From Termination to the Evolution of a Relationship: A New Understanding

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Much of the psychoanalytic literature on termination is steeped in ideals of autonomy, independence, and permanent cessation of contact. Although more recently some modified perspectives on termination have been offered, literature from various fields including contemporary psychoanalytic models, infancy research, and neuroscience supports a more extensive reconceptualization. After reviewing the literature, this article proposes replacing the concept of termination with the more flexible idea of multiple possible evolutions of the analytic relationship depending on the particular pair and their context. A clinical illustration is offered to support this perspective.

INTRODUCTION

Much of the psychoanalytic literature on termination is steeped in ideals of autonomy, independence, and permanent cessation of contact. Webster’s definition of termination as “the end of something is space or time” rings of finality. Pedder (1988) notes the final, irrevocable connotations of the word. At the same time, the experiences described in the literature are quite divergent from these ideals. Although modified perspectives on termination have emerged, contemporary literature from infancy research, developmental theory, including new conceptualizations of adult development, findings of neuroscience, and relational models of psychoanalysis can all contribute to a more extensive reconceptualization. After reviewing the literature, I suggest replacing the concept of termination with the more flexible idea of the evolution of a relationship. In addition, I suggest that this concept offers clinical value in encouraging flexibility in the evolution of any analytic relationship, such that more helpful configurations for each unique analytic dyad can be found and developed over time. I illustrate this proposal with a case vignette where the mutual surprising discovery of an unconscious shared adherence to a more traditional model of termination allowed my analysand and me to consider new options for our evolving relationship, and to choose an arrangement that felt preferable to the options we had previously entertained. This clinical experience actually led me to develop the position put forth in this article.

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TRADITIONAL IDEALS IN THE TERMINATION LITERATURE

Freud’s Views

In “Analysis Terminable and Interminable,” Freud (1937) delineates his criteria for the decision to end an analysis:

First, the patient must no longer be suffering from his former symptoms, and must have overcome his various anxieties and inhibitions and, secondly, the analyst must have formed the opinion that so much repressed material has been brought into consciousness, so much that was inexplicable elucidated, and so much inner resistance overcome that no repetition of the patient’s specific pathological processes is to be feared (p. 219).

He also proposes another, more ambitious, criterion that “the effect on the patient has been so profound that no further change will take place in him if the analysis were to continue” (p. 219). Although the rest of Freud’s paper is devoted to the factors militating against the attainment of these ideals, primarily factors residing in the patient’s psyche, these are presented from the perspective of realistic, but regrettable, limitations. Thus, Freud foreshadows many writers I will describe in this article, who acknowledge the divergence of clinical experience from the theoretical ideal, but who do not allow this experience to impinge upon the theory itself. The ideal as ideal is not questioned.

The Optimists

Ten years earlier, Ferenczi (1927) took a more optimistic and ambitious position. He proposed that a well-conducted analysis “is not an endless process, but one which can be brought to a natural end” (p. 86). The limiting factor, in Ferenczi’s view, is not in the patient’s psyche, as Freud proposed, but in the analyst’s “skill and patience” (p. 86). While acknowledging that he, himself, had had few such ideal experiences, he optimistically expected that this would change as analysts learned more and became more self-aware.

Writing about Freud’s 1937 paper, Fenichel, (1974) reviews that work and challenges Freud. The limitations delineated by Freud on the effectiveness of analysis are, in Fenichel’s view, inaccurate, and he proposes alternative perspectives that render each limitation surmountable.

Balint (1950) largely returns to echoes Ferenczi’s (1927) point of view, also believing that the gap between ideal and experience of successfully terminated analyses can be lessened by the reduction of errors on the analyst’s part.

More recently, continuing this optimistic tradition, Grinberg (1980) challenges Freud’s view on the limitations of analytic influence. For these optimistically inclined analysts, terminable analysis is more than an ideal; it is attainable, given a properly conducted analysis.

Termination as a Necessary Phase

With Glover (1955), termination is definitively conceived as not only desirable and possible, but also necessary to a successful analysis. In his thinking, analysis involves regression and the termination phase is, therefore, necessary for “transference wearing and ego readaptation” (p. 39). “The terminal period is specifically concerned with the final reversal of the tendency to regression”
Finally, he asserts, "Indeed, I would go so far as to say that unless a terminal phase has been passed through, it is very doubtful whether any case has been psychoanalyzed" (p. 140). The ideal of finality in a good termination is reflected in his view that post-termination contact from the patient indicates that the positive transference has not been fully analyzed.

Glover (1955) thus adds a new dimension to the thinking about termination. It becomes not just the end of the analytic process, but an analytic process in itself. Without a final termination, this process has not been experienced, and the treatment cannot be considered a legitimate analysis.

In a 1987 address to the American Psychoanalytic Association on the development of the concept of termination, Blum (1989) notes that Glover's (1955) view both reflected and was embraced as the analytic standard. The broader survey of the analytic literature on termination shows the pervasiveness of the ideals of autonomous functioning, the therapeutic necessity of the termination process, and the requirement of the final cessation of contact delineated by Glover.

Although authors propose a variety of criteria for deciding to move toward termination—Firestein (1978) and Shane and Shane (1984) have reviewed extensively the literature on termination criteria—the view is widely expressed that once the point of readiness for termination has been reached, from that point on, wishes for continued contact with the analyst reflect strivings for infantile gratification, which must be analyzed.

Reich (1950) states,

In nearly all cases which I have analyzed, there remained a wish to be loved by the analyst, to keep in contact with him, to build up a friendship. Further analysis of these wishes proved them to be derivatives of an early relationship with the parents, mostly diffuse oral or anal in nature [p. 181].

