

Relational Approaches to Social and Political Issues: Andrew Samuels Interviewed by Tom Warnecke

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ABSTRACT *This article derives from an interview originally conducted for a webinar on relational psychotherapy. The focus is on relational approaches to political and social issues. The possibilities and limitations of such approaches are discussed in the interview. Attention is paid to ecopsychology and also to the interweave between personal experience and societal dynamics. The ways in which the political is still marginalized in psychotherapy are explored. Ideas about how to work directly in the session with clinical material that is political in nature are introduced. Specific attention is paid to situations where the therapist might be repelled by the viewpoints of the client. Copyright © 2016 John Wiley & Sons, Ltd.*

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Tom: Hello, Andrew. Welcome to the Psychotherapy Excellence Webcast Series. We've asked you to join us to talk on social and political themes in the context of relational paradigms and relational practice. What are your initial thoughts on a relational approach to the social and the political?

Andrew: I want to begin with some thoughts about the relational paradigm because it's often presented as if this is the last word in the evolution of psychotherapy and counselling. I'm not sure that it's cutting edge any more. Sometimes the emphasis on the therapy relationship can be a bit of a cliché, and sometimes it's both cutting edge and cliché (see Loewenthal and Samuels, 2014).

I think, though, that there is a coming together of tributaries into a river. The relational school in London started as a linked-in organisation to relational psychoanalysis in New York, but it quickly became very clear that because schools of humanistic psychotherapy – such as person-centred – were already doing, and had been doing for years, what relational

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psychoanalysis had just discovered, there were many, many people in Britain who were truly relational. There was no need to struggle here, like they had to in New York, against the classical ego-psychology of American psychoanalysis.

So the relational paradigm is really alive and well in Britain in a very particular way – and I might add that, in addition to the humanistic antecedence, there is a Jungian one. Jung was, without doubt, a relationally oriented clinician, saying things like “You are the treatment just as much as your patient”, and referring to the personal qualities of the therapist all the time.

So there is something going on. As I say, it may not be as cutting edge and exciting anymore and I think there are problems with the relational approach.

Tom: Well, that’s partly why we’re doing this Webcast Series, Andrew. Let’s try to begin with the social and political which is, of course, well on the margins of psychotherapy, albeit with a few exceptions.

Andrew: From the very beginning psychotherapy has wanted to influence the social and political dimensions of life in society. It’s not a new ambition. I like to say that we invited the world into therapy but it didn’t show up for its first session. However, I think what’s interesting about relational approaches is that they do regard the social, political and cultural aspects of lived experience in society much more centrally in terms of therapeutic concerns.

I think that what is being reflected when the social and political culture is positioned more centrally is a very interesting conception of the human subject, of the individual person in society. Relational approaches recognize that the boundary between inner and outer worlds is highly permeable, and, conceptually, perhaps we should cease to refer to it because our inner worlds are flooded with social and political issues, whether we really know it or not.

I was working the other day with somebody who has lots of dreams about natural disasters and particularly about landslides and earthquakes that damage tunnels – railway tunnels. An inspiration came and I asked her about how she felt about ecological catastrophes, climate change, and so on, and I couldn’t stop her talking about them. She hadn’t realized this was affecting her deeply. She produced a classic dream which, because of my training – and I’ve been doing this for so long – I’m thinking birth trauma, tunnels collapsing, blah, blah, blah ... and then suddenly I remember more modern thinking which I do regard as relational which is that ecological and environmental concerns had got into her so deeply that they populated her dreams.

I think relational approaches to therapy lend themselves to working with these kinds of thoughts in mind.

Tom: Actually I’d like you to say a bit more on that. I very much agree with you that clients/patients bring their social relationship, their relationship with the natural environment into therapy – how can they not? But I think there’s something about psychotherapy that psychotherapists have kept it aside – or have seen it as separate or outside. So what could relational thinking offer as an alternative point here, a counterweight?

Andrew: Well, here I really would want to talk about the history of relational psychoanalysis a little bit and, also, the history of post-Jungian analysis too. I think we’ve changed how we see the individual. If you like, there’s been a reaction, sometimes verbalized – increasingly verbalized –

against neoliberal, capitalist ideas of the isolated, atomized individual. This is what relationality means in the social sense.

It's not the same as object relations and the psychodynamics of parent/infant interaction – that's important, but that's not what this is about. This is about subjectivity being formed in a vast network of relationships that extend beyond the human into the social and, I would say, the planetary or global realms as well.

