, one wonders why they are bothering to find out what everyone knows.

Wilfred Bion, Brazilian Lectures, 1990, p. 5

Avoid Use of Jargon

- Kohutians talk about interpreting from an “experience-near” position.
- What this means, in part, is avoiding the use of concepts like shadow, ego, persona, anima, or individuation in formulating interpretations to the patient.
- It is more accessible to the patient to “operationalize” concepts in simple terms. For example, instead of using the term shadow in formulating an interpretation you might say, “the part of you that is difficult for you to accept in yourself” or “the aspects of yourself that you would like to disown.”

Action Language

- Frame interpretations in terms of actions, real or imagined, both private and public.
- Actions might include feeling, sensing, thinking, or choosing.
- Actions are designated by verbs (action words) and adverbs (qualifiers to verbs) rather than nouns (terms that name) or adjectives (modifiers to nouns). Nouns and adjectives lend themselves to reification.
- Use “act” and “behave” rather than “is” or “are” because the later terms imply static, unchangeable aspects of the personality/psyche.
- Always try to locate the action being described within an intrapsychic or interpersonal context.
- Be as specific as possible. Avoid words and phrases like: *something in you, a place in you, you feel bad, a part of you.*

Use Affective Language

- Affects are the most ephemeral of all the clinical experiences. You can get back to memories, images, thoughts, ideas, concepts relatively easily but it is often difficult to re-access an affect once the initial moment has passed.
- Attempt to link behaviors (actions) you are interpreting with an affect.
- Be as specific as possible when linking an affect to a behavior or defense.
- As we saw with the material from neuroscience Interpretations based on a metaphor are almost always better at involving the patient at an affective level.

Interpretational Context

- Give the interpretation a context, for example:
 - Interpersonal
 - Intrapsychic
 - Archetypal
 - Situational
 - Process related
 - Transference

Priority of Interpretative Interventions

- Overall work with what is happening in the room first before moving to subjects of analysis that exist psychologically outside the room
- Hierarchy of Priority:
 1. Affect and Emotion
 2. Transference - Countertransference
 3. Behaviors
 4. Images
 5. Intellectual Ideas and Concepts

Four W's of Interpretation

- **Why** is this interpretation necessary in terms of the issues the patient brings to analysis?
- **What** is the focus of the interpretation? (e.g. transference, object, complex, defense, etc.)
- **Where** does the patient locate the problem from their perspective? (e.g. in their self, in someone else, in their situation)
- **When** is it appropriate to offer the interpretation in terms of *when* it comes into the analyst's mind and *when* the patient may have receptivity to it (partially referring to timing)?

Timing of Interpretations

Timing of Interpretations

The interpretation must be given *when the analyst knows what the patient does not know, needs to know, and is capable of knowing.*

Heinrich Racker (1968, p. 41)

Listening for Response to Interpretation

In general, interpretations will either be:

1. Defended Against
2. Introjected – (i.e. taken in) resulting in some kind of mutative experience.

Listening for Response

If a mutative interpretation has been offered at an appropriate time, there will be some shift or opening up:

- Patient will reveal more or remember more that is connected to the interpretation
- They will have an association (e.g. “that makes me think of...”)
- They will pause to reflect
- Their breathing or posture will shift
- There will be a noticeable shift in affect (such as tears, anger, etc)
- They will agree in some way that has an affective congruity to it
- There will be a sense of “ah-ha” in the room

Listening for Response

- In a defended response:
 - Patient will actively disagree in a way that precludes further examination (an overtly negative reaction to an interpretation does not necessarily mean the interpretation wasn't effective).
 - Patient will shift subject matter (avoidance)
 - It will appear that the patient didn't hear the interpretation
 - Patient will continue on with what they were saying before the interpretation (incorporation)
 - Patient will agree verbally but with no sense of affective reaction to the interpretation.