She attributes this common occurrence to the unavoidable "primitive narcissistic gratification" (p. 182) provided to the patient by the analyst's interest and attention. Although she sees the patient's wish to continue this gratification as understandable, she sees the gratification of this wish as preserving "an unhealthy transference situation" (p. 182). In an interesting contradiction, which I discuss later, she sees professional contact between analyst and students after termination as possibly beneficial in promoting a more realistic and mature relationship, but she does not allow this thought to alter her view of the pathology of the nonanalyst patient's wish for contact. Here again is the pattern of not allowing experience to inform theory.

Kubie (1968) also sees resistance to termination as reflecting the analysand's unconscious goal of restoring "those lost relationships of his earliest years" (p. 337). He goes so far as to suggest that the termination phase may be better conducted by a second analyst to mitigate the force of these resistances. For the same reason, he sees it as desirable for a length of time to elapse after termination before any extra-analytic contact would occur. He also sees the more immediate post-termination contact between analysts and trainees as detrimental because of the danger of perpetuating infantile gratifications.

In a more recent voicing of a similar view, Gaskell (1980), summarizing follow-up studies of analyses and panels on termination, states that "emancipation in an absolute sense was never achieved. The wish to be back in analysis reflected not only the wish for perfection, but the wish for union. This primordial transference (Stone, 1967) pressed for 'non-separateness and undifferentiation' (Loewald, 1978a, p. 26), which was never totally eliminated" (p. 19).

Gourevitch (1980) notes the common tendency of patients to resist termination out of various infantile motives. She therefore recommends that "an analyst should treat the patient as a responsible adult and introduce the possibility of termination from the beginning" (p. 73).
For all of these authors, then, separation from the analyst may be resisted, but remains a necessity. At some point, the analysand’s wish for further contact is seen as infantile and inappropriate. Termination is the necessary thwarting and analysis of these infantile strivings, and thus an essential component of a complete analysis.

Conceptions of Therapeutic Action

The ideals of autonomy and separation are also seen in common conceptions of the therapeutic action of analysis leading to termination. Many authors speak of termination as promoting an internalization of the functions or qualities of the analyst, leading to autonomous functioning. Although their descriptions vary somewhat, depending on their theoretical frame of reference, all propose some process by which the analysand develops the capacity to provide for himself and, therefore, no longer needs the analysis and the analyst.

In an early article on this idea, Kramer (1959) suggests that through analysis “the capacity to integrate unconscious conflict in the form of insight can become an independent ego function” (p. 17). She calls this function “auto-analytic.”

Shane and Shane (1984) believe the development of the capacity for self-analysis is an important criterion for termination. They state, “at the risk of oversimplifying, it appears to us that it is the capacity for self-analysis, broadly defined, along with the resolution of the transference neurosis, that ensures adequate autonomous functioning once the analysis is over” (p. 751). In termination, they believe, the analysand separates from the analyst, the identificatory ties with the analyst are loosened, and the self-analyzing function is retained.

Loewald (1988) describes the terminal phase as focusing a great deal on the “impending, actual, permanent separation” (p. 156). He believes that the mourning of the relationship to the analyst is an essential part of the process of internalization of the analyst, a transformation of the self that allows autonomous function. Because of the necessity of this mourning process for internalization, he believes analysts must sometimes insist on termination despite the patient’s reluctance.

Some self-psychologists writing on termination also describe the termination as necessary to the consolidation of new self-structure, which the analytic experience has promoted through optimal frustration and transmuting internalization (Palombo, 1982; Muslin, 1995). This consolidation happens through the revival of issues in the termination phase so that they can be reworked and gains solidified. The subsequent removal of the analyst as an external self-object allows the patient to independently utilize his newly formed self-structure to form mature self-object ties (Muslin, 1995).

From the perspective of ego psychology, Blank and Blank (1988) also describe analysis as promoting internalization of self and object interactions, through forming images of the interactions, and finally the transfer of functions of the object representation to the self representation. They propose that this “transfer theory” (p. 968) is one way that autonomy is acquired. They assert, “Termination is appropriate at the point where autonomous functioning has reached the optimal level that can be expected” (p. 972).

Berenstein and Fondevila (1989) entitled a paper, “Termination of Analysis in the Light of the Evolution of a Link.” Although their title gave me the idea the title of this article, their view is quite different from the one I am proposing. Their conception is that the analysand, through identification, establishes the psychoanalytic function within his ego. The analysis continues for a lifetime, but internally within the patient. The analytic link evolves from absolute dependence, to relative dependence on the analytic. Although (1995) reported the analytic ideal to the ideal.

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Although many of the authors previously cited above (Palombo, 1982; Loewald, 1988; Muslin,
1995) report that some patients, due to the severity of their pathology, are unable to achieve the an-
alytic ideal of autonomous functioning, none goes on to question the ideal per se. The exceptions
to the ideal tend to be viewed as sometimes necessary compromises.

MODIFICATIONS OF THE TRADITIONAL IDEALS

Over the years, authors have proposed various modifications or alternatives to the ideal view of
termination described above. They have allowed more interpenetration of theory and experience.
Although none is as extensive as the reconceptualization I am proposing, they do open the door
and provide direction and support for this new view.

Connotations of the Concept of Termination

In the literature, a few authors have objected, as I do, to the word termination. Stock, as reported
by Firestein, in a 1968 panel of the American Psychoanalytic Association, expressed the view that
it may be more useful to think of termination of an analysis as an interruption; and that every anal-
ysis is fundamentally interminable, yet subject to varying degrees of closure related to the pa-
tient’s personality and neurotic structure (p. 223).

