



# IPSO JOURNAL 2023

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## Editorial

Dear colleagues,

I am very happy to introduce this edition of our Journal, which has something special, being the first of a new editorial line.

Until now, in fact, the IPSO Journal came out once every two years, after each IPA-IPSO World Congress, collecting the papers who won the IPSO Writing Awards which, until last year, were related only to that biennial congress. Starting with this issue, however, it is our intention to bring out the IPSO Journal every year. It will collect the papers that won the recently established Writing Awards, linked to the main congresses of each Region. In addition, there will be sections that give a contribution based on the specific experience of the candidates. One, called "*Training Today*", will feature papers reporting interesting elements of the training experience on the contemporary world horizon. The other, "*Psychoanalytic perspectives on contemporaneity: reflections on art, technology, and socio-cultural issues*", will welcome experiences and reflections, from an analytic perspective, concerning interesting elements of the contemporary context, observed through the eyes of the new generation of analysts.

The basis for this project is the belief that the clinical, theoretical and cultural experience made during training by candidates can be their specific and valuable contribution to the entire analytic community.

Truthfully, candidates' writings do not have the theoretical depth and clinical precision of those of more experienced colleagues. However, the analytic experiences candidates encounter during training are lived by them for the first time, and this can allow for a freshness of observation that brings forth different perspectives in our discipline, on which the entire analytic community can usefully reflect. In addition to this, because of the career stage they are in, the internship contexts in which they are placed, and the need to follow cases in analytic treatment for training, well supported by their supervisors, candidates may be more likely to come into contact with and welcome clinical situations and settings on the edge of sustainability.

Finally, commonplace but important, the age of the candidates puts them in contact with a different social and cultural reality than their senior colleagues.

On the basis of these considerations, I believe that the candidates' works are not simply a sketchy and less valuable copy of those of more experienced colleagues, but bring a contribution of a specific and different kind that, when put in dialogue with the experience of the entire analytic community, can support the development of our discipline. This dialogue between perspectives and generations could increase both the enthusiasm of discovery and the sense of reliability of expertise, the willingness to explore the new and consolidate experience; this could help psychoanalysis to maintain its simultaneously expert and continuously new gaze on human phenomena, lending support to its avant-garde function, with which it was born and which, in my view, it must maintain.

In this issue we welcome the winning papers of the IPSO Writing Awards related to the EPF Annual Conference, Wien 2022; those related to the FEPAL-OCAL Congress, Mexico 2022; and those related to the recent IPA Asia Pacific Conference, New Delhi 2023.

Reflecting the global horizon and the desire for transregional scientific and cultural exchange that characterizes IPSO members, some of the winners of the awards come from different continents than where the conferences were held. The papers deal with contemporary and problematic or even controversial issues. Noel Bohl Fabien's one, for example, grapples with whether it is possible to consider the functioning of the mind altered by hallucinogenic substances as a dream-like state that, in a way similar to dreams, puts one in touch with deep psychic contents. Cecilia Caruana exemplifies the importance of maintaining the tension between the exactness of the setting - established through generations of analysts - the peculiar needs of the individual patient as well as the environmental context in which analyst and patient find themselves. Florencia Biotti and Susana Maldonado report on the importance of having used teleanalysis in the treatment of a child during the pandemic. Noa Barheim reflects on the difficulty of being in a triangular bond, welcoming its possible richness in one's life but also within the session and in the training. Karen von der Meden Gutiérrez discusses the elements that contribute to the evolution of identity, reflecting from an analytical point of view also on her experience as a support teacher.

For the "*Training Today*" section, we present Gloriana Bartoli's inspiring account of her experience as a migrant in New Zealand during her training, which led her to join three continents in her experience as a candidate. This section also includes a report of one of IPSO's most inspiring initiatives, the Cross Regional Study Groups: clinical and theoretical reflection groups among candidates from different continents. Furthermore, an interview done by Valerie Curen, IPSO Editor Elect, with Agrawal Himanshu, editor, together with Charles Baekeland, of the book "*Dear Training Analyst.*"

Last but not least, in the section "*Psychoanalytic perspectives on contemporaneity: reflections on art, technology, and social-cultural issues*", Nicolle Zapien's paper aims to extend the psychoanalytic reflection on the dynamics of technologically-mediated interactions not only related to teleanalysis but also in the daily life outside of the consulting room.

Enhancing and disseminating the work of candidates within the analytic community has been my intention during my two-year term as IPSO Editor, which will come to its end this July. I would like to take this opportunity to thank my Ex-com colleagues for the help they have given me, in their different roles. A very special thank also goes to all the colleagues who, with commitment and voluntary generosity, collaborate on the “*IPSO reviewing team*”<sup>1</sup>, an ongoing group of reviewers who double-blindly evaluate papers presented at congresses, and who continue to grow in number and expertise from congress to congress.

I hope that this renewed identity of the IPSO Journal and the principles underlying it, will find the interest of the analytical community and be helpful to its continuing growth.

Enjoy the reading!

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<sup>1</sup> Urvashi Agarwal, Ritika Arora, Noa Barhaim, Ad Blom, Federica Cavazzoni, Muriel Gayet, Ananya Kushwaha, Bruce Laing, Diana Maldonado, Chiara Pazzagli, Suzanne Schut, Paola Solano, Marina Vidal Stabile, Konstantinos Taliouridis, Priya Tiwari, Michelle Van den Engh, Cristina Wünsche, Nicolle Zapfen

# **IPSO MEMBERS' PAPERS**

We publish in this section the papers of the winners and the runners up of the IPSO writing awards presented at EPF Annual Conference 2022, FEPAL-OCAL 2022, Asia Pacific Conference 2023.

Noel Bohl-Fabian

Winner of the IPSO Writing Award for the 35th EPF Annual Conference, Wien 2022

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## The effects of psilocybin-induced ego-dissolution in a case of gender dysphoria: A psychoanalytic investigation

### Abstract

This article presents a clinical case study of a transgender individual engaged in psychoanalytic psychotherapy following two unguided psilocybin experiences in which they first experienced themselves as female. The paper seeks to address the question of how to think about and work with psychedelic imagery and transformations in selfhood and identity particularly around gender and sexuality. By comparing the psychedelic state to dreaming, I offer a tentative conceptualization of psychedelics as a transitional space in which unconscious and repressed affects that are central to one's particular form of psychic suffering can emerge into consciousness in order to be worked through.

“The dream-thoughts to which we are led by interpretation cannot, from the nature of things, have any definite endings; they are bound to branch out in every direction into the intricate network of our world of thought. It is at some point where this meshwork is particularly close that the dream-wish grows up, like a mushroom out of its mycelium.” -Sigmund Freud, *The Interpretation of Dreams*

### Introduction

In 1989, Edward Nersessian, reviewing a compilation of essays titled *The Interpretation of Dreams in Clinical Work*, summarized contemporary attitudes about the role of the dream and dream interpretation within the field of psychoanalysis. Nersessian contrasts Brenner's position that a

dream should be treated like “any other material” in contrast with the view that “the dream is a special and unique communication,” (p. 736).

Nersessian writes:

*“the wish to analyse a dream, to listen to its details, and to attempt to apply the various rules of interpretation proposed by Freud nearly a century ago remains a powerful part of our analytic identity. In any case, it is a source of some satisfaction to finally find the key to a dream... It is a source of pleasure that is hard to give up; in addition, dream analysis often provides a sense of conviction not always as easily forthcoming from other ongoing interpretations.”* (p. 736).

This passage highlights the role of dreams and their interpretation as central to psychoanalytic identity. While much has been written about dreams and dream work, little has yet been written about understanding what happens in a psychedelic journey, an experience which shares similar qualities to a dream. There is currently no unifying theory for how to characterize and interpret the visual imagery and psychological dynamics that emerge during a psychedelic trip. What might a psychoanalytic treatment of psychedelic material look like? Can a psychedelic experience be compared to and worked with like a dream? Do they represent the same kind of process, or are they incomparable? Could analysis offer a framework for interpreting psychedelic trips?

This paper explores the function of a psychedelic trip that occurred prior to a patient beginning analytically-oriented psychotherapy. The following case study illustrates one potential way of working with psychedelic trips within the context of psychoanalytic therapy.

## **Case description: The trip**

V<sup>2</sup> first contacted me in the fall of 2019. They<sup>3</sup> had found my listing online, and reached out to inquire if I was accepting new patients. In an email they described suffering from general depression as well as “some kind of mind/body disconnect”. V explained that their partner had been pushing them to begin therapy for a few years, but they had been in denial of how serious their problems were. Most significantly, they wrote, sexual activity, particularly intercourse, provoked feelings of shame, guilt, and confusion.

V and I met for an initial consultation at my office and decided to begin twice-weekly psychotherapy. They wanted to work with me because of my interest in psychedelic integration. At the time of our meeting, V had experienced two solo, unguided psilocybin<sup>4</sup> trips in their apartment

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<sup>2</sup> All personal identifying information has been altered to protect the patient’s confidentiality.

<sup>3</sup> I will be using the pronoun “they” throughout this paper to reflect the patient’s decision during the treatment to change pronouns from “he/him” to “she/they”.

<sup>4</sup> Psilocybin is a naturally occurring psychedelic compound found in Psilocybe mushrooms. It is currently a Schedule I illegal substance under the Federal Controlled Substances Act. It is currently being researched in clinical trials as an adjunct to psychotherapy in the treatment of a variety of conditions. It is contraindicated for individuals with psychotic symptoms or a family history of psychosis. Psilocybin has low toxicity, low abuse potential, and the risks (such as having a “bad trip”) can be ameliorated under a supervised medical and therapeutic setting (Lowe et al., 2021).



which forced them to reckon with their gender and sexuality in new ways, and left them feeling jumbled and disorganized.

V had decided to try psychedelics after reading some research studies in which psilocybin was being used to treat obsessional disorders (see, for instance, Moreno et al., 2006). V had taken mushrooms before, and believed they were a source of “truth and wisdom”. Their basic intention was to understand why sex felt so troubling.

Both trips took place in an apartment that V had recently moved into with their female (heterosexual, cisgendered) partner of several years. The first trip was preceded by two important events: the death of V’s maternal grandfather (which was both upsetting and confusing to V, who felt that during the funeral they were unable to experience any kind of emotion whatsoever) and news that one of V’s close male friends had been identified as a sexual predator who had assaulted several women, some of whom V knew personally.

V was shocked by the cruelty of this friend’s behavior, and was especially distressed by the fact of its concealment. V told me they never knew this person had a dark, destructive side. Yet upon finding out, the information seemed to confirm an intuition V had held in secret for many years. By taking psychedelics, V told me they were attempting to “see what was unseen”: they wished to root out the origins of their own sexual difficulties and confront the truth about themselves, something they were incapable of seeing fully with their own eyes.

During the peak of the first trip, V was lying in bed. They were “floating in darkness” when suddenly there was a “loud voice” that seemed to come from deep within V’s core. They listened to the voice, and the voice was female. The voice was accompanied by a vision of a strong and powerful female deity, surrounded in flames. Although no specific words were spoken or registered, V panicked. V opened their eyes and had the thought for the first time that they might be transgender.

The experience unearthed feelings of confusion, sadness, as well as “moments of ecstasy”. V was startled to consider that their entire life had possibly been lived in the wrong body. However, this revelation gave new meaning to a long-term feeling V had that either something was fundamentally wrong with them, or that something fundamental was missing.

A few months later, V decided to take mushrooms a second time as an attempt to re-encounter the female figure who appeared to them during the first trip. They told themselves they would be prepared this time to engage in a direct conversation with this figure, to better understand her meaning.

V’s second trip was unexpectedly challenging. They suddenly worried they had taken too much, the mushrooms were too strong, and they began to lose their grip on reality. V says they forgot who, where, and what they were. Time and space seemed to disintegrate in waves, and V felt as if they were being swept out to sea in a “nauseating ebb and flow” of intermittent unconsciousness. V called a friend, who was able to intervene and calm V down. The experience was unnerving, and

left V with the lingering suspicion that their self was not fully intact, and that they were “broken beyond repair.”

About six months into the work with V, I reached out to a group of clinicians in the psychedelic-therapy community to ask if anyone else had encountered similar reports. A respected colleague referred me to Jeanna Eichenbaum, a transgender psychotherapist in San Francisco. She sent me a link to a presentation she gave titled “Dissolving the Binary: The Queerness of Psychedelics” (Chacruna, 2018). In the video, Eichenbaum describes her own psychedelic experience, in which she felt for the first time that it was ok to be transgender. She related this to the quality of mystical experiences, how they “reveal the nature of our true, cosmic self, one beyond life and death, beyond difference and duality.”

The video resonated with V, and they wrote me a long email -- the first of many-- in which they offered a stream-of-consciousness account of their internal experience. The emails became a transitional space for V to punctuate the time between our sessions, and to continue processing the material that had emerged during, and since, their mushroom trips. As a result of engaging with V’s memories of their psychedelic experience and corresponding feelings of distress and anxiety, several themes began to emerge. These themes include V’s lost and shattered sense of self; the shock conferred by relating the vision of the flamed woman to a previously unconscious gender dysphoria; confusion about what is real and what is imagined; and understanding the wounds of psychic trauma embedded in V’s sexual development.

## **Background**

V grew up outside of a major city in the American South. Their mother is a contemporary dancer and their father works in publishing. V has a sister who is three years younger. Their parents come from traditional families: the mother’s parents live in a small, rural town a few hours from where V grew up. The maternal grandfather was a World War II veteran, who became the town mayor when he returned home, and used to enjoy flying planes until he passed away in 2019, weeks before V’s first mushroom trip.

From the time I have known V, their childhood has always sounded warm and idyllic. They were close to their mother, particularly before their younger sister was born. The family spent summers visiting their grandparents in the countryside. V was a lively, active, compassionate child who loved animals. However, two major threads stood out to me in the family dynamics: one is the description of V’s parents as “sexless”, that is, never showing physical affection towards one another; the other is a model of masculinity, based on V’s relationship with their father, that V considered to be harsh, withholding, punitive, and lifeless.

V’s adolescence was complicated. As they matured, V’s relationship with their mother became distant, and they felt pressured to confide in their father about personal matters. V’s first sexual experiences were frightening. The first time they masturbated, V felt their body, especially their penis, was alien and monstrous -- it seemed to possess a life of its own that was beyond V’s control.

