



OUTCOME RESEARCH AND THE FUTURE OF PSYCHOANALYSIS

CLINICIANS AND RESEARCHERS IN DIALOGUE

Edited by
Marianne Leuzinger-Bohleber, Mark Solms
and Simon E. Arnold



ROUTLEDGE



Outcome Research and the Future of Psychoanalysis

Outcome Research and the Future of Psychoanalysis explores the connection between outcome studies and important and complex questions of clinical practices, research methodologies, epistemology, and sociological considerations. Presenting the ideas and voices of leading experts in clinical and extra-clinical research in psychoanalysis, the book provides an overview of the state of the art of outcome research, its results and implications. Furthermore, its contributions discuss the basic premises and ideas of outcome research and in which way the contemporary Zeitgeist might shape the future of psychoanalysis.

Divided into three parts, the book begins by discussing the scientific basis of psychoanalysis and advances in psychoanalytic thinking as well as the state of the art of psychoanalytic outcome research, critically analyzing so-called evidence-based therapies. Part II of the book contains exemplary research projects that are discussed from a clinical perspective, illustrating the dialogue between researchers and clinicians. Lastly, in Part III, several psychoanalysts review the importance of critical thinking and research in psychoanalytical education.

Thought-provoking and expertly written and researched, this book is a useful resource for academics, researchers and postgraduate students in the fields of mental health, psychotherapy, and psychoanalysis.

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Clinicians and Researchers in Dialogue

Edited by Marianne Leuzinger-Bohleber,
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First published 2020
by Routledge
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge
52 Vanderbilt Avenue, New York, NY 10017

Routledge is an imprint of the Taylor & Francis Group, an informa business

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British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

Library of Congress Cataloging-in-Publication Data

A catalog record has been requested for this book

ISBN: 978-0-367-23666-3 (hbk)

ISBN: 978-0-429-28111-2 (ebk)

Typeset in Bembo

by Wearset Ltd, Boldon, Tyne and Wear

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Introduction

Outcome research and the future of psychoanalysis

Marianne Leuzinger-Bohleber and Simon E. Arnold

A basic question

Can outcome research save the future of psychoanalysis? This question—the original title of a Sandler Research Conference, held in Los Angeles at the Children’s Hospital in early May 2018 (local host: Bradley Peterson, MD) and a recurrent theme throughout our volume—refers to the view of some clinical colleagues, scholars in the field of psychotherapy research and health policy-makers. For them, the future of psychoanalysis in times of evidence-based medicine depends on proving the outcome of treatments for different patient groups. In fact, it implies that psychoanalysis would have no future without competing in this race and that it is a matter of pure survival. Such prophecies of doom are not new: speaking of the future, we will take a moment and look back on the history of psychoanalysis, and some tendencies in psychoanalytical research, before giving an overview of the contributions to the volume, you are about to read.

But let’s take one step at a time and remember the backstory of this volume: in the 1990s an international psychoanalytic research conference was brought to life by Annemarie and Joseph Sandler, with the support of Arnold Cooper, Robert Wallerstein, Peter Fonagy, and many more, as a productive answer to a changing *Zeitgeist* in the realm of science. It has—together with the Research Training Program of the International Psychoanalytic Association (IPA) in London that was founded five years later—contributed essentially to embedding psychoanalysis in a new way in the world of science and in the general public.

Therefore the Sandler Conferences are closely connected to the topic of this volume: the founders of the conference have been convinced that empirical research, and particularly outcome research, would prove to be essential for the future of psychoanalysis. However, as we will discuss in this introduction, not all psychoanalysts are sharing their view. Empirical outcome research was controversial in the psychoanalytical community at that time—and it still is today. Thus one central aim of the Sandler Conferences was and still is the dialogue between researchers and clinicians. Joseph and Annemarie Sandler, both experts in the so-called conceptual research in psychoanalysis,

were two of the most successful bridge-builders between the world of psychoanalytic researchers on the one hand, who often are engrossed in the academic discourse and the clinicians on the other hand, working in their private offices and having their professional exchange almost exclusively in their psychoanalytical institutions.

The potential danger of splitting between researchers and clinicians has interesting historical roots. In the following sections, we are developing some thoughts on these splits. However, of course the historical remarks must remain very fragmentary within the frame of this introduction.¹ We must confine ourselves to a few thoughts on this complex topic that are of interest to this volume. We will focus on some developments in Germany² (and in particular in Frankfurt a.M.) to highlight in an exemplary way some problematic ruptures and polarizations between clinicians and (empirical) researchers, especially in outcome research, due to the traumatic history of psychoanalysis in the twentieth century.³

Clinical and extraclinical research in psychoanalysis—some historical remarks

The beginnings ...