Peder (1988) thinks “it is [a] rather odd, unsatisfactory and inappropriate term for what should
be a healthy, developmental process” (p. 495). He especially objects to the final, irrevocable, and
often negative connotations of the term.

I agree with both of these authors. As the literature review below will show, there is a growing
body of experience and thinking about the need for and value of alternatives to the traditional
view.

Positive Attitudes Toward Re-contact

A number of authors express a more positive view about the idea of an analysand’s returning for
further brief contact or more extended treatment. Rangell (1966), in a paper which offers the first
conceptualization of a post-termination phase, states, “More frequently, the door is left open for
any returns that might be necessary. The possibility of such occasional bouts of help is often one of
the most fruitful sequences to a successful analysis” (p. 159).

Again, in the 1968 panel, Stock, Zetzel, and Deutsch all expressed very positive attitudes to-
ward further contacts after termination. Zetzel, as reported by Firestein, regarded “no analysis as
successfully terminated unless the patient feels free to return in the case of further troubles”
(p. 229).

Sanville (1982) states, “Sometimes, of course, the ‘interruption’ is termination, but we may not
know for some years. I believe in an open door policy. I do not think it is my right to set up criteria
for discontinuance” (p. 129). She sees this stance as therapeutic in supporting the development of the
patient’s capacity to know and pursue what he or she needs and wants, including further treat-
ment. Imposition of an expectation of termination from without would work against the patient’s finding his or her own true self in the Winnicottian sense.

Malin (1990) provides a self-psychological rationale for the value of the patient returning to the same therapist for further treatment. She describes two cases in detail where termination reflected the attainment of a certain level of development. Both patients continued to grow during the interruption. For both, the return to treatment seemed to reflect a wish for further work at a new developmental level, not a deficiency in the initial treatment. Malin further proposes that return to the same therapist can be advantageous because the self-object tie established in the first period of treatment is not dissolved at termination, and is quickly reactivated when the patient returns.

These emergent ideas and experiences have aided me in my reconceptualization of the evolution of a relationship. They support an understanding of the analytic relationship as an evolving, in some sense unending, tie that remains available to the analysand.

**FOLLOW-UP STUDIES**

The literature on follow-up studies also unintentionally provided some evidence for the value of contact with the same or another analyst after termination. Early papers on follow-up studies seem to be speaking to the trepidation about follow-up contact that the traditional view of a necessary, final termination would imply. They seem to be defending the practice of follow-up studies by showing that it is actually helpful, not harmful, to analysands.

Pfeffer’s (1964, 1993) early work in this area led him to conclude that the transference neurosis is not obliterated at termination, but achieves a new resolution involving a new image of the analyst. In unstructured follow-up interviews with a different analyst, patients appeared to repeat both the transference neurosis and its resolution. Pfeffer (1993) noted that follow-up studies did not seem to have a negative impact on analysands. On the contrary, patients found value in “seeing their analysis in such a clear summary form” (p. 328). The follow-up helped some patients to return for further treatment, another beneficial side effect of follow-up, in Pfeffer’s view.

Using a similar follow-up format to Pfeffer’s, Norman, Blacker, Oremland, and Barret (1976) describe a similar “capsule recapitulation of the analysis” (p. 490) during a series of follow-up interviews. Although they do not in this paper identify this experience as necessarily beneficial, in another article (Oremland, Blacker & Norman, 1975) they describe two patients whose follow-up studies facilitated their return for further treatment.

Schlesinger and Robbins (1974), using a revised version of Pfeffer’s follow-up format, explicitly state that “the results of providing an opportunity for a retrospective view of the analysis appear to be beneficial” (p. 550). At a 1987 panel of the American Psychoanalytic Association (1989), they conceptualize follow-up interviews as having “a facilitating effect on the exercise of the self-analytic function of the former patient” (p. 818).

Wallerstein (1989), in reporting on follow-up studies conducted at the Menninger Foundation, describes unintended beneficial impact of follow-up studies as including a “convenient and face-saving road to additional treatment” (p. 937), and an opportunity to “use the follow-up visit to consolidate against the prospect of return for re-treatment” (p. 938).

Tyson (1996), speaking from a more purely clinical perspective, notes the value of follow-up visits or contact in consolidating treatment gains.
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Schachter (1990, 1992) makes this widespread observation of benefits to patients of follow-up studies the basis for his proposal that analysts move beyond the idea that post-termination contact should be predicated on the analysand’s need for further treatment. On an individualized basis, he suggests that during the termination phase, the analyst propose to the patient a post-termination session after a mutually agreed upon interval. This meeting would consider how the patient has been feeling and doing since termination. The gains and limitations of the analysis could also be discussed. It would be up to the patient to contact the analyst for this session. If it occurred, the possibility of further periodic contact could be discussed. Schachter proposes that, even without the need for further treatment, these contacts are beneficial in sustaining the belief in the analyst’s concern for, and interest in, the patient, a belief that can continue to promote growth as it did during the analysis. He also proposes that such contact promotes “a more mutual interaction with the analyst within the context of the analytic setting [which] should be helpful to the patient in furthering the development of ... a new object relationship with the analyst” (p. 149). He notes, as other authors have, that analytic candidates have many opportunities to develop increasing mutual interactions with their analysts post-termination, which he sees as having a potentially positive impact by fostering more equality and mutuality.

Thus, Schachter (1990, 1992) adds the idea that the analyst, as well as the analysand, might propose possible future contact. He also conceives of the analytic relationship as evolving and reconfiguring, and believes that this evolution can be beneficial to the analysand. This idea of a changing, but continuing, analytic relationship is central to my proposal for a new understanding. That the analyst might initiate the possibility of future contact seems to me to be a valuable option to consider.

