PROJECT MUSE®

Bringing the Plague: Toward a Postmodern Psychoanalysis
(review)

Jason B. Jones

Journal for the Psychoanalysis of Culture and Society, Volume 8,
Number 1, Spring 2003, pp. 170-174 (Review)

Published by The Ohio State University Press

DOI: <https://doi.org/10.1353/psy.2003.0015>

➔ *For additional information about this article*

<https://muse.jhu.edu/article/40708>

am not faulting the writers of this collection here for this tendency to use psychoanalytic terminology to describe a patient's experiences, but I do think the field of psychoanalysis has to analyze the role played by psychoanalytic terms in our experience and description of our patients' lives. We need to ponder how the power of Freudian psychoanalytic language haunts us in our attempts to capture in the present past clinical experiences. Moreover, this volume also asks us to question our tendency to use old modernist psychoanalytic conceptions of gender to describe changing postmodern gender relations.

Lynne Layton brings this conflict between modern and postmodern versions of subjectivity, gender, and psychoanalysis to the foreground in her contribution. Layton effectively argues that feminists, postmodernists, and clinicians often use the same words to mean very different things. For instance, the postmodern (or Lacanian) usage of the term subject often indicates the way human beings are shaped and controlled by external cultural and linguistic forces, while this same term may mean something quite different for object relation theorists who tend to downplay social forces in order to highlight the subjective aspects of personal relations and histories (287). Layton also indicates that many academics equate psychoanalysis with Freud and Lacan, while Anglo-American analysts tend to ignore the influence of postmodern theory by clinging to more traditional notions of sub-

jectivity (286). By differentiating between the postmodern Lacanian subject and the relational self, Layton argues for a more complex and multi-leveled consideration of gendered subjectivity.

Layton also asks the important question of what kind of subject is produced by psychoanalysis (290). In other words, she follows Foucault's post-structuralist notion of cultural subjection to examine how psychoanalytic theories tend to shape different conceptions of subjectivity that are in turn enacted and lived by psychoanalytic patients. In this conjunction of cultural determination and subjective enactment, we find the true nodal point of this collection: Not only do people embody and perform scripted gender constructs, but, patients also tend to enact the psychoanalytic concepts favored by their analysts.

Throughout this review, I have intentionally used terms like "scripted," "performance," "acting," and "science fiction" to indicate the ways the drama of gender construction has often combined elements of film and psychoanalysis. One reason for this media version of subjectivity can be located in Nancy Chodorow's claim in this volume that "an individual, personal creation and a projective emotional and fantasy animation of cultural categories create the meaning of gender and gender identity for any individual" (237). According to this theory, we are all human film projectors animating our gendered cultural scripts through our own emotional and historical filters. Or like method

actors trying to make a scripted dialogue come alive, we are constantly seeking to make our gender quotations appear to be original. The great strength of this book is that it takes many common psychoanalytic and feminist concepts and animates them by projecting them through the lenses of personal experience and cultural constructs.

—Robert Samuels

Susan Fairfield, Lynne Layton, and Carolyn Stack, eds. *Bringing the Plague: Toward a Postmodern Psychoanalysis*. New York: Other P, 2002.

As readers of *JPCS* are of course aware, *Bringing the Plague's* title alludes to a comment attributed to Freud as he and Jung approached the United States: "Little do they know we are bringing the plague." What I found surprising about this familiar allusion is the editors' explicit desire to plague psychoanalysis with postmodernism, when the most recent tendency of so much work in the humanities has been precisely the reverse.¹ Both my surprise and the absence of any reference to this humanistic work by the contributors indicate how pressing is the need for a book like *Bringing the Plague*, one that allows relational clinicians and theorists the opportunity to grapple publicly with concepts and interpretive strategies that at times echo those of the humanities. The editors close their intro-

duction with the hopes that their volume will lead academics to move “beyond Freud, Lacan, Winnicott, and Klein” and that clinicians will gain a greater analysis of how culture and power imbricate psychoanalysis (27). And if *Bringing the Plague* perhaps cannot fully satisfy both these far-reaching ambitions, it offers a clear reminder of how clinical perspectives can illuminate the humanities, and powerfully suggests that there is a place for postmodern theory in the clinic.

