SYMMETRIES AND ASYMMETRIES IN THE THERAPEUTIC RELATIONSHIP

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The concept of symmetry in the analytic situation derives from the fact that this relationship is constituted by a couple. Just as for Winnicott there is no such thing as a baby but only a mother-baby couple, there is no such thing as a patient outside of the therapist-patient couple, or, in the case of the analytic relationship, analyst-analysand.

From another point of view, congruous with the above, Horney says:

Since the relation to others and the attitude toward the self cannot be separated from one another, the contention, occasionally to be found in psychiatric publications, that one or the other of these is the most important factor in theory and practice, is not tenable. (Horney, 1945, p. 47)

The concept of the couple or dyad has an extremely general nature. It can be limited to a purely phenomenological-descriptive level but it can also be conceived methodologically. The description of only one of the members of the couple is necessarily incomplete, while the description of both members cannot be superimposed. At the same time, neither element of the couple can be simply defined as the negation of the other.

These definitions fall more within the realm of philosophy and, although I do not intend to venture further into this field, it seems appropriate to borrow its terms. This allows us to define the analytic couple as one to which the concepts of symmetry, resemblance, complementarity, reciprocity, and contiguity can be attributed. With these concepts in the background, it is then possible to state that the extent to which an analysis is symmetrical or asymmetrical depends largely on the personality of the analyst, as well as on his theoretical frame of reference.

I must first specify that I have deliberately left aside the important contribution of the studies about the pragmatics of human communication. Including it would orient our discussion toward that specific point of view. It is enough to remember that symmetry and complementarity are defined as two basic categories according to which all exchanges of communication...
can be classified. Symmetrical communication is thus characterized by equality and the minimization of differences, while the opposite is true for complementary interactions (Watzlawick, Beavin, and Jackson, 1967). We will not address here the psychoanalytic arguments of Matte Blanco (1975) either, which emphasize the importance of symmetry as a logical property of the mode of being of the Unconscious and Primary Processes. This concept has large applicability to analytic listening and general clinical experience. I will refer to symmetry instead, at least at the beginning, in the more general sense of the term, which derives from the original meaning of the Greek word *summetros*: commensurate or proportional.

It appears that there is general agreement today, even if within significant theoretical, methodological, and clinical differences, about concepts such as reciprocal interaction between analyst and analysand, a notion that immediately poses the question of whether it is important to consider this relationship a symmetrical one. The issue must be raised then regarding the described contrast concerning the analyst considered either as a real person in the here and now, or else as the neutral activator of the private fantasies of the patient. The two positions are brought to an even more extreme polarity when on the one hand the analyst is portrayed as a reflecting surface, while on the other hand he is referred to as gratifying spontaneity in the name of his presumed authenticity. Could this contrast be read as a positivistic illusion of reasoning that goes against the irrational fantasy of the presumed omnipotence of love?

A large area between these extremes makes it possible however to avoid the risks inherent in taking either position in the definition of the kind of presence the analyst portrays. This area allows us to take into account the implicitly ambiguous nature of that analyst’s position:

You can be a better therapist, or perhaps you can only be a therapist, if you are with all of yourself in what you do. (Horney, 1987, p. 31)

And also:

Wholeheartedness of concentration means that all our faculties come into play: conscious reasoning, intuition, feelings, perception, curiosity, liking, sympathy, wanting to help, or whatever. (Horney, 1987, p. 19)

And again:

But what we attend to in our patients, we must also attend to in ourselves, and more. (Horney, 1987, p. 25)

These are some of the statements contained in Horney’s *Final Lectures* that would seem to place her in a position pro-symmetry. Nevertheless this