Extra Analytic Contact

In an even further modification of the ideal view, some writers have proposed that extra-analytic contact with patients can be beneficial.

Although not advocating intentional posttermination social contact, Bornstein and Fintzy (1980) take the position that inadvertent social contact, if properly handled, can be beneficial. They advocate that the analyst be friendly and cordial, not overly intimate or aloof. Such experience, in their view, can be helpful in stabilizing and reinforcing analytic work. They describe several vignettes where former patients reported such encounters as positive and helpful.

As previously noted, Reich (1950) feels post-termination contacts between analysts and trainees can be helpful. She states:

With students who have the occasion to meet their analysts professionally after termination of analy-
isis, this process [relinquishing of the infantile transference relationship to the analyst] progresses faster. They have the opportunity to see their analyst in the frame of reality, and the magic omnipotent features of the relationship collapse more readily under these conditions and may be replaced by a mature friendship or a working relationship (p. 183).

Buxbaum (1950) agrees with Reich and extends these ideas to other patients as well. She says:

The acceptance of the former student-patient is a necessary step. I cannot conceive of therapeutic results continuing firmly when the analyst rejects the former student-patient after the end of the analysis. What we observe in colleagues is in no way different with other patients. It has been my experience, particularly with children who would say, "I want to see you at least once in a while. You are too
valuable a friend to lose." I would, of course, always assure them that I would remain their friend, sometimes adding, "You can come whenever you want to see me, and you don't need to throw a temper tantrum, steal, vomit, or whatever symptom was in order to do so." I have adopted the same procedure with adult patients with the same results. They come occasionally, but never misuse the privilege (p. 189).

Buxbaum sees this post-analytic social contact as reducing the trauma and mourning of termination. She also feels that it provides patients with a model of someone not afraid of a personal contact.

In a 1972 panel (1973) of the American Psychoanalytic Association, Buxbaum reportedly "re-called that Freud, on several occasions, remarked on an aspect of the relation between patient and analyst, most manifest after termination, that allowed for the establishment of friendship" (p. 189).

Bergman (1988) describes a personal correspondence between Freud and former analysand Kata Levy, which would indicate that Freud did not restrict the possibility of friendship with former analysands to professional colleagues. He reports that on August 18, 1920, Freud wrote to Kata Levy, "I cannot tell you how it relieves me to be able to write to you in a simple warmhearted way, without the educational rudeness that prevailed during the analysis, without having to hide my warmhearted friendship for you, a friendship you should never have doubted" (Bergman, 1988, p. 144).

Norman (1969), in a 1968 panel where analysts reported on their surveys of analysts in their institutes regarding problems of termination, although finding the prevalent lack of social involvement with former analysands, did note three instances of analysts and former patients becoming close friends.

Schachter (1992) also expresses openness to the idea of post-analytic friendship. He wonders if fantasies of post-termination relationship can reflect not only infantile wishes, but also "elements of healthy adult development" (p. 150). He also cites Freud’s words that “not every good relation between an analyst and his subject during and after analysis was to be regarded as a transference; there were also friendly relations which were based on reality, and which proved to be viable” (p. 222). Without being specific, Schachter goes on to state,

There are examples which replicate Freud’s observation that patient and analyst may, following termination, develop a genuine friendship which seems healthy rather than neurotic. Indeed, this does not seem a surprising outcome of a strong working alliance, i.e., of the patient's realistic trust in and belief in the analyst’s genuine concern for his/her well-being (p. 150).

It seems, then, that in the experience of at least some analysts, social contact, collegial associations, and even friendship are potentially valuable evolutions of the analytic relationship. These experiences support the view I hold that analytic relationships evolve in varied positive ways that may not include the total cessation of contact.

Interminable Analysis

Some writers have contributed to a rethinking of the negative judgment of interminable analysis contained in the ideal view. Firestein (1982) relates that a number of respondents to his survey of the experience of senior analysts, found that some of their analysands continued to make progress in the later years of analyses lasting as long as twenty years.
Arnold Cooper (1991) describes how viewing psychoanalysis as a process of narrative construction leads to the conclusion that analysis is interminable. Although he does not concretely address the possibility of the analysis remaining in treatment indefinitely, the possibility is implied in a number of his statements. He says, “The modern narrative view of psychoanalysis, with its emphasis on large constructions rather than narrow interpretation of conflict, assumes that there are always multiple possibilities” (p. 121). And later, “The issue of interminable analysis is, indeed, a realization that different perspectives on the person will always arise in the course of adaptation to new life situations” (p. 122). And finally, “Analysis is, indeed, interminable as the human personality is constantly recreating itself” (p. 123).

Adatto (1995), although seeming to hold a more traditional view in expecting that analysis will terminate, does take a developmental perspective. He states, “I view analysis as a process that modifies obstacles to development; since development is a life-long process, developmental changes can evoke new or old conflicts that require analytic scrutiny” (p. 143). “In this sense, there can be no end to the analytic process” (p. 147).

Leignier (1986) argues for a more flexible individualized perspective that could include the possibility of interminable analysis. She observes, “For some patients, continuing indefinitely may be lifesaving” (p. 8). And later, “Ideally, it seems preferable for analysts and patients to remain together as long as they both want to be, if life goals and treatment goals are still in the process of being met” (p. 17). She also challenges the ideal of mature independence. “All healthy people are interdependent. If continuing in analysis enables us to function maturely in our lives, why does it matter if we are dependent on analysis?” (p. 16).