Initiating physical intimacy with girls during this time was felt as impossible for V, because they felt a need for “permission from an outside source”.

V has always struggled with the idea of limits: what they do, how far they extend, and what they signify. V identified as Straight Edge in high school and avoided any and all mind-altering substances out of a belief that the substances would permanently contaminate them. In some ways this belief reflects their father’s harsh, negative attitude towards substance use throughout V’s childhood; in other ways, V’s strong commitment to abstinence highlights a deeper concern about the potential for irreversible damage as a result of physical and mental contamination.

V lost their virginity in college, and the experience was traumatic. After receiving fellatio from a female love interest, V orgasmed immediately, and ran to the bathroom feeling sick. Unable to regulate, they grabbed a straight razor from the medicine cabinet and carefully sliced open the skin on their inner arm. The cut provided relief from a surge of inarticulable emotions.

V and I have explored this moment many times. It serves as a reference point for what Stein calls the “*compelling power of sexual experience*” (2008, p. 43). I believe that psychedelics created a way for V to re-experience this moment of disruptive unbinding, that signifies an important aspect of V’s sexual identity. The second trip in particular became a mirror for V to process their internal fragility, and a related fear of being shattered by something (or someone) outside.

V considers heteronormative sex to be “violent, weird, and darkly comical”. In fantasy, they imagine themselves as a voluptuous female, becoming the recipient rather than the feared interloper of penetration. On the other side of V’s aversion to sex is a fear of being swept away in the ecstasy of their partner. In real life, they have described being asked for more, to “go harder”. The demand to be sexually unrestrained provokes intense anxiety, as it conjures an association with violence that triggers a subsequent desire to protect themselves from the contaminating effects of their own potential aggression.

The idea of contamination is linked in V’s mind to many different associations. V became vegetarian because they believe that to consume an animal that had been tortured and slaughtered would mean to absorb the negative energy or “essence”, and this would become permanently etched in V’s body. Similarly, as previously mentioned, when V decided to join the other Straight-Edge students in high school, it was because of a belief that drugs and other psychoactive substances would lead to irreversible damage, i.e. would result in permanent contamination.

Underlying these thoughts is a notion about the unlimited destructive potential of particular substances on the body, and an inability to protect the self from possible invasion. For V, pain and suffering can be transmitted physically, through touch or consumption for example. Along these lines, V wondered if their confrontation with the female deity in the psilocybin trip was a representation of this fear of being “abruptly invaded” by a foreign body, and the idea of taking a psychedelic in the first place represented an overwhelming urge to “trash” their mind.

V mentioned a recurring phobia in the treatment about “undressed” windows. They recalled once as a child going downstairs in the middle of the night to get a drink of water. In one room of the house, there was a wall of windows -- at night, it became a wall of total darkness. In V’s mind, the windows were “undressed”: without curtains or blinds, they were bare and exposed, unprotected. They were frightened by the boundless dark. They worried about being seen and found to be doing something wrong or bad, and wondered if they would be punished.

For the last year or so, V has experimented with wearing makeup, jewelry, and women’s clothing. The experience has been turbulent, but transformative. Initially, the jolt of pleasure in feeling feminine would degrade into crushing disappointment when they looked in the mirror and discovered they still have a man’s body. V’s body can frequently become a site of dizzying emotions: they describe a unique kind of anxiety that emerges especially at night, a visceral combination of claustrophobia and vertigo— that is, feeling confined by what feels like the wrong body and uncontained by this predicament, which conjures vast emotional fear.

For V, to challenge the undeniable fact of their male body, to question its meaning and to imagine themselves as other-gendered is equivalent to transgressing the “Law of Nature”. To imagine themselves as female is felt to be provocative and dangerous: it evokes the fear of violating something pure and uncontaminated, something akin to the “American Dream”, and therefore risks the possibility of punishment, perhaps even eternal suffering. If subscribing to the gender binary provides a stilted form of comfort, then identifying as trans or female would be to fall through the boundless dark of the undressed windows.

V and I have frequently discussed their observation that a “strange economy” exists in their mind between pleasure and pain. They often feel that an experience of pleasure must be earned through an experience of suffering. The world operates according to the logic of “an eye for an eye”: to pursue pleasure is always to risk negative consequences. Every moment of pleasure has an equal and opposite force. The more V attempts to defy and transgress the “Law of Nature”, the more they fight against the boundary of what is acceptable, the more Nature seems to fight back.

V has often wondered if the psychedelic mushrooms created something new in them, or if they merely amplified something that was present but repressed and dormant. We have also explored V’s feeling that the mushrooms “broke” or “removed” some crucial aspect of V’s mind. I believe that the mushrooms both amplified and elaborated a dimension of V’s psychic life that was obscured by the ongoing process of repression. In Letcher’s conceptualization, mushrooms “adjust” what it is possible to perceive rather than altering consciousness (2007, p. 88). After some deliberation, V has landed at the understanding that their trip magnified a feeling that was already there, which is a sense of unrecognition whenever they see their reflection.

In connection with this, an important aspect of V’s decision to take psychedelics was to invoke an experience of total, even primordial loss and annihilation. Taking mushrooms was connected to a wish to overwhelm their mind and body, as if to become a sacrifice. The trip was both a violent attack and violent surrender, resulting, perhaps, in self-negation. This seems related to the type of surrender V is unable to risk during sexual intimacy. Rather than dissolve into ecstatic abandon and

permit themselves sexual pleasure, V was pushed both to make a cut and to be cut, to contaminate and decontaminate. In doing so, they inscribed a strict boundary that would limit and regulate the uncanny, while at the same time inviting these inarticulable sensations to invade and ravish their body. This experience suggests simultaneously a state of bliss or pleasure combined with terror, horror and disgust. Holding and incorporating these antipodes into an experience of unity may be a central mechanism of transformation in situations like V's.

## **Analysis: Self-dissolution, estrangement, and synthesis**

Lethaby and Gerrans (2017) compare the process of psychedelic-induced ego-dissolution to a process of unbinding. Psychedelics create an altered state in which attention is re-distributed away from ordinary markers of self-identification. When this narrative element of experience dissolves, unfamiliar and unfiltered perceptions emerge that can evoke chaos and disorientation. V's attempts to process their sexual experiences resemble a crisis in ego disruption as a portal to integrating indeterminate ways of being.

But what happens when a psychedelic trip causes an experience of ego loss that is felt not as therapeutic but as destabilizing?<sup>5</sup> Nunberg believes that disintegration of the synthetic function of the ego actually results in an enhanced effort towards synthesis (1931, p. 129). Indeed, V's experience of ego loss during their second trip and the subsequent reorganization of their gender identity precipitated an intense longing for internal destabilization, followed by restabilization: in other words, it catalyzed a process attempting to cure.

V's internal state has shifted substantially since the time we began working together. V used to describe feeling caught between the incessant swinging of a pendulum. Their sense of self, of gender, were constantly in motion. This oscillation has slowed down, and they report feeling more grounded. Their tendency towards harsh self-criticism has decreased and rumination regarding what is real and what is imagined has waned. They now feel greater confidence and trust in their ability to navigate their internal world and external experience.

The revelation that V is transgender has provided an explanation to the source of their internal disequilibrium. Their psychedelic experiences enabled V to locate and identify the origins of their pain, which was rooted in feelings of alienation about their body. However, the ongoing need to define their new identity remains a predicament, a task that requires patience and creativity, and responding to the information, experiences and feelings that emerged from their trips is anything but static.

I believe that V's trips carved out a space in which a newly gendered self could emerge. Expressing themselves as feminine, feeling themselves as female, in addition to providing a new identity structure, offers a source of pleasure. It is, in their words, "a way to make the unseen seen, to make

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<sup>5</sup> Milliere (2017) describes the neurological effects of "drug-induced ego dissolution" under a psychedelic as a result of "increased global functional connectivity", which produces an experience of self or ego disintegration that can be compared to a disturbance in ipseity (p. 7).

the inside the outside, to make my body my own.” Although sex is still complicated, and remains predominantly at the level of auto-eroticism, V can articulate a new feeling that they are striving to protect. They have identified that there is something new inside that longs to be held intact, to be kept pure. This may represent the envelope of a psychic skin (Anzieu, 1993), a newly formed membrane that demarcates a developing internal state.

It is interesting to note that even during the most “florid” psychedelic experiences, the self-concept is “never entirely destroyed” (Letheby, p. 2). We experience momentary ego loss often throughout our lives, and the structure of neurosis, our model of normal psychological functioning, is predicated on the battle to retain ego mastery, which requires flexibility and the capacity to enter non-ordinary states of consciousness when needed and valuable. The ability to lose oneself temporarily in an activity, for instance, is typically seen as an indication of mental health, not of pathology (what Bromberg calls “normal dissociation”<sup>6</sup>). If this is the case, perhaps an extended and intensified experience of ego loss, rather than reifying the ego and its defenses, encourages a different mode of operation, one that challenges our understanding of what it means to be adaptive.

The changes in perception that are a direct result of psychedelic experience can cause important and rapid transformation in one’s understanding of themselves and the world. It is my belief that psychoanalysis provides the space and time necessary for certain individuals to work through and integrate what can sometimes be felt as disorienting and disruptive within these psychedelic transformations.

## **Conclusion: Dreams, trips, psychoanalysis, and integration**

There seems to be a consensus comparing the phenomena of psychedelic trips with dreaming (Jacobs, 1978; Schultes and Hofman 1979; Grinspoon and Bakalar, 1979; Fischman, 1983; Carhart-Harris et al., 2014; Pollan 2015; Kraehenmann 2017; Sessa, 2017; Sanz et al., 2018). While dreams can be understood as “prototypical hallucinatory experiences,” psychedelic states can be understood as “experimental dreams,” (Kraehenman, 2017, p. 1032). Dreaming allows associations to become unbound by logic and secondary revision; new image-based formations are useful to creative problem-solving and the generation of insight (Kraehenmann, 2017, p. 1034). A similar process unfolds in psychedelic states, as the mind responds to shifts in subjective experience in an effort to create new meaning. Just as Greenson (1970) wrote that a dream reveals “with unusual clarity” the inner workings of the mind, a psychedelic trip can provide us with a vivid illustration of intrapsychic functioning.

The main difference between psychedelic states and dreaming is that they induce different neurological patterns of activation. Psychedelic imagery differs from dream imagery in that it is often not directly self-involved, and in fact the self is often minimized, similar to a hypnagogic

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<sup>6</sup> For Bromberg, “normal dissociation” is “the natural hypnoid capacity of the mind that works in the service of creative adaptation”, as opposed to pathological dissociation which “developed as a defense against the recurrence of trauma,” (2003, p. 701).

state<sup>7</sup>. Psychedelic imagery, unlike dreams, can encompass simple geometric patterns, enhanced colors, or wave-like distortions, in addition to imagery that is more structured, thematic, and driven by one's personality (Krahenman, 2017, p. 1035). Furthermore, an individual under a psychedelic is conscious, remaining aware and receptive not only to stimuli from the external environment, but also to the full range of their emotional memory (p. 1037).

I would argue that in this case, V's repressed and unintegrated sources of internal pain having to do with feeling something was fundamentally wrong in their body became the locus point for a psychedelic transformation. The vision of a woman in flames, appearing suddenly as if from nowhere and speaking through V, condensed and gave meaning to memory traces from the past, and symbolized a deeply repressed wish to be female.

This experience calls up Freud's concept of sublimation, which involves the capacity to achieve satisfaction without repression, freed from the grip of the superego. The wish to have an experience of pleasure that is free from conflict may be symbolically present in the wish to have a female body that is free from feelings of shame, disgust, and prohibition. If psychedelics temporarily suspend the process of secondary revision, one might anticipate a surge in unconscious wishes, perhaps a redistribution of libidinal drives<sup>8</sup>. As in a dream, these wishes may be disguised. Still, they are waiting to be interpreted into a digestible form of thought that can be integrated.

Psychedelics induce a certain kind of dissociation. From a psychoanalytic perspective, this can be considered in a variety of ways. For instance, it can represent a desire to have an experience of not knowing, to alter the mind's ordinary function in order to achieve new kinds of thinking and perceiving, and to experience other forms of awareness. To have an experience of this kind is to willingly lose one's ordinary compass in the world, and often to lose awareness of time. It is also perhaps an echo of a more basic wish to have a dream that is uninterrupted, to re-imagine the primary "oceanic" state of union with the mother, or to rekindle an infantile phantasy of omnipotence (Freud, 1929).

At the same time that a psychedelic dissolves one's ordinary conception of reality, it releases the "twilight state"<sup>9</sup> that lies between sleeping and waking consciousness (Freud, 1900, p. 507). This is a state that resembles what Selma Fraiberg calls the "magic" of early childhood, a place where the

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<sup>7</sup> Stamm (1962) writes of hypnagogic (also referred to as twilight) states: "The best analogy is to the state of falling asleep, when one begins to lose interest in one's surroundings, and when the ego boundaries become adumbrated, and the sleeper falls into a state of blissful reverie. In short, there is a withdrawal of cathexis from both the external world and the ego," (p. 779)

<sup>8</sup> See Davis (2020) for a Lacanian description of perceptual, affective, and somatic transformations under a psychedelic.

<sup>9</sup> Freud describes the "functional phenomenon" of hypnagogic imagery (see also Isakower, 1938) that develops between sleeping and waking states, in which images form not out of thought-content, but "of the actual state...of the person who is struggling against sleep" (1914, p. 96). The "ego-censor", the author of secondary revision, monitors the sleeper's state of mind which carries into the function of dreaming (p. 96-97). I believe the same process occurs during a psychedelic journey: the waking or conscious self communicates with the tripping self, to derive meaning from the chaos of the experience in an effort to preserve the function of the trip.

imagination runs wild before the self has fully formed. This is also the space of primary process<sup>10</sup> and unconscious fantasy, which resemble dreaming (Auchincloss & Samberg, 2012, p. 200). Perhaps another wish that is embedded in the psychedelic experience is the wish to remember what has been forgotten through the mechanism of repression.

One of the major losses that occurs in childhood development is the “intense, even agonizing, pleasure associated with imaginative play,” (Winnicott, 1971, p. 136). When the child has the freedom to make their own experience, everything becomes an act of creativity, and this allows for “a link with the cultural inheritance” through the creation of a transitional space in the environment (p. 137). Where a patient “goes” during a psychedelic journey can be related to this dynamic of playing with the potentialities of transitional space, and what this experience means differs from person to person<sup>11</sup>.