Bringing the Plague merits a wide readership for bringing together distinguished clinicians and theorists who share a relational emphasis (partially including, in addition to the editors, Virginia Goldner, Jay Greenberg, Irwin Z. Hoffman, Donnel B. Stern, and the late Stephen A. Mitchell), and who also share, with varying degrees of intensity, a commitment to a social-constructivist view of analysis. The volume is arranged as a series of dialogues: Irwin Hoffman’s opening essay was originally published as a review-essay on recent trends in relational theory, and then every subsequent essay is paired with a response.² Finally, in the last essay, Jay Greenberg partially responds to Hoffman’s opening essay. This organizational strategy is the collection’s greatest strength. It is always fascinating to watch clinicians explain how cultural and intrapsychic formations interact, even become indistinguishable, in analysis, especially when these explanations are carefully grounded in clinical vignettes. And I found particularly

helpful three essays structured around the clinical encounter: Carolyn Stack’s response to a patient’s narrative of ritualized satanic abuse, Lynne Layton’s unsparingly honest account of how a “normative unconscious” at times threatens to swamp the analyses of even the most progressive analyst, and Jay Greenberg’s careful unpacking of a heroic tropology within relational clinical vignettes.

The claim that there is a connection between relational theory and postmodernism hangs on an analogy: relational theory’s focus on the importance of the analyst-patient relationship in the present is asserted to be like the postmodern position that meaning is produced and enacted discursively, rather than preexisting “out there” in the world. The editors argue that a postmodern (relational) psychoanalysis would “take seriously the notion that reality is co-constructed moment to moment between patient and analyst,” while also honoring the myriad ways that “strongly entrenched categories of race, ethnicity, class, gender, and sexuality” persist in the analytic session (6). An important implication is, as Hoffman states in his contribution, that “any divorcing of the intrapsychic and the interpersonal is unacceptable” (36). Because analysis is, on this view, a ritualized encounter that produces certain kinds of discourse, the “intrapsychic” is actually a mode of the interpersonal or even of the cultural. Susan Fairfield advances this argument most forcefully: “A psychoanalytic theory and its clinical implementa-

tion are not *about* a certain kind of subjectivity. They enact it, reiterate it performatively, within a cultural setting that allows for the legibility of that construct, and this legibility makes the enactment one in which the patient can learn to join” (76). In other words, both analysts and patients find in an analysis precisely what they have been trained, consciously and unconsciously, to find. And given the old saw that the patients of Lacanians produce Lacanian symptoms, Kleinian patients Kleinian ones, and so on, it is easy to agree with this view.

If we conceptualize subjectivity as emerging within the analytic dyad, then the aims of psychoanalytic interpretation and treatment shift. Carolyn Stack’s eloquent, clinically focused essay captures this well: She aims for “a mode of treatment that relies less on linking current symptoms to past events and more on mining the imaginative space created between patient and analyst. We cannot know what really happened in our patients’ histories. I mean this in the social constructionist sense that memories are always reconstructions” (139). Stack’s emphasis on the analytic dyad is echoed by nearly every contributor to the volume. Donnel B. Stern explains that since “the analyst’s personal participation in the treatment is inevitable, continuous, and even continuously unconscious,” “mutuality and dialogue would seem to be essential, because the analyst, just like the patient, needs to listen to the patient’s impressions of him or her and wonder about his or her

impact" (184). In fact, he asserts, "for the process to be mutative, . . . the two participants must understand each other" (184). And Jay Greenberg emphasizes the way relational clinical reports tend to dramatize the analyst's "personal participation": in several classic relational texts, the analyst "has offered himself, *as a person*, to contain the tensions and anxieties that the patient is experiencing as a consequence of being in treatment" (331). Although Greenberg critiques this tendency as potentially self-indulgent, he shares with Stern and other contributors an appreciation for the analyst's presence in the dyad.

As contributions by David L. Eng and Shinshee Han, Fairfield, Virginia Goldner, Layton, and David Schwartz make clear, postmodern theory adds to relational clinical practice a focus on power, discourse, and the institution of psychoanalysis. As Goldner writes, relational theory broke with classical theory by substituting a two-person for a one-person psychology; the next step is "the move from the dialogical to the discursive, from the intersubjective co-creation of meaning to the discourses and cultural narratives that set the terms for what the dialogical partners can think and know" (160). The editors further claim that interweaving relational and postmodern theories, with the latter's "concerns about subject positions and power inequities[,] ties a therapeutics to an ethics" (12). Though Fairfield, Layton, and Stack say "ethics" here, they also plainly imply a politics as well.