I found that relational psychotherapists are well able to think this way and, knowing your own interests, I would say that what remains to be worked out much more are relational approaches to the body. I know you're interested in that and there are other people interested in that, but I think that that isn't well represented enough in the network of ideas that I've been describing that extends from the soul outwards to the planet. The body, somehow, isn't quite represented specifically enough.

Tom: Okay, yes, I agree with what you just said – and I don't want to put that aside – but I still want to come back to that edge of relationality. I hear you say it is not just the family, not just the parental relationships, but I'm thinking of let's say Martin Buber (Buber, 1923/1970, 1999) and the "I/Thou" and the "I/It". There is an edge here between the two that he identified.

Andrew: Yes. I don't think that what I'm talking about is Buberian or Levinasian (Davis, 2013). I think it's much more informed by feminism and by insights from cultural studies, about how the subject is influenced and evolves. I think it's a clinical perspective to see the person before you, not only in a network of human relations – where Buber or Levinas would be relevant, but in a wider network of relations.

Jung said that when you analyse an individual you analyse the culture, and I think that's what we're beginning to realize and those of us who are interested in diversity issues in therapy practice know that the history of the groups to which the therapist and the client belong is really interesting and important, and that's, I think, another insight that many relational workers bear in mind.

Can I say, I think, that the idea of trans-generational trauma has produced a huge boost to the sophistication and incisiveness of relational thinking. Quite a lot of people, not only in relational psychoanalysis, have cut their teeth on intergenerational, trans-generational trauma.

Tom: How so? What do you think made that so significant?

Andrew: Because although a trauma in the past is an individual experience for the individual's present at the time, it's a collective or cultural experience for their descendants. We can see how the past – the political past, the cultural past, the religious past – comes to life in the client who wasn't there. I think you can learn from working with trans-generational trauma, things that apply to all clients about how the "more than personal" exerts an extraordinarily deep and powerful personal effect. If that's going on in both people in the therapy room, then you need a perspective that takes account of experience at more than an individual level.

Tom: I think James Hillman would have probably said much the same about things being more than personal (Hillman, 1964, 1975).

Andrew: I think the interesting thing about writers like Hillman is that they tend to completely remove the distinctions between the material and social worlds – the suffering that takes place

there – and the soul. Most relational theorists that I know are less iconoclastic than Hillman, but I think they are more humane and closer to experience as it's lived.

It's a very intellectual perspective to say there's a "*unus mundus*", one world, or to talk to about "*anima mundi*", the soul of the world. When people do too much in Latin, I get suspicious. It's a bit dry and abstract, is what I'm saying, Tom, but, of course, it is also an important insight.

Tom: Well I think if we're trying to chart a field of where we position a client in therapy within the wider world around us, Buber's and Hillman's are all useful positions to consider because they provide points of reference for us.

Andrew: Yes, but we're talking, still, inside the "therapy bubble" and I want to bust out of it in this interview, because there are relational ideas in use, in the fields of political and social distress and crisis, that I would like to talk about. You see, I think that the relational psychotherapies do approach these social and political crises in a new way. I think there has been a long history of psychotherapy engaging with the world and it's the methodology, and the ethos, and the feeling with which it's done that have changed. At the moment the cutting edge in therapy's engagement with the world is relationality.

I'll give an example from my own work in a moment, and one now from Jessica Benjamin's work (Benjamin, 2004), with her idea of "stuck complementarity". She's used this with great effect in trying to understand Israel/Palestine dynamics; the ways in which each side accuses the other of things that only a small proportion of its people are doing. We saw this very clearly when all Palestinians and all Arabs were suicide bombers, so to speak. And we see it when all Israelis are apartheid-like illegal settlers, missing out the massive humanity on both sides. This is what Benjamin's term "stuck complementarity" suggests. I think it's a very fresh idea, and I think the way it's being used does not leave the therapist or analyst outside the problem.

From my own work I'm particularly interested in whether we can move to a more relational economics and, to do that, relational economics would imply all the things you can imagine: less inequality, more sustainability, greater attention to the long term. To do that we have to overcome financial sadism, what Jungians call "the shadow" – the unchangeable part of the human being that really enjoys its privileges and its differences from other people and its sense of superiority. I think that thinking in terms of the shadow and relationality also presents a newish kind of way to approach economic problems.