Under the influence of a psychedelic substance, when the ego is stripped of its normal defenses, the barrier between self and world becomes more permeable, and this may allow for the creation of new associations and insights, as well as a different mode of exchange. This phenomenon may be especially salient when considering the therapeutic action of psychedelics<sup>12</sup>. V’s psychedelic trips incorporate elements of our contemporary culture, particularly conflicts and confrontations around the complexities of gender identity. Specifically, V’s notion of masculinity as something toxic or poisonous, to be expelled, erased and rejected, mirrors ongoing discourses that seek to redefine gender norms. Moreover, the intuition that developing a feminine self-structure could provide internal healing seems another way of digesting and working through such questions of sexual difference, and perhaps symbolizes the need for new categories. Culture is therefore an additional space in which identity can continually redefine itself.

At this point in the treatment, we don’t yet know what the woman in flame means. V’s meaningful encounter with this figure could represent many things, including fear of aggression, infantile rage, the inability to mentalize sexual enjoyment, and perhaps unarticulated fears about male and female genitals and fear of castration, among many other things<sup>13</sup>.

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<sup>10</sup> See Kraehenmann et al. (2017) for a discussion of how psychedelics increase primary process thinking.

<sup>11</sup> Bromberg (2003) writes that “a dream, in its essence, is a nonlinear reality and must be related to as such – not as a kind of story or a kind of movie, but as a real space in which the patient has been,” (p. 700).

<sup>12</sup> Dominique Scarfone (2021, in press) describes the porous relationship between self and cultural environment as resembling the “operational closure” or semi-permeable membrane of a biological cell that filters information in and out in an attempt to absorb, separate, and contain the interaction between body and world: it is the part that is “most alive in a living system” (p. 4).

<sup>13</sup> It is possible that these deeper kinds of interpretations allude to what Stein describes as the “less accessible parts of the dream, the underside” which contain the unconscious wish (1984, p. 542).



## Afterward

A few months ago, V gave me a copy of a comic book they wrote and illustrated in college. It features a genderless, hairy monster who is devoted to worshiping the sacred “juices” that are present everywhere in the world, a substance that is meant to be consumed and enjoyed for its own sake, to relish in the fertile creativity of the cosmos, to drink and internalize its beauty and vitality. The last image in the comic is especially poetic. It is a picture of a mass of vegetation, jagged plants and shrubs, surrounded by what looks like a membrane -- like a body that has been cut open. At the center, it looks at first like a gaping hole, a wound that has broken through the fleshy mass, like a shard of skin. In fact, it is a clearing that reveals the dazzling splendor of the night sky, the stars and the “sweet juice” that the monster needs in order to live.

In a recent session, V spoke about going home to see their family. For the first time in our work together, they reported a dream. In the dream, V declared they were a woman, and they wanted to celebrate by getting on a boat. They were naked, and they wanted to go out on a “body of water”. But the water was black, and they couldn’t see through to what was below them, and they were afraid.

V felt victorious about this dream. They had wished many times to dream of themselves in a different body, and this felt close enough. They associated the dark water to the dark windows at night: impenetrable, consuming, and mysterious. After several days without any “mental noise”, the trip to visit their parents ignited old questions, doubts, and shame about their identity. When they arrived, much to V’s disappointment, neither parent recognized any change in their child, and they didn’t speak about V’s gender transition whatsoever.

This unfolded into a realization that V’s parents have always felt mysterious, cryptic (“dark and impenetrable”) as if withholding a world of secrets, perhaps in an attempt to protect their children from the impure (“contaminated”) aspects of reality. I mentioned to V that when they were going through puberty, they felt unable to talk to their father, as though it were unsafe, and this may have contributed to their confusion and fear when it came to understanding their bodily changes and emerging sexual feelings. In fact, while home, V discovered an old journal from adolescence, in which they wrote about turning into a monster and even wanting to kill themselves.

V also discovered that their longing to be a beautiful woman is predicated on a misconception that something external will make them feel better. They clarified that it wasn’t the woman they craved, but “what the woman had.” I asked once about V’s new habit of wearing especially large, dangly earrings, which resemble the geometrical shapes in a psychedelic vision: iridescent lightning bolts, and translucent, intertwined hoops. V responded

that they like to feel the wind against their skin, and the earrings amplify that sensation in a way that is pleasurable.

In the process of integrating their psychedelic trips, V has found a way to feel at home in their own body, achieving the internalization of something that is perhaps beyond words but is inviolable. This process has been non-linear, and much of the experience has felt disruptive, heartbreaking, and

terrifying -- as is the language of the primary process. In this way, V's wish to remember something that was lost is universal, and represents a paradox: to forget oneself is in fact the only way to remember.

## References

- Anzieu, D. (1993). Autistic phenomena and the skin ego. *Psychoanalytic Inquiry*, 13(1): 42-48.
- Auchincloss, E. L., & Samberg, E. (2012). *Psychoanalytic terms and concepts* (4th Revised edition). Yale University Press.
- Bromberg, P. M. (2003) On being one's dream: some reflections on Robert Bosnak's "Embodied Imagination". *Contemporary Psychoanalysis*, 39:697-710.
- Carhart-Harris R.L., Leech R, Hellyer P.J., Shanahan M, Feilding A, Tagliazucchi E, Chialvo D.R. and Nutt D (2014). The entropic brain: a theory of conscious states informed by neuroimaging research with psychedelic drugs. *Frontiers of Human Neuroscience*, 8(20). doi: 10.3389/fnhum.2014.00020.
- Carhart-Harris, R. L., & Friston, K. J. (2019). REBUS and the anarchic brain: toward a unified model of the brain action of psychedelics. *Pharmacological Reviews*, 71(3): 316–344. <https://doi.org/10.1124/pr.118.017160>.
- Chacruna. (2018). Psychedelics, sexual and gender minorities. *Cultural and Political Perspectives*. YouTube. <https://www.youtube.com/watch?v=XdtR4ofsC9s>.
- Davis, T. (2020). New, strange, odd and weird perceptions - a Lacanian account of psychedelics. *Lacunae*, 21:64-105.
- Fischman, L. G. (1983). Dreams, hallucinogenic drug states, and schizophrenia: a psychological and biological comparison. *Schizophrenia Bulletin* 9, 73-94.
- Fraiberg, S. (2008). *The magic years: understanding and handling the problems of early childhood*. Scribner.
- Freud, S. (1900). The interpretation of dreams. *The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume IV* (First Part), ix-627.
- Freud, S. (1914) On narcissism: an introduction. *The Standard Edition of the Complete Psychological Works of Sigmund Freud, 14*: 67-102.
- Freud, S. (1929) Letter from Sigmund Freud to Romain Rolland, July 14, 1929. *Letters of Sigmund Freud 1873-1939* 51:388

- Greenson, R. R. (1970) The exceptional position of the dream in psychoanalytic practice. *Psychoanalytic Quarterly*, 39:519-549
- Grinspoon, L., Bakalar, J.B. (1979). Psychedelic drugs reconsidered. Basic Books: New York.
- Isakower, O. (1938) A contribution to the patho-psychology of phenomena associated with falling asleep. *International Journal of Psychoanalysis*, 19:331-345
- Jacobs, B. L. (1978). Dreams and hallucinations: a common neurochemical mechanism mediating their phenomenological similarities. *Neuroscience Biobehavioral Reviews* 2, 59-69.
- Kraehenmann R. (2017). Dreams and psychedelics: neurophenomenological comparison and therapeutic implications. *Current Neuropharmacology*, 15(7), 1032–1042. <https://doi.org/10.2174/1573413713666170619092629>.
- Kraehenmann, R., Pokorny, D., Aicher, H., Preller, K. H., Pokorny, T., Bosch, O. G., Seifritz, E., & Vollenweider, F. X. (2017). LSD increases primary process thinking via serotonin 2A receptor activation. *Frontiers in pharmacology*, 8:814. <https://doi.org/10.3389/fphar.2017.00814>
- Letcher, A. (2007). Mad thoughts on mushrooms: discourse and power in the study of psychedelic consciousness. *Anthropology of Consciousness*, 18(2): 74-97.
- Letheby, C., & Gerrans, P. (2017). Self unbound: ego dissolution in psychedelic experience. *Neuroscience of Consciousness*, 2017 (1), nix016. <https://doi.org/10.1093/nc/nix016>.
- Lowe, H., Toyang, N., Steele, B., Valentine, H., Grant, J., Ali, A., Ngwa, W., & Gordon, L. (2021). The therapeutic potential of psilocybin. *Molecules (Basel, Switzerland)*, 26(10), 2948. <https://doi.org/10.3390/molecules26102948>.
- Millière, Raphaël (2017). Looking for the self: phenomenology, neurophysiology and philosophical significance of drug-induced ego dissolution. *Frontiers in Human Neuroscience*, 11:1-22.
- Moreno, F. A., Wiegand, C. B., Taitano, E. K., & Delgado, P. L. (2006). Safety, tolerability, and efficacy of psilocybin in 9 patients with obsessive-compulsive disorder. *The Journal of clinical psychiatry*, 67(11), 1735-1740.
- Nersessian, E. (1989). Review of the interpretation of dreams in clinical work. *International Journal of Psychoanalysis*, 70: 736-738.
- Nunberg, H. (1931). The synthetic function of the ego. *The International Journal of Psychoanalysis*, 12, 123–140.
- Pollan, M. (2015, February 2). The trip treatment. *The New Yorker*. <https://www.newyorker.com/magazine/2015/02/09/trip-treatment>

- Sanz, C., Zamberlan, F., Erowid, E., Erowid, F., & Tagliazucchi, E. (2018). The experience elicited by hallucinogens presents the highest similarity to dreaming within a large database of psychoactive substance reports. *Frontiers in neuroscience*, 12, 7. <https://doi.org/10.3389/fnins.2018.00007>
- Scarfone, D. (2021). Extending Winnicott's idea of environment. In press.
- Sessa, B. (2017). Towards an integration of psychotherapy and Pharmacology: using psychedelic drug-assisted psychotherapy. *Psychedelic Press*. <https://psychedelicpress.co.uk/blogs/psychedelic-press-blog/psychotherapy-pharmacology-psychedelic-therapy-sessa>.
- Stamm, J. L. (1962) Altered ego states allied to depersonalization. *Journal of the American Psychoanalytic Association*, 10:762-783
- Stein, M. H. (1984) Rational versus anagogic interpretation: Xenophon's dream and others. *Journal of the American Psychoanalytic Association*, 32:529-556
- Stein, R. (2008). The otherness of sexuality: excess. *Journal of the American Psychoanalytic Association*, 56(1): 43-71.
- Winnicott, D.W. (1971). *Playing and reality*. Routledge.

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## Coming and going from the setting to the actuality

### Abstract

The construction of the setting in the session is determined by the analyst and his or her identity, by his or her analytic training and by the cultural moment in which he or she is inserted. From the disconnection in the session with a patient we can analyse different failures in the setting.

The dialectic between having our own identity as psychoanalysts and at the same time being part of this society is actualised in each encounter with the patient.

All this in the context of a world that has recently undergone a crisis that as psychoanalysts has forced us to make quick moves that only now, in a second time with more perspective, we can think about and integrate in an honest way as part of who we are.

### Introduction

I would like to reflect on the movement from inside to outside and from outside to inside that occurs in every interaction with a patient. I start from the premise that analysts, whether we want to or not, are affected by our actuality, and that at the same time we end up affecting that environment through our work, especially through our relationship with patients.

In order to systematize these movements, I will focus on three stops along this journey: 1) the analyst's internal setting, 2) the psychoanalytic society in which this frame is inserted or Psychoanalytic Culture, and 3) the social and cultural moment that surrounds it, the actuality. These three levels are interrelated and feed in both directions: we analysts affect/modify the society or the world in which we live, and at the same time we cannot isolate ourselves or deny that the sociocultural environment permeates our daily work. All this is modulated by the psychoanalytic societies to which we belong.

For this reflection I use those clinical situations that lead the analyst to have to "act", to transgress his own referential frame of work in order to maintain the relationship with his patient under the premise of continuing to explore his inner world.

To start, I need to draw the clinician's attention to a sensation within the session; I am referring to that moment when a patient goes into crisis and we fear either for his physical integrity, or for his mental organization, or for the continuity of the therapeutic process. These moments are preceded by a blackout in the analyst's mind, a suspension in his or her ability to think. It is a state in which the sensory, his anguish, his discomfort take precedence. The mind feels like it is losing its creative essence.

In the midst of this state of suspension, the analyst comes to the rescue of the situation by activating a particular mode of functioning, absolutely focused and directed to the present situation, blocking-momentarily-other areas of his own thinking. The therapist makes an effort to put aside the psychoanalytic theories with which he/she normally deals, conversations with supervisors and even the voice of his/her own analysis. The conscious effort is directed to connect with the patient of that moment, with what is happening now, not what should be or what will be later, but the now with all its intensity in negative terms, of overflow, of unawareness. Later we will have the opportunity to understand in what we have disconnected.

I have chosen this moment because it allows me to hypothesize with the idea that the blockage has to do with the tension experienced between two opposing forces, hence it is resolved by disengaging from one of these forces and concentrating on the other. The picture of the analyst's mind is one in which we can see how two instances have become too far apart: that of the present moment reality formed by sensations and emotions (both from the analyst's internal and external world), and that of his or her thinking (understood here as the set of representations resulting from experience). In these situations the conduits linking the analyst's mind with that of his patient have become obstructed and readjustment is mandatory.

The analytical process is based on the interplay between these two instances, this back and forth is what allows the analyst to generate content about what happens in the session and that he can return to the patient at the rhythm he considers appropriate.

## **The setting**

The setting has two faces, an external and static one formed by the set of rules agreed at the beginning of the treatment for the process to work: schedules, fees, vacations, etc., and another internal and dynamic one formed by theories and past experiences, which develops throughout each analytical process and which watches over our work, which corroborates our sensations, which allows us to understand what happens to us, whose ultimate goal is to maintain the work with the patient.

When "confronting" another unconscious or the outside world, we can only equip ourselves with our theories, with our limited experience in order not to feel the immensity of the different, of the ominous. We assert the little we have and with it we lay the rope by which we descend. Our unconscious resists to show its face because it threatens, always and for everyone, the fear of going mad.

