Musings on Mourning and the End of Analysis: A Review of “Turn! Turn! Turn! The Patient’s Contribution to the Interpretive Process in the Terminal Phase of Analysis”

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On April 16, 2014 Caron Harrang, LICSW FIPA presented a paper for the NPSI Scientific Meeting titled, “Turn! Turn! Turn! The Patient’s Contribution to the Interpretive Process in the Terminal Phase of Analysis.”

The end of analysis evokes ambivalent feelings of both mourning and accomplishment, not only in the patient but in the analyst as well. As psychoanalysts used to working under conditions of abstinence and neutrality, we naturally tend to feel more comfortable speaking about our patient’s feelings and vicissitudes in relation to termination of analysis than exposing our own countertransferential thoughts and feelings. Caron’s beautifully written paper describes a dance for two, the transference and countertransference of the patient-analyst dyad. One aspect of the presentation that I particularly appreciated was her ability to convey, with great sensitivity, her experience of this dance, without losing the asymmetry that maintains the essential neutrality and abstinence of the psychoanalytic frame. This paper offers the opportunity to visit the feelings of the analyst in the termination phase of an analysis.

Caron’s paper carefully delineates the differences between interruption and termination. It isn’t easy to identify when the analysis is ready to end, even though the criteria for termination are not difficult for most authors to agree upon: the symptoms have to be resolved; a new pathologic event is not expected; there is recovery of repressed content; the ego has obtained a wider field from what previously belonged to the id (“Where id was, there ego shall be”); and, for the most part, further analysis would not likely result in any additional significant change.

But how do we really know that we have arrived at the point of termination and not a point of interruption? When is it time for us to say that the analysis was good enough? When have we achieved an integration of the ambivalence of the good/bad object, love and aggression? This decision would be easy if the patient was the only one in the room with feelings, but the analyst is also involved and needs to manage his/her countertransference as well.

Caron’s patient, Anthony (a pseudonym) tells her: “I don’t fully understand what we’ve been doing all these years. In some ways it’s still a mystery.” Is this a complaint? Is this a shared intimate reflection? Is this a way to ask to stay in the analysis? Is this a mature way of tolerating uncertainty? We work in a field where there are few certainties, so while we need to use our technique and our theory, it is our feelings that constitute our most valuable tools. We can try not to expose them, but we always need to recognize them.
In Anthony’s fantasy of the funeral, Caron saw a way in which finishing his analysis was represented in his mind as carrying a “casket” with the analyst. Maybe in “carrying” the casket, he is expressing his feeling of “dying” with the termination/separation, while at the same time, taking his analyst with him (inside his psyche) as an identification with her for the rest of eternity. Thus, he sees himself becoming his analyst when he loses her, the shadow of the object falling upon the Ego, as Freud wrote in “Mourning and Melancholia” (1915).

But this fantasy, or thought about the funeral, constitutes a kind of foreign film for the patient. Is there something here that is foreign (not conscious) for him to think and speak about? Maybe it is part of his “inside foreign land,” or perhaps it feels “foreign” to him to talk about his gratitude and intimacy with the analyst and also about his feelings of aggression and hate in response to the separation.

After the fantasy of the funeral, his next association was related to how close he felt to his daughter when she was a baby and how distant (foreign?) he feels now, when he cannot say something more personal to her. He wants to be closer, more personal with his daughter and perhaps with his analyst as well. I hear this as his saying, “We are very intimate now, but I am afraid that you will be like a foreign experience after I leave and times pass.”

In her paper, Caron is talking about pain for the patient who is leaving, as well as pain for the analyst who feels her nest as empty, even though she will continue working with other patients. The empty nest is sad, but possible to endure, because Caron senses that Anthony has grown enough to fly on his own. This is the feeling Caron evokes in discussing the termination of this case.

Anthony’s analysis ends as agreed upon and he leaves with a feeling of hope. In his dream about a flood, he makes an association to Noah’s Ark. This calls to mind the idea that, symbolically, Anthony is bringing on board all the animal pairs who will survive the chaos of the flood and arrive in a new land to begin a new life. Thus, the patient and his analyst will survive as an internal couple, which is so different from his previous feeling of being frightened of drowning, expressed in his symptom of difficulty with breathing that he presented when he first came to analysis. Now, he is able to leave the treatment as a hopeful Noah, departing the shore of Caron’s office and taking all of his belongings to this new but more secure land of the unknown.

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