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On the combination between wishes and pathological defenses in a couple relationship, studied with the David Liberman algorithm (DLA)

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I. Goal

To study the reciprocal contributions of the members of a couple to their pathological exchanges.

II. Sample

Lucinda and José consulted because they couldn't stop their discussions. The differences between each other became evident in the initial exchange during the first session, for they disagreed even regarding the description of their problems. While Lucinda said they had accomplished certain achievements but they found it hard to enjoy them, José affirmed that they enjoyed their achievements but they weren't able to come to agreements because they thought differently. This initial disagreement, for these or those reasons, was maintained along all the sessions of the treatment. The exchange kept on having the same sequence: Lucinda affirmed something or started the narration of an episode and José questioned what she said. Besides, José resorted to irony to criticize his wife because of the disorder, for forgetting the keys or the glasses, for not preparing certain food in the weekends and for not being enough time available for him or the children, because she had her work and he wanted her to quit it. She replied that she only worked a few hours, that her kids didn't seem to require more attention from her and that she wasn't determined to obey all his claims. During the sessions, the disagreements between the patients appeared under the shape of an insistent sequence: Lucinda outlined the narration of an anecdote, to which José responded quickly with different types of critics. Lucinda would react in two simultaneous ways: on one hand she would accept José's topics and, at the same time she would respond each time more angry until finally they would both put on top their voices, making it difficult to hear each other and to pay attention to the therapist's interventions. In this escalation, José would maintain a relatively stable style, while Lucinda would increase the hostility of her answers. There could be two alternatives in this sequence: either the escalation would end up in reciprocal interruptions that could only be stopped by the therapist, or the escalation remained truncated because José would abandon the effort to provide arguments, saying he would consider it useless, for his wife wouldn't change her opinion.

III. Method

The David Liberman algorithm (DLA), which allows to detect wishes and defenses (as well as their state) in narrations, speech acts and paraverbal components.

Table I: DLA main concepts

Wishes	Defenses	State
IL	Foreclosure of the affect	Successful
O1 O2 A1	Disavowal	
	Foreclosure of reality and the ideal	
A2 UPH GPH	Repression+characterologic traits	Failed
IL O1 O2 A1 A2 UPH GPH	In accordance with the goal	Successful/ Failed
	Creativity	
	Sublimation	

Table II. Narrated scenes and wishes

<u>Wishes</u>	GENITAL PHALLIC	URETHRAL PHALLIC	SECONDARY ANAL SADISTIC	PRIMARY ANAL SADISTIC	SECONDARY ORAL SADISTIC	PRIMARY ORAL	INTRASOMATIC LIBIDO
<u>Scenes</u>							
Initial state	Aesthetic harmony	Routine	Hierarchic order	Natural legal equilibrium	Paradise	Cognitive peace	Equilibrium OF tensions
First transformation = Awakening of desire	Desire for aesthetic completion	Ambitious Desire	Desire to dominate an object in the frame of a public oath	Desire driven by thirst for justice	Temptation Expiation	Abstract cognitive desire	Speculative desire
Second transformation= Attempt to consummate desire	Reception of a Power OR Gift	Finding the mark of the father deep inside the object	Discerning that the object is faithful to corrupt subjects	Revenge	Sin Reparation	Access to a truth	Gain in pleasure through organic intrusion
Third transformation=Consequences of the attempt to consummate desire	Pregnancy Aesthetic disorganization	Challenge of adventure Challenge of routine	Virtue recognized Social condemnation and moral expulsion	Leadership formally recognized and honored Being unable to move; being locked away and humiliated	Forgiveness and loving recognition Expulsion from Paradise	Recognition of genius Loss of lucidity; the other enjoys objective cognition	Organic euphoria Asthenia
Final state	Shared harmony Lasting feeling of disgust	Adventure Pessimistic routine	Moral peace Moral torment	Evocation of heroic past or Return to lasting peace Lasting resentment	Vale of tears Recovery of Paradise	Bliss in revelation Loss of the essence	Balance of tensions with no energy loss Lasting tension or asthenia

Narrations allow to detect the extra-sessions conflicts of each one or both members of the couple, speech acts and paraverbal components permit to study intra-session enacted episodes.

IV. Procedures

1. To select the repetitive exchanges occurring during the sessions, 2. To detect wishes and defenses as well as their state in the enacted episodes of each patient, 3. To select in each patient's discourse the corresponding narrated episodes that are the equivalent of the enacted scenes during the sessions, 4. To detect wishes and defenses as well as their state in the narrated anecdotes, 5. To infer the reciprocal contributions they make to increasingly resort to more regressive defenses during the sessions, 6) To compare the outcomes of the analysis of enacted and narrated episodes.