Finally, Rucker (1993) offers the most systematic and extensive rethinking of the traditional model of termination that I have found in the literature. She argues persuasively for the potential value for some of an interminable analysis. She asserts that the belief that termination is necessary in a successful analysis emerges from tenets of drive theory and ego psychology. She notes that newer relational models of analysis question the ideal of autonomy and propose an alternative model of mature dependent relatedness. From this perspective, she states, “It is plausible that the wish for a lifelong analysis is natural and fitting to a given analytic dyad . . . . In fact, it may represent the attainment of a mature dependent position (Fairbairn, 1952) and the appreciation of the analyst and the analytic function as irreplaceable by extra-analytic relationships” (p. 162). She proposes that sometimes “the analytic relationship loosens its ties to treatment, takes on an exploratory experiential relational emphasis and transcends the schism between psychoanalysis and nonanalytic relationships” (p. 163). She expresses her belief that there is a valid place for such interminable analyses.

Here is yet another modification of the traditional ideal view of termination, where interminable analysis is no longer seen as a failure or a necessary compromise. It becomes a fully acceptable evolution of the analytic relationship. The analytic relationship may be a unique experience not attainable in any other way. Its life-enhancing quality is not necessarily exhausted after a certain period of time.

Empirical Studies

Finally, there are empirical studies which clearly indicate that the ideally terminated analysis is a rarity. Strupp (1989) in a panel of the American Psychoanalytic Association reports that one finding of his outcome studies is that “40–50% of former patients do contact their therapists at some
point" (p. 820). In summarizing the results of a questionnaire sent to senior analysts, Firestein (1982) reported findings from a survey of his own that, on the issues of posttermination consultations, several respondents stated "that almost every patient will have contact with them at some time" (p. 494).

In a survey of seventy-one terminated cases, Hartlaub, Martin, and Rhine (1986) found that two-thirds of these patients had recontacted their analysts within three years. The analysts providing this data generally viewed such recontact as serving positive developmental functions, which included the need to develop a less idealized image of the analysis, reactivation of the self-analytic function, and restructuring of the self and object representations by reporting accomplishments and having these acknowledged by the analyst. They note that these functions, particularly the de-idealization of the analyst, may be more easily accomplished in training analyses because of the opportunities for ongoing contact after termination. They make the interesting point that this may create a sort of countertransference blind spot in which analysts do not appreciate the difficulties in terminating for analysands who do not have such opportunities for continuing contact. They state, "Perhaps we analysts are ill-prepared to help him [the patient] with the impact of this reality [cessation of contact], because we have been silently, as it were, profiting from the effect of continuing contact, without conceptualizing its nature or understanding the psychological necessity for certain experiences which go with it" (p. 904).

Clearly, on a purely empirical basis, the ideal of termination does not match what is happening in real, everyday analytic experience.

CHANGING ANALYTIC THEORY

At the same time that experience has been modifying our views about termination, analytic theory has been evolving beyond the theoretical matrix from which the traditional ideals of termination emerged. In particular, changes in developmental theory, new relational models of psychoanalysis, and integrations of neuroscience findings into psychoanalytic thinking all support the ideal of variously evolving analytic relationships.

Changes in Psychoanalytic Developmental Theory

Particularly with the integration of infancy research, developmental theory has moved from a predominantly intrapsychic model of drives and their transformation to an understanding of development as an interpersonal process. Although this article is not the place for a comprehensive review of the topic, the contemporary literature on infancy research, much of it written by analysts, clearly conceives of all development as occurring in a relational matrix. Beebe and Lachmann (1988); Bowlby (1988); Emde (1988); Lichtenberg (1986); and Stern (1985) are just a few of many examples.

As an example of the new views on termination arising from this literature, Stern (1995) reports the finding that in parent-infant treatment, serial brief intervention can be beneficial to address new issues posed by the baby's ongoing development. He notes that the traditional bias that a period of treatment should have a long-lasting, if not permanent, effect may have prevented an earlier recognition of the value and even advantage of this form of treatment for parent-infant work.
At a later point, Stern (1995) notes the applicability of the serial periodic treatment model to the treatment of adults. He says,

But if one sees lifespan development as a never-ending series of transformations that cannot be anticipated or sufficiently prepared for, even by getting the coping machinery in good order, then the only difference between infancy—or adolescence, for that matter—and any other period or phase of the lifespan is one of degree, that is, rate of internal change and rate of encountering drastically new context. The need for a working-through process over time is then seen as normative, and the timing of therapy may need to adjust to it in the form of some variation of the serial-treatment format. Such re-applications of treatment in this light are neither re-treatments nor second treatments. They are simply the continuation of a single treatment across discontinuities in a lifespan [p. 192].

Thus, Stern’s view, arising out of infancy research and mother–infant intervention, clearly challenges the traditional ideal of termination, and supports a varied, individualized evolution of the analytic relationship.

Although Erickson (1963) and Levinson et al. (1978), among others, preceded Colarussso and Nemiroff (1981) in proposing models of adult development, Colarussso and Nemiroff are clearer in proposing that adult development occurs in relationship. They disagree with what they call the “commonly held conception … that the adult, compared to the child, is relatively free of environmental influence. In contradistinction, we suggest that in the achievement of new and phase-specific developmental tasks of adulthood, the individual is as dependent as the child on the environment” (p. 62).

Settlage et al. (1987) have also asserted, “Our study of adult development rests on the premise that human psychological development is a life-long process” (p. 347). They also assert the relational basis of development, saying, “These ego functions and structures which are not biologically rooted are developed through human interactions” (p. 351).

Emde (1985) reviews a number of books on developmental research extending into adulthood and concludes, “We must realize that the developmental thrust is not over in adolescence—far from it…. It may be, in fact, that the psychology of adult development is as important for clinical psychoanalysis as is the psychology of early development” (p. 109). He is clear that this development occurs in relationships, and he makes the interesting observation that “psychoanalysis may be a special case of what happens more generally under favorable environmental circumstances” (p. 111).