So, what I'm saying is that there's a great salience in relational ideas. We don't just have to leave these things we're discussing regarding social and political issues within the consulting room. Of course the individuals in the consulting room are deeply affected by them – absolutely. But what are we, the therapists, going to say about those social and political issues? This is what matters to me at the moment.

Tom: Political problems like Palestine and Israel polarize, and we know what happens when something gets polarized in the consulting room – it puts the therapist into the opposite polarized role – right?

Andrew: Yes. I would say that there's a parallel with what happens in a therapy process between the two people in the room and, then, what might happen in relation to political and social

problems. I'm sure you'd agree that people come to therapy thinking like somebody else or something else. They think like their mother; they have a mother's voice in their head. Or they think like the church that they belong to tells them to think. Or they think the way someone of their gender is supposed to think. Or, in a nutshell, they think like a State thinks. Psychotherapy tries to unscramble that.

Out there, in the world, much the same thing goes on, on a more collective level. People don't think, on the whole, as individuals. They think in states of identity – what our Kleinian friends called “adhesive identification” (Fano Cassese, 2002) with the thinking tropes and tendencies of something big; usually, the State.

So, I would like relational engagements with the world to try to free up the inner voice and vision of the individual. Now my academic friends say that this is completely “out to lunch” from a scholarly point of view. There are no individuals, there are no inner voices, and how can you talk about somebody thinking like the State? (Scott, 1999).

But I actually think it is a valid and viable way to proceed. People think like something bigger than themselves thinks – and I think it's a valid, interesting and even joyous project to try to unstick that.

Tom: Andrew, I've just been thinking, politics is like a last taboo in psychotherapy, and yet we both know that Freud conceived psychoanalysis as a social/political discipline. So I'm just wondering about the therapy-politics polarity that gets created. Is there another way forward for the wider field?

Andrew: I'm not sure whether what I'm about to say is more optimistic or more pessimistic than what you've just said. It's professional conditioning, you're not supposed to go there (into the political). As you know, Tom, I did a very large international survey of psychotherapists from different schools of psychotherapy across the globe, and what became very clear was that they want to work with these political dimensions of experience, but they know they're not supposed to. Of course, the clients know they're not supposed to bring this stuff. So the educational or consciousness goal is to deal with exactly what you put very well, something that's marginal in the backs of people's minds that needs to be brought to the forefront.

I'll never forget one of the responses to my survey – because there was a little place where you could say what you felt and so on. This woman wrote, “It's not that I didn't discuss politics with my analyst, but we did it as a kind of a chat, as the session was winding down”.

Tom: Right ... yes.

Andrew: We've all done a bit of this, of course, but I want to make it every day, quotidian, normal – even boring – to check in with one another in the therapy setting about the events going on in the world to make it normal.

Psychotherapy in its history has shown a pattern in which the thing that everybody in the field thought you couldn't do, you can do. People thought you couldn't work with children. People thought you couldn't work with psychotics. People thought you couldn't work with people with special educational needs. People thought you couldn't work where you don't speak the same

language as the other person. People thought you couldn't work with the Irish. People thought you couldn't work with the working class.

Tom: Yes, what do you think it represents if you think of it as an internalized voice that therapists hear?

Andrew: Well, what I would say is what so many people have said, starting from Russell Jacoby's book (Jacoby, 1983) about how American psychoanalysts became conformists, with adjustment to society being the key goal of therapy. You still see this interest in people like Lynne Layton (Layton, 1998) who writes about hetero-normativity and the "normative unconscious".

Getting back to our history, psychotherapy divides in two different directions in relation to authority and power. The first one is a completely adolescent, ceaseless, often mindless, knee-jerk objection to any kind of authority on the grounds that it's patriarchal, that it's cruel, and so forth. That's no good. But the second way we respond to authority and power is equally no damn good, and that is that we want to climb up inside the bottoms of the powerful. We want to live inside their protective rectum. We don't seem to be able to find a position in the middle somewhere where the therapists accept some things and don't accept others.

I went to see Joan Baez a couple of weeks ago [2014] and she was talking about some anecdote of an experience in Argentina. She said, "You have to pick your battles". Well, when Joan Baez can say, "You have to pick your battles" when everyone's association to her is of someone who battles on every front, I want to listen. I wish the therapy world did not exist in this state of ecstatic protest all the time. We need to fight, we need to organize, we need to struggle. But this kind of self-congratulatory protest – I'm sure I'm guilty of it too, by the way – sometimes it gets up my nose.

