



The Dialectic Of Love: Giving Authority And Conflict A “Good Name.”

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It's very timely for me to reflect on the dialectic of love having just retired from my private practice of psychotherapy. Perhaps controversial, my opinion is that manifestations of non-romantic love are key to the therapeutic value of all relationships inside and outside of the treatment room. The termination phase of treatment is an exit interview conducted over the span of months. My patients to the last were grateful for my relentless efforts to model benevolent authority. Until they could hold and mediate their own conflicts my reflective presence was there to oversee a dialectic that historically was a source of pain and suffering and had obstructed growth and change.

If most of my patients entered treatment likening conflict to being caught in the crosshairs of tribal factions vying to fill a void of centralized authority, then these palpable threats dictated avoidance of being wounded by these fractious forces. Call it what you will, many well-meaning yet misguided and unreflective parents raised generations within systems of authority that could be described alternately as dictatorial, hypocritical, punitive, and neglectful. The discipline of socializing youth was much less about education and much more about using power and control as a feared weapon to manipulate compliance. To survive, these children internalized confusing, and angst producing models and disillusioning expectations of the outside world that could be summed up as: “Do as I say and not what I do.”

Once we reach the age of majority and by legal standards are in charge of our lives, if these internalized voices are not observed, reflected upon, reinterpreted, reined in and redirected, we will presumably be held hostage by and hold others hostage to dynamics that could be described as obstructive and undermining, and most certainly not loving. I'm defining love as a mutual, intersubjective negotiation, a process I nurtured and supported so my patients could achieve higher levels of autonomous self-regulation.

My superordinate objective as a therapist was to help my patients reframe their ideas about conflict and give it “a good name” when the majority of their formative

experiences as retold by them had given it “a bad name.” As much as many of them contended they did not know why they were “stuck in the mud,” in truth they did not want to know what was right under their noses. Their over learned and largely unconscious status quos were not working well. For years they checked out on themselves to escape self-criticisms and self-judgments, or rebelliously and reflexively fought such dominating trends in unproductive and hurtful ways. Oscillating and vacillating between horns of their ambivalent dilemmas, they went nowhere fast and would not commit to new courses of action. They left it up to me to unwaveringly convey to them that although enlightened decision-making entailed risk taking and sacrifice, the pursuit of new directions would not foreshadow the demise of their valued identities or dash what were wishful and magical hopes for greater autonomy.

Models of loving authority so foreign to patients of my generation and younger generations, were represented in my practice. These models are intersubjective and rooted in the spirit of mutual respect, consideration, empathy and compromise. It was incumbent upon me to epitomize the virtues of fighting fairly and reasonably. My patients to the last lacked trust in the exercises of benevolent authority over themselves and others. Consequently, they lacked faith in a vision that dialectical tensions could result in the birth and growth of an observing and reflective executive authority to captain and navigate their way toward making their lives artistic expressions of their inherent gifts, skills and passions. Some experts have called the exercises of autonomous authority “a mindful presence,” others the cultivation and trust in one’s “Higher Power,” and others of The Christian persuasion describe it as allying with one’s inhabited “Holy Spirit.” I liked to describe it as: Being the loving parent to ourselves we once needed and didn’t have we that we no longer need but still long for.

One formidable obstacle facing my patients was the belief that brooking the risks of stepping into the risky terrain of unknowns and uncertainties in the service of transcending their stalemates was a gross injustice. They felt ill prepared to manage such a daunting responsibility and likewise resented having it now dropped in their laps. They resisted paying for the missteps of their caregivers. Unfortunately, there was no way around them grabbing the reins of their lives to integrate and coordinate forces at odds with each other and pulling them in many directions at once. It secretly broke their hearts to accept such a mandate. Holding this dialectic and fighting to tip the balance in favor of mourning their losses to accept moving on was a primary initiative on my part. Often this meant an unwavering resolve to say “no” to their regressive demands for immediate gratifications. Meanwhile I worked tirelessly to encourage them to shut that over used door behind them and say “no” to falling backwards. Entrenched and overused patterns of immediate gratification may have been a slice of heaven in the short term, but in the long run made their lives living hells.

The fact that such dialectic tension did not degenerate into hostile stalemates between us or result in patients walking out of therapy prematurely enmasse was a testament to our mutual commitments to weather conflicts in the service of adaptive ends. We

experientially affirmed the concept of loving self-restraint and tilted the balance of power in favor of growth and change over inertia, and their weddedness to comfort and familiarity. Apprehensions aside we forged an alliance to fight fairly and reasonably to forsake survival to do better, to thrive.

The word dialectic is certainly not self-explanatory as a conceptual framework for what is a crucible for growth and change. Simply put optimal stress results in morphological adaptations that yield physical and mental muscles that are more fit. These muscles are able to tackle more complex challenges with less effort.

I was introduced to the concept of optimal stress in the 1970's while reading about The Swedes who introduced "fartlek," or speed play as a training regimen for long distance runners seeking to improve their speed. It's a form of interval training on the roads, a dance between accelerated intervals followed by periods of much slower recovery running. In recent years this concept was submitted to laboratory testing and resulted in a book authored by Martin Shubala and Christopher Shulgan titled: *The One Minute Workout: Science Shows A Way To Get Fit That Is Smarter, Faster, Shorter*. Giving credit where credit is due Dr. Martha Stark applied this theory of growth and change to the treatment room with her book titled: *The Transformative Power of Optimal Stress: From Cursing The Darkness To Lighting A Candle*. The application of this concept to my own training regimen yielded greater athleticism and surprisingly reduced bouts of illness to next to nothing. The bonus benefits did not stop here. It had salutary effects on my nervous system that yielded improvements in my recovery from posttraumatic stress. I'll give my memoir a plug here, *Do I Need My Head Examined Or Just A New Pair Of Running Shoes*, as my narrative delves into this matter in greater detail. My life dramatically changed for the better 19 years ago as a direct consequence of forsaking distance running for interval training.

Optimal stress helps actualize the potential benefits of the brain's plasticity. You might say that optimal stress is a window of tolerance of conflict that yields increased capacities to hold, observe, reflect on and mediate conflicts in new, creative and adaptive ways. This idea is central to understanding how an effective therapeutic alliance fosters growth and empowers patients to change. We can all learn and improve upon how we utilize and apply our innate gifts and learned skills. Like a good coach we must develop the strength and endurance to get the many sides of ourselves on the same page and stay the course in setting sail for new adventures in living. It's a dance of connections, disconnections, working with conscious memory to take snapshots and crunch data followed by rest and relaxation while our unconscious minds develop new pictures in the dark rooms of our psyches.

Loving my patients was all about them trusting me that their health and welfare was worth fighting for and that they were capable of allying with me, to contain, take charge of and redirect self-defeating and self-destructive forces toward constructive ends. Love emboldened them to accept and forsake a once sacrosanct belief that holding fast to old paradigms was safer and that they would be sorrier trying to make changes. May they

hold me with same loving gratitude I hold for my former therapists who helped put me in the driver's seat of my life.