

Psychoanalytic Research in the University: Methodological Research Strategies

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ABSTRACT – The principle of psychoanalytic investigation is to provide conditions for discoveries, but not necessarily to discover what was sought. On the other hand, at the university level, a frequent requirement is the delineation of general objectives, specific objectives, hypotheses, and expected results. How is it possible, then, in the face of clinical and university claims, to study unconscious phenomena so as not to violate the nature of the object of study? This article proposes to conduct a theoretical discussion on the epistemology of psychoanalytic research and its place within university research. Psychoanalytic research is conceptualized as a matrix of strategies guided by clinical practice and research. In this context, the focus of this article is directed at the case study.

KEYWORDS: psychoanalytic research, university research, case study, methodology, psychoanalysis

A pesquisa Psicanalítica na Universidade: Estratégias Metodológicas de Investigação

RESUMO – A máxima da investigação psicanalítica é propiciar condições para descobertas, mas não necessariamente descobrir o que se procurava. Por outro lado, no âmbito universitário, exige-se frequentemente a prévia delimitação de objetivos gerais, objetivos específicos, hipóteses e resultados esperados. Como é possível, então, diante das reivindicações clínicas e universitárias, estudar os fenômenos inconscientes de modo a não violentar a natureza do objeto de estudo? O presente artigo se propõe a realizar uma discussão teórica sobre a epistemologia da pesquisa psicanalítica e seu lugar dentro da pesquisa universitária. Conceitua-se a investigação psicanalítica como uma matriz de estratégias de investigação orientada pela prática clínica e a pesquisa. Nesse contexto, o enfoque deste artigo é direcionado ao estudo de caso.

PALAVRAS-CHAVE: pesquisa psicanalítica, pesquisa universitária, estudo de caso, metodologia, psicanálise

There are many psychotherapists and many investigation methods for the human psyche. According to Freud (1905/2006, p. 243), “[a]ll that lead to recovery are good.” However, he restricted himself to a single therapeutic procedure, the analytic method, abandoning other forms of treatment he had previously used, such as hypnotic suggestion. Freud’s choice stems from his conviction that this method he chose to explore, based on the technique he developed, was the deepest and also the most investigative regarding the psychogenesis of psychopathologies.

... the analytic method of psychotherapy is the one that penetrates most deeply and carries farthest, the one by means of which the most extensive transformations can be effected in patients. Putting aside for a moment the therapeutic point of view, I may also say of it that it is the most interesting method, the only one which informs us at all about the origin and interrelation of morbid phenomena. (Freud, 1905/2006, p. 246)

This way, psychoanalysis seeks to act on the unconscious conflicts that lie at the root of our symptoms. It also aims to analyze the analysand’s resistances that impede access to

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content beyond the reach of consciousness in order to get at these roots and their psychopathogenic occurrences. Thus, psychoanalysis is not limited to alleviating symptoms, to making the patient's life less intolerable. It intends to agitate this life to the point that the patient himself is willing to submit it to revision to gain broader self-knowledge and face certain truths about that self (Bucher, 1989, p. 187).

From this, psychoanalytical investigation was constituted as a reliable way to access mental processes that "are almost inaccessible in any other way" (Freud, 1923/2006, p. 287). Psychoanalysis is, as such, as much an investigatory procedure as a treatment method that culminates in effecting a theoretical framework for continuously developing psychological information.

In psycho-analysis there has existed from the very first an inseparable bond between cure and research. Knowledge brought therapeutic success. It was impossible to treat a patient without learning something new; it was impossible to gain fresh insight without perceiving its beneficent results. Our analytic procedure is the only one in which this precious conjunction is assured. It is only by carrying on our analytic pastoral work that we can deepen our dawning comprehension of the human mind. This prospect of scientific gain has been the proudest and happiest feature of analytic work. (Freud, 1926/2006, p. 246)

This way, Freud always maintained an investigative posture. For all that he created recommendations for analytic practice, they were not a consolidated method set in stone, but a psychoanalytic investigation guided from its beginnings by the transformations of the clinical experience. The knowledge acquired with the patients became a source for thinking and rethinking the theoretical configurations of psychoanalytic theory. Therefore, Freud initially developed a method of investigating symptoms until arriving at a form of treatment, which in turn fed back into the investigation method itself. As such, it is more coherent to think of the methodology of psychoanalysis, as Figueiredo and Minerbo (2006) put it, not as a research method, but more as an array of investigation strategies. The notion of 'method' is "since Descartes, committed to the pretense of modern man of exercising complete control over his own volitional and cognitive processes" (Figueiredo & Minerbo, 2006, p. 263).