Tom: So if we come back to relational ideas, are they helpful here in this project, or not so helpful?

Andrew: Let's talk about how relational ideas might get in the way, about how relational approaches to psychotherapy are damaging to a progressive social and political project. The opposite of what we are supposed to be doing in this interview!

When a passionate discussion is going on – for example, about the Middle East or about the National Health Service, or about the values of neo-liberalism or whatever – a lot of relational psychotherapists don't want to join in. What they want to do is evaluate it, sitting outside the partisanship in an aura of reasonableness. This tendency to triangulate, to sit outside and make mature, deeply reflective observations on the political problem of the day – it just sucks. It's avoidant, it's disengaged, it's supercilious, it's elitist, and I believe it's actually quite violent.

I would much rather have a psychotherapist with a passionate political conviction, and you can rest assured that a psychotherapist with a political conviction is not going to rule the world because the other 50,000 psychotherapists are all going to have completely different points of view. So there's no fear of dictatorship here, but I'd rather have the woman or man of conviction who doesn't play this mature fireside game of sitting in judgement of the warring parties – like a judge, like a God. I don't like it.

Tom: One of the problems we have is how to disagree but stay in relationship, rather than drift

into Buber's I/It, which is the loss of the relationship, the loss of empathy, the loss of "this could be me..."

Andrew: Well, I think there's a rhythm between aggression and tolerance, and that true tolerance rests on working through aggression.

There are many valuable aspects to aggression, and I'm not going to list them here (see Samuels, 2015). But one important thing is that, if you want to get to respect and recognition for the existence of the other and their views, no matter how much you disagree with them, you had better work through the aggression; you cannot leap into tolerance. Too many psychotherapists and counsellors leap into tolerance in the way they imagine a good therapist should do. They are non-judgemental.

But you cannot always be non-judgemental. You cannot always maintain unconditional positive regard towards both sides of a political dispute. You cannot be neutral to suffering, or to what you experience as obnoxious views. So I think that you're dead right, that the relational task is to hold the aggression, and then tolerance, in some kind of balance.

I'm not very well up in Buber, but I have a vague recollection that he does talk about the travails and the struggles to get to I/Thou. That it's not just something you can take as an ethical absolute and announce your arrival in it.

Tom: Well, the I/It seems to be a mode which we can manage when we don't manage the I/Thou. I'm not a Buberian either, but that's how I understand it.

We've talked a fair bit about the political, and only a little about the social. One of the big social issues at the moment is, of course, the environmental crisis which seems to be another item on the margins for many psychotherapists. Of course there are colleagues who are speaking out and writing and publishing and talking, but what about relational ideas? I'm remembering the "ecological" dreams of your client that you mentioned earlier.

Andrew: There's a difficulty in moving from relationality – which would include object relations – which is essentially human, to something that is other than human. There's a resistance because relationality is seen as human, and society, politics, and the environment are perceived as something else. It's much more difficult to take the broad outlines of relationality and move them so as to embrace animals, ecosystems, the planet itself. I've written a lot about this, as you may know, and I'm very concerned about the simplistic use of words like "nature", and the idealization of certain sorts of eco-practices. But I won't say any more except that I think it's beginning to be recognized that depression in particular may have roots outside the personal circumstances of the sufferer. I think it was Joanna Macy (Macy, 2007) who linked it most clearly to species depletion, and I think that planetary despoliation makes people feel so guilty and so anxious that they slip into a depressive anxiety or even into a depression. When I'm talking with somebody who is either announcing themselves in the early stages of therapy as depressed or, seems to me to be depressed, or has responded well to the idea that they may be depressed, I like to look into the wider sources of the depression.

Continuing to widen our understanding of the root causes of depression, I have come to see that the group of people who talk mostly easily about social and economic sources of depression are people working in the public sector in Britain today – teachers, lecturers, doctors, nurses, social workers, therapists, and so on. When in dialogue with a member of one of these groups, or with

someone unemployed, disabled or part of the psychiatric system, it is more doable to recognize and explore the link between depression and politics.

It took me a long time to wake up to this. Other people – such as Nick Totton, Mary-Jane Rust, Jerome Bernstein – were seeing this before I did, and it took me a long time. I didn't like the wearing of sandals and the living in yurts and the refusal to use deodorants and the reluctance to fly that characterized ecopsychology (in my prejudice). I was very cynical about that, and I still am. But behind these lifestyle issues there's a thinking and a passion that I think all therapists need to pay attention to. Hence I would actually say it's a profoundly relational thing to do, to try to get your client who is in the throes of depression to look at some non-personal sources of it – including planetary destruction.