George Makari (2008) impressively traces back the origins of psychoanalysis to the beginning of the twentieth century and shows its entrenchment in European cultural and intellectual history. He argues that Freud succeeded in integrating various trends of biology, physiology, psychophysics, and psychology at the time. For instance, the controversies surrounding a new understanding of psychopathology around Charcot at the world-famous Salpêtrière Hospital in France, as well as the scientific study of human sexuality by Krafft-Ebing, Ehrenfels, Weinberger, Moll, Hirschfeld, and others into his theories of psychosexual development, the unconscious and the psychodynamics of mental disorders (see Makari, 2008, p. 120). Moreover, in this scientific orientation Freud was strongly influenced by Darwinism, which saw man as an organism driven by needs that he tries to satisfy under specific environmental conditions. Therefore, Freud defined “*Triebe*” (drives) at the border between the somatic and the psychic. He understood psychological qualities, the developmental stages of sexuality and the ego functions as the product of a long evolutionary history in which man continuously adapted to inner and outer realities (cf. also Jones et al., 1960; Gay, 1988; Zaretsky, 2004, pp. 473ff.; Whitebook, 2010).

One of the great achievements of Freud in discovering psychoanalysis is, undisputedly, that he kept up with the natural sciences of his time, but also integrated so-called humanities and cultural sciences. Freud, as a young man, was very interested in philosophy and other humanities before he turned to the natural sciences with a remarkably violent emotional reaction. In the laboratory

at the Physiological Institute of Ernst Brücke, he got to know a strictly positivistic understanding of science that attracted him throughout his life. Nevertheless, Freud later turned away from the neurology of his time, because he recognized its limits in understanding the psyche. With the *Interpretation of Dreams* (1900), he defined psychoanalysis as *pure psychology*. However, he continued to see himself as a physician who observed complex clinical phenomena like a natural scientist. According to Joel Whitebook (2010), his desire for a precise “empirical” examination of hypotheses and theories protected Freud from his own inclination to wild speculation. As a “philosophical physician” he was thus able to establish a new “specific science of the unconscious”—psychoanalysis.

Makari (2008) as well as Zaretsky (2004) give detailed accounts how, even in the early days of psychoanalysis, Freud and his followers tried to find a way between, on the one hand, an open, innovative discussion, with constant questioning so-called “truths”—as they characterized a scientific discourse—and, on the other hand, the search for a common identity, the specific characteristics of “psychoanalysis.”

According to Makari (2008), this effort of psychoanalysis has been a key to its success. Freud followed a gut feeling and stuck to his understanding of psychoanalysis in times of great conflicts—both content-related and institutional. He resisted integrating psychoanalysis either into the world of medicine or into that of philosophy and the humanities and therefore retained its autonomy as a scientific discipline. In 1909 Freud considered integrating psychoanalysis into the medical organization *Internationaler Verein für medizinische Psychologie und Psychotherapie* of August Forel or even into the *Orden für Ethik und Kultur*. Fortunately, he decided during the Sylvester night 1910, to found his own organization, the International Psychoanalytical Association (IPA, see Falzeder, 2010). With this decision, the independence of psychoanalysis as a scientific discipline with its own research methodology and institution was protected. Afterward, Freud always emphasized that psychoanalysis did not deserve to be “swallowed up” by medicine. Instead he said, “as a ‘deep-psychology’, a theory of the mental unconscious, it can become indispensable to all the sciences which are concerned with the evolution of human civilization and its major institutions such as art, religion and the social order” (Freud, 1926, p. 248).

However, as Michael Schröter (2019) argues for the years 1918 to 1932, the Viennese group around Freud was characterized by a continuing openness towards the academic world, psychiatry, and other sciences.

Unlike Berlin (or Germany in general), in Vienna there were major overlaps between the representatives of academic psychiatry and psychoanalysis. This was largely due to the chair-holder Julius Wagner-Lauregg, who despite his personal resentment of psychoanalysis gave his academic staff the freedom to engage in research on it.