Strategies, meanwhile, are forming and transforming, engendering tactics, and providing insights as a function of the current conditions under which they are implemented; strategies leave a wide margin for improvisation and for primary processes, for discoveries, and for invention. Unless we deconstruct the current meaning of "method," forged over many centuries of Western culture, to go back to the original and archaic sense of the term, setting aside its modern and "scientific" resonances. (Figueiredo & Minerbo, 2006, p. 263)

Thus, research in psychoanalysis distances itself from empirical research, which is characterized by ideas of replicability and control of scientifically epistemological variables. While, in empirical research, the relationship between subject and object involves an active subject who methodically studies an object, underpinned by concepts, instruments, and techniques of hypothesis discovery and verification, in psychoanalytic research precisely the opposite is verified: the non-control of variables. Psychoanalytic technique, both clinically and in research, is fundamentally constituted from what emerges from our control: unconscious manifestations. As such, it is not an accident that psychoanalytic investigation has not been embodied in manual with rigid directives to be followed. It was precisely by not becoming an explicitly delineated method that Freud was able to follow and transmit it. "The scarcity of technical recommendations is immanent in the psychoanalytic method insofar as it inhibits the risk of reducing it to technique, which would make it amenable to application" (Vorcaro, 2010, p. 11).

Psychoanalytic clinical investigation demands letting go of control in order to access the object under study, precisely to "avoid the psychoanalyst's ideas (including scientific ones) blinding/deafening them to the material that was to come, especially that which might cause surprise or revulsion in the psychoanalytic situation and process" (Castro, 2010, p. 26).

In this context, Figueiredo and Minerbo (2006) differentiate two types of research in psychoanalysis: research into psychoanalysis itself and research based on psychoanalytic investigation. The first is broader, consisting of a set of activities aimed at producing knowledge, which maintains relationships with psychoanalysis. There is no demand here for a psychoanalyst engaged in clinical care. Any interested person can put psychoanalytic theories under the metaphorical microscope and conduct systematic, historical, social, or epistemological studies of them. On the other hand, research based on psychoanalytic investigation requires a psychoanalyst. This form of analytic psychoanalytic research needs to respect, inasmuch as it is intrinsically tied to clinical practice, the specificity of its clinical method, free association, which responds more to the logic of the discovery than to a planned goal in agreement with a pre-established project of confirming hypotheses.

When placed in an academic context, faced with various university demands, would psychoanalytic investigation-based research be able to maintain its essence or would it have to be adapted, risking a break with the nature of its object of study? With this issue in mind, the present study proposes a theoretical discussion on the epistemology of psychoanalytic research and its place within the university research.

PRINCIPLES OF PSYCHOANALYTIC INVESTIGATION

Even if psychoanalytic investigation is guided by a search, often responding to the university's research demands and those of research ethics committees, which require the prior delineation of specific objectives, general objectives, and expected results, it is crucial that this search does not invalidate the result of the clinical sessions' findings. The maxim of psychoanalytic investigation is to provide conditions for discovery, but not necessarily to discover what we were seeking (Mijolla-Mellor, 2004).

In this sort of research, the researcher transforms alongside the object, letting himself be remade by it, and, in return, reconstructs it as his elaborations and discoveries advance, making it "a point in the relationship's history that leaves none of the terms as they were before the research itself began" (Figueiredo & Minerbo, 2006, p. 260).

The transference and countertransference relationships give the mark of singularity to what is discovered and to what was invented in the psychoanalytic clinical practice's investigative research. The clinical researchers, in this case, make themselves available to the other who is expressing suffering in various ways: making demands, challenging the capacity for attention and acceptance, testing knowledge, leaving the comfortable domain of rigid theory. This other one who faces them, also dislocates them, puts them in another place, and it is important that the other one does this, because it is there that the possibility of something new arises. It is vital that, as part of their ability to practice, the analyst be able to learn with and about this other before him. Clinical and investigative technique is, therefore, essentially about allowing the time and space for the other to appear and show himself in their condition of otherness. The analysts as much as the analyzed become others in the meeting with each other (Figueiredo, 1996).