I won't do it now, but I could give you a whole long theoretical talk about how the Kleinians are right – the planet *does* represent the breast, and our destruction of it represents a sadistic onslaught on the mother – and sadistic onslaughts on the mother which remain unrepaired lead to depressive anxiety and, hence, to depression.

Tom: Andrew, I'm not quite sure if I agree that object relations are limited to people. Let me go back to the origins of the word "psyche"; our Greek forbears thought that all living things had a psyche.

Andrew: Well I use the word "psyche" a lot. I wrote *The Plural Psyche: Personality, Morality and the Father* (1989) and *The Political Psyche* (1993). I just published a chapter (in Samuels, 2015) called "The Economic Psyche". However, you slightly misquoted me, I didn't say object relations were only human, I said we take it that they are. You were asking – and you've been asking it all the time, "Why is there resistance, why is there reluctance to see this in many corners of the psychotherapy world?"

What I've been saying is that when people think "relation/relationality", they tend to think "people". So you're absolutely right; there is no intellectual or conceptual reason why object relations should be restricted to people. Once you overcome this shibboleth, this taboo on thinking this way, then you can extend ideas about relationality to the planetary level.

Tom: Where would that lead us?

Andrew: Somewhere else on the Psychotherapy Excellence website there is an interview of me by Richard House on politics (Samuels & House, 2013), and we found ourselves discussing some of these things with special reference to what you do in the therapy session, and I think that might be what you're asking about (see Norcross, 2011).

We are very ill equipped technically to manage it when the material is political because, first of all, it's collective if it's political. The body is often where collective phenomena lie.

It's very, very visceral, the response, and people get very frightened and they shut down. So I've been thinking about what you have to do if you want to work with this stuff as a therapist. The first thing is to stop interpreting. People who bring in political stuff about good guys and bad guys in the political world – whether it's Nelson Mandela or Margaret Thatcher – are not talking about idealized fathers or terrible mothers. You have to stop interpreting from on high out of your theories and systems as a psychological therapist. That's the first thing.

Secondly, you have to trust that clients – even vulnerable clients – can manage some discrepancies of opinion between themselves and their therapist, provided this is appropriately framed. Not as a contradiction, not as “I know better”, not as “Your views are simplistic and repulsive”. I’ll come back to *repulsive* in a moment, but, somehow, an understanding that this is a worthwhile dialogue of difference to have – and Buber might be very useful there, by the way, now that Buber’s been introduced.

Then, I think, you need to apply some very simple therapy thinking to what the client tells you about the political stuff that they wanted to bring into the therapy session. How long have you known about this? How long have you had strong feelings about this? Where do your strong feelings about this come from? Who has told you that you shouldn’t have these feelings, that they’re the wrong feelings? How intensely do you feel about it, and why? What is it in your personal and political history that leads you to bring this material and to bring these values/attitudes/emotions in connection with it? Now, these are just a number of things which I think, in a way, are very ordinary. They’re sound therapy principles.

Working with political/social/cultural material that clients bring is as mutually transformative as working with any other kind of material about sexuality, about aggression, about spirituality, about the meaning of life, about ethics. Working on the political changes both of you, just as those other themes which are well known to change both people and, here, relational approaches are very valuable because it is assumed, isn’t it, in the relational approach that both parties are transformed.

Tom: Regarding the transformativeness of the dialogue, if we turn this to political, social or ecological issues, doesn’t that create a bar so that therapists might not engage with the political, with the social, with ecology?

Andrew: What do you mean by a bar?

Tom: Well, a block, something that’s in the way.

Andrew: Yes, of course there is. It’s our training. Mostly our professional conditioning as I said earlier. But there is something else I want to say; I don’t do this sort of thing with all clients, all the time. Often when I get into debates with more conservative clinical colleagues, they assume that I do it compulsively, that I insist the client brings politics, we have political discussions, we have some disagreements and we’re both mutually transformed. No, not with everyone and not all the time with anyone.

Any innovation in therapy has to be done responsibly, and it has to be checked in with other colleagues, with supervisors, and discussion groups, and so on. So, using your judgement, being judicious in allowing the dialogue to be, frankly, political – uninterpretably political – that remains very, very important. When I’m teaching this in workshops, I begin by looking at all the reasons why therapists should be neutral, abstinent, and keeping out of politics – because I respect that stuff. You have to look at the reasons why it’s difficult to overcome the bar that you talk about.