V. Analysis

V.1. Analysis of the enacted scenes developed by each patient

The research started with the analysis of the scenes developed during the sessions, because in this level the material was redundant and with very few changes. We made an inventory of the main components of the scenes developed both by José and by Lucinda to study later the exchanges between them. In José's speech it was possible to detect a cathartic tendency (IL and successful foreclosure of the affect), hyperlucid argumentations and critics to his wife's lack of coherence (O1 and successful disavowal), a tendency to objections, critics and impositions, and opposition to the topic proposed by Lucinda (lack of satisfaction) instead of which he demanded to talk about another one (chaos at home), (A2 and repression+characterologic traits) and some histrionic traits (GPH and successful repression+characterologic traits). These components were relatively stable. In the initial moment of the sessions the hypercritical components prevailed, but the already mentioned unabridged cluster would immediately be developed. Then the hypercritical components and the objections (A2 and repression+characterologic traits) seemed to be at the service of the tendency to develop hyperlucid ironies (O1 and successful disavowal). The histrionic components (GPH and successful repression+characterologic traits) constituted a reinforcement of the cathartic tendency. In consequence, what prevailed in José was IL and successful foreclosure of the affect combined with O1 and successful disavowal. This combination between José's speech acts would be maintained stable throughout the sessions. In those occasions in which he would manage to put a stop to the interruptions to his wife and the catharsis, what prevailed in the end was O1 and successful disavowal and IL and successful foreclosure of the affect. In those situations in which the cathartic scene was fully developed, then what prevailed was IL and successful foreclosure of the affect. However, in Lucinda's speech acts we found some changes regarding wishes and defenses and their predominances. What prevailed in the beginning of the sessions was the tendency to narrate some episode, which would usually include an embellishing tendency. This narration would be interrupted by her husband's objections. Due to this, what prevailed in Lucinda was a combination between A2 and the failed defense in accordance with the goal, and also GPH and the

failed defense in accordance with the goal, with the predominance of this last component. Then the patient would start responding to her husband, which involved objecting the disqualifications that he directed to her. This tendency of Lucinda to object (A2 and successful repression+characterologic traits) would be combined with a defiant attitude (A1 and successful disavowal) towards the orders that José gave her, and with some histrionic resources (GPH and successful repression). The tendency to respond to the objections (A2 and successful repression+characterologic traits) acquired predominance in this second moment. This tendency was replaced, in a progressive way, by a defiant attitude that became prevalent, until finally she would enter in a series of reciprocal interruptions with her husband, whom she tried unsuccessfully to rectify, for she supposed that he lied or distorted the facts. With this, her discourse changed to a combination between O1 and failed disavowal and a cathartic trait (IL and successful foreclosure of the affect). So Lucinda would go from an initial moment in which GPH and failed defense in accordance with the goal prevailed, a second moment in which A2 and successful repression+characterologic traits was dominant, a third moment in which A1 and successful disavowal had the hegemony, until O1 and failed disavowal as well as IL and successful foreclosure of the affect were highlighted. When José interrupted his own hypercritical and insulting discourse, Lucinda would also stop her own defiant and cathartic argumentation.

Table III: Wishes and defenses in each patient's enacted scenes

José			
Wish	Defense	State	
IL	Foreclosure of the affect	Successful	Main
O1	Disavowal	Successful	Main
A2	repression+characterologic traits	Successful	Complementary
GPH	Repression+characterologic traits	Successful	Complementary

Lucinda			
Wish	Defense	State	
A2	In accordance with the goal	Failed	Complementary
GPH	In accordance with the goal	Failed	Complementary
A2	Repression+characterologic traits	Successful	Main in 2 nd moment
A1	Disavowal	Successful	Main in 3 rd moment
GPH	Repression	Successful	Main in 1 st moment
O1	Disavowal	Failed	Complementary in 4 th moment
IL	Foreclosure of the affect	Successful	Main in 4 th moment

V.2. Analysis of the narrated anecdotes

The patients would narrate a large number of episodes that constituted sources of conflict of a major or minor severity. In consequence, we had to face the problem of the selection of those episodes that turned out to be more significative and that would justify an analysis of their components. For the selection of the complete sample of narrations we decided to take two criterions into account: on one hand, we consider the anecdotes that appeared more frequently as source of conflict and, on the other hand, we chose those narrations that seemed similar to the episodes developed during the sessions between them, specially during the cathartic scenes.

