

**Review: Nancy McWilliams Seminar
May 2004, Brisbane.**

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**Nancy McWilliams: Honouring Individuality:
How the personalities of both therapist and client influence psychotherapy.**

I attended this workshop in Brisbane in May because firstly the topic, I believe, is a crucial one for therapists, and secondly, having read parts of McWilliams' two previous books 'Psychoanalytic diagnosis: Understanding personality structure in the clinical process' (1994) and 'Psychoanalytic case formulation' (1999), I considered her to be, along with Virginia Goldner, one of the most impressive contemporary female writers on the practice of psychotherapy. [This year, Guilford has released her third book 'Psychoanalytic psychotherapy: A practitioner's guide'.]

Nancy presents as a petite well-groomed figure. Whilst appearing a little reserved in person, once speaking to an audience, it is though she moves into a more extroverted realm where she is warm, humorous, self-disclosing and impressively articulate. She spoke for two days mostly without notes. Interestingly, she self-diagnoses as hysterical and depressive. Most therapists, she considers, have a depressive personality organisation.

The main focus of her presentation, despite the title of the workshop, was going through one by one the personality types described more fully in her 1994 book, with a handful of other categories she has added subsequently. She also presented a couple of case studies which enlivened the presentation. Nancy is one of those rare individuals who has a lot of clinical experience and insights, but at the same time is immensely well-read in the psychoanalytic tradition. She disclosed at one point that one of the motivating factors in her work was the drive to appear as a woman just as competent as the male leaders in the profession.

The following matrix gives an understanding of McWilliams' clinical approach and nosology:

	Psychopathic	Narcissistic	Schizoid	Paranoid	Depressive	Hypomanic->
Neurotic							
Borderline							
Psychotic							

Moving from left to right across the personality spectrum, there is decreasing self-focus. After Hypomanic, McWilliams includes Masochistic, Obsessive-Compulsive, Hysterical, Dissociative, Somatising/Alexithymic, Phobic, Dependent, Counterdependent, and Passive-Aggressive. Some of these McWilliams groups together e.g. Phobic, Dependent, Counterdependent. She does not include in her scheme a Schizotypal personality which of course is included within the DSM-IV nosology. She believes schizotypal is more a trait than a personality organisation, and cites the recent work of Jonathan Sheffer and Drew Westen.

McWilliams maintains that individuals can have a number of prominent personality organisations (organised rigidly around specific defences) operating at different developmental levels e.g. an individual may mainly be a depressive operating at a neurotic level but at some highly stressful moments be hysterical at a psychotic level. It does not seem as if all personality organisations exist at all levels, at least as seen clinically. McWilliams also makes a plea that therapists honour and respect appropriately all personality types and levels. Even the so-called primitive levels of organisation such as the psychotic have their adaptive and compensating skills which other more 'normal' personalities may lack. McWilliams focused interestingly on the Schizoid personality (her husband is so diagnosed!). She said the schizoids increasingly fascinated her and they had much to teach therapists e.g. in terms of their amazing sensitivity and perceptiveness.

Therapeutically, McWilliams relies on her countertransference to guide her in the psychoanalytic diagnosis of personality organisation of each client. With a Paranoid she will feel threatened, with a Narcissist evaluated, with an Hysteric warm, and so on. She insists however on seeing each client as an individual rather than a type. She will vary her approach to each client depending on her understanding of the client's dominant personality organisation. For example, with psychopaths she will go out of her way in the early sessions to project to the client how powerful and smart she is, reckoning that psychopathic types will not respect nor work with her otherwise.

McWilliams in her case descriptions displayed an awesome ability to empathise with the client and to choose her language exquisitely sensitively. Her long years of clinical experience and her encyclopaedic knowledge of the psychoanalytic and psychological literature on personality development and pathology no doubt contribute to this ability. It seems to me though that all the theory in the world and the most nuanced theoretical models are to no avail without the intuitive capacity to select the right words with the right clients at the right time. I am reminded here of Paul Wachtel's inspirational 'Therapeutic communication: Principles and effective practice' (1993).

Finally, some quibbles. As mentioned earlier, there was too little on the influence of the therapist's personality and the interaction with the client's personality. And apart from the self-other dimension there are no underlying factors to help systematize what is a very complex array of personality organisations from Psychopathic to Passive-Aggressive. It presumably is now second nature to McWilliams to fairly quickly put her clients into a particular category, but this is after a lifetime of experience, reading, writing and reflecting on the many varied personality types as manifested in the therapy room. Other therapists including this one probably could benefit from some simpler heuristic. I think Ted Millon (1996) 'Disorders of personality: DSM-IV and beyond' and (1999) 'Personality-guided therapy' offers some helpful guidance in this regard. He posits that all personalities can be classified as varying along three dimensions: not just self/other, but also passive/active, and pleasure seeking/pain avoiding.

'Personality', 'Character', 'Temperament', pooh-poohed by the behaviourists and later by Walter Mischel in particular, have been unfairly consigned by psychologists to the historical dust-heap. The messiness of Axis II reflects this neglect. McWilliams is to be congratulated for her continuing work in this area.

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