Interpretive Cycle Resumes

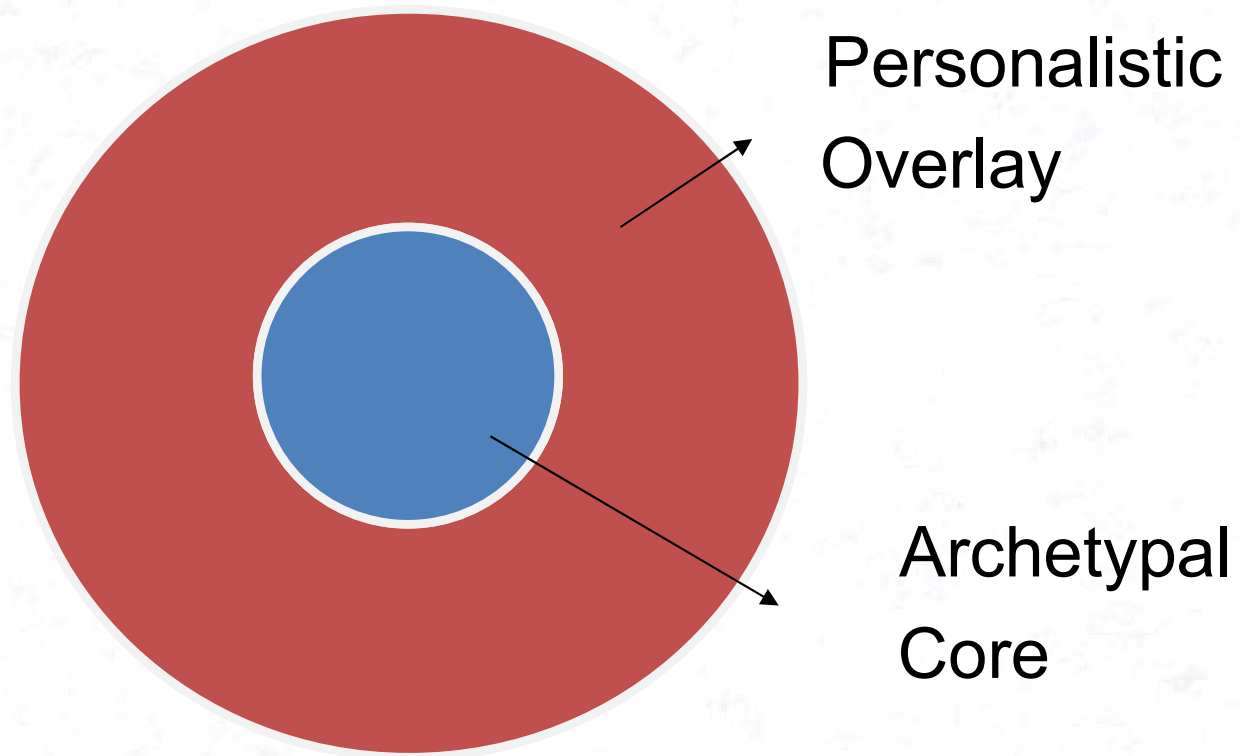
- **Gathering Data** - Listening, observing, feeling
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- **Return to Data Gathering**

Complex Centered Interpretation

Interpretation of Complex with Psychotic Patient

- 1) When you feel that you can't keep your daughter from coming into your house and taking your things,
- 2) I think there is also a sense that this is also happening inside of you as well.
- 3) It feels as if you can't keep the feelings and thoughts of others from invading your mind and stealing away with bits and pieces of you.
- 4) I think this reminds you of the situation you grew up in where there were no boundaries, no personal space, so sense of personal possessions, and no room to have your own thoughts.