There are profuse descriptions on the attack on the frame, as well as on the meaning of these performances. It seems that nowadays there is a growing tendency to think of these exchanges as natural parts of an analytic process that must be understood. The term enactment refers to the situation in which the analyst would be enlisted by the patient to represent a feeling of the patient that has not yet been put into words. The analyst will recognize a posteriori his involvement in this enactment, mainly thanks to the analysis of his own feelings, initially of surprise, but which often evolve into guilt and shame and which force an analysis of what may have happened.

This conceptualization refers to the elements that enter the analyst's mind through Projective Identification with his patient. However, in this article I will focus on those other elements that enter the analytic field but are not introduced by the patient but come with the analyst. This differentiation is contrived but if we accept that no two analyses are ever the same, then we will have to conclude that each analyst is different, so the patient will activate different areas of the mind depending on who their analyst is.

In this sense, the internalized setting of each analyst has to be like the Freudian Superego, which in its essence is protective as it pursues the survival of a functioning, vital analytic process. However, in every session there is a threat (not because it is threatening it is less desirable) of the irruption of primitive elements that would put the patient-analyst relationship in check. The analyst, faced with the irruption of such emotionally destabilizing elements in his mind, may wish to leave and momentarily abandon his role as guardian.

Sometimes, as I said at the beginning, thinking in the session stops, we feel impelled to interrupt our march because we cannot go on, we are forced to exert some other force that will alter the rhythm. It is the result of a hiatus between the outside and the inside, between our experience and what we are thinking. Attempts to connect to the patient's account, to analyze the shared patient-analyst reality fail, and may sound false, distant and even untruthful. These are the situations that I theorize have to do with an internal inadequacy that seeks to be resolved.

If the mind is a continent, our internal framing should allow for the reception of the patient's projected feelings. And if we accept that there is a large number of moments in which we move between uncertainty, it should not be so difficult to recognize that throughout an analytic process it is not always possible to give an immediate response to the pressures on the frame. We are faced with the commitment to give an answer that fits our frame of reference or what we are living in the here and now. In this scenario, something of the order of transgression is imposed, which will also give way to feelings of guilt and shame. Hence, there are many moments in which we will be disoriented, trying to know what has happened in the session in a second time.

If instead of opening ourselves to think, incorporating the discomfort produced by the uncertainty, we rigidify ourselves in the fulfillment of these norms or directly elude them, we will be facing a pseudo-development constrained by plots of the analytical space that remain silenced, not confronted, forcing us to tiptoe around them. The reassuring appearance of a common agreement would mask mutual submission: the patient submits to a rule and the analyst in turn unconsciously submits to not entering into certain areas of the relationship.

In these situations, feelings of guilt and discomfort appear, related to the lack of truth regarding what is being played out during the session.

In the best of cases these feelings push us to understand and we will make use of spaces of elaboration such as work groups, supervisions to resolve your discomfort. Surely we will need these other spaces to face the feelings that the patient confronts us with, but also to be able to elaborate creative answers, in the sense of something new, which may be different from what he initially expected.

## **Psychoanalytic culture**

Within the psi world, the psychoanalytic community, and in particular the institutes belonging to the IPA, the constitution of a third party in our mind is promoted as a fundamental pillar in the transmission of psychoanalysis. The conditions for becoming a "psychoanalyst" have to do with the progressive conquest of an identity that functions creatively but also that can be inserted within a work ethic, within a framework that has been internalized in the relationship with others, and that at the same time is genuine in each analyst. Seminars, supervisions and, of course, the analysis itself are experiences of sufficient intensity to assimilate and generate this instance that guides us in this search. Assimilation and generation as the two inseparable interfaces: the unconscious and the conscious.

Bleger quoting Fenichel in his famous article *The Psychoanalysis of Internal Framing*: "What became evident to me is that each institution is a part of the personality of the individual. And of such importance, that always the identity - wholly or partially - is group or institutional, in the sense that always at least a part of the identity is shaped by belonging to a group, an institution, an ideology, a party, etc. Fenichel wrote: "Beyond any doubt, the individual structures created by institutions help to preserve these same institutions". But in addition to this individuals-institutions interaction, institutions always function (to a varying degree) as the boundaries of the body schema and core of identity." (Bleger, J., 1967)

During the training process, from our status as candidates to become psychoanalysts, we alternate experiences as passive and active subjects. We are the patients of our analysts, but we are also the analysts (in training) of others and therefore we occupy those places of active generators of meaning during the session, of designers and guardians of the frames with our patients, we are also part of other spheres in which we occupy places of authority. Just as in life, we can be both children and parents for a long stretch.



This coming and going provides a very interesting dynamism since it forces us to resituate ourselves at each movement; we cannot go from one experience to the other without modifying ourselves, so our mind opens to receive the contact with the outside and at the same time closes to shape the experience through symbolic productions in order to reach the other.

If we look at the range of psychoanalytic institutes of the IPA we will see that there are significant variations. The different models of transmission: French, Uruguayan and Eitingon, design plans for admission, education and training of candidates, with notable differences that logically reflect different theoretical and clinical positions. For example, the French model promotes a depth study of Freudian work as opposed to the breadth of other contemporary or post-Freudian theories, while the Eitingon model prioritizes the breadth of visions. Obviously, neither of them is denying the advantages of deepening or opening oneself to the knowledge of other theories, but it is indisputable that there is an "institutional subjectivity".

Therefore, listening in the session will largely depend on where we are trained, namely, the French model emphasizes listening to unconscious contents and dynamics, for example, Oedipus, passivity and bisexuality, après-coup, infantile neurosis, etc., the Eitingon model focuses on the analysis of defenses to overcome resistances, on the systematic analysis of the transference, the deidealization of the analyst and the knowledge of primitive mental states. On the other hand, the Uruguayan model emphasizes the total immersion of the candidate in an analytic environment, so that it would be obligatory to make the analysis itself coincide with the seminars and supervisions, in order to promote a temporary regression that would culminate with the resolution of the same and the training of the candidate. On the other hand, in all the institutes there is this tension between preserving the old and incorporating the foreign.

All these questions about training lead us to ask ourselves: What basis do we need to be able to treat a patient? What is a psychoanalytic treatment and how do we differ from other professionals of the mind? What is Psychoanalysis? What are the minimum conditions to be able to analyze?

All these questions are of great interest to the psychoanalyst because they are not answered once and for all, indeed, the answers may be modified with the experience of each one. However, what is clear is that a psychoanalyst's main working tool is his or her own mind, and if this mind is too much constrained by cultural imperatives (of his or her institute, of his or her training) he or she will not be able to work, becoming heavy and defended in the face of contact with what is different. Likewise, we cannot conceive the training of a psychoanalyst without passing through institutions or authority figures that transmit the profession.

So in the end the different institutes must converge in the need to promote a theoretical and clinical framework that contains and protects the development and individuality of each analyst, and not so much that it molds the candidates in pursuit of an ideal. A paradox that occurs in the institutions is that some of the older members end up saying and doing whatever they want, displaying a freedom conquered thanks to the passage of time, which favors the development in the younger candidates

of fantasies of omnipotence associated with the passage of time, as opposed to the idea of taking responsibility at any time of life.

## **The actuality**

In recent times a series of massive changes have taken place, in terms of quantity and quality, which have tested the resistance of our frameworks; we are experiencing to a greater or lesser extent an increase in pressure on our framework, both from our internal world with an increase in anxieties, and from the outside. While we seem to have left behind the hardest part of fear, the impact of threat and restrictions, we are left with a sad and loss-filled world picture, full of uncertainty and negativity about the future. Today, a month has passed since Russia invaded Ukraine and the whole world is witnessing with terror the sinister spectacle of this war, while at the same time we cannot stop wondering about its consequences.

At the same time, we are witnessing a moment in which concern for mental health occupies a space in society as never before, many public figures talk about their fears and share experiences about their therapies. The demand for psychotherapy is overflowing. Many children go to a psychologist, many young people normalize suffering and the need to be helped. There has been a movement from private pain to more public spaces.

All of the above does not necessarily translate into a deep awareness of the need for help, but it is already a start to establishing a therapeutic relationship. Nowadays it is common to receive a patient who has gone through several treatments before coming to our office. As analysts, confinement (lockdown?) spurred us on, forced us to redefine ourselves, to know what place we occupy in society, to ask ourselves where we wanted to be. For example, some analysts during the confinement interrupted their work because they could not conceive of going online, there were others who despite the state of alarm continued working in person, others who went to work online and never went back to face-to-face. In short, many unexpected but revealing things happened.

In my opinion, during this time of intense changes in society through the entry of technology and the precipitation of this tool with the presence of Covid-19, we have been pushed into territories unexplored by some or totally unknown to others. In these situations, it is tempting either to take refuge in rigid models or to abandon referential schemes in the name of chaos and anguish.

In this line it is useful to look at Bion's model, for which one of the most suggestive characteristics is that of an organism in continuous movement. Thanks to the alpha function (alpha functioning transforms bodily sensations and emotions into psychic material), the contact barrier (between the conscious and the unconscious) is always in transformation. Bion invites us to become ourselves in our clinic, and not to be afraid to show our wildest thoughts to ourselves. For this, the analyst must be able to have an open mind and be willing to listen to what emerges at that moment, without memory or desire. The goal in each session is to get in touch with what he calls "O", something like the ultimate, original sense that prevails in the relationship with the patient here and now.

All theories and teachings are susceptible to become screens of beta elements (anti-thought), barriers that make contact with what is happening to the patient in the session impossible, our listening is tempted to conceptualize in a theory a strange and emotionally disturbing event, in order to momentarily give a meaning. A meaning that is false because it is not true in the now of the session.

Payment in cash, the analyst's non-presence in public spaces or at the university, word of mouth or referrals among colleagues as the only sources of patient intake, function as unwritten imperatives of psychoanalytic culture, but transmitted from "parents to children" and which are part of our setting. At another level would be the management of sessions missed by the patient, vacations, formal rigor or the analyst's neutrality. These are all issues very specific to psychoanalytic psychotherapies and psychoanalysis as opposed to other models of psychotherapy.

These points, at best, are at the service of bringing us closer to archaic modes of our mental functioning that otherwise would have been difficult to reach.

But they have also and at the same time created a generalized climate of social detachment and a folding in on ourselves, reflecting a difficulty in being able to justify certain positions with honesty and conviction, and the point is that if we transform theories into our cultural imperatives, our destiny is, paradoxically, to disconnect ourselves from the patient and from the society in which we live.

## **Clinical vignette**

Isabel is a 40 year old patient whom I have been seeing for six years once a week, I started with her in person but since the beginning of the pandemic we have been seeing each other via Skype since I moved to another city.

Throughout these years the patient has lived through several losses of different kinds, but undoubtedly the death of her husband in a traffic accident was a turning point both in her personal life and in her psychotherapy.

Shortly after I started working online, I perceived more intensely a discomfort that I had been feeling intermittently with the patient. I noticed that my silences were longer than usual, I looked at the clock a lot during the session, I felt unproductive, and I became impatient when it was time for her.

I tried to understand why I felt this way with her, it is true that there were some components of the transference that were guilt-inducing: a shingles that violently burst in, a deep apathy and boredom in and out of the session, delays and forgetfulness, etc. I took the case to a supervision group and extracted several things: the first is that my feelings were not easily accessible, that is to say that I did not resolve my discomfort with my colleagues, but what I did realize was that inside me there was a strong refusal to increase the patient's hours in order to give space to the understanding of all these feelings. I justified my refusal by saying that since I was outside of Madrid, the best thing was that later -after the pandemic- the patient would find a therapist there. Opening my eyes to my

resistance allowed me to take responsibility: what was happening in the sessions with me I had to be able to analyze, and at the same time I was relieved to be able to put aside the imperative with which I was operating -presential is always better- to move forward with my patient in a framework modified first by the irruption of the pandemic and then by my personal circumstances.

The night after that group supervision, I dreamt that I was in my old consulting room, where we had experienced the face-to-face stage and which I had already closed. In the consulting room there were two couches. I interpreted that of the two couches, one was for her and the other for me. Two couches -two sessions a possibility that opened up in my mind.

The next time I saw the patient I felt more able to talk about the feeling of stagnation in our relationship and I proposed to her to increase. To my surprise she told me that for a moment she thought I was going to refer her to another psychoanalyst because of being away, the patient eagerly accepted the change and from then on I considered supervising this case regularly until all these feelings were better clarified.

## **Conclusions**

We live in a globalized world, of quick encounters, with liquid relationships, and mediating technology; on the other hand, our work space as an immutable and silent place, prepared for rest and introspection.

Patients request but expect from us brief treatments and generally tolerate much worse the demands of the classical framing. Many candidates or analysts in training, we have found ourselves navigating between two waters of different character: that of the internalized reality of our analysis against the torrent of the outside world. The tradition of the institution versus the current maelstrom. Both realities generate deep contradictions which, in order to overcome them, require a certain perspective together with the continuous analysis of our work.

In order to elaborate this contradiction between what is expected and what is found, I find useful the phenomenon of "preconception" in Bion, which alludes to the original fantasies or preconception of the breast. Preconception exists as an expectation of something. So that when the "realization" occurs, that is, the encounter with reality, it is always frustrating, and it is in this mismatch that he believes thought appears. There is a reality that is always different from the expected one, neither completely satisfying nor completely frustrating, and thought arises from this lack of consonance. The thought arises from the failure, the lack, the frustration.

It is important not to lose sight of this eternal game between preconception and absence, which is what will allow the development of thought and will give freshness to our work, as it will keep us close to what is happening in the session while allowing us to move away, to be able to think and give back to the patient what we are observing. In this sense, every crisis has an opportunity character because our development depends on its elaboration.

The frame must protect the process and therefore the analyst, it must be the guardian but it must also have a certain permeability to the unknown because otherwise it is impossible for it to support the experience. A frame must be able to come out into the open, to externalize itself partially in each encounter with a patient but also in other types of environments.

Endogamy weakens the structures while the know-how of other analysts favors the clarity of this working tool, which can be thought by being contrasted and enriched. Meeting members of other societies is of great interest because it favors the porosity of our frames and allows us to develop a richer and more genuine identity as psychoanalysts.