Tom: I think there are many kinds of situations where therapists and clients will hold different belief systems. For example, if you work with a third generation person from a Jehovah Witness

tradition it is likely that the therapist will have strong reactions – and that may be the basis to do very deep, very powerful, and very valuable therapy.

Andrew: Yes, you're right, and I often say exactly that: why is political discrepancy of opinions so much more taboo than the other things? I once gave a talk on this sort of stuff to a psychoanalytic institute in London. Somebody got up and she was very pleased with herself with this question: "What would you do if Hitler came into your consulting room?" I didn't challenge this sneaky and smearsy question, or wonder why she'd put it. Instead, I gave an answer that was appropriate to the group I was addressing. I said, "Intra-psychically, psycho-dynamically from the point of view of unconscious fantasy, I see Hitlers all the time." Everybody was very cheered by my answer – including the questioner.

But there truly is a problem with revolting political views, there really is. On the one hand, you can say "Don't worry, you can learn from rednecks, you can learn from UKIP members, you can learn from homophobes, you can learn from multi-millionaire bankers" – and you can. But the problem of disgust is not a resolvable problem, and there is no point in pretending. There is what the late, great relational psychoanalyst Muriel Dimen (2008) wrote about in connection with "perversion"; there's a yuck factor – and that will never go away. I like the relational take on this. There is an irreducible, subjective limit, and you can't force yourself, authentically anyway, to go beyond it.

So, okay, I gave a great answer about what I'd do if Hitler came into my consulting room, but the truth of the matter is, it was a very effective question.

Tom: Well, I think, speaking from my experience, I think it is okay to state clearly on particular occasions that I cannot find it in myself to agree with something or to let it stand without actually, also, declaring my different position.

Andrew: Let me ask you a question: you're German and this country is obsessive in its hostility to Germans. One can easily speculate as to why. This question comes from a discussion with another German therapist who told me that he finds quite a lot of people refer to the idea that all the Germans backed Hitler – let's not talk about the facts for the moment – but all the Germans backed Hitler, that when Hitler goes to Vienna in 1938, the crowds are cheering and all this kind of thing, and he finds it difficult. The question then is, what do you do? I wanted to ask you about this kind of experience – which I'm sure you've had, you must have had.

Tom: Well, I don't feel German or identify simplistically as such. I also have more nationalities in my background than just German. But I think it's the same problem with being an Israeli and being asked, "How do you feel about the West Bank or Gaza?" I remember earlier this year walking on the beach in Israel with a colleague friend and you see the helicopters flying, you know where they're flying – to Gaza. We know what they're doing there.

So I think we have to hold these difficult identifications and feelings. Here I am as somebody who still has a German passport walking and talking with an Israeli, and we *both* don't agree with what happens in Gaza. But where does it lead us?

Andrew: A traditional psychoanalytic view would be that you must accept the client's projection that you, as a German, whether you say you're a German or not, are a mass-murderer, a

concentration camp, all this kind of thing. You don't argue, you don't enter into any kind of discussion about it. Some of me is still with that way of working; I was trained that way. There was an idealization of the acceptance of the negative transference.

In your answer to me you say, "Well, I'm not only German, I'm other nationalities as well". I'm not saying that's what you'd say to a client, but, to some extent, there is an almost irresistible temptation or need to say "No," to the client, "you've got this wrong". Now, this tension is not something we can settle in a relatively short interview, but it's one that fascinates me. At what point do you step away from the transference and the professional stance and fight for your own identity in the face of the client? This is really quite difficult.

I get it a lot – not only because I'm Jewish – but that's not what I'm going to talk about. I get it when I'm working with younger women. Rightly or wrongly, they identify the patriarch in me, they cite feminist approaches and books that they assume I've never read and people they assume I've never heard of. But what do I do? As I say, a lot of me just accepts it. But I feel, sometimes, a huge force rising in me and I want to say, "No, you've got me wrong". It's very difficult.

Tom: Well I'd say not being identified with being German almost makes it easier to just take it and then see what happens with it – does that make sense?

Andrew: Yes, it does.

Tom: So I feel less defended, actually.

Andrew: Yes, I can see that.

Tom: Andrew, I think this is a good moment to close it. So, thank you very much. I really enjoyed it.

Andrew: Me too.

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