

Prologue

The professor wanted to share her recent enlightenment with us. She had been digging deeply into a version of French psychoanalysis. “Homosexuality is curable!” she lectured. I was the only openly lesbian student in my class. The atmosphere in the room was stifling. Seldom have I felt more lonesome. Following her statement, the professor was not allowed to teach again. After all, it was 2004, and Sweden’s self-image included being progressive on diversity issues and human rights. For a long time, however, because I felt robbed of my inner enthusiasm, I found it hard to continue at the university; in fact, I almost dropped out. The professor had symbolically thrown me back 25 years, and I had landed with an inexorable thud. In 1979, when I was 4 years old, gay employees were protesting antigay prejudice by calling their workplace and the Swedish Social Insurance Agency, saying they could not come to work because they were gay and therefore officially ill. After major demonstrations on the stairs of the Swedish National Board of Health and Welfare, homosexuality became officially conceptualized as nonpathological. A quarter century later, my teacher suggested again that I was pathological, an attribution that made me feel too unwell to attend school for a while. Because of my sexual identity, my status as a healthy human being was suddenly denied; my voice was silenced. The pain of the assault lingered in my body like an illness. Psychoanalysis, which had been beautiful to me, had been painted in dirty colors, and I did not want any part of that. This time, however, calling in sick would not have been a heroic act. This time the battle was different. I am glad I found a way back.

For several reasons, the style of this book is highly self-disclosing, even confessional. And although it draws on scientific data, it is also anecdotal. These choices reflect both ethical and practical concerns. As a feminist, I believe the personal is political. The open way I try to approach the topic of power issues in psychotherapy is a part of feminist ethics. Inevitably, everything starts with oneself. I think of this style as also honoring the psychoanalytic history of ideas. Often one cannot easily change others, but one can understand something new and choose to change oneself. A more transparent authorial style follows the psychoanalytic tradition of looking as deeply and unflinchingly as possible into both case material and one's own subjectivity, including aspects of self about which one is not proud: needy parts, strivings for power, maliciousness, greed, and wishes to show off one's generosity, success, or strength.

The practical reason for my adopting a self-disclosing style is that I believe that doing so is a way to put nuances of power into words. Some expressions of power dynamics are so subtle that major theories or formal explications of power dynamics fail to catch all the shades and implications of their operation in the verbal and nonverbal relationships of the parties in a psychotherapy relationship. As I try to understand how external power issues intrude on the therapeutic dyad, I draw on philosophical theories, sociological theories, psychoanalytic theories, empirical research, as well as on experiences from my own life as a person, patient, and therapist. My goals are to make complicated ideas accessible and practical, and to show their value for the art of psychotherapy.

All the vignettes in this book are either heavily disguised or made anonymous and published with the patient's consent. Occasionally, I have combined prototypically similar experiences from several patients into one fictive case. In all versions, I have tried hard to preserve emotional truth.¹ I thank all my patients, friends, students, supervisees, colleagues, and doctors for helping me with examples of the dynamics I try to illuminate here.

¹The Norwegian Regional Ethical Committee (2015/1446/REK nord) and the Research Foundation for Finnmark Hospital Trust have addressed the ethics of writing about real cases. According to Norwegian law (Helsepersonelloven §21, § 23 and Helseregisterloven §2), anonymous material is not seen as confidential health information and may be published when made fully anonymous.

Another reason for my self-disclosing style is my exasperation with two types of writing about one's own successes. The first, often subtly embraced by the feminist tradition of therapy, conveys an implicit split. The protagonist is the "good" feminist, antiracist therapist who is highly attuned to social injustice and is "culturally competent" with regard to all matters of human diversity. The implicit or even explicit antagonist is often the stereotypical narcissistic, White, heterosexual male therapist with a seemingly hopeless lack of insight. The second type of writing, paradoxically both similar and contrasting, displays an equal omnipotence: The author shows off his remarkable clinical acumen, suggesting that the patient improved spectacularly and that all readers should learn from him. Not only does this self-aggrandizing style evoke performance anxiety in young therapists, but it also forecloses further explorations. An author's willingness to acknowledge mistakes, try to repair them, and learn from them is valuable to professional growth. By including my own mistakes, I hope to contribute to a climate in which others can be less defensive about learning from their own mistakes as well as mine. I assume the inevitability of lifelong mistakes and am not being confessional for the sake of some kind of purification or compulsory forgiveness, in which I do not believe.

This book is not a manual. It does not describe specific skills or train the reader in special competencies. Nor is it in the tradition of the well-known American pursuit of constant self-improvement, of continually trying to do better and in the end attaining unambiguous success. There are no sprightly "take-home messages" or summing up of specific skills to exercise after each chapter. As a Scandinavian, I find such pep talks culturally alien; to people from my part of the world, American exuberance can feel slightly hypomanic. Some readers might thus find my writing melancholic or pessimistic. I hope others will find it liberating. Sometimes, raising further questions and enduring the painful fact that no easy answers are to be found may be wiser than persisting in the pursuit of an unrealistic vision of achievement. At the end of the book I have included an Appendix with suggestions on themes and questions to be further explored in clinics, in supervision,

among colleagues, in teaching, and elsewhere. My hope is to have started a conversation that will continue. For those who find my style disturbingly melancholic, please blame that partly on my personality and partly on my cultural sensibility; I hope you will try to find ways to adapt what you like and incorporate it into your own ways of working. I do not intend to imply that self-reflection needs to get stuck in hopelessness.

I still find it hard to forgive my teacher for characterizing homosexuality as “curable.” Sometimes I wish my heart were greater, bigger, purer, deeper, or more generous, but it is not. A few years after that episode, a new chapter of this story made my blood boil at an even higher temperature. One of the papers on the syllabus for that course was an old text by Otto Kernberg (1997), in which he characterized male homosexuality as a version of narcissism. In my mind, this paper, along with writings by some Kleinians and ego psychologists, supported the French interpretation of heterosexual superiority and homosexual abnormality that had so excited my professor. Until reading this article, I had always liked Kernberg’s writing, and then I suddenly felt abandoned—both by psychoanalytic theory as a whole and by my favorite theorist, who had symbolically disowned me as a lesbian colleague. If this was a core assumption of the field, how could I work in it? Nevertheless, a few years later I learned that in 2002 (2 years before my teacher’s lecture), Kernberg had written a subsequent paper in which he publicly retracted his former position and said that homosexuality could be normal. This newer article had not been included in the syllabus!

I think that by that omission, violence was done, not just to all people of minority sexual orientation but also to the progression of psychoanalysis. It was a major distortion of the truth and an offense to Kernberg himself. To publicly change one’s mind is a brave, honest, and dedicated gesture that deserves respect. My teacher never apologized or publicly changed her own position. This is why I have found it easy to forgive Kernberg, and still respect and admire him, but much harder to forgive my teacher. I do believe we can only make progress when people are willing to own their mistakes.

Having regained my voice, I want this book to honor the voices of all the paralyzed, the silenced, the shamed, the frightened, the sad, and the angry. I want to honor the progressive people in the generations before mine and to express gratitude to those who painted psychoanalysis in rich colors, helping me recapture my passion for the field. To the ones who called in sick. To the brave ones. To the fearless. To the frightened. To the ones owning their mistakes. The work will never be completed. Prejudices are everywhere. Even inside ourselves.