After all, if the choice is between upholding or meliorating inequities of power, presumably few would choose the former. This implication is spelled out most forcefully in Fairfield's and Ronnie C. Lesser's essays. As a way to distinguish between modernist and postmodernist theories of plural subjectivities, Fairfield asks, "Is your pluralism confined to psychoanalysis, or is it informed by a sociopolitical ideal of openness to alterity (e.g., in matters of gender orientation or minority cultural practices?)" (83). Who would not want to choose an "ideal of openness" over confinement? Lesser is even more emphatic, arguing for what amounts to psychoanalytic re-education, in which analysts would affirmatively seek to trouble the whiteness and heterosexuality of male patients (273), and which would try to cure "American-Dream sickness" (274). Though such an argument might sound extreme, it is in reality the only logical consequence of the social constructivist view described above, that the intrapsychic and the cultural are inseparable. If subjectivity is only an effect of power, or if the conversion from social oppression to private suffering is transparent, and if analysts aim to reduce the suffering of patients, then it follows that analysis must be directed at those social causes. In a discussion of trauma theory, Stack laments the "easy reach for the literal interpretation," when analysts assume that "one can always know whether a patient has been sexually abused or not" (139). It would be interesting to hear relational

theorists engage with a slightly different version of this criticism: isn't it easier, in some ways, to reach for the material or discursive interpretation? What happens to the work of analysis when we assume that we can readily trace the imprint of power on subjectivity?

Even when the analyst's desire is not explicitly for political change, analytic interventions in this volume can be startlingly directive. Greenberg acknowledges as a basic premise "largely accepted by all relational analysts" that "suggestion and personal influence, once the base metal of the despised and disdained psychotherapies, have become both coin of the realm and a prime area of psychoanalytic investigation" (328). And Goldner urges analysts to think about interpretation as akin to Althusser's concept of interpellation.³ She claims that interpretation "can be construed as a text like any other in which the words create a space and a category through which the subject can locate herself and identify" (164). Although Goldner earlier argued that an attention to discursive structures could move relational theory past a two-body psychology, conceptualizing interpretation in this way only foregrounds the analytic dyad: the work of an analysis proceeds through identification and disidentification between the ego of the analyst and that of the patient.⁴

Greenberg's essay dramatizes the limits of such an approach. He focuses on recent clinical vignettes in which the analyst personally intervenes in an analysis—for exam-

ple, by confessing to a desire for the patient, by admitting a lie to a patient, by yelling at a patient, and so forth. He correctly identifies such vignettes as “morality plays” (331, 346) insofar as they exhort clinical readers to respond personally in their own analyses. Further, he shows how such vignettes “encourage the analyst to want to provide the patient with a particular kind of experience[, which] . . . can inflame the analyst’s desire to be a good analyst or even to be a good person” (339). When analysts act personally, it is often from “a desire to be part of things in a way that could heal a piece of the patient’s history,” and is related to a disinclination to accept especially negative transference enactments (345). This interpretation seems persuasive, and it can actually be extended slightly: while Greenberg disclaims such an inflammation of analytic desire as an “excess” of relational theory, it is arguably a condition of it. It is hard to understand how the analyst’s desire to influence the analysis as a person can be anything other than narcissistic in structure.⁵

There are other risks to the relational approach. Lynne Layton’s contribution—a version of which appeared in *JPCS*—details her struggles with a “normative” or “heterosexist” unconscious. Layton describes this normative unconscious as, among other things, “the unconscious support of what we think of as ‘common sense,’” a force that “works to keep dominant cultural norms in place” (203). The normative work of the unconscious can of course take