(Schröter, 2019, p. 290, translation MLB)

Schröter (2019) discusses three exponents of this concatenation: Otto Plözl,⁴ Paul Schilder, and Heinz Hartmann. All of them played a central part outside their therapeutic offices in working on empirical confirmation of psychoanalytic theory and encouraging further development. Other well-known psychoanalysts such as Helene Deutsch, Hermann Nunberg, and Erwin Stengel had positions in psychiatry or at medical departments of the Viennese University. Felix Deutsch was a doctor of internal medicine, Josef Karl Freidjung worked with children and adolescents, and Charlotte and Karl Bühler were famous professors in Psychology. Hans Kelsen was a full professor of state and administrative law and August Aichhorn and Lili Roubiczek (Peller) were devoted to education and social work. All of them were either psychoanalysts themselves or interested in the interdisciplinary dialogue with psychoanalysis, at that time the new, challenging science of the unconscious.

As an example, Schröter (2019) depicts the Association for Applied Psychopathology and Psychology, founded in 1920, as a forum for lively and unusual discussions. Their aim was to promote the study and application of psychopathological and scientific knowledge to practical and social life, to cultural research and history. Erwin Stansky, Professor at the Neurological Psychiatric University Clinic, was in charge of the discussion and organized a series of lectures by psychoanalysts (Bernfeld, Ferenczi, Aichhorn, and Schilder) and non-psychoanalysts (Allers, Kelsen, and Stransky, etc.). Afterward he was very proud and described the events as the first serious academic discussion, at least in the German-speaking world, in which clinicians and psychoanalysts participated. Stransky formulated a wish: “May both—but especially psychoanalysts—descend from their towers! Intolerance and science are incompatible” (Stransky & Dattner, 1922, p. 1, quoted after Schröter, 2019, p. 282, translation MLB).

Within the framework of this introduction, we can only mention that problems of empirical research in psychoanalysis were raised already during these early controversial discussions that are still relevant today. For example, Heinz Hartmann gave a lecture on *Empirism in Psychoanalysis*. His talk was followed by fierce controversies on the scientific understanding of psychoanalysis and tensions in the dialogue with the academic-scientific community (e.g., Hartmann, Pappenheim, & Stransky, 1931). According to Schröter (2019, pp. 284ff.), after some years it became apparent that there was no common ground on which the older generation of psychoanalytical practitioners impressed by their therapeutic experiences (and faithfully bound to Freud) could meet with methodically trained and methodically demanding academics and scientists. However, it is historically interesting that in Vienna many psychoanalysts and other researchers endeavored to create a common ground with the non-psychoanalytical scientific world and—despite all the difficulties just mentioned—to not simply ignore academic and cultural discourses. In contrast, according to Schröter (2019), there were hardly any crossing borders in Berlin. The psychoanalytical community in Berlin concentrated much more on internal education or theory

development—and the “internal differentiation” of psychoanalysis (Binnendifferenzierung), as Schröter calls it.⁵

The traumatic history of psychoanalysis and some of its epistemological and methodological consequences

The divergent developments in Vienna as well as in Berlin were brought to a tragic end by the rise of National Socialism and anti-Semitism in the early 1930s: many psychoanalysts were persecuted and murdered in the concentration camps, a few emigrated and others, especially the non-Jewish Germans, “adapted” to Nazi-Germany. The many traumatic events due to National Socialism and the Shoah, the following of Nazism of German psychoanalysts as well as the death of Sigmund Freud—all this had a decisive influence on the development of psychoanalysis and led, for example, to the fact that to this day hardly any coherent history of psychoanalysis as a movement and a science exists in the various countries (e.g., Young-Bruehl & Schwartz, 2011).

Bohleber (2019) proceeds from this thesis and examines in his Abraham lecture how the aforementioned traumatizations of psychoanalysis have affected the development of theory in German Psychoanalysis:

The exploration of their history in the decades after 1945 was long overshadowed and under the spell of the confrontation with their involvement in the Nazi regime. [...] For a long time German psychoanalysis was dominated by a certain narrative with which it described its development after 1945 as a path leading from liberation from the relics of the Göring-Institut and especially from synoptic psychotherapy to the “rebirth” of “Sigmund Freud’s unadulterated psychoanalysis”. At the same time, however, the idea of a completely new beginning resulted in amnesia of the historical reality of the ideas of that time. Some achievements of depth-psychological psychotherapy (*Tiefenpsychologie*) and psychoanalysis, which had emerged from a fruitful dialogue with philosophical, phenomenological and anthropological thinking, were forgotten. [...] [T]he rupture with the theoretical and therapeutic approaches of that time was not only a liberation, but also a loss of seminal insights. Psychoanalysis here experienced a second rupture in the 1980s. Its causes also have to do with the long shadow of the Nazi past.