I believe that we should all work as freely as possible, as long as we feel protected by harnesses of shared thought and reflection, of the old contrasted with the new, and of respect for the different. And of course the awareness of a certain degree of uncertainty inherent to the human experience and to that of psychoanalysis. What is unchangeable over time must be the relationship with the truth and the attempt to preserve a clinical situation that can be defended with honesty.

## References

- Bion, W. R. (2003) *Aprendiendo de la experiencia*. Barcelona: Paidós Ibérica.
- Bion, W.R. (2006) *Volviendo a pensar*. Buenos Aires: Hormé-Paidós.
- Bleger, J. (1967) *Psicoanálisis del encuadre psicoanalítico*. *Revista de Psicoanálisis* 24:241-258
- Bleger, L. (2021 ) *Ni besar ni pegar. Sobre el análisis a distancia y la concepción de la cura*. *Revista de Psicoanálisis* (Madrid), 36(92), 403-427. ISSN: 1135-3171
- Collins, S. (2020) *Psychic time as occasion for enactment*. *International Journal of Psychoanalysis* 101:436-455
- Ehrlich, L. T. (2013) *Analysis Begins in the Analyst's Mind: Conceptual and Technical Considerations on Recommending Analysis*. *Journal of the American Psychoanalytic Association* 61:1077-1107
- Puget, J. y Wender, L. (1982) *Analista y paciente en mundos superpuestos*. *Revista de Psicoanálisis - APdeBA - Vol. IV - Núm. 3 – 1982*
- Robles, M. U. (1997) *La ilusión contenida de la identidad psicoanalítica*. *Revista de Psicoanálisis* 26:127-142

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# **Building bridges and connecting differences in a child analysis from Latin America**

Working with children and adolescents is an arduous and beautiful job in which creative bridges between patient and analyst are created at all times. Playing with children is the bridge in which the generational difference is united, it is a new language and communication channel through which the analytic duo connects in order to access the unconscious and wordless material that children bring to our consulting room.

We bring a clinical material from Latin America. A different culture from the one that brings us together today, India. A different psychoanalysis, a different way of practicing psychoanalysis? We will probably find differences. From the epistemological point of view, we may suggest to speak of Psychoanalysis (plural) instead of The Psychoanalysis (singular). However, for those of us who work with children, playing games, drawing, making stories, is the bridge that crosses all our differences and at the same time accommodates them.

We would like to talk about a case one of us had during the pandemic in which virtual work was made with an 8-year-old boy. The pandemic is and has been an untamable dragon that trespassed us personally and at work. If it has turned us as adults upside down and awakened our deepest fears and apprehensions, it has affected children and adolescents, perhaps even more because they are still in critical moments of development and discovery of their identity. While working with children and adolescents virtually, we have encountered different challenges, from children who cannot tolerate quarantine to children who are afraid to go out into the real world and wish to stay in

the comfort and "safety" of their home. As analysts, it is complicated to deal with this situation because many times the pathology can be seen to be justified by the pandemic, the fear is now real and tangible, but there are things that cannot be dealt with and are acted upon. Thus, in this particular case, another bridge that united patient and analyst was technology (computer as a working tool).

In our experience, we consider that it has been possible to conduct analysis with children and adolescents virtually, and even to initiate treatments in this way. We emphasize that virtual is not better than face-to-face; however, virtual has much more scope than perhaps we imagined. This is why we ourselves are going through a process of transformation, acquiring new tools and techniques to work in this modality without leaving our characteristic psychoanalytic framework. We were challenged to redesign our devices. In general, we are used to think in terms of framing, and as analysts we have internalized framing. So, it is pertinent in these times to differentiate framing from clinical devices.

### **Framing from a classical perspective**

José Bleger (Bleger, J.: 1967) defines the analytical situation as the totality of the phenomena included in the therapeutic relationship between analyst and patient, and then distinguishes between the analytical situation, frame and process. He understands frame as the constants, and process as the set of variables of the phenomenon. The frame is that part of the device that remains the same, constant, so that the process can unfold and then make change possible. For Bleger (Bleger, J.: 1967), the frame is mute and only makes itself felt when a rupture appears; he uses the metaphor about the frame in which, like love or a child, they are only heard when they cry.

On the other hand, the frame is the repository of the psychotic anxieties of the personality. The not-self, responds to an undifferentiated part, to that symbiosis of the beginning of development. And symbiosis is mute, it only manifests itself when it breaks or threatens to break. Bleger (Bleger, J.: 1967) says, something is not repressed. It is cleaved. It is about transforming primary process into secondary process.

Donald Winnicott (Winnicott, D.: 1955), for his part, states that regression is necessary in analysis. The frame that gives security and holding will allow him to lean on it and feel supported by a link that serves as the arms of a mother who will not let him fall. Winnicott (Winnicott, D.: 1955) argues that the regressive process will give rise to dependence and the illusion of omnipotence and magical dominion that should have created the psyche at the beginning of its development, but which in certain patients has failed. Now the analyst is able to attend to all their demands as a sufficiently good mother would have done. If it is possible to "recreate" this condition or this state between analyst and patient, it could then favor autonomy and the process of differentiation, that is, change. The transitional character of the analytic space will allow integration in a gradual way.

Since it is a human situation, sooner or later it will fail, the frame will find some fissure or failure and will disappoint, but to the extent that a more integrated and tolerant self has been constituted, it

will be possible to face this situation avoiding the reactivation of what Winnicott (Winnicott, D.: 1955) calls the experience of collapse.

Both authors emphasize the importance of the first experiences in the moments of constitution of the psyche, then there are patients in whom this happened more or less without too many difficulties, with whom it is possible for the frame to function as a backdrop and the process to take place with the predominance of the technique of interpretation. Others, on the other hand, require certain conditions to be worked out beforehand, the framing, for the analytical process to progress.

It's really interesting if we think about the metaphor of the frame as the facilitating environment (Winnicott, D.: 1955) or as the maternal womb (Bleger), as the one that envelops or reassures so that the ego can develop. Framing does not refer only to patterns of place, time, etc., but to an analytical attitude. Something is internalized in the person of the analyst himself and is transmitted, sometimes without the need to be at least completely explicit.

## **Clinical devices**

The concept of device was introduced by M. Foucault and later taken up by authors such as G. Deleuze and G. Agamben, Mauer S, Moscona S. and Resnizky S. A possible definition of device, in the Foucauldian sense, is the following: "arrangement of a series of practices and mechanisms with the aim of dealing with an urgency and achieving an effect" (Mauer, S.: 2014). Of course, the pandemic was a situation of urgency that required us to "invent" a new way of encountering patients and achieved an effect. In this sense, "the zoom" is a valid device. The approach strategy involves the construction of a device that is woven into a network of variables ranging from temporary socio-cultural experiences to transference and countertransference vicissitudes. From this point of view, the device assumes the coordinates of time and space and includes the frame as we think of it from the classical perspective.

Siro Husvelt (Husvelt, S: 2021) invites us to think about the role of the placenta as a transitory organ, alive only to gestate this single bond. It will have to be created anew each time a bond needs to be created to give life. Could the device be like the placenta? Unique, original, impossible to repeat? Handcrafted each time, for each analytical process.

## **The clinic**

The following clinical experience, like so many we have lived in pandemic, shows explicitly the necessary modifications according to the clinical device and invites us to think about whether we have had to modify the setting. We will read it in the first person to transmit in an experiential way what happened in the case:

Manuel is an 8-year-old boy who lives with his parents. They describe their son as an anxious child with an enormous fear of death as a result of the loss of an uncle due to COVID. They mention that Manuel asked them for help and wanted to take therapy. From the beginning, the therapeutic



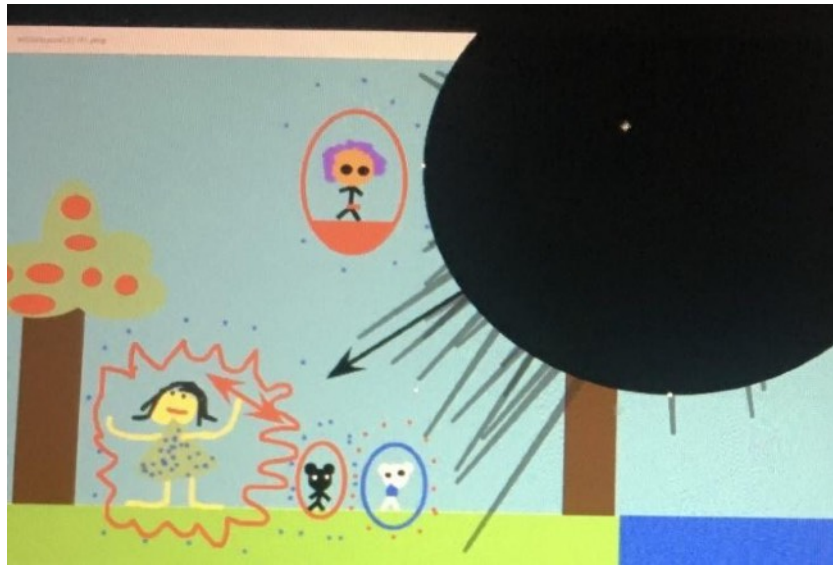
process was online, twice a week. The treatment lasted one year and 3 months. I must confess that he was the youngest patient I had and I did not know what to expect from the online sessions.

From the first session Manuel began to tell me that he could not sleep and that he was very afraid of his father going out to work because he could die. He told me about the death of his uncle and that, as a result of this event, he now fears that any family member might die; it was during this story that Manuel burst into tears. Almost immediately he asked me to share the screen and began to draw a cemetery where his uncle's grave appeared, at the same time he was drawing figures of the coronavirus, which he began to scratch furiously, while expressing insults and rudeness. As I observed him, I tried to help him to get in touch with the scared part he was showing me and not only with his angry part.



As the sessions continued, it was evident that the bond between us grew stronger. It is important to note that Manuel has many narcissistic traits and is extremely sensitive to criticism and rejection. He is a child who does not have many friends and his parents are very demanding and intrusive. Despite his young age, he would set his alarms on his cellphone to connect punctually to his sessions.

Usually what we did during our meetings was to draw. He liked to create new worlds. At the beginning of the treatment, he would make stories where there were two characters (he and I). He would attack me and my character would not survive. Little by little this began to change and I began to make some modifications to the story, like lending him "tools" so that he could defend himself from the bad guys and survive; gradually he accepted them until one day he told me: "Today I am going to draw myself like this, I don't need to put on any shield", to which I replied "wow, it seems that you already feel safe and you feel that you are not in danger" (I was thinking about all the transference implication of that phrase). He smiled and that was a turning point in therapy, where from that moment on in his drawings and stories he and I were a team and together we defeated the bad guys (his whole fearful internal world projected).



Another moment in therapy was when we started to play with stuffed animals, creating strengths and making teams where one protected the other, even when he was very happy, he would play a song and we would both dance to it. We felt a close bond, despite the distance, we were able to cross the bridge of physical distance. I noticed that when there was resistance or regression, the dynamic was to go back to the first drawings and put me as his enemy.

Despite not knowing Manuel in person, our relationship became very close, which caused his mother to want to sabotage the treatment because she felt her symbiotic core with Manuel was threatened. She began to "punish" him by leaving him without his session, telling him that if he misbehaved, she was going to "accuse him to me" and even though I talked to the parents about the negative implications this had, it continued to happen until one day the little boy had a self-injurious act that could translate into a suicide attempt. It is important to note that every act carries a communicative intent. What was Manuel trying to communicate? At the time of his analysis, his mother called me and put him in front of the camera.

It was a very shocking moment for me to see the scene of my patient's face covered in blood, crying and asking me for forgiveness. That call lasted no more than a minute in which I tried to contain him. I didn't understand anything that had happened. I felt scared, full of guilt. What did I overlook?

I requested a phone call with his parents so they could explain me what had happened: Minutes before the session, Manuel and his mother argued, she threatened to accuse him with me, he felt cornered with an intense fear of disappointing me. Such were his overflowing feelings that he decided to throw himself down the stairs, and turn the destructive act on himself before taking out his rage on his mother and fulfilling his fantasy of destroying her.

Talking about suicidal intent in children is a very rare topic and it is something that chills the blood just thinking about it. I never saw any signs that he might do such an act, nor did his parents. Perhaps the screen there did work against me and did not allow me to assess his levels of

impulsivity. The process took its course and we reached a point where, little by little, he tried to put his feelings into words and not actions. An example happened when he connected for the first time without turning on the camera, he just started writing in the chat.

I asked him if there was something going on that he didn't want me to see and he answer "no" many times in a written way. I noticed him overwhelmed and anxious (I thought: how difficult this session will be, this is not the way to work). I kept silent for a moment and told him: "maybe today you feel something you don't understand and that's why you don't want to see me, maybe that's why you prefer to write and not talk". He asked me to share the white board and wrote in giant letters "They are going to operate on my grandmother". At that moment I understood that his fear of death and the memory of the loss of his uncle were mobilized. I replied: "I understand, you must be very scared".

He then drew a game of hangman. In Mexico, hangman is a guessing game where one player thinks of a word and the other tries to guess it as suggested by clues given with letters and number of spaces. We started playing and he asked me to guess the first word.

I quote excerpt from the session:

A: Manuel, the word you wrote is "sad"?

P: Yes!!! (*I notice his excitement when I find the word that describes his feeling*).

A: Ok, it's your turn. I'll give you a hint: this word is what I think you're most afraid of right now, but you can't say it."

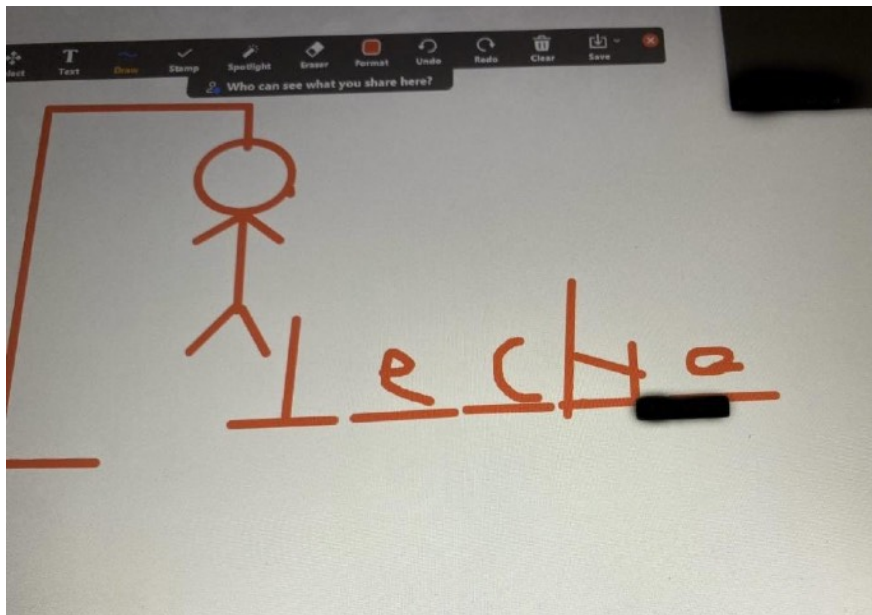
P: Mmmm....starts with D?