Both patient's narrations were centered in the recent anecdotes that were part of the permanent arguments. Some of these arguments finished only in a lack of agreement, but others reached the point of reciprocal, frantic and cathartic interruptions. It is convenient to consider the displayed scenes of cathartic type. The recent topics of the arguments were related mostly to José's worries due to the fact that Lucinda neglected her own health and her family's. From this perspective, José would get furious when Lucinda brought some of their children's friends that had recently suffered from a contagious disease, or when he didn't find in the kitchen certain food necessary for his diet, or when his wife had a blowout and ended up exceeding her weight. These corporal worries that conducted José to have fury outbursts were combined with narrations referred to his cronic diarrheas produced by a severe ulcer. The diarrheas were apparently originated during a work journey in which he felt outstripped by the labour exigences and by the incentives he received. This narration was combined with another, referred to the relationship with a therapist that he had in that period, who didn't seem to value enough the fact that the patient was losing weight in a dangerous way as a consequence of his disease. In regards Lucinda, the anecdotes displayed when she responded to José's catharsis with her own could be combined with her bulimic episodes, which started in her adolescence and that were sometimes expressed in the present as blowouts.

The anecdotes that José narrated gave relevance to the fact of not being understood or heard (O1 and failed disavowal), which culminated in the organic helplessness (IL and failed foreclosure of the affect). The anecdotes that Lucinda narrated, referred to the blowouts, gave relevance to IL and the successful foreclosure of the affect, combined with O1 and failed disavowal (to swallow=to believe in the other's arguments, i. e., she was compelled to accept some arguments that she believed as being false).

Table IV: Wishes and defenses in the patients' narrations

José		
Wish	Defense	State
IL	Foreclosure of the affect	Failed
O1	Disavowal	Failed

Lucinda		
Wish	Defense	State
IL	Foreclosure of the affect	Successful

O1	Disavowal	Failed
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V.3. Analysis of the enacted and narrated scenes developed between them

During the exchange between them, there were some regressive alternations regarding prevalent wishes and defenses. The core of this regression was composed by the combination between: 1) a subject (José) who depends from another person to whom he attributes his organic helplessness or an erroneous conviction that he/she has decoded the keys to solve it (O1 and successful disavowal), and who suffers from an acute crisis of anxiety (IL and failed foreclosure of the affect), which he transforms in a violence outburst (IL and successful foreclosure of the affect) and 2) another subject (Lucinda) who unsuccessfully pretended to rectify her husband's opinion that she lacks form coherence and logic (O1 and failed disavowal) and that ends up developing a cathartic scene (IL and successful foreclosure of the affect).

From José's perspective, when Lucinda refuted his arguments and challenged him in session, she was operating as those characters that, while ignoring his somatic helplessness, reinforced his anxiety crisis. From Lucinda's perspective, when José ironically disqualified her and interfered her discourse in session, he pushed her to an impotent effort to refute her husband's conviction that she lacked from logic. This situation culminated in a helplessness similar to the one she suffered before the blowout. During the sessions, the conflict started as a competence between both spouses to impose the central topic, continued with Lucinda's acceptance of treating the problem proposed by José, and then was followed by the wife feeling that she needed to go on the defensive and to try unsuccessfully to rectify her husband, until it culminated in episodes of catharsis that involved both spouses.

VI. Discussion

The next step in our study consisted in comparing the results of both analysis (narrated and enacted scenes). Thereafter, we noticed that, regarding José, there were strong similarities between the results corresponding to one and other level: the wishes and defenses were the same, and they only differed regarding the state of the defense, which failed in the extra-session relationships but was successful in the intra-session exchanges. In regards Lucinda, the results of the analysis of the enacted and narrated episodes coincided globally regarding the wishes, the defenses and the states.

The successful character of the main pathogenic defenses intra-session turned the patients every time more insensitive to each other's helplessness, with which it boosted the own one. Something similar occurred out of session when both patients got involved in endless discussions. What took place in the session was a link in which IL and the successful foreclosure of the affect prevailed in both patients, and this was an advance of the fact that the constant disagreements would continue in the extra-session life. They both had a rich range of psychic resources, which we have tried to describe while studying the speech acts of both patients. However, they ended up getting into a pathogenic regression very hard to rectify, both in the sessions and in the daily life. It turned out to be evident that José constituted an attractive core to such pathogenic regression in the couple link, and that Lucinda, who would begin resorting to functional resources, would end up making an increasing regression in her

psychic functioning, until remaining standardized to her husband's wishes and defenses.

VII. Conclusion

The combination between wishes and defenses of both patients allows understanding the pathological traps where they are included, mainly the episode in which someone suffers from a helplessness state and induces the lack of comprehension of his/her interlocutors.