(Bohleber, 2019, p. 1, unpublished manuscript)

Such ruptures and discontinuities can also be observed in relation to the attitude of clinicians to empirical research in psychoanalysis, especially to outcome research as will be discussed shortly in the next sections.

Some remarks on the development of psychoanalytic (outcome) research in Germany after 1945

Understandably, in Germany these ruptures—or distortions—in the theory developments, in the clinical treatment technique, as well as in the attitudes towards empirical research after 1945 proved to be particularly serious. It took decades before a critical and self-critical reflection of the history of psychoanalysis in Germany during National Socialism became possible.

After the war, the psychoanalysts who had remained in Germany or immediately came back were primarily concerned with existential questions of survival, their professional establishment, but also with the confrontation with crimes during the Nazi-era. Alexander Mitscherlich, one of the leading figures of German psychoanalysis in the 1950s and 60s, is a good example for these developments after 1945. He was one of the observers of the Nürnberg Doctors' Trial and their involvement in National Socialism. His book *Doctors of Infamy* (1949, but in Germany under the title *Medizin ohne Menschlichkeit* not before 1960), which he published together with Fred Mielke, made him well known internationally but at the same time a persona non grata in the world of German academic medicine. He was regarded as fouling his own nest and never received a full professorship at one of the medical faculties in Germany. However, as Bohleber (2019) pointed out, the ruptures in the scientific career of Mitscherlich also led to ruptures in his own scientific thinking, his theory formation and his attitude towards various forms of empirical research. For example, his first book *Freiheit und Unfreiheit in der Krankheit* (Freedom and Unfreedom in Illness, 1948) was strongly influenced by anthropological positions. Until 1955 he tried to develop a synopsis of anthropology and psychoanalysis, which also meant that he felt more connected to philosophy and the humanities than to pure natural science. He had read Freud intensively during the war and expressed his gratitude to Freud in his first work with the words: “whose deep view also helped the darkness of the past years to wander through ...” Bohleber (2019) pronounces:

But Mitscherlich understands Freud in the years after the war through the glasses of his own anthropological-existentialistic therapy concept. This changed after his research stay in the USA in 1951, during which he became acquainted with American ego psychology. [...] At first he criticizes ego psychologists from his own concept of anthropological therapy and considers them too conformist to the American way of life. But more and more he adopted their positions in the following years. In 1956 Mitscherlich's version of a natural scientific first-person psychology was widely received, and at the same time he was on his way to his own version of first-person psychology, which he further developed over the

next few years. Mitscherlich increasingly distanced himself from his original synoptic view of psychotherapy at that time.⁶

(Bohleber, loc. cit. p. 14)

With regard to empirical research, it is interesting to note that identification with an ego-psychological understanding of psychoanalysis as a (natural) science, also meant being open to empirical research at least for some of the psychoanalysts who worked in psychiatry, Helmut Thomä, for example.⁷ In contrast, many psychoanalysts at the Sigmund-Freud-Institut (SFI) in Frankfurt am Main—founded with the support of Max Horkheimer and closely connected with the *Institut für Sozialforschung*—were keen on following the sharp critique of positivism in Critical Theory. Mitscherlich was a close friend of Jürgen Habermas and, as a charismatic personality, shaped the heyday of psychoanalysis in the following decades. However, personally he has never dealt extensively with distancing the positivistic understanding of ego-psychology with which he was identified deeply. A few more remarks on these contradictions.

**Alexander Mitscherlich: charismatic personality
and “one-man-army” in the heyday of psychoanalysis⁸**

As Plänkers (2010) points out, it is interesting that the SFI owes its existence not primarily to the universities (and certainly not to empirical research!), but to politics. In particular, the good relations of Mitscherlich with the Hessian prime minister Georg-August Zinn and the ministerial councilor Helene von Bila, as well as the longstanding comrades-in-arms, Max Horkheimer and Theodor W. Adorno at the *Institut für Sozialforschung* made it possible. On a lecture celebrating Freud’s 100th birthday, which Mitscherlich organized together with the *Institut für Sozialforschung* in the summer of 1956, prime minister Zinn announced the establishment of a professorship for psychoanalysis at Frankfurt University. Mitscherlich saw himself close to his goal of finally being able to represent the subject of psychoanalysis as a full professor at a German university, but he was disappointed again: the medical faculty of the University of Frankfurt refused to appoint him as professor. Nevertheless, he did not give up the fight: he tirelessly tried to use the good contacts with the Hessian Ministry and the *Institut für Sozialforschung* to establish a psychoanalytical training and research institute despite all the resistance and with much political and rhetorical skill. Again, after almost unimaginable obstacles and intrigues, the time had finally come on April 27, 1960: Alexander Mitscherlich ceremoniously opened an institute and training center for psychoanalysis and psychosomatic medicine in Frankfurt, which in 1964 received the name *Sigmund-Freud-Institut* (SFI). The SFI developed into an inspiring center of psychoanalysis, also thanks to the many foreign guests who came to Frankfurt often and with pleasure. Most of them were close friends