It is an activity in which "objects," "researchers," "means," or "instruments" are constituted and transformed. And, in this way, "research subject," "object of study," and "means of investigation" are constructed in their transformative quality concerned with accessing the unconscious dimensions of suffering. In order to achieve this transformative end, clinical psychoanalysis develops from floating attention, which means that the analyst should not *a priori* privilege any discourse element of the analysis. If the latter is guided to freely associate, communicating everything that comes to mind, without criticism or selection, the analyst, in turn, should keep himself in a state of suspension as to the unconscious motivations to listen as freely as possible to the material produced in the analysis (Freud, 1912/2006, Figueiredo & Minerbo, 2006).

Hence, perhaps, the precedence of listening over looking when metaphorizing the clinical experience in the originality of its ethics: looking suggests the sovereignty and distancing of the one who sees and by seeing grasps what is seen, while listening

puts what one hears in a closer, more passive, more suffering position. It is easier to direct the gaze than to listen; easier to open and close the eyes than the ears. The eyes beg light to function, the ears work better in silence. The eyes cast about the illuminated world, searching, while the ears wait silently. (Figueiredo, 1996, p. 167)

What Figueiredo poetically points out to us is that analysis, in its clinical and research dimensions, demands that the analyst/researcher let himself be awakened to a novelty that contradicts expectations. Figueiredo (1996, p. 170) and also Pontalis (2003, p. 376) takes up Picasso's motto, assumed by Lacan: "I do not seek, I find." And what they mean by this is that one finds oneself only by accepting the risk of not seeking the self. The popular saying "whoever seeks, finds" is pertinent here, for being understood as whoever looks for a thing, finds something related to what is being sought. One's finding is directed by a search that blinds him to what is not being looked for.

Pontalis (2003, p. 376) provocatively states, "more findings and we would take less delight in the word 'research.'" That is, psychoanalytic listening consists fundamentally in granting a place to the unknown, finding the "unexpected in its irreducible otherness, a meeting with what arises before me invalidating me and spurring me to be, outdating me and calling on me to update myself" (Figueiredo, 1996, p. 170). Therefore, it is essential that one is able to make space for the deconstruction that will open the way for reconstruction, thereby evading the trap of reducing practice to theory. If one falls into that trap of not being open to novelty in clinical practice, whatever the analyst's resistance to the treatment of the subject is, such as the desire to cure or the craving for scientific recognition, nothing new will be presented, and the clinical investigation will be restricted to confirming already-made theoretical statements (Vorcaro, 2010).

The researcher might restrict himself to wanting to confirm theoretical statements already made, offering clinical manifestations in the service of witnessing psychoanalysis itself. In this situation, far from the function of investigation, the case becomes a mere example that may block the method itself, abandoning what is most essential to psychoanalysis. Functioning as the analyst's resistance to singular, subjective manifestation, the researcher may act to fit the singularity of the case into the necessary theoretical generalization's universal. (Vorcaro, 2010, p. 15)

Thus, for all that research and clinical practice go hand in hand in psychoanalytic practice, they are not completely complementary. The clinical case study functions to find problems with theoretical knowledge through its singularity marked by the unconscious. The challenge of these studies is to transition between what is particular and what is general, which can either confirm the generalization or be

an exception to it (Castro, 2010). However, the particular case can never be a banal example of what is general, an exemplary case that loses its singularity and its capacity to surprise (Miller, 2009).

Floating attention is the practice of the analyst who is open to being surprised. In the words of Freud (1912, 2006), the analyst “should withhold all conscious influences from his capacity to attend, and give himself over completely to his ‘unconscious memory.’ [...] He should simply listen, and not bother about whether he is keeping anything in mind.” (p. 150). Otherwise, if the analyst deliberately focuses all his attention on a fixed point, that choice that is made of the material produced in analysis will favor what is anticipated from his subjective inclinations or expectations. Consequently, the analyst runs the risk of never discovering anything beyond what he already knows, because he will neglect the emergent content of the novel.

