

Psychoanalytic Treatment: Unlocking Your Inner Self

Authored by
mohammad looti

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Using the various analytic theories to assess mental problems, several particular constellations of problems are particularly suited for analytic techniques (see below) whereas other problems respond better to medicines and different interpersonal interventions. To be treated with psychoanalysis, whatever the presenting problem, the person requesting help must demonstrate a desire to start an analysis. The person wishing to start an analysis must have some capacity for speech and communication. As well, they need to be able to have trust and empathy within the psychoanalytic session. Potential patients must undergo a preliminary stage of treatment to assess their amenability to psychoanalysis, at that time, and also to enable the analyst to form a working psychological model which the analyst will use to direct the treatment. Psychoanalysts mainly work with neurosis and hysteria in particular, however adapted forms of psychoanalysis are used in working with schizophrenia and other forms of psychosis. Finally, if a prospective patient is severely suicidal a longer preliminary stage may be employed, sometimes with sessions which have a twenty minute break in the middle. There are modifications of techniques due to the radically individualistic nature of each person's analysis.

The most common problems treatable with psychoanalysis include: phobias, conversions, compulsions, obsessions, anxiety, attacks, depressions, sexual dysfunctions, a wide variety of relationship problems (such as dating and marital strife), and a wide variety of character problems (for example, painful shyness, meanness, obnoxiousness, workaholism, hyperseductiveness, hyperemotionality, hyperfastidiousness). The fact that many of such patients also demonstrate deficits above makes diagnosis and treatment selection difficult.

Analytical organizations such as the International Psychoanalytic Association, The American Psychoanalytic Association, and the European Federation for Psychoanalytic Psychotherapy, have established procedures and models for the indication and practice of psychoanalytical therapy for trainees in analysis. The match between the analyst and the patient can be viewed as another contributing factor for the indication and contraindication for psychoanalytic treatment. The analyst decides whether the patient is suitable for psychoanalysis. This decision made by the analyst, besides made on the usual indications and pathology, is also based to a certain degree by the "fit" between analyst and patient. A person's suitability for analysis at any particular time is based on their desire to know something about where their illness has come from. Someone who is not suitable for analysis expresses no desire to know more about the root causes of their illness. An evaluation may include one or more other analysts' independent opinions and will include discussion of the patient's financial situation and insurances.

Cost and Length of Treatment

The cost to the patient of psychoanalytic treatment ranges widely from place to place and between practitioners. Low-fee analysis is often available in a psychoanalytic training clinic and graduate schools. Otherwise, the fee set by each analyst varies with the analyst's training and experience.

Since, in most locations in the United States, unlike in Ontario and Germany, classical analysis (which usually requires sessions three to five times per week) is not covered by health insurance, many analysts may negotiate their fees with patients whom they feel they can help, but who have financial difficulties. The modifications of analysis, which include dynamic therapy, brief therapies, and certain types of group therapy (cf. Slavson, S. R., *A Textbook in Analytic Group Therapy*), are carried out on a less frequent basis - usually once, twice, or three times a week - and usually the patient sits facing the therapist.

Many studies have also been done on briefer "dynamic" treatments; these are more expedient to measure, and shed light on the therapeutic process to some extent. Brief Relational Therapy (BRT), Brief Psychodynamic Therapy (BPT), and Time-Limited Dynamic Therapy (TLDP) limit treatment to 20-30 sessions. On average, classical analysis may last 5.7 years, but for phobias and depressions uncomplicated by ego deficits or object relations deficits, analysis may run for a shorter period of time. Longer analyses are indicated for those with more serious disturbances in object relations, more symptoms, and more ingrained character pathology (such as obnoxiousness, severe passivity, or heinous procrastination).