of the Mitscherlich couple, such as Piet Kuiper and Jeanne Lampl-de Groot from Amsterdam, Otto von Mehring from Pitsburg, Willi Hoffer, Michael Balint and Paula Heimann from London, Heinz Kohut and many others from the U.S. Alexander Mitscherlich also advocated the German translations of many important publications, one more reason why psychoanalysis met with enormous public and professional interest in the 1960s and experienced the greatest bloom in its history in Germany.

In recent decades it has become strangely quiet around Mitscherlich. This extensive forgetting of the charismatic personality, Alexander Mitscherlich, especially among younger generations, can only be understood in connection with the enormous societal changes in the last five decades—changes that naturally also affect psychoanalysis. For many psychoanalysts, thinking about these transformations is associated with grief work, because today we no longer live in a “heyday.” In psychoanalysis, but also in the world of contemporary globalized sciences, the times of a “one-man army,” as Erikson once characterized him, seem to belong to the past. New fields of tension have emerged in which psychoanalysis must assert itself and unfold as a “specific science of the unconscious” without losing its critical potential. In this context, it is also a question of a changed significance of empirical research in psychoanalysis and, in particular, of outcome research.

Alexander Mitscherlich can be seen as a prototype of an advocate of a “new psychoanalytical ethic.” He passionately committed himself to shed light on the unconscious effects of National Socialism on the German post-war period. The SFI owes its existence to this commitment, which was perceived publicly and politically closely with psychoanalysis as an indispensable force of enlightenment. It was indeed the combination of a precise, “scientific” observation of complex phenomena with current sociological and philosophical theory that contributed to the attractiveness of psychoanalysis at that time—even among politicians. To our knowledge, not a single empirical psychoanalytic therapy study was carried out at the SFI in the first decades: in contrast to the research group led by Thomä and Kächele at the University of Ulm, where already in the 1970s national and international empirical studies from the field of psychoanalytic therapy research were conducted.⁹ But within the German Psychoanalytic Association (DPV), empirical research in the 1980s and 1990s were met with great skepticism (see also Bohleber, 2019). At the time, many German psychoanalysts felt a polarization between the critical “Mitscherlich tradition” at the SFI or in Giessen (represented by H.E. Richter) and the research activities in Ulm, which were perceived as positivistic—even after their own differentiated description of their epistemological position (Thomä & Kächele, 1975).

It is striking that these polarizations can also be observed internationally. Zaretsky (2004, pp. 475ff.), for example, notes that in the 1970s a (natural) scientific and a philosophical tradition within psychoanalysis separated again. According to his analyses, this was an important factor that contributed to the

marginalization of psychoanalysis. International psychoanalysis was divided into two differing trends—a “therapeutic” one, as quasi-medical treatment of the mentally ill with an empirical (positivistic) orientation on the one hand, and a “philosophical” one with a “critical hermeneutic” orientation, on the other hand. At the SFI, these divisions and the associated positions of epistemology were intensively discussed in the 1970s and led, for example, to the definition of psychoanalysis as a “science between the sciences” by Alfred Lorenzer (1974, p. 121) or to the characterization as a therapeutic method committed to an “emancipatory interest in knowledge,” which had to constantly re-analyze its “scientist self-understanding” by Jürgen Habermas (1968, 1971).

But as important as these debates about an adequate understanding of the epistemological and methodological positions of psychoanalysis were for the understanding of psychoanalysts themselves, in Germany, they played hardly any role in connection with the evaluations of the Scientific Advisory Board for Psychotherapy from the 1990s until today and therefore also not in the decision as to whether longer psychoanalytical treatments are accepted by health insurance funds.