many forms; Layton focuses on heterosexism in her fascinating essay. She explores “the subtle way in which dominant gender dynamics can be normalized in treatment, the way therapy can subtly keep gender inequalities and the gender splits that secure inequality in place” (207). As she acknowledges, “no matter how aware I am of [these issues], I catch my heterosexist unconscious in operation more than I would like to admit” (211). Her vignettes are interesting and subtly interpreted. In one instance, Layton recalls telling a lesbian patient that, since their desire was confined to fantasy, she would “never touch her the wrong way” (211). This turned out to be humiliating for the analysand. Layton’s comment perfectly illustrates the dynamic at work: “While I think such a rupture was inevitable, I’m also quite certain that I made my comment not to be helpful to her, as I consciously thought, but rather to allay my own anxiety, as I, a nominal heterosexual, was becoming aroused” (211). Framed this way, the concept of the normative unconscious is compelling, but I wonder if it is not an artifact of the relational emphasis on the personal influence of the analyst. For example, from a Lacanian point of view, the conscious desire “to be helpful” ensures that the session remains within the imaginary domain—in other words, at the level of two egos. As Greenberg illustrates so well, the conscious desire of a personal intervention can only be for the patient to see the analyst as “good,” a desire that can blind us

both to the analytic needs of the patient and to our own unconscious determinants.

Those studying psychoanalysis from within the humanities and social sciences will be particularly interested in *Bringing the Plague*, since it illustrates so clearly the clinical implications of literary-theoretical propositions. It has the additional merit of being consistently well-written and clear.⁶ I share with the editors the hope that this volume will open a further dialogue between clinicians and academics about the relation between subjectivity and social, cultural, and political structures of power, a dialogue that would enrich both parties.

—Jason B. Jones

NOTES

¹The most widely available source of the contention that psychoanalysis should plague postmodernism is Slavoj Žižek’s work, especially *Sublime*, *Metastases*, and *Ticklish*. The recent dialogue among Judith Butler, Ernesto Laclau, and Žižek, published as *Contingency, Hegemony, Universality*, is an excellent starting point for debates between Lacanian and social constructivist accounts of psychoanalysis. Joan Copjec’s superb *Read My Desire* tries to bring into clearer focus why psychoanalytic thinkers should be suspicious of Foucault. Meanwhile, Tim Dean’s *Beyond Sexuality* wittily and remorselessly exposes the limited utility for psychoanalysis of postmodern accounts of subjectivity. Finally, Christopher Lane’s “The Experience of the Outside” and “Victorian Asymmetry” and Charles Shepherdson’s *Vital Signs* all argue that the conventional reception of Foucault and Lacan within Anglo-American cultural studies has flattened and distorted the contributions of each.

²The essays prompting Hoffman’s review essay are Aron, Greenberg, and Modell. A full overview of relational ap-

proaches is obviously beyond the scope of this review, but key texts certainly include Benjamin, Mitchell, Greenberg and Mitchell, and Layton. Finally, the final two chapters of Mitchell and Black help connect the key aspects of relational theory to wider developments in contemporary psychoanalysis.

³As Žižek explains, the difficulty with Althusserian interpellation is that it theorizes "the efficiency of an ideology exclusively through the mechanisms of imaginary and symbolic identification" (*Sublime* 124).

⁴Dean advances a related critique of relational theory's emphasis on a two-body psychology in "The Medium Really Is the Message" (35). As Dean explains, Lacanians emphasize that the speech of an analysand is never directed toward the analyst, but toward an Other. It is the non-coincidence of analyst and Other that allows the work of an analysis to proceed. For a related argument, see Fink 32–33.

⁵For an explanation of this view, see Fink 16, 30–35.

⁶I should say, though, that "postmodern" is allowed to float even more loosely than usual in this collection, which sometimes results in solecisms that are—at least from the perspective of the humanities—untenable. The projects of Derrida and Foucault are routinely conflated, without the slightest gesture toward explaining how such a reconciliation is to work. Even granting that "deconstruction" has come loose from Derrida's scrupulous use, there's something peculiar about the claim that "'deconstruction,' both etymologically and as it is deployed by its practitioners, is virtually synonymous with 'analysis'" (115). And the identification of one analytic perspective on unconscious meaning as "the *power/knowledge orientation*, or *deconstruction*" is jarring (181). Nothing could be further from deconstruction than the emphasis on "subject positions" and identities found in the power/knowledge orientation, especially as it is articulated in this volume—as Derrida's essays on Foucault, including "Cogito and the History of Madness" and "'To Do Justice to Freud,'" make clear. A short overview of the disparate claims of Foucault and deconstruction, along with an

assessment of their relative value for psychoanalysis, can be found in Dean's "Wanting Paul de Man" 260–64. For a clear explanation of the difference between postmodernism's emphasis on the infinite displacement of desire and Lacan's—and Freud's—emphasis on how desire gets "stuck," see Miller 21–24.