Training and Research

Psychoanalytic training in the United States, in most locations, involves personal analytic treatment for the trainee, conducted confidentially, with no report to the Education Committee of the Analytic Training Institute; approximately 600 hours of class instruction, with a standard curriculum, over a four-year period. Classes are often a few hours per week, or for a full day or two every other weekend during the academic year; this varies with the institute; and supervision once per week, with a senior analyst, on each analytic treatment case the trainee has. The minimum number of cases varies between institutes, often two to four cases. Male and female cases are required. Supervision must go on for at least a few years on one or more cases. Supervision is done in the supervisor's office, where the trainee presents material from the analytic work that week, examines the unconscious conflicts with the supervisor, and learns, discusses, and is advised about technique.

Many psychoanalytic Training Centers in the United States have been accredited by special committees of the American Psychoanalytic Association or the International Psychoanalytical Association. Because of theoretical differences, other independent institutes arose, usually founded by psychologists, who until 1987 were not permitted access to psychoanalytic training institutes of the American Psychoanalytic Association. Currently there are between seventy-five and one hundred independent institutes in the United States. As well, other institutes are affiliated to other organizations such as the American Academy of Psychoanalysis and Dynamic Psychiatry, and the National Association for the Advancement of Psychoanalysis. At most psychoanalytic institutes in the United States, qualifications for entry include a terminal degree in a mental health

field, such as Ph.D., Psy.D., M.S.W., or M.D. A few institutes restrict applicants to those already holding an M.D. or Ph.D., and most institutes in Southern California confer a Ph.D. or Psy.D. in psychoanalysis upon graduation, which involves completion of the necessary requirements for the state boards that confer that doctoral degree. The first training institute in America to educate non-medical psychoanalysts was The National Psychological Association for Psychoanalysis., (1978) in New York City. It was founded by the world famous analyst Theodor Reik.

Some psychoanalytic training has been set up as a post-doctoral fellowship in university settings, such as at Duke University, Yale University, New York University, Adelphi University, and Columbia University. Other psychoanalytic institutes may not be directly associated with universities, but the faculty at those institutes usually hold contemporaneous faculty positions with psychology Ph.D. programs and/or with Medical School psychiatry residency programs.

The International Psychoanalytical Association (IPA) is the world's primary accrediting and regulatory body for psychoanalysis. Their mission is to assure the continued vigour and development of psychoanalysis for the benefit of psychoanalytic patients. It works in partnership with its 70 constituent organizations in 33 countries to support 11,500 members. In the US, there are 77 psychoanalytical organizations, institutes associations in the United States, which are spread across the states of America. The American Psychoanalytic Association (APSA) has 38 affiliated societies, which have ten or more active members who practice in a given geographical area. The aims of the APSA and other psychoanalytical organizations are: provide ongoing educational opportunities for its members, stimulate the development and research of psychoanalysis, provide training and organize conferences. There are eight affiliated study groups in the USA (two of them are in Latin America). A study group is the first level of integration of a psychoanalytical body within the International Psychoanalytic Association (IPA), followed by a provisional society and finally a member society.

The Division of Psychoanalysis (39) of the American Psychological Association (APA) was established in the early 1980s by several psychologists. Until the establishment of the Division of Psychoanalysis, psychologists who had trained in independent institutes had no national organization. The Division of Psychoanalysis now has approximately 4,000 members and approximately thirty local chapters in the United States. The Division of Psychoanalysis holds two annual meetings/conferences and offers continuing education in theory, research and clinical technique, as do their affiliated local chapters. The European Psychoanalytical Federation (EPF) is the scientific organization that consolidates all European psychoanalytic societies. This organization is affiliated with the IPA. In 2002 there were approximately 3900 individual members in twenty-two countries, speaking eighteen different languages. There are also twenty-five psychoanalytic societies.

The National Membership Committee for Psychoanalysis in Clinical Social Work was also started in the mid-eighties to represent social work psychoanalysts. Founded by Crayton Rowe, MSW it

included in its membership Rueben and Gertrude Blanck who were well known ego psychologists. Other notable members are Joyce Edward, Jean Sanville and Diana Siskind. Recently, NMCOP changed its name to the American Association of Psychoanalysis in Clinical Social Work (AAPCSW). The organization holds a bi-annual national conferences as well as numerous annual state and area meetings in 16 area chapters. These conferences provide sessions on theory, technique and research.

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