*I smile and know we are connected. He guesses the word death and it's my turn.*

P: This is a tough one, this is something I really like!

A: (*I can't guess it easily but after several tries, I get it*) The word is milk!

P: Yes, I love to drink milk!



*I understood the level of regression when he put that word and commented:*

A: Surely drinking milk is a comfort for you, it makes you feel safe and you need that right now because you are sad....

The session is about to finish and he asks me to guess one last word, which was "hug". At the end I told him that even though I couldn't see him on camera, I felt very connected to what he was feeling, he was surprised and said "yes, I think even more than in other sessions, I could almost hug you".

Reflecting on this, I realized that Manuel might still be at risk. Why play the "hangman" game? Would he be warning me of some new action by feeling so much anguish? It is difficult to deal with so much death when we are in parallel, I admit that at least it was difficult for me to see those kinds of signs, however the process existed and could be worked through.

Unfortunately, the bridge between the two of us was abruptly destroyed several months later by his parents when in a message they asked me to interrupt the treatment since they saw that their son was stable and happy. They did not even let me say goodbye to him, which saddens me to this day.

The analytic space, including the analytic attitude, preserves from overstimulation, from unforeseen change. It recalls the shelter of the known. They facilitate the decoding of emotions that have no words, they transform primary process into secondary process, they discriminate emotions and sensations just as parents do with a baby or a small child. But they also protect the analyst, who in this case had had to tolerate the anguish of the unpredictable, the terror of the threat of death. In this sense, is the online working device a limit or would it have been similar in a classical device?

We can conclude that if we have the patience to try to understand the non-verbal signals that children give us and we take advantage of the tools and learn to play with them and speak their language, we can create bonds despite the distance. It is a fact that we can work in this modality and we must allow the children's inner world to unfold in ways other than the known ones. More than ever, we must be aware of our countertransference and we must be creative. What has been

achieved in the analytic work with a child, whether the process has been concluded or not, is the bonding experience that lays the firm foundations on which that psyche will rely to face new adversities. Perhaps the analyst will have news of this or perhaps he/she will only have to rely on the road traveled with the patient.

## References

- Bleger, J. (1967): "Psychoanalysis of psychoanalytic framing", in *Symbiosis and Ambiguity*, 1967 (pp 237-250) Buenos Aires: Paidós.
- Husvelt, S. (2021): "Entering and leaving", in *The mirages of certainty*, 2021 (pp7-27) Barcelona: Planeta
- Mauer S., Moscona S., Resnizky S. Resnizky S. Chap. 2: Clinical devices. *Editorial Letra Viva*. 2014
- Winnicott. D (1955): "Clinical and metapsychological aspects of regression in the psychoanalytic framework", in *Writings on Pediatrics and Psychoanalysis*, 1979 (pp 377-398) Barcelona: Laia.

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## Triangles are painful- On mental pain within triads

### Abstract

In this article I want to trace the mental pain which is at the heart of one of the most basic human states - the human triangle - real and fantasized. It is a well-known fact that an enormous mental pain is involved in these situations but I want to further explore why is it so painful. I seek to outline how the design of the third space in the primary relationships affects the ability to be in a vital and productive relationship with another person. I look into Rosenfeld's concept of the narcissistic defensive structures "thin skin / thick skin" and on the link Britton does between these narcissistic vulnerabilities and the need to deal with a third. In addition, I am suggesting another perspective regarding the mental pain that may arise in the presence of a third, real and fantasized: a distress that mainly involves feelings of humiliation and terror that arise in situations of closeness and during attachment processes which require coming in contact with the inevitable dependence on the other, who in turn, inevitably maintains additional relationships with others and with themselves. I would like to show how the mechanism of self-holding, and all the high prices it entails in terms of authenticity of existence and the ability to be in a relationship, is based on early relational traumatic experiences. I will also try to look into how the way the third position lives in us as therapists shapes the way we cultivate-build the development of this position in our patients

### Triangles are painful- On mental pain within triads

The importance of the third for human development cannot be overrated. From the moment of birth and onwards, there are few developmental achievements, either of one with oneself or within a relationship that do not involve working through the triangle. The manner in which these triangles have been dealt with throughout our lives is central to the making of our inner and interpersonal world. The triangle is not a necessary evil, it is an existential necessity, even if it is a painful one.

Throughout our lives we belong to many triplets: it is a common human experience. All of us always want to come first, in every context. I know I always wanted it. I wanted exclusivity. I looked for it in all significant relationships - I wanted to be my mother's favorite child, my best friend's best friend, my teacher's favorite and so on. You could say I was competitive... And that would be true. But I was competing unconsciously, and always for the same thing - I wanted exclusivity.

One of the problems with human triangles is that they are never equilateral. Rather, they tend to be isosceles triangles, with only two out of three sides equal. This means there is always a vertex to which one wants to be close. So apart from the difficulty involved in being excluded - there is always a tension surrounding the competition, and a tentative failure looming over the effort to be closest to the top. It is a fantasy with a huge appeal, and giving up on this fantasy - which is inevitable for the process of development - involves pain. It is a fantasy of closeness, a closeness where there is room only for one, a fantasy in which a defeat has been inflicted on the third side, leaving only us two, close together. One can detect this fantasy in the most commonplace of dialogues:

Mom, who do you love more? Me or my sister?

I love you both the same.

No. Really, Mom ... who do you love more?

I have a special love for each one of you...

Stop it, Mom, tell the truth...

The idea of holding a special but not singular place is much less appealing than that of exclusivity.

The therapeutic situation, in this context, is uniquely organized - on the one hand a perfect dyad - on the other hand - a complete lack of exclusivity from the onset. On the one hand, Ogden's "Analytic Third" or Benjamin's "One in the third" is created: these exciting transitional states that are born in the one-time meeting, in the singular dyad (Benjamin 1990, Ogden 1994) ... On the other hand - vast and endless plains in both the mind and the reality of the therapist, who becomes The Third, The Other, deferring, creating a sense of being superfluous, and in most cases - inaccessible.

In fact, one might argue that transference is a distinct instance of a triangle - in which the patient is one vertex, the real therapist the second vertex, and the imaginary, transference therapist is the third vertex. To preserve the illusion of exclusivity, there is a conscious and unconscious effort to maintain a dyad and an effort to avoid any acknowledgment of a third.

Britton argues that there are instances of therapies where any attempt by the analyst to think independently brings the oedipal state to the fore and is experienced as catastrophic. Following Rosenfeld, he describes the defensive structures as "thin skin / thick skin." Rosenfeld emphasizes the different types of narcissistic vulnerability and Britton tries to provide an explanation based on the different mechanisms created when there is a need to deal with a third. (Britton 1989, Rosenfeld 1971, Rosenfeld 1987)

The clinical manifestation of the thin-skinned type is "difficult" patients; people vulnerable and explosive in relationships, patients for whom the analytical situation is seemingly unsuitable. They cannot accept a new thought or interpretation, they cannot accept being in any way different from their analyst, without feeling assaulted, abandoned - forsaken or annihilated.

The clinical manifestation of the thick-skinned type is completely different. These are the patients who are seemingly uninterested in the relationship with the therapist. They seek and ask only for "objective" explanations and interpretations. The connection formed between a "thick skinned" patient and his analyst looks like two objective observers who are studying the patient as a subject.

Britton suggests that these two clinical conditions, which seem so opposite, are in fact a result of two different relationships of the subjective self with the third object. In the case of "thin skinned" patients, the self wishes to avoid dealing with the objectivity of the third object - and clings with all its might to subjectivity. With "thick skinned" patients, the self identifies with the third object and denies its own subjectivity. (Britton 1992)

In both cases the mechanism is based on the fantasy of an always empathetic, completely understanding, and a completely other object: aggressive, intrusive, one that seeks to obliterate subjectivity and impose meaning. When these two objects cannot be connected the third position is not achieved, and in the absence of the third position, the objective and the subjective realities cannot but be perceived as mutually destructive; any development of reflexive functions is not possible in the absence of the third, and any fruitful connection, one that may bring about change, with someone else also becomes impossible (Britton 2000).

Obviously, this description can be traced to Jessica Benjamin's "beyond doer and done to". Both in its fundamental statement that the most important intersubjective developmental task is to recognize that the objects of our emotions, our needs and actions are in fact subjects, and in its well-known description of the complementarity role structure - the impasse, in which dependence, and the illusion of symmetry, make conflict impossible to deal with, leaving only the feeling of a coerced sense of meaning which is in fact experienced as an obliteration (Benjamin 2004). Furthermore, when thinking in the transference context - it can be said that there is always a desire to form an alliance and merge the analyst in one's inner world, and a tendency to choose one of two ways for this purpose: either the "thin skin" version - that is, eliminate any difference between the analyst as the patient sees her and the actual analyst as a human being, or, - the "thick skin" version - that is, deny any subjective aspect in the perception of the analyst, and strive for partnership or alliance only with the "objective" analyst. Therefore, from the onset the task is to establish and recognize the triangular space that exists between the patient in one vertex, the therapist they created in the other vertex, and the therapist as a separate person in the third.

At this point I would like to add another thought, that has to do with another similar but different distress that may arise in the presence of a third, real and fantasized. A distress that mainly involves feelings of humiliation and terror that arise in situations of closeness and during attachment



processes, which require coming in contact with the inevitable dependence on the other, who in turn, inevitably maintains additional relationships with others and with themselves.

## **Naomi**

Naomi, a young woman, who was an only child for the first four years of her life, before her first sibling was born. Upon her birth, her mother left her job, and stayed with Naomi, who was not sent to kindergarten. The father's place in the family was unclear and negligible. When her sister was born - her mother made every possible effort to obscure the enormity of the event. In an effort to spare her the mental pain involved in losing her (so called) exclusive place, she continued to act as if Naomi was the sole center of the world. Together they were invested in building the illusion that "nothing significant had happened", and that the new baby does not affect neither the mother's maternity nor the relationship, so there is no rival, and no one to envy. Naomi walks the world "not jealous" and "not in rivalry". She can withdraw from any relationship at any given moment if she feels her exclusivity is threatened.

During therapy Naomi is very attentive to small and large triangle instances: changes in the room; a book taken out of the bookshelf; a new flower pot – all there are clues, that there is a third therapist, I, who exist outside of Naomi's 50 minutes, the one that has other competing-threatening interests. When the clues are minute, Naomi reacts a little manically - she becomes a very present patient, interesting and funny. When the clues are big, such as a vacation or actual information about me, or about my other patients, she backs off and disconnects. This leaves us with only a "Naomi shell" which continues to communicate and simulate "business as usual, therapy as usual". She is not familiar with, nor can she allow herself any other stance. To be one of... To be second best, is devastating for her psyche. Life exists only insofar as the illusion of exclusivity is possible.

But what is a life that depends this way on the illusion of exclusivity? What toll does maintaining the illusion take? Is Naomi thick skinned or thin skinned? Perhaps the source of her pain is different altogether?

Naomi is highly adaptable. She is an expert in fitting in, and she does this in a complex and unconscious manner. She endows the person she faces with a feeling of exclusivity and in return gains a special position of her own. In relationships she can be likened to an acrobat on a tightrope - seemingly light and easy, and yet altogether directed, with no room for mistakes or spontaneity. Very sure of herself and at the same time in constant fear of breaking down. Seemingly, the "third stance" has been achieved, and she is of good reflexive capability and can transit from looking from the outside at herself while being herself, and looking inside without losing her eye for reality; but she does not let herself be in any relationship. She does not let herself be. The avoidance that rules over her life is the avoidance of the humiliation involved in any relationship that includes a third object: be it internal or real. She arranges all her defenses toward the anxiety that dependence on any one else would entail. Thus, Naomi's pain is also threefold: the actual neediness, the shame, and finally, the anxiety of losing the relationship, and the place that was hers in that heart.

I think, and maybe this even goes without saying, and yet I feel it needs to be stated, that the source of mental pain in times of dependence, the pain we all fight throughout life to feel, or not to feel, is the lack of symmetry, and the absence of exclusivity. That is, dependence is hard because of the presence of the third within the relationship, whether it is a subjective third, i.e., the innermost parts of the object, or an actual third person, with whom one must share one's object love (usually it isn't either/or but both).

When I think of Naomi, I think of how to create a safe place in the psyche, a place that allows one to be in a deep and close relationship without retreating. How to allow her to take a risk, step off the tightrope, and walk confidently on the ground with other human beings?

In order to let go of the constant self-holding, and to agree to make contact, to be dependent, one must believe that exclusivity is not synonymous with having a place. The fantasy of a pyramid with only one place at the end-point should be flexed. One has to believe-feel that there may be a safe place even in the presence of a third. That the gaze can be temporarily turned away from her, or extended to include both her and a third, without her losing her place. No less will it be necessary to believe that she can maintain her place, and be included, despite her flaws, despite her being human.

My contention is that in order to move from self-holding to the ability to be in a relationship, one must be able to both recognize and tolerate the actual and fantasized thirds present in every dyad. For Naomi, and others, the self-holding mechanism for all the price it bears in terms of authenticity of existence and the ability to be in a relationship is based on early traumatic encounters with the third. In some mother-infant dyads, there is a temptation to deny the existence of thirds. The result is developmental trauma. That is, the exclusion of some self-states, such as feelings of envy, hatred etc. - which are an integral part of existing within any relationship. In Bromberg's words, parents influence their children less by telling them "what they should do" than by "showing them who they are", by ignoring certain attributes of the child as though they didn't exist. Since such lack of validation can never be spoken and negotiated, it becomes traumatic. (Bromberg 1996)

That is when the therapeutic process needs to be slow and prolonged, so that these child-self states such as deprivation, neediness, jealousy and rage can be met, along with the condemnation, and the shame that accompany any mental contact with these states, and the underlying anxiety of exposing them to the therapist.