Listening to the psychoanalytic investigation is, therefore, a listening unmoored from the apparently central theme, which makes speech populated by the unconscious possible and demands an ethical position from the analyst of being mentally available to participate in the encounter with the

analysand’s unconsciousness. Hence, the emergence of clinical material oriented from the analyst’s disposition to the procedure of accompanying the associative threads that arrive in analysis. The concern with isolating oneself from disturbing stimulus, so present in empirical research, is the equivalent, in psychoanalytic practice, to isolating oneself from the intentionality of the analyst (Botella & Botella, 2003).

With this concern in mind, Freud makes an important recommendation that aids us in situating our research. He states that it is not good to work scientifically on a case while the treatment is still ongoing (Freud, 1912/2006). In other words, one should not from time to time assemble the case characteristics, perform diagnostics and prognostics with the aim of monitoring the treatments progress and the therapy efficacy. According to him, the most successful cases are those that progress without an intention in mind, without speculative presuppositions, which allows the analyst to be taken by surprise at any new twist. As such, it is not recommended to take notes during the sessions. The analyst is thus free to range according to the clinical demands of each case and, only after the analysis concludes, make a case study of the material obtained.

THE CASE STUDY AS A METHODOLOGICAL STRATEGY OF CLINICAL INVESTIGATION

The university requirements imposed on researchers are not perfectly aligned with the ethical demands of research with clinical cases. The chronology of university research even hampers the Freudian recommendation to only theorize on the material obtained from a clinical case once the analysis has been concluded. When following the university research recommendations, the master’s or doctoral researcher, for example, will have two or four years to complete his research and present its results, as well as formulate a research project to be submitted to an ethics committee.

In this context, we should, then, raise the issue of how the intentionality of a psychoanalytical study might impact the conduct of clinical cases. There is, in this point, an identity conflict for every analyst who undertakes research: “Am I an analyst or am I a researcher?” (Giuly, 2017). In order for the authenticity and value of a clinical meeting to be realized, whether in the clinical world or in university research, it is necessary for the analyst to be aware of this conflict. The position of master’s/doctoral candidate research/analyst can echo the patients’ problems. It would then be necessary to find a compromise between the demands of various authorities, which are the university and the specificity of research fields, with the aim of building a good enough reference for the temporality of the university not to overwhelm that of the analyst and patient. Ethics in psychoanalysis is not about transforming the subject into an object of study, but establishing the subject in a unique and individualized status (Giuly, 2017).

In the work of gathering and assembling data for analysis and theoretical development, as we have seen, it is necessary to be open to the novel and even to finding nothing about the issue under study in the case. Likewise, it is necessary to allow the treatment to evolve in an unintended direction, and to keep, thus, the ethic needed for psychoanalytic research of assuming a neutral position, abstinent, without imposing any demand upon the patient that is not of the patient and that would compromise the psychotherapeutic development. Otherwise, the analyst’s “knowledge” of the theory and clinical “experience” would overwhelm the analysand’s “knowledge” (Mijolla-Mellor, 2004).

In the face of this, the case study, developed from the analyst’s post-session notes and, in line with Freudian recommendation, after the end of care, follows a reading other than that of the clinical treatment itself.

Psychoanalytic treatment is characterized by the method of free association – that each session requires realization under transference of discourse (done improvisationally and without pretext), as unfettered as possible from the resistances of the self. While the case study, for its part, is marked by writing (done by the research about fragments of a subject), which tends toward the scientific-university framework. (Castro, 2010, p. 27)

Case study writing seeks to examine unconscious psychic processes originating from the analytic session (Jardim & Rojas Hernández, 2010). This is not limited to the

patient, but refers to the encounter the clinical promotes. The analytical session's "encounter between unconsciousnesses" gives space to a way of producing novelty. In this, the content produced in the analysis will be evoked from post-sessions notes and the analyst's memory, making a selection that privileges themes, expressions, gaps, works, or any other elements, in accord with the intentions of the researcher. For all that the case study aims to understand, as fully as possible, the complexity of the analyzed experience. It is, nonetheless, understood that analyzing every aspect of an issue is infeasible and even impossible from the point of view of psychoanalytic understanding. Hence, "the totality of any case is an essentially intellectual construction, for its constituent variables are ultimately related to one another" (Sanches Peres & dos Santos, 2005, p.121). Therefore, one must make cuts and focus on aspects more relevant to the analysis, avoiding losing oneself in tangles of information, since the same content could unfold in various forms according to the intentions and with the life experience of the researcher.