The decline of Freud’s cultural theory

Until the end of the 1960s, the Freudian psychoanalysis reached so many people because it felt like dealing with the great themes of human life—with love and aggression, sexuality, creativity and death, “discomfort in culture,” war and peace, etc. Margarete and Alexander Mitscherlich also understood how to express contemporary topics such as the “inability to mourn” and thus initiated a broad discourse in the German post-war period.

It is interesting that these political writings committed to Enlightenment first were met with great interest among the student movement of 1968. In Frankfurt, Mitscherlich’s lectures became iconic. But soon the relationship between the students and activists with not only the Mitscherlich’s but most of the established psychoanalysts of this older generation cooled down—or even turned into mutual distrust (cf. Hoyer, 2008). In Zurich, for example, the leaders of the student movement were almost predominantly psychoanalysts of the younger generation, such as Berthold Rothschild, Emilio Modena, Peter Passett, and others. The lecture on Wilhelm Reich’s “Masspsychology and ego-analysis” by Rothschild during the anti-fascist week in the large auditorium of the university, was one of the highlights of the movement in 1971. But even here the conflicts with the established generation of psychoanalysts became evident. In Zurich, the conflicts between the young generation of psychoanalysts and the established ones in the Swiss Society escalated. This led to a splitting in the Zurich group with far-reaching consequences to this day (cf. Kurz, 1993; Leuzinger-Bohleber & Plänkers, in press).

Not only in Zurich or Frankfurt, but also in Paris, Berkley, and New York, the students and activists increasingly placed their hopes on a political

culture and organizations that would change society as a whole and no longer on psychoanalysis. The focus on individuals was considered bourgeois or a “side contradiction.” Group therapies (cf. Richter, Foulkes, Horn, etc.) and approaches to institutional theory became more and more attractive. Some of them were also associated with the antipsychiatric movement, which gained broad influence and, among other things, changed psychiatric institutions to a large extent. H.E. Richter and other psychoanalysts succeeded in appointing many psychoanalysts to the newly founded psychosomatic chairs at German universities and encouraging them to become involved in social psychology. Only one generation later most of the successors on these psychosomatic chairs are no longer psychoanalysts, but mainly cognitive-behavioral therapists. In 2019, for example, the last psychoanalytic chair at the University of Frankfurt and thus one of the cities with the most prolific psychoanalytic tradition in Europe will disappear—a sad development for psychoanalysis.

Not only in Germany—but also in many Western societies, psychoanalysis became rather marginalized in the last decades. Zaretsky (2004) describes this development:

As one great slope of the psychoanalytic edifice disappeared into psychopharmacology, the other slid into identity politics. One effect was to absorb psychoanalysis into new “recognition” or “other-directed” paradigms that were unpsychological and antipsychological.

(Zaretsky, 2004, p. 337)

Thus not much remained of psychoanalysis. Although references to (Lacanian) psychoanalysis popped up in most postmodern cultural theories, in gender and queer theory, deconstruction asf. (cf. Nancy Chodorov, Judith Butler, and others) the connection remained mostly superficial. But even in these discourses psychoanalysis increasingly lost its influence and thereby on society and culture as a whole. It gradually turned into an indispensable but “quiet” voice in the loud chatter.

Loss of importance of psychoanalysis in medicine: the advance of pharmacological treatments and evidence-based medicine

The relationship between psychoanalysis and medicine was complicated from the very beginning. In the U.S., psychoanalysis was closely related to medicine and psychiatry. Until the 1990s, for example, only physicians were allowed to receive full psychoanalytic training (see e.g., Wallerstein, 2001; Kernberg, 2006 and many others). Psychoanalysis in the US gained a unique political influence and an amazing social power: American psychiatry in the 1950s and 60s was almost exclusively in the hands of psychoanalysts. Nonetheless—seen retrospectively—this leaning of the ego psychologists towards a positivistic understanding of science in psychiatry created a paradoxical situation: “Ironically,

as we saw, the more the U.S. ego psychologists claimed the mantle of the medical model, the more their critics attacked them as unscientific.” (Zaretsky, 2004, p. 334). This can be observed in various discourses, e.g., about the *Diagnostic and Statistical Manual of Mental Disorders* (DSM), in which the influence of psychodynamic thinking disappeared more and more, from version to version, as well as in the emergence of hegemonic “evidence-based medicine.” The solely positivistic understanding of research spread in connection with the rapid development of pharmacological treatment of mental disorders, which were perceived by society as “cheaper,” “more efficient” and “scientific.” This development pushed psychoanalysis more and more out of psychiatry. While in the 1980s a pluralistic approach to methods was still preferred—often a combination of pharmacological, psychodynamic and psychosocial treatment—the fierce controversies triggered by Grünbaum and other “Freud bashers” in the 1990s led to a complete denial of the scientific basis of psychoanalysis and to a predominance of CBT in psychiatric clinics and universities.