WORKS CITED

- Aron, Lewis. "The Patient's Experience of the Analyst's Subjectivity." *Psychoanalytic Dialogues* 1 (1991): 29–51.
- Benjamin, Jessica. *The Bonds of Love: Psychoanalysis, Feminism, and the Problem of Domination*. New York: Pantheon, 1988.
- Butler, Judith, Ernesto Laclau, and Slavoj Žižek. *Contingency, Hegemony, Universality*. New York: Verso, 2000.
- Copjec, Joan. *Read My Desire: Lacan against the Historicists*. Cambridge: The MIT P, 1994.
- Dean, Tim. *Beyond Sexuality*. Chicago: U of Chicago P, 2000.
- _____. "The Medium Really Is the Message: Commentary on Michael J. Bader's Paper." *Psychoanalytic Dialogues* 8.1 (1998): 33–43.
- _____. "Wanting Paul de Man: A Critique of the 'Logic' of New Historicism in American Studies." *Texas Studies in Literature and Language* 35.2 (Summer 1993): 251–77.
- Derrida, Jacques. "Cogito and the History of Madness." *Writing and Difference*. Trans. Alan Bass. Chicago: U of Chicago P, 1978. 31–63.
- _____. "'To Do Justice to Freud': The History of Madness in the Age of Psychoanalysis." *Resistances of Psychoanalysis*. Trans. Peggy Kamuf, Pascale-Anne Brault, and Michael Naas. Stanford: Stanford UP, 1998.
- Fink, Bruce. *A Clinical Introduction to Lacanian Psychoanalysis: Theory and Technique*. Cambridge: Harvard UP, 1997.
- Greenberg, Jay. "Countertransference and Reality." *Psychoanalytic Dialogues* 1 (1991): 52–73.
- _____. and Stephen A. Mitchell. *Object Relations in Psychoanalytic Theory*. Cambridge: Harvard UP, 1983.
- Lane, Christopher. "The Experience of the Outside: Foucault and Psychoanalysis." In *Lacan in America*. Ed. Jean-Michel Rabaté. New York: Other P, 2000. 309–47.
- _____. "Victorian Asymmetry." *The Burdens of Intimacy: Psychoanalysis and Victorian Masculinity*. Chicago: U of Chicago P, 1999. 1–43.
- Layton, Lynne. "Cultural Hierarchies, Splitting, and the Dynamic Unconscious." *JPCS* 5.1 (Summer 2000): 65–71.
- _____. *Who's That Girl? Who's That Boy?: Clinical Practice Meets Postmodern Gender Theory*. Northvale, NJ: Jason Aronson, 1998.
- Miller, Jacques-Alain. "A and a in Clinical Structures." *Acts of the Paris-New York Psychoanalytic Workshop*. Trans. Stuart Schneiderman. New York: Lacan Study Circle, 1987. 14–29.
- Mitchell, Stephen A. *Relational Concepts in Psychoanalysis*. Cambridge: Harvard UP, 1988.
- _____. and Margaret Black. *Freud and Beyond: A History of Modern Psychoanalytic Thought*. New York: Basic Books, 1995.
- Modell, Arnold H. "The Therapeutic Relationship as a Paradoxical Experience." *Psychoanalytic Dialogues* 1 (1991): 13–28.
- Shepherdson, Charles. *Vital Signs: Nature, Culture, Psychoanalysis*. New York: Routledge, 2000.
- Žižek, Slavoj. *The Sublime Object of Ideology*. New York: Verso, 1989.
- _____. *The Metastases of Enjoyment*. New York: Verso, 1994.
- _____. *The Ticklish Subject: The Absent Centre of Political Ontology*. New York: Verso, 1999.

Cole, Gilbert W. *Infecting the Treatment: Being an HIV-positive Analyst*. Hillsdale, NJ: The Analytic P.

What do I look for in good psychoanalytic writing? One way of answering my question might be, I