Winnicott's "discovery" of "transitionality," for example, is not the only result of observing a child's use in front of her teddy bear. On the contrary, if Winnicott was able to observe this phenomenon, it is because he already had a theory about the relationship between the external and the internal, the self and the not-self. Thus, to the extent that speech in analysis consists of free association and listening via floating attention, the writing "exists as a function of the permanent revision and correction of errors. For this reason, [writing] filters and erases what would be the order of the unconscious's manifestations, for example, writing lapses" (Castro, 2010, p. 27).

As such, writing must come after the session's trails have been traversed. The work of listening differs from that of writing. The longitudinal work of listening within the analytic process, framed by the context of the transference and

countertransference relationship, produces clinical material originating from the communication of facts occurring within and without the session in depth. This is followed by the laborious work of rereading the produced content, without the goal of presenting an integrated history of the analysand, but instead to privilege, by the written word, specific boundaries of the case (Silva & Macedo, 2016). Thus, the case study does not seek to exhaust the subject's story, but instead to articulate fragments of this narrative to be "witness to a change in the subject's position relative to desire and enjoyment" (Castro, 2010, p. 27). In this fashion, the records of each clinical visit, made *a posteriori* in a private notebook, should be reread guided by a clinical listening. This analysis develops in the post-session, "where the clinical session's experience plays the role of a semi-unconscious 'remainder of the session'" (Botella & Botella, 2003, p. 439). The sessions' events pave the way for a secondary elaboration of the vestiges left by the experience of these sessions.

It is from this investigation methodology that psychoanalysis develops its theoretical and investigative tools, affirming it as a legitimate and discerning research strategy based on its own research and ethical foundations (Silva & Macedo, 2016). On the other hand, this investigation strategy does not involve a generalizing inference of results for a sample or population among its objectives (Iribarry, 2003), nor is it concerned with statistical analysis or appropriate for uncovering cause and effect relationships, as the production of truth in psychoanalytic analysis is always relative to the producing process. And this process is singular, and, therefore, unrepeatable. This methodology presents much more coherent for "interpreting any phenomenon part of man's symbolic universe: psychotherapy sessions, interviews, any type of presentational-expressive (projective) material, social or institutional phenomena, clinical material collected from patient groups (colostomized, phobic, etc.)" (Figueiredo & Minerbo, 2006, p. 274).

BY WAY OF CONCLUSION...

The debate over the scientific character of psychoanalysis is not new. Freud was very concerned about the issue. Within his life, the author labored to have psychoanalysis inserted into the scientific domain, fearing that otherwise it would be saddled with a mystical and speculative aura (Botella & Botella, 2003). However, the problem that confronted it on this path was the nature of its object of study.

The data we deal with is not that of the mechanisms of the inanimate natural world (the natural or physical or chemical sciences), or that of the mechanisms operating in the living world of flora and fauna where phenomena of the mind are not studied (the biological sciences), but specifically mental expressions of desire, of will, and of intention in all their subjectivity, their elusive nature, and their ambiguity. (Wallerstein, 2003, p. 110)

In view of this, psychoanalysis does not consist of an experimental science properly said, because its object of study is not measurable and quantifiable. How "will we measure the anguish and psychic pain of castration?" asks Pontalis (2003, p. 377). If, for example, the object of study in analysis is an individual case, it is not a matter of analyzing the signs and symptoms produced by the patient, but every intrapsychic path that is established as much in the processes of producing them as in their treatment (Widlocher, 2003). The object of psychoanalysis is not an external one, nor is it an event,

but the unconscious movements and feelings that are subjacent to them, which constitute a psychic life simultaneously of the observed and the observer. Both unconsciousnesses, that of the analyst and of the analysand, participate in the experience of the session, which organizes a deep unity between the instrument

of observation (the analyst's psyche), the object of study (the patient's psyche), and the reciprocal relationship between them, both functioning in a regression state: it is this ensemble that forms the true object of study in psychoanalysis. (Botella & Botella, 2003, p. 435)

It is by recognizing that observation itself is profoundly subjective that psychoanalysis takes on its role as part of the object of study. The interpersonal relationship between the analyst and analysand is not what is placed at the focus, but the intersubjective relationship of the two psyches in communication, into which unconscious individual processes are inserted. That is why the concepts of transference are developed in psychoanalysis. It seeks to give an account of what lies beyond the exterior object, which is, in all its complexity, the unconscious. "This triple situation that occurs in the individual practice of psychoanalysis (individuality of case, complexity, intersubjectivity) imposes different methodological rules different from so-called scientific research" (Widlocher, 2003, p. 53).