Freud bashing and the attack on psychoanalysis in times of evidence-based medicine

In the 1990s in Germany, the danger that psychoanalysis would lose its health insurance accreditation after Klaus Grawe et al.’s attack (1994) in their book *Von der Konfession zur Profession* (From confession to profession, 1997), forced psychoanalysts to critically reconsider their rejection of empirical psychotherapy research. Studies of that kind are as old as psychoanalysis itself (see e.g., Coriat, 1917; Fenichel, 1930; Alexander & Wilson, 1935), but have been little-noticed by the mainstream of psychoanalysis (cf. e.g., Wallerstein, 2001; Fonagy, 2001; Leuzinger-Bohleber, Arnold & Kächele, 2019). Outcome research existed internationally but was a divisive issue in psychoanalytical community—especially in Germany.

To mention just one example: in order to counter the aforementioned political threat, in the early 1990s, the German Psychoanalytic Association (DPV) decided to conduct a large, representative, retrospective study to investigate the long-term effects of psychoanalysis and psychoanalytic long-term treatment—the so-called DPV follow-up study. In total, 402 former patients were investigated with a combination of quantitative and qualitative methods. At that time, it was crucial for the acceptance of this first outcome study of a psychoanalytical society that the methods took into account the epistemological and sociological concerns outlined above and, for example, did not influence the ongoing treatments. Therefore, only a retrospective study was possible. With the quantitative methods, we were able to show that more than 80% of the former patients had improved in symptom-load, quality of life and social relationships at least three years after completion of their long-term treatment. These results were important for the dialogue on

the outcome of psychoanalytic long-term treatments. However, for the psychoanalysts involved, the results of the psychoanalytic follow-up interviews were far more interesting. More than 200 former patients had three psychoanalytic follow-up interviews, which led to new insights into the short- and long-term outcomes of psychoanalysis and sparked many controversial discussions within the DPV (cf. Leuzinger-Bohleber et al., 2003). However, it was a bitter pill for many of the researchers and clinicians involved in the DPV follow-up study that this elaborate and methodologically inventive study was hardly noticed by the world of evidence-based medicine mainly because it was a retrospective study.

This ignorance was due to apparently not meeting the criteria of outcome research today and the so-called “gold standard”: the randomized controlled trial (RCT). These criteria—randomization of patients, precisely described inclusion criteria, blind raters, standardized measuring instruments, manualized therapy procedures checked for their adherence, as well as the exact description of samples, drop-outs and applied statistical procedures—must be met in order for a study to be recognized both in the world of psychotherapy research and in health care systems. It is interesting from a historical and sociological point of view that in the DPV the LAC Study (see Leuzinger-Bohleber et al. in this volume), which tried to meet all the criteria mentioned above, would not have been possible without the follow-up study in the 1990s. Only this concrete experience had convinced many clinicians of the DPV that an outcome study, which satisfies the criteria of evidence-based medicine does not lead to a nemesis of psychoanalytic treatments. In fact, it can open a space in which the outcome of psychoanalysis can be looked at from different (even epistemological) perspectives. This means the associated demanding theoretical and epistemological questions must not be ignored even in a study meeting the criteria of evidence-based medicine, as foreign and unfavorable to psychoanalysis they might seem. Many of these questions and epistemological challenges can be critically discussed (at least in short)—even in the main publications of such studies (see e.g., Leuzinger-Bohleber et al., 2019a, 2019b; Kaufhold et al., 2019). In other words: we have continuously tried to link the therapeutic considerations of chronic depression with sociological and cultural-critical reflections, and therefore—as far as possible within the framework of an empirical study—to combine the two traditions in psychoanalysis described above, the scientific and the philosophical one.

Can outcome research save the future of psychoanalysis?