Britton returns to Bion in an effort to explain when it is that people suffer from "the missing link": When is it that "the third" position cannot be attained. He states that with failure of maternal containment, what is not understood is experienced by the infant as impermeable. Failure of maternal containment allows the object to be experienced as good only when split from the experience of impermeability, and after such experiences are attributed to a third object, altogether impermeable and hostile. (Bion 1959)

In addition to this I believe that a critical aspect of the ability to achieve the sphere of the triangle, and bear it, is dependent upon the way this sphere is alive within the mother's internal world. The oedipal situation is only one example, and the birth of a sibling another. Meaning to say that in some cases it is the mother who experiences the triangle as a catastrophe and in seemingly protecting her baby from the mental pain brought about by the loss of exclusivity, she is actually protecting herself from this pain and unconsciously demanding her infant to contain the horror for her. The mother who needs the experience of exclusivity so that she may feel her worth as a mother, might exclude the thirds in her infants world and at the same time signify for it that there is only one place worthwhile - that of exclusivity.

Similarly, in order to allow patients to establish a third position within themselves, the therapist must be able to bear the mental pain that arises with the existence of thirds. One of the most common and interesting examples of this dynamic happens in therapies that raise a question (or fail to raise it even though it should be raised) regarding the inclusion of a psychiatrist in the picture.

The referring of a patient to a psychiatrist by a psychotherapist is both an internal mental occurrence and an interpersonal mental occurrence that is of the utmost significance within the private, one-time world of any therapeutic dyad. Such an occurrence has quite a few aspects, but I will concentrate here only on the fact that an actual other is added to the therapeutic process, making the dyad into a triangle. This is both a symbolic and a practical leaving of the so-called bubble. The psychiatrist is an outsider in the dyad, and her gaze disrupts any option to continue the relationship that existed before. It forces movement from the familiar place of two people who were used to experiencing one another closely and consistently. The entrance of the psychiatrist often exposes the thin skin, or the thick skin of ourselves as therapists, i.e., the way the third position lives within us.

All three participants have to deal with this new situation. The psychotherapist, in dealing with her urge to restore exclusivity, might either leave the psychiatrist out, or choose him as her partner, leaving the patient out. The reference to a third illuminates the boundaries of the dyad, and its limitations. It forces the three partners in the interaction to connect with their conscious and unconscious perceptions regarding integration.

Being a psychiatrist myself, I am familiar with the effort to preserve the third position, when I have to call upon the psychiatrist inside me, to use her own language – mine, when she looks at and thinks about the psychotherapist (me) who uses an altogether different language when she thinks of her patient. It is quite the familiar situation - this turmoil: here we are, and despite all our efforts we ourselves have not managed to bring healing to our patient, neither through our therapeutic approach nor through our personality, or through the relationship - we feel we are failing to understand the symptom, or contain the crisis, and sometimes we feel guilty for being tired, and hoping for outside help, afraid the psychiatrist might not be helpful and at the same time afraid he will be very helpful very fast...

Can we tolerate the mental pain involved in the inclusion of a third? The competition, the envy, the insecurity that a third's entry produces? The psychiatrist offers an understanding which is different

by definition from the understanding that preceded the encounter with her. This is a moment when true integration can be created, will it be possible to hold on to being the other without losing the self? As therapists, will we choose the thin-skin option - "the psychiatrist actually does not understand anything ... what does she know about the complexity of the inner world, shoving pills down people's throats." Or might we opt for the thick-skin option - identify completely with the third object - the psychiatrist - her language, her perspective, forsaking our subjective view of the patient and betraying what is our own unique language and understanding. Here, too, the challenge is to create a space in which the languages may be integrated. An integration that would provide a new perspective. And that depends on the inner world of the therapist no less than on that of the patient.

Integration, like the triangle, is inevitable and painful. In order to develop the ability for abstract thinking in general and reflexive thinking in particular, in order to be able to bear the burden of otherness in close relationships, in order to be able to feel understood even though any understanding between two people is always only approximate, in order to integrate between the internal and the external, to succeed being in vital connection - one has to endure the truth about the existence of third parties, be they theoretical, real or imagined. And this truth can be tolerated only insofar as there is maximum maternal investment which can itself tolerate the presence of a third.

## References

- Benjamin, J. (1990) An Outline of Intersubjectivity: The Development of Recognition. *Psychoanalytic Psychology* 7:33-4
- Benjamin, J. (2004) Beyond Doer and Done to: An Intersubjective View of Thirdness. *Psychoanalytic Quarterly* 73:5-46
- Bion, W. R. (1959) Attacks on Linking. *International Journal of Psychoanalysis* 40:308-315
- Britton, R. (1989) The Missing Link: Parental Sexuality in the Oedipus Complex. *The Oedipus Complex Today: Clinical Implications* 54:83-101
- Britton, R. (1992) The Oedipus Situation and the Depressive Position. *Clinical Lectures on Klein and Bion* 14:34-45
- Britton, R. (2000) Hyper-Subjectivity and Hyper-Objectivity in *Narcissistic Disorders*. *Fort Da* 6:53-64
- Bromberg, P. M. (1996) Standing in the Spaces: The Multiplicity Of Self And The Psychoanalytic Relationship. *Contemporary Psychoanalysis* 32:509-535
- Ogden, T. H. (1994) The Analytic Third: Working with Intersubjective Clinical Facts. *International Journal of Psychoanalysis* 75:3-19

- Rosenfeld, H. (1971) A Clinical Approach to the Psychoanalytic Theory of the Life and Death Instincts: An Investigation Into the Aggressive Aspects of Narcissism. *International Journal of Psychoanalysis* 52:169-178
- Rosenfeld,H.A.(1987) *Impasse and Interpretation*. London:Routledge

# Karen von der Meden Gutiérrez

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## Identity and its voice: Thoughts about the ideal in educational and therapeutic scenarios

### Introduction

In psychoanalytic practice, the progressive construction of a person's own narrative brings along the integration of different elements from the self that allow that person to become a subject and build his or her sense of identity. In this paper, I would like to portray how this can be seen at work with neurodiversity, how it feels and can be experienced, specifically thinking about the autistic spectrum population. I give account of my experiences working as a teacher and therapeutic companion, and the thoughts and questions regarding identity and desire that I pursued for two years, upholding an analytical point of view and position outside of a classic psychoanalytic scenario.

Two years ago, I started working with Lila, an eleven year old girl, as her teacher. The situation at that time was: six months had gone by since the start of the quarantine in Mexico and schools started a completely online program for classes. Lila's parents were looking for a different option, where their daughter could take individual lessons face-to-face at home, and at the same time continue the school's curricular program so she wouldn't lose her academic progress. At the beginning, my work was limited to teaching the designated lesson plans and adapt the content when necessary. The objective was for Lila to go through all her grade lessons, but in a personalized manner. It is worth mentioning, that under these circumstances, there wasn't a crystal clear path or method to follow, it was only known that the aim was for Lila to learn and to be able to show this in measurable ways, to acknowledge and qualify her performance (and mine, of course). This started changing over time, after a strong bond between her and me developed as a base for further changes along the way.

My first impression of Lila was that she seemed a little girl inside a body that was too big for her. Upon meeting her, I wasn't given a diagnosis per se, but reference was made to autistic traits and characteristics related to social skills, bursts of stereotypes, deep interests and difficulties in self-

autonomy. Lila had difficulty grasping and using language in a comprehensive way. Most of the time she didn't try establishing conversations or communicating with others, instead she talked to herself in a monologue where she repeated dialogues she had heard in cartoons. She identified with the cartoons' characters and, oftentimes, didn't distinguish or differentiate her own self from the character. Thus she talked about herself in this manner, talking about the adventures experienced in the episodes, as if she was the one who had experienced them. One day, almost a month after we started classes, I asked her if we could draw one of her cartoons together, so that I could imagine the story and understand it better. It turned out to be an adventure about a group of kids during a trip to the zoo and Lila, through repetition, was communicating how she missed her school mates whom she hadn't seen in over six months since the start of the pandemic. This moment was a complete turning point for the relationship, perspective and method in which I intervened with Lila. It was then clear that she was communicating and expressing herself with these repetitions, they had meaning. From then on, the lessons dynamic changed as she was not asked to be silent when her repetitions appeared or burst in, instead we drew them.

We started seizing the spontaneous moments of connection between us. When Lila talked to me, I did my best to listen to her and comprehend what she was saying. On many occasions, it was after many different versions and repetitions of the material, that I could grasp something of what the underlying meanings could be, what was being projected onto the cartoons with which she identified. By this I mean that she did not choose them randomly, rather she recounted them because she perceived something in them that related to her own internal or external reality, and was thus important. In this way Lila has been finding pieces of herself and of the world as she sees it, this has allowed her to gradually amplify her knowledge and comprehension of both.

Alejandro Beltrán (2021), in an extract from his analysis of a boy with autism wrote about this form of communication:

“Through this singular mothering built inside the psychoanalytic practice, all the supposed obsessive interests are decanted as repetitive attempts to construct a social communication.” p. 104

In this way, Lila's attempts at communication pointed towards creating a social link where her messages could be received and understood by another. Lila was starting to construct possible narratives supported by chunks and pieces of her cartoons or other resources, in order to give account of this process, give it a voice and express it to others. This encouraged her to communicate more, but it also entailed processing frustration, anger and a mourning process when she realized she had to make this effort to be understood.

Anne Álvarez (1994) as quoted in Silva (2015), talks about the concept of *reclamación* - reclaim as a maternal function that engages the baby to bond and connect; it is a demand to be present and connected with others and reality. Taking this into account, I think that the attitude of being attentive and curious about what Lila had to say, little by little moved Lila to become interested in connecting with me, showing her symbolic representations. Even though it meant feeling angry and frustrated that I could not understand her without language and, also, by noticing we were different subjects.

From teacher and an amateur therapeutic companion, I changed to a different position, where the purpose was to accompany Lila in a learning process but not in a rigid vertical paradigm, instead being present and sharing the process with her. I don't think that standard analytic work has been done with Lila, due to the fact that an analytical process doesn't include education or tutoring, let alone reading exercises or math problems, and yet both was part of my job. But I would like to think that I worked with a different mindset in education, where the objective wasn't imitation or memorizing of lessons, but an incorporation that could be metabolized and integrated. I was there to receive the material, metabolize and contain Lila, trying to intuitively follow her rhythm, patterns and interests, while trying to abstain from interfering with other topics that had more to do with demands of what the ideal should be regarding knowing, doing and being.

Silva (2015) mentions using the narrative function in the psychoanalysis of the autistic spectrum as a way to approach and start forming a bond, offering representations and meanings for repetitive and stereotypical play behavior. Silva (2015) also explains that the narrative function favors the patients' ability to create images and to traduce them into narratives (that can belong to the subject or be shared), amplifying associative possibilities, offering a frame for the internal reality, and supporting the capacity to think about oneself. In sum: Silva emphasizes that narrative function and reclamación - reclaim (Ferro, 2000; Álvarez, 1994, found in Silva, 2015) demand and encourage the patient to be present in a relationship, to form bonds as a humane alive and animated object that can be connected with others and reality, so that he or she may construct a container for their content and the capacity to reflect and think (p. 116).

I think that Lila takes stock of the narratives she finds in her cartoons, in order to use them as representations of her own reality. She uses whatever she may need from them, whether it is the structure or particular elements such as the characters, emotions or gestures. In this manner, she would be repetitively watching them with the desire to understand them so she may understand herself and so that it may support and bolster the construction of narratives that can be communicated to others.

Alongside our bond, there were other factors taken that had a significant impact on how I worked with Lila. On the one hand, there were the expectations and demands to act according to an educational model. I don't mean a traditional vision of education, but a presence of fixed and concrete parameters that measure achievements and how they should be accomplished. Lila's learning was then measurable. Whether Lila learned and used new abilities, they were only rated if she showed them. On the other hand, I found myself surrounded by questions and demands of what the "ideal analytical" work was, feeling that I should apply these "ideals" with Lila for it to be acceptable. I felt pressured to act following both of these perspectives and methods, so much that it became something that hindered my capacity to really look at and listen to Lila. In supervision, I started to understand my role with Lila better, it was not necessary to choose one of the options, and throw away the other, and instead I realised I could try to find a different version in which to accompany Lila.



Even now, I have found myself occasionally acting from an educational perspective as if this was the only objective, censoring what starts to go “out of the grid” of pre-approved topics and actions for an academic “class”, as opposed to opening spaces to build something creative together. This could go even as far as silencing the spontaneous, the absurd and the genuine aspects of human connections, in favor of reading or grammar exercises. I do not mean that what is typically taught at schools doesn’t have value for Lila, but this must not preclude the process of becoming a subject with her own voice. In other words: keeping in mind who we are referring to, who we are talking to and to whom we are connected. For example, studying the topic of body parts with Lila, which is also included in schools’ lesson plans, I tried to make it significant and that it meant something to her. To acquaint herself with the sensory experiences of her body, to name its parts, and differentiate hers from other bodies, know about its functions, how to take care of it and why it was important. And I must say that Lila was so much more interested in all she was seeing and learning than if we were only working with memory and theory. Alas we were talking about her body, my body and the bodies of others, naming the sensations, the representations and the functions. Also, I caught myself allowing more time to talk and just be, when Lila sought to communicate something she thought about, felt or wanted to know about the body, while using her impressions of cartoons and videos. I figured I could explain to the parents, and also to myself, that it wasn’t a “waste of time” because Lila was elaborating what she was learning. In my experience, it was these types of interventions, both educational and accompanying her, that had the most significant effects. From a girl that kept to herself and closed to what others chose for her, she started giving input about what she wanted (even though it was and is still difficult for her), trying and wanting to do things by herself and being proud and happy about it. Her parents started noticing and little by little accepted bigger changes for the lessons: we started talking about sexuality (names and body functions, physical changes distinctive of puberty that Lila was experiencing at the time), development and the notion of time passing (babies, childhood, adults and her place in that scheme), emotions (names, gestures, reactions, situations and associated thoughts), how to take care of herself and others, autonomy and self sufficiency, among others.