Thus, psychoanalysis's object of study is not translatable into the languages of statistics and mathematics. Verification, quantification, predictability, replicability lie far from the specificity of psychoanalysis. "The domain explored by psychoanalysis demands objective recognition of a true subjectivity and fears that, by this fact, analytic thought will never be admitted into the realm of the sciences" (Botella & Botella, 2003, p. 437). The abyss between psychoanalysis and the so-called natural sciences does not reside in its content, but in its method of investigation, which, in turn, is what defines what is and what is not science. As psychoanalytic investigation is a methodological practice before aiming to be a science, the challenge of psychoanalytic research consists of studying the unconscious phenomena by its own method, so as not to violate the nature of the object of study (Wallerstein, 2003).

Hence, psychoanalysis had to create its own research criteria, whose fundamental principle was "stop considering already-established scientific research models as the only ones possible" (Botella & Botella, 2003, p. 423). The great creation of Freud was, therefore, the invention of a methodological investigation strategy, whose initial milestone was Freud's study of himself.

As much as he was studying his patients, his "inaugural work" was derived from the self-analysis Freud directed at his own dreams. The book *The Interpretation of Dreams*, published in 1900, displays the rigor, clarity, and systematization of an author quite concerned with convincing the scientific community of the soundness of his discovery.

If Freud had simply limited himself to a rational demonstration of the idea that dreams have meaning, including a realization of desire, he would have been able to claim a scientific character for his approach much more easily. But he would have been no more than, along with Maynert and Griesigner, one scientist among many, and would not have inaugurated a new field. (Botella & Botella, 2003, p. 437)

However, the reversal of the hitherto unusual position of the researcher to the researched opened up a world from which Freud was not able to escape. The development of his method of study, thus, was guided by the goal of creating conditions for learning those elements that were foundational for psychoanalysis: the unconscious and its manifestations. With this in mind, he created and developed a rule basic to the psychoanalytic situation: "The fundamental rule is that of speaking freely, omitting nothing from what comes. Making the effort not to omit what arises and is presented for being outside the purpose – futile or senseless (unconnected), or unconscious and disagreeable" (Laplanche, 2003, p. 359). It consists of running counter to the direction of control the consciousness imposes on communication production. As for the analytic situation, the technique is not about furnishing the patient with much sought after synthesis. It is not about refusing to help the other, but yet, refusing to give advice, to impose one's knowledge on the other and dispassionately manufacturing solutions. Again, against the current, the movement of the analysis orients toward a dissolution of previously constructed syntheses so that, in this deconstruction, something new will arise (Laplanche, 2003).

Therefore, there is a simple response to the attacks against the scientific character of psychoanalysis, based on the assertion that the psychoanalytic method does not satisfy the criteria of science because its concepts don't have explicit and observable definitions: "the rules of correspondence are inadequate and unreliable, the means of attesting to the reliability of the observations were not taken into consideration" (Canestri, 2003, pp. 86-87). Psychoanalysis arose as a new research technique in which its specificity is inseparable from its practice. The nature and complexity of its object of study necessitate an appropriateness of method in order not to lose exactly the singularity of this object. Transcription of the object into the quantitative domain annihilates its nature.

In the face of this discussion, it is possible to make a comparison: psychoanalysis is scientific just as acupuncture is medicinal. Acupuncture is an ancient oriental technique consolidated in the West as a form of alternative medicine. However, despite being appropriated by some doctors and being a stage for policy debates about its exercise, acupuncture is an alternative to medicine, if we consider it as a set of methods and practices that govern the medical profession. Acupuncture is only alternative medicine if medicine refers to the theoretical field of the study of the human being. Thus, psychoanalysis is scientific, for having its own methods and practices that culminate in a production of knowledge that develops its theoretical framework, but it constitutes an alternative to science, if this refers only to naturalistic hypothetical-deductive empirical research.

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