Looking into some facets of the traumatic history of psychoanalysis may lead to the assessment that it is by no means guaranteed that good outcome research will save the future of psychoanalysis as a scientific discipline. Social and cultural processes that determine the position of psychoanalysis in the

health care systems, the universities, and the academic world as well as the media and in the public are extremely complex and can only be influenced to a limited extent—of course not by a particular type of research alone. We can only mention that some of today’s social changes are worrying many of us and there might be more at stake than the future of psychoanalysis: the resurrection of right-wing extremism and nationalism, the growth of populist movements and the associated splits in many countries, global terrorism. It all seems to be endangering the Enlightenment project, with which psychoanalysis is so closely linked. The philosopher and historian of science Michael Hampe (2019) therefore pleads vehemently for a Third Enlightenment:

It could be that we are currently not primarily in a crisis of democracy, but rather an erosion of enlightened culture has taken place, which affects the way democracies “function”. If this is the case, we cannot afford any illusions and must strive for another enlightenment movement. [...] The first Enlightenment, promoted by Socrates in Athens in the 5th century bc, recognized the argument as a better solution than violence. The second Enlightenment, from the 16th to the 18th century, discovered that humans do not have to be completely at the mercy of natural and social powers, that they can set out on the path of emancipation with the help of reason. The Third Enlightenment that lies before us is about the realization that we live in a *complex world* in which there are coincidences as well as necessities and also human beings as factors influencing reality. Human action and its historical consequences take place within this tension....

(Hampe, 2019, p. 10/11, translated by MLB)

Psychoanalysis and its future indeed are embedded in these social changes. Nevertheless, many of us have the dream that the potential for Enlightenment that lies within psychoanalysis will be re-discovered in the near future. But is also on us to find our place and hold our ground.

On the other hand—and on a very different level—in the US and Europe, psychoanalysis as an therapeutic offer in the health care system only has a future if we conduct comparative outcome studies and show, according to the criteria of evidence-based medicine, that its treatments lead to success measured by these very criteria. In the meantime, many research groups and psychoanalytical institutions have devoted themselves to conducting and supporting empirical psychotherapy studies. For example, the Open Door Review of the IPA (Leuzinger-Bohleber, Arnold, & Kaechele, 2019) or Liliengren and Bräcke (2019) show that a large number of empirical psychotherapy studies are now available and can be used as arguments.

In this volume, many studies and meta-analyses are summarized, which shows that psychoanalysis have faced these challenges for several decades, so that even the *Guardian* (2016) talked about the “revenge of Freud” based on

the new abundance of evidence, especially on the outcome of short-term psychoanalytic therapies. However, whether this is sufficient to save the (institutional) future of psychoanalysis remains an open question as to how the current professional political struggles in Germany in connection with a new psychotherapist law teach us.

To make a long story very short: of course in psychoanalysis it is always a central matter of protecting our unique way and Freud's famous "*Junktim von Heilen und Forschen*" (Freud, 1927a, German: p. 293, English: p. 256)—the conjunction between cure and research, which can only take place in the safe, trusting space of the professional, therapeutic relationship and can not be accelerated, economized nor medialized. At the same time, however, psychoanalysis—like every scientific discipline—must be accessible to criticism from outside and must be committed to extra-clinical proof of its outcome if it is to remain a therapeutic treatment method in the (statutory) health care system and to face up to academic discourses. A further tension arises from the fact that the specific research object of psychoanalysis is the pathogenic, tabooed causes of individual and collective behavior, which first of all cause resistance of those affected. On the one hand, psychoanalysis is in danger of adapting too much to a prevailing zeitgeist, and thus of losing its credibility, its authenticity as a "science of the unconscious." At the same time, however, it must beware of withdrawing from communication with the non-psychoanalytical world and the public on burning social issues and denying existing dependencies on the scientific community, politics, and media. This would sooner or later lead to scientific and social marginalization.

Overview of the contributions of this volume

This volume consists of three parts: The contributions to Part I discuss the grand scheme of things and the state of the art in psychoanalytic outcome research. Part II contains exemplary research projects that are discussed from a clinical perspective, illustrating the dialogue between researchers and clinicians. In Part III, several psychoanalysts review the importance of critical thinking and research in psychoanalytic education.

As a second introductory chapter Mark Solms, the third editor of this volume, elaborates three central questions of psychoanalytic outcome research: (A) How does the emotional mind work, in health and disease? (B) On this basis, what does psychoanalytic treatment aim to achieve? (C) How effective is it? He summarizes the core scientific claims of psychoanalysis and rebuts the prejudice that it is not "evidence-based." Solm's chapter is an extensive version of a paper that was published in the *British Journal of Psychiatry* (2018).

"Researchers and clinicians alike are seeking new knowledge about improving outcomes in psychotherapy. But, as the contributions of this volume indicate, challenges often arise in appreciating the meaning of changing advances in our field," is the starting point of Robert Emde in Chapter 2