Shane (1977, 1979) has written in depth about the implications of a lifespan developmental orientation for psychoanalysis. Shane proposes that analysis itself is a developmental experience; that development occurs in analysis through a combination of insight and a new relational experience with the analyst and others. Colarussso and Nemiroff (1981) reference Shane extensively in their discussion of the implications of an adult developmental model for psychoanalysis. They also extend Shane’s view of analysis as a developmental experience to include implications of termination.

The door to the consulting room is never finally closed; rather, termination is more flexible and open-end. Since the resumption of normal development is the overriding goal of therapy, this flexibility implies that normative crises and transitions are to be expected after the individual leaves treatment and engages in new developmental tasks. For each individual patient, the therapist must find a way in the termination process to convey to his patient that yes, certain developmental goals have been achieved in the hard work of therapy, but certainly more experiences are ahead of the patient, and the
therapist stands ready to participate in furthering the patient’s development, should the patient wish to consult him, however briefly [p. 204].

To summarize, traditional drive theory pointed to an understanding of termination as the necessary finitude of infantile strivings. Newer psychoanalytic developmental theory points in a different direction. All the theorists cited above see development as a life-long process that is nurtured in relationships. This is, then, a theoretical evolution that supports the notion of life-long evolution of the analytic relationship according to the developmental needs of the analysand and the unique qualities of any particular analytic dyad.

Changing Ideals in Psychoanalytic Theory

More recent psychoanalytic thinking has also challenged the traditional ideal that the goal of either development or analysis is an independent, autonomously functioning person. In their 1978 book, *Illusion in Loving*, Shor and Sanville proposed a conception of development that was quite unusual for its time in the psychoanalytic literature. In this book, they assert that the goal of human functioning and development is not autonomy, but rather richer and more complex modes of connection and relatedness. They describe an alternation of greater separation and greater connection which allows each partner to contribute to the enrichment of the relationship.

Kohut (1984), as he established his own theory, was explicit in his views that interrelatedness, not autonomy, is the lifelong essence of human functioning. He stated:

Self-psychology holds that self-selfobject relationships form the essence of psychological life from birth to death, that a move from dependence (symbiosis) to independence (autonomy) in the psychological sphere is no more possible, let alone desirable, than a corresponding move from a life dependent on oxygen to a life independent of it in the biological sphere. The developments that characterize normal psychological life must, in our view, be seen in the changing nature of the relationship between the self’s self-objects, but not in the self-relinquishment of selfobjects [p. 47].

More recently, Stolorow and Atwood (1992) further developed this view in their discussion of the “myth of the isolated mind” (p. 4). In this discussion, they assert that “the concept of an autonomous, isolated mind is the central myth that pervades contemporary Western culture” (p. 7). They note that this myth has been incorporated into psychoanalytic theory “in the form of an ideal endpoint of optimal development” (p. 12) and as the “ideal outcome of a successful analysis” (p. 14). This myth contrasts with their own view that: “the intrinsic embeddedness of self-experience in intersubjective field means that our self-esteem, our sense of personal identity, even our experience of ourselves as having distinct and enduring existence are contingent on specific sustaining relations to the human surround” (p. 10).

Not surprisingly, a different view of termination emerges from their position. They say, “a perspective that recognizes that experience and its organization are inextricably embedded in an intersubjective context can accept and even welcome the patient’s remaining tie to the analyst as a potential source of emotional sustenance for the future” (Stolorow & Atwood, 1992, p. 4).

Clearly, then, changing ideals lead to new perspectives on termination. The analysand may cease contact for some time, but the sustaining emotional bond remains, and resumption of contact may now be viewed as a reflection of this positive state of affairs.
Relational Models of Psychoanalysis

Mitchell (1983, 1988) has written extensively about what he identifies as a paradigm shift in psychoanalysis from a “drive/structure model” to a “relational/structure model” (Greenberg & Mitchell, 1983, p. 20). In describing this shift, he says, “Mind has been re-defined from a set of predetermined structures emerging from inside an individual organism to transactional patterns and internal structures derived from an interactive, interpersonal field” (Mitchell, 1989, p. 17). In addition, Ghent (1992) and Aron (1995) have discussed this shift and presented histories of the developments in analytic thinking out of which this shift has emerged.

Mitchell (1993) interestingly retains a somewhat traditional view of termination when he says, “Ending is necessary, if the analytic work is not to become a static alternative to a fully lived life” (p. 229). And later, “Analysis, by its very nature, demands a suspension of choice and responsibility… One of the startling realizations upon leaving analysis is the sense that one is now fully responsible for one’s life” (p. 229). And further, “Ironically, the very dyadic nature of the analytic relationship comes eventually to constrain the free exploration of the analysand’s personal experience” (p. 229). The traditional idea of the necessity of termination is definitely at work in these statements.

At the same time, Mitchell does note that the relational model leads to new and different conceptions of termination. He notes that all concepts of complete analysis and natural termination have little meaning from a relational perspective, for no analysis is ever complete, and no termination is ever natural. It is possible to use these conclusions of Mitchell’s to support the contention that since no analysis is ever complete, many evolutions of the analytic dyad are possible, even though Mitchell himself leaves these potential implications unexplored.