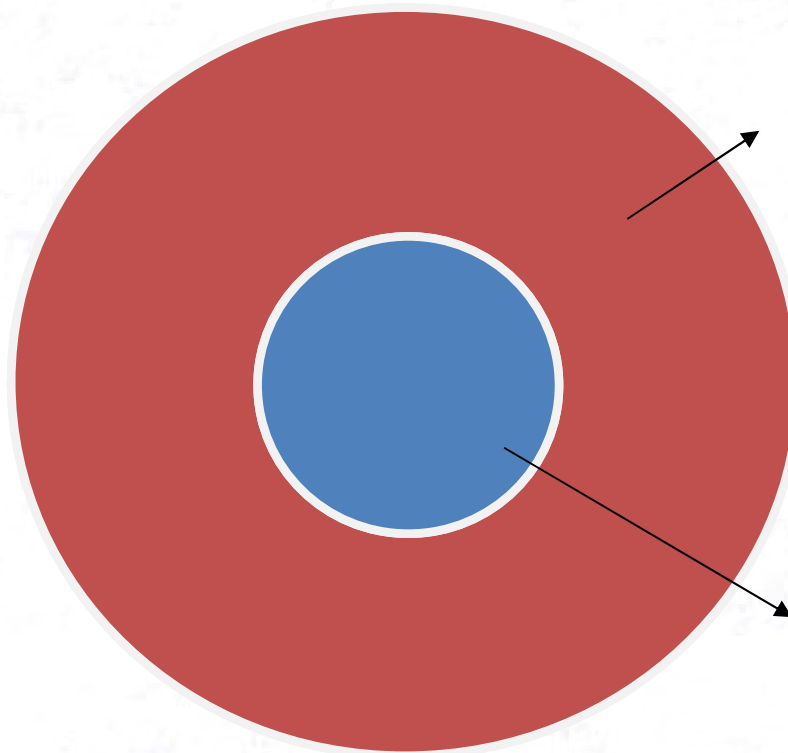
Simple Complex



Simple Complex

Personalistic Overlay

1. Memories
2. Images
3. Feelings
4. Behavioral Patterns
5. Defenses
6. Cognitive Sets
7. Specific Values or Attitudes
8. Physiological States
9. Patterns of Object-Relatedness



Personalistic
Overlay

Archetypal
Core

Examples of Complex Focus

- “It seems that the part of you which feels abandoned...”
- “The child-like part of you...”
- “The part of you that can seduce and the part of you which can be seduced.”
- “This seems to be an instance in which you can behave towards yourself in a very domineering and aggressive way towards yourself.”

Circumambulation of the Complex via Interpretation

- Ability to recognize cues which signal the activation of the complex.
- Recognition of how the complex relates to inter-personal problems. This allows patient to distinguish what he/she brings (via the complex) to relationship problems versus what other people and events bring to them.
- Recognition of the power of the complex
- Insight into origins of the complex.
- Understanding of secondary gain aspects of symptoms as well as the symptom as effort of self-cure.
- Diminishment of the power of the complex and an acquisition of greater range of emotional and behavioral patterns.

Time Focus of Complex Interpretation

The tense of the interpretations around a complex can vary across interpretations and sessions:

- **Past** – how the complex developed
- **Present** – how the complex impacts the patient's current experiences
- **Future** – where the complex is taking the patient

Subjective Interpretations versus Objective Interpretations

- Subjective level interpretations are formulated around the experience of the patient's inner world.
- Objective level interpretations are formulated around how the patient experiences their outer world.

Personal versus Archetypal Interpretation

- **Example 1 (Personalistic):** You had no boundaries growing up so now you have trouble setting them with others, so now you want me to do that for you.
- **Example 2 (Archetypal):** In the unfolding of your life it doesn't appear that your capacity to experience yourself as a warrior, and hence to protect yourself, was ever constellated and now you want me to carry the function of the warrior for you.

Symbolic – Archetypal – Metaphoric Interpretations

This type of interpretation is frequently used in dream interpretation but can also be used in interpreting the patient's public (observable) and private (internal) behaviors.

Advice for Learning to Interpret

- Read as many verbatim transcripts of actual sessions as you can, from any school of psychoanalytic thought (see books with verbatims recommended on handout).
- Overcome the fear of recording sessions.
- Record and transcribe as many of your own sessions as you can.
- Find supervisors who are interested in working with verbatim transcripts.
- Try to make one real interpretation in every session.

Conclusion

The analyst must register the session with the eyes, ears, and heart of a sensualist while translating those experiences with the mind of a philosopher and the voice of a poet.