Neuroscience

Findings from neuroscience are now being integrated into psychoanalytic thinking, and can inform a reconceptualization of termination. Schore (1994), who gives centrality to the neurobiology of affect regulation for human functioning, states, “For many patients, the psychotherapeutic relationships creates, for the first time, an optimal socioeconomical environment for the development of internal structures that efficiently regulate affect” (p. 465). And later, “Affect regulatory dialogues, mediated by a psychotherapist, [he describes these as having both verbal and nonverbal components] may induce literal structural change in the form of new patterns of growth of cortical–limbic circuitries, especially in the right hemisphere which contains representations of self-and-object images” (p. 468). He also emphasizes the necessity of long-term treatment to bring about such changes. Thus, he stresses that repeated experiences of verbal and nonverbal interaction with the therapist over time produce lasting changes in brain structure that underlie enhanced affect regulatory capacities.

Gedo (1995) says this about working through: “From a neurological viewpoint, these processes involved the establishment of new neural networks through habituation. From the vantage point of cognition, this necessarily slow process amounts to learning new skills in communication, the mastery of mounting unpleasure, and the expansion of ‘referential activity’” (p. 339). Here, too, the necessity of repeated experience over time is emphasized.

In discussing Gedo’s paper, Rothstein (1995) also stresses the necessity of “frequency of sessions, repetition of interpretations, and a long period of time” (p. 371). He conceives of the brain
as both “stable and open to new experience” (p. 371). He believes that analysis results in the “establishment of new schemas in the brain” (p. 371), but also asserts that, “The old schemas, however, continue to exist” (p. 372). He believes that this points to the life-long need for self-analysis. I would add that it also points to the possible value of later continued analysis with an analyst.

Also, in discussing Gedo’s paper, Shane and Shane (1995) stress the new relational experience established in analysis as critical to change. They say, “But it does take some real years, and a real portion of the patient’s current life, through a myriad of interactions, for the patient to fully perceive the analyst, as well as others, as truly different… Not a replica of the past” (p. 375).

Finally, in his discussion of Gedo’s paper, Modell (1995) presents the view that working through involves the recategorization of memory. He notes that, in this sense, working through really is a life-long process.

I contend that these understandings from neuroscience of the time and repetition required to build new brain structure, of the interactional origins of this structure-building process, and of the life-long need for processes of recategorization, although not directly addressing the issue of termination, do support a more flexible view that long, possibly indefinitely continuing, or life-long intermittent analyses are viable and desirable options.

FROM TERMINATION TO THE EVOLUTION OF A RELATIONSHIP

In light of the ongoing changes in theory based on infancy research, neuroscience, and clinical experience, I propose that from these a new understanding emerges that moves beyond the concept of termination to the idea that analytic relationships may evolve over time in many ways that are determined uniquely in each dyad. This is consistent with Bacal’s (1985) recommendation that analytic technique not to be prescribed. Treatment decisions should be guided, instead, by an effort to find the optimal experience for each individual dyad.

It is clear from the literature that analytic relationships rarely terminate in the manner prescribed in the classical ideal—a complete ending, with the analysand becoming fully autonomous in his functioning. At the very least, the analytic process and relationship continue inside the analysand and analyst. Neither analysand nor analyst ever function autonomously. Both live out their lives embedded in relational matrices. Human interdependence is not something infantile, to be renounced; it is inherent in the human condition.

Termination is not necessary. Some analysands do wish to cease contact for some period of time. Most recontact their analyst for various reasons. They may seek further treatment. They may seek some sense of continuity and connection in knowing that the analyst knows about the unfolding of their lives. They may want to develop new configurations of relationship with their analyst. Some analyses may continue to evolve without cessation of contact, possibly for a lifetime. All of these possibilities may have beneficial consequences.

Analysts may want to propose a structure for periodic continuing contact for some analysands. The analytic relationship may reconfigure into new forms less akin to the analytic encounter. There may be intended or unintended social encounters. Analysands may become consultees or colleagues. Friendships may develop.

If development is viewed as continuing throughout the lifespan, the evolutions described above, and probably others as well, can be seen positively as desirable, growth-enhancing trajectories, unique to each dyad. This flexible understanding can replace a more constrained prescrip-
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tion for the course of analysis. I will now describe a clinical experience that illustrates that this
new understanding can enhance our clinical work.

CLINICAL ILLUSTRATION
When he entered analysis, William was a 24-year-old married man, who moved to Los Angeles
from a small Midwestern community for five years to enroll in a Ph.D. program in clinical psy-
Chology. As he described it, his experiences in living and learning in Los Angeles had destabilized
his conservative worldview and adaptation to life. He was both pleased and frightened by his new
experience and discoveries, since he was not sure that he could trust his new thoughts, feelings,
and impulses. He feared falling away from values that he continued to hold dear. He was also feel-
ing very isolated because forming friendships had always been a slow process for him, and was
even more difficult since he knew his time in Los Angeles was limited. Further, he was becoming
increasingly aware of his difficulty sharing feelings authentically, which limited the intimacy he
could achieve with others, including his wife.

His distress led a friend who was in analysis to suggest that he do the same. He welcomed the
idea, even though he would be leaving Los Angeles in sixteen months to return to the area of the
country where he and his wife had previously lived.

We met four times a week for those sixteen months. In our work, we understood that his
core theme of mistrust of his own inclinations was deeply rooted in William’s Christian up-
bringing and faith. He had been taught that man was born in original sin, and must defer to the
authority of God. It was dangerous to follow one’s own authority, because one might unknow-
ingly come under the devil’s influence. These beliefs were reinforced by his family’s authoritar-
ian structure, which was guided by the conviction that children’s natures are bad, and must be
shaped and controlled by parental authority. It is not surprising that change felt frightening and
potentially dangerous to William. William’s commitment to his faith also meant that any per-
sonal change in the analysis required a search for theological perspectives that could inform his
evolution. As he put it, he always wanted theology to be the final lens through which he filtered
his experience.

Our relationship was often in focus. One important configuration was that William feared I
would judge him for his liberalizing theological views. Concurrently, I feared that his discovery of
my “theological illiteracy” would lead him to want a different analyst. Out of this discussion, we
both had an enhanced conviction or our “good match,” and an enhanced sense of safety and com-
fort with each other.

As the time to leave approached, William expressed deep happiness and gratitude for the
changes in his life, which analysis had helped him to achieve. His professional confidence was
greatly increased. He had developed some close, treasured friendships. He was more open and ex-
pressive, which had brought greater intimacy with his wife and friends. He trusted himself to be
more open, flexible, and guided by his own inclinations, since he now knew that his values were
internal and not reliant on external rules and authority. He was engaged in an exciting and compel-
ing theological search. He felt that most critical to these changes had been our relationship, in
particular, that I “allowed him to go wherever he wanted” in our sessions, and responded posi-
tively to his increasing freedom in doing this. It was in this experience that he learned to better
trust himself.
William was excited to leave analysis and "try his wings." At the same time, he was sad about losing our cherished relationship. He also thought that, at some point, he would want to return to treatment, maybe once a week. I gave him a referral in the area where he would be living. He said that the idea of seeing someone else was difficult because he could not imagine that another relationship could function with the same ease of understanding as ours.

At the same time, in his other relationships, he was determined not to do what he had done during his many childhood moves. As a child, he was allowed only positive feelings about each new destination. Any sadness or loss was expressed alone, hidden away in his bedroom. Upon moving, all previous relationships, no matter how important to him, were severed. Now, he wanted to share his grief with those he was leaving, and sustain ties with those who mattered. He was very pleased with his growing ability to leave in this new, connected way. I also told him that I would like to hear from him, and he was happy (as was I) to think that we did not have to sever our connection. At the same time, neither of us questioned the referral to a new therapist.

A few weeks before his move, William began a session by reporting, seemingly in the spirit of an interesting bit of news, that a friend in his training program who was also in analysis, and also moving away from Los Angeles, had been offered by his analyst the possibility of continuing analysis by phone after his move. I felt some pull from William to join him in negatively judging this offer. When I did not, William went on to other matters, as it slowly dawned on me that he and I had not discussed this option. After a few minutes, I asked him what he thought of his friend's analyst's proposal. He seemed almost stunned and a bit disoriented by my question and by the idea that this could be a real option. He fell silent, and then began to realize that the idea had some appeal.

Over the next several sessions, we explored many issues related to this option, and in the end William decided that he wanted to take a break for a couple of months during his move. He would then like to begin once per month sessions by phone, and see what developed. He thought it was possible, but not necessarily so, that he might want more frequent phone sessions at a later date … or maybe some other option would emerge as preferable. He would like to keep it open-ended. At the point of this writing, we have had several monthly sessions by phone. We were both concerned about how the lack of face-to-face contact would feel, but now agree that it is more comfortable than we had expected. I think we both value the ongoing sense of continuity and connection that this contact provides. We talk most about his professional development. William will be finishing his dissertation soon, and is considering entering analytic training. How this might impact our relationship will be a part of our conversation. I think we both share a sense of possibility and creativity in our flexibly configured relationship.

**DISCUSSION**

I have pondered and William and I have discussed, at length, how it was that we nearly missed this more desirable arrangement. It is with more than a little distress that I have contemplated how near we came to reenacting some portion of the pattern he wished to change, that we could have unnecessarily restricted our contact after his move. It worries me to think that this could have happened.

Why did I not propose the option of treatment by phone to William? It had crossed my mind at various moments. I had read Lindon's (1988) article on analysis by telephone, and liked this expansion of our options for avoiding disruptive losses. While I had not myself conducted more than intermitte
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as that we nearly missed this have contemplated how near we could have unnec-at this could have happened. n? It had crossed my mind at telephone, and liked this ex-myself conducted more than intermittent sessions by phone, I had discussed with others their experiences (Bacal, Ziskind, per-sonal communications) and believed that treatment by telephone is sometimes preferable to changing therapist or analyst. Yet I did not offer this possibility to William.

In part, I think, I did not want to replicate his experience with his mother, who imposed her presence on him, hung on his every move, gained identity through him, and could not give him privacy or the space to be a person different from the one she needed him to be for her. Indeed, when I told William that these considerations might have held me back, he agreed that his first reaction to hearing of his friend’s analyst’s proposal was to judge the analyst as selfishly clinging to his analysis. William and I concluded, however, that we could have worked through these issues if I had allowed the option to become a dialogue with him instead of with myself.

I think there is yet another way to understand this “near-miss.” It seems to me that both William and I were interacting from old and new models, side-by-side. For William, they included his professional training and his old model of severing contact, side-by-side with a new model of experiencing loss and sustaining some version of valued ties. For me, they included my professional training about termination side-by-side with my development of more flexible, individualized attention to what may be needed and preferable in each treatment relationship. In the termination process, I think both of us thought we were exploring and developing new ways of being in relation ship, and were unaware of the continuing influence of old configurations on our choices. I believe that, for both William and me, this discovery was in some ways sudden and shocking, and allowed us to further develop and integrate our ability to be in relationships in new and more flexible ways.

Donnel Stern (1990) talks of the creative process of courting surprise in analysis. He describes how collegial input can help us identify and transcend unconscious relational assumptions constraining our work. We can be surprised by this discovery of what we did not know we were doing and, thereby, be freed to find new creative possibilities. I believe William and I were surprised and enhanced in this way.

I do not know who William’s friend’s analyst is, but I am deeply indebted to him for helping us to court surprise by providing us with the input we needed to further the evolution of our relationship.

REFERENCES


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