It has been exhausting managing the balance between the analytical attitude and the demands to be an educator, frustrating to realize I had deviated and acted from this educator position as an ideal. It was hard to manage and face my own feelings and reactions to Lila’s moments of disconnection or feeling lost in what I should do, questioning my own and others’ demands about what I should do, or whether I made any sense trying to make something out of two incompatible perspectives in one intervention. Nevertheless, I recognize that when sparks of connection happen with Lila, when we joke and play, or she tells me about how she feels or what she thought the other day or about something we learned together, I think it is so important not to give up or take away value to what we have built and elaborated together. I trust Lila will continue to do so and keep on creating narratives and meanings with her own voice.

## References

- Álvarez, A. (1994) *Companhia viva: psicoterapia psicanalítica com crianças autistas, borderline, carentes e maltratadas*. (Maria Adriana Veríssimo Veronese, Trad.). Porto Alegre: Artmed.
- Beltrán, A. (2021) “Es que yo no estoy ahí...”: La construcción de sentido en el tratamiento de un niño autista. Calibán. *Revista Latinoamericana de Psicoanálisis*. Vol. 19. n. 1-2. pp. 95-112
- Ferro, A. (2000) Narrações e interpretações. In A. Ferro, *A psicanálise como literatura e terapia*. Rio de Janeiro: Imago.
- Silva, M. C. P. (2015) Una pasión entre dos mentes: la función narrativa. *Psicoanálisis*. Vol. 37. n. 1. pp. 111-127. Recuperado de: <https://pesquisa.bvsalud.org/bivipsil/resource/es/psa-50411>

# TRAINING TODAY

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## My psychoanalytic training experience

### Introduction

This paper is a work in progress about my own personal experience and development as a psychoanalyst, before, during and after my training (Bartoli, 2015, 2019, 2021). I will base this paper on my experience of moving from Italy, where there is a long tradition of psychoanalysis, to Aotearoa-New Zealand, where there were no psychoanalytic societies; and my constant search for a psychoanalytic training. I will focus on the adjustment process to the new reality, as I describe the differences and specificity of my psychoanalytic training experience mediated via audio-video technology, as the only one possible.

### In the beginning ...

In 2014, I moved to Aotearoa-New Zealand and I had to leave behind my psychoanalytic training in Italy. I started analysis in 2008 and, in 2013, I was about to start training as a psychoanalyst with the Italian Psychoanalytic Society. Prior to that, it took me a long time to be in a financial position to be able to do an analysis. This is an element of reality; an important one, though, which is worth mentioning, particularly if it does not come easy. In Italy, it is not unusual to start analysis before starting the training. There is a process to apply for the analytic training, like in many other institutes around the world: this includes the act of asking for a training, followed by three interviews with different training analysts, who will make a decision about the suitability and then the readiness to start the training. Being in analysis helped me as I went through this process, and helped me with feeling ready, firstly within myself.

Being 'accepted' for the training marks the official beginning of the training. In 2011, my analysis was registered as a training analysis<sup>14</sup> and, two years later, I was due to start attending the seminars, as part of the training. As this was a long process, many things were concurrently happening in my life. Amongst others, there was my decision to move to Aotearoa-New Zealand, which was related to a personal reason: to build a family life with my partner, who was already living there before we met. Unfortunately, Italy did not offer any prospect for our future, but this is a whole other story!

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<sup>14</sup> Training analysis, in this paper, refers to the analysis being part of a training to become an analyst; it does not mean that the analysis itself is different from a personal analysis.

This paper started in 2015, when I first presented at the IPA Congress in Boston. By then, I had been in Aotearoa-New Zealand for just over a year, I had started working as a Clinical Psychologist, and I was still looking for an analytic training. I remember that I talked about the loss of psychoanalysis in this new country, which I described as the “no psychoanalysis’ land” (Bartoli, 2015). At the time, I focused on the difficulties I encountered, while facing the differences in: language, culture, history, life style, social norms and habits, and so forth. All such aspects, which are typical of any migration, had a significant impact on my personal life, as well as on my clinical work. However, more than anything else, my experience was coloured by feelings of frustration, resentment, sadness, and anger, for not having the possibility to continue my training. The motivation to write about it was driven by the possibility to share those feelings, and probably by the not-so-secret hope that these words would resonate with someone who would, finally, make a training available to me. It could only take one person! And yet, I am afraid, this was not the case. It took me a long time to find a new ‘psychoanalytic’ home.

The image of me on a train comes to mind, when I started University in Italy and I was going from Florence to Padova to study Psychology, leaving at the beginning of every week and coming back home towards the end of the week. Being in between places is very much part of my history, dated back to my childhood, and, as much as it is a familiar feeling for me, it is also identified with a sense of loss of belonging, a struggle to be part of, something that does not come easy, and, yet, it is associated with a constant yearning. This can give you a glimpse of what it meant for me not being able to be part of a training or institute, during this time, while there was still a lot of uncertainty about my future in the new country.

I am now aware of a sort of omnipotent phantasy, which gave me the sense that I could do the training, despite that the reality was telling me that I could not. It took me a long time to process my feelings of grief, and coming to terms with a different reality. After all, wasn’t it my decision to move from a country where psychoanalytic training was well established, and finally ready for me, to a country where no psychoanalytic society was available? It has been, however, this same drive that has allowed me not to give up and has kept the desire alive to look for something different, and yet possible, to pursue my analytic training.

For almost three years, if we consider the planning time before moving and the arrival to Aotearoa-New Zealand, I consulted many psychoanalytic training Institutes around the world and I always received the same negative answer: nothing was possible because the rules of the training could not be changed and did not allow to accommodate me and my needs. After having been in turbulent waters, following a strenuous and relentless search for a safe port, I finally landed at the Chicago Psychoanalytic Institute, thanks to my perseverance and to the openness of the Institute. I will always be grateful to the Chicago Institute because its members listened to my request and offered me a training, from afar: the only one possible, given my circumstances at the time!

In order to describe the characteristics of my training at the Chicago Psychoanalytic Institute, I shall summarize below how the different components of the training were conducted:

- The analysis, which started for me with the so called ‘traditional’<sup>15</sup> setting in Italy, many years before (in 2008), and continued ‘via audio-video technology’ as I move to Aotearoa-New Zealand in 2014, was accepted as part of the psychoanalytic training, being my analyst an IPA member and a training analyst of the Italian Psychoanalytic Society;
- The seminars were all conducted via Zoom, with the participation of candidates from different parts of the world, and those from Chicago, in the room<sup>16</sup>;
- Two control cases were conducted following the ‘traditional’ or ‘classic’ analytic setting, and one out of three could be conducted as ‘tele-analysis’<sup>17</sup>;
- Supervisions were all necessarily mediated by audio-video technology, given the geographical distance, which nevertheless did not diminish the possibility to establish a working and close relationship with all three of my supervisors.

Due to the COVID-19 pandemic, this training might not have been that different from that of many other candidates around the world, particularly in the last two-three years (2020-2022). The main difference being that my training was planned in that way, rather than due to an emergency response to external adverse circumstances; which means that there has been a thinking process of a group of people at the Chicago Institute to provide the best experience possible for their candidates. I can only imagine that it took a lot of work, initiative, commitment, and maybe a dose of imagination! I experienced the Chicago Institute as welcoming, understanding, and very supportive. I think that an act of trust in psychoanalytic institutions was responsible for the Chicago Institute’s recognition of my own analysis, without the requirement to make further changes, when so many changes had already occurred in my life.

## **The transformative experience of psychoanalysis**

The analytic experience is considered the most important component of the analytic training, and it remains the most controversial aspect of a training conducted through audio-video technology. I often ask myself, what is it about psychoanalysis that brings about change, in terms of internal transformation? And, specifically, what is it about analysis that marks the transition from a personal to a training analysis? And has my experience had a different development because of the use of audio-video technology? In an attempt to answer these questions, which I believe we all have if we are in this field, I am going back to my own analysis, as we all may have done at different times.

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<sup>15</sup> With ‘traditional’, or ‘classic’, setting, I refer here to the analysis conducted in the consulting room with an analyst, usually with the use of the couch.

<sup>16</sup> In the interest of information, I shall add that seminars were for me in the middle of the night, as candidates attending from overseas were based in different countries with different time zones, so it was difficult to accommodate all, although the majority was from China.

<sup>17</sup> I am using here ‘tele-analysis’ given that it is widely used in the literature, although I prefer ‘analysis conducted via audio-video technology’, because it highlights the different media used, rather than creating a new category of ‘analysis’.

A few specific images, sensations, memories, that held an affective meaning for me, come to my mind.

I remember the voices of the children, coming from the courtyard outside of the consulting room; the birds twittering in the springtime, when the windows were left slightly open, to let the fresh air come in; my analyst, with whom I had a visual connection only at the beginning and at the end of each session, as it is in every analytic setting; his calm voice; his patience; his sense of humour; his way of being, which felt to me an integration of spontaneity and humanity; the childish quality of the painting hanging above the couch, which I would always see in my sessions, reminding me that life is about playing; and his words, mostly when he said something obvious, like stating the reality for example, or rewording my experience, with its affective meaning; our working on dreams; and many other memories of his alive presence in interaction with me. Alongside the painting there was the room, so small and alive, full of books, which communicated the essence of my analyst's ever-present vitality, playfulness, and creativity. The room has remained extremely alive within myself, and has become an internal part of myself, which settled over years of analysis. Would it have been less intense, my experience and my memory of it, or in any way less transformative, if I were to have had the whole analysis online, instead of only partially, as it has been like for me? I do not know, I do not have an answer to this question; I think, indeed, that I cannot have an answer, because I had a different experience, my personal experience! And this is exactly the point I would like to make.

I came to understand, years later, the importance that my analyst placed on the consulting room. He considered the setting as an integral part of the analytic treatment, in the form of something that needs to be created and achieved, rather than a set of rules, established a priori, that the analyst has to follow. He viewed the setting as a space, which is an alive and physical space, made up of perceptions, sensations, feelings, and which contributes to the development of an internal object and promotes the analytic process. A comfortable and safe place, which stimulates curiosity, interest, and invites to talk and to listen. So different from the idea of a neutral setting!

To my great surprise, my analyst was immediately open to the idea of continuing the analytic work online, when I told him about my plan of moving to Aotearoa-New Zealand. He did not have any doubts about it, apart from not knowing what it would have been like! He never hid his lack of knowledge and experience with working online, including his unfamiliarity with technology, but he never made me feel alone or abandoned because of my choice. He, first of all, responded to my request and need as a person, beyond his position of an analyst, and beyond what he had learnt before and the institution was telling him to do. I think his response was an expression of what Lopez (1992) described with the concept of 'persona', as different from that of 'individual': it is a "synthesis of singularity and universality, discretion and continuity, temporality and eternity" (p.6); it contains "the inherent coherence between theories and emotions (p.15)<sup>18</sup>". I cannot describe how

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<sup>18</sup> In the same paper, Lopez (1992) argues that "the psycho-analyst-persona enters from the beginning into the analytical relationship with all his meaning and essential being, with his libidinal-emotional, mental and formal potentialities" (p.6). (...) "The theory, when is not ideologically and compulsively defended, is an essential part of the psycho-analyst persona" (p.14).

immensely grateful I am to my analyst, because of this very fact, that he listened to me and let himself be curious. He transformed the impossibility into the continuation of an analysis and he told me that he would have learnt from this new experience together with me. This included a different setting, so far away from his thinking, one that he had developed over years of analytic work. It is never too late!

I think that the prerequisite to be curious lies, first of all, in the ability to maintain a capacity to play and therefore to be surprised<sup>19</sup>. It is about maintaining an ‘open gaze’ that allows different perspectives to be seen, felt, experienced, and thus to be incorporated in the analytic work with each patient/analysand. Pellizzari (2021) has written that “*the very essence of psychoanalysis consists in the uncanny confutation of the phantasmatic life that act in the repetition compulsion. One expects, unconsciously, something, the usual thing, and instead, (...) there comes another, unexpected and surprising, thought-provoking thing*” (p. 53)<sup>20</sup>. A good enough mother, who is attuned to her baby, and is in a receptive state of rêverie, has to constantly re-create and experience with each baby what it means to be a mother, including in moments to moments with the same child<sup>21</sup>. Equally, we have to “re-invent psychoanalysis every time, or, if we prefer, to re-discover it” (Pellizzari, 2017, p. 897)<sup>22</sup>; in the same way as the baby discovers the breast as his/her own creation. When the rules of a setting, as well as those of an institute, become rigid and there is no longer the ability to wonder and play with different possibilities and ideas, there comes a problem. Our ability, as analysts, to listen, to maintain alive our curiosity, openness, and interest towards the other as unique and different, isn’t that the essence of psychoanalysis? Alongside: tolerating uncertainties, unconscious drives and affects, dealing with mourning, oedipal conflicts and castration anxieties, and so on.

I have some other memories from the time we started having sessions via audio-video technology. My experience of my analyst changed, as suddenly I could see his face, disproportionately big, and found this very intense, and so different from the no-eye contact I was used to. After I shared my feelings of being constantly ‘observed’, with no need of an interpretation, my analyst adjusted the setting to a less intense one, from a visual perspective, by positioning the camera towards the periphery of his face. I found this adjustment - that could be interpreted as an analytic enactment (Filippini & Ponsi, 1993) - extremely helpful and containing: it made me feel closely listened to and understood in my emotional needs; and deeply known, after those many years of analysis. Maybe another way to understand what, I believe, my analyst was trying to do is to consider his response as an attempt to create, re-create, and co-create a frame. What constitutes the setting is a complex question in itself, that I am not expecting to answer in this paper. I will only reference Bleger (1967)

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<sup>19</sup> As Winnicott said (1971), sometimes it is about promoting a capacity to play, if not yet present or somehow lost/hidden.

<sup>20</sup> The English translation is mine.

<sup>21</sup> This is, for example, similar to the difference between breastfeeding on demand versus on a schedule in the mother-baby relationship.

<sup>22</sup> The English translation is mine.



when he uses the term “psycho-analytic situation” to describe “the totality of phenomena included in the therapeutic relationship between the analyst and the patient. This situation comprises phenomena which constitute a process that is studied, analysed, and interpreted; but it also includes a frame, that is to say, a ‘non-process’, in the sense that it is made up of constants within whose bounds the process takes place” (p. 511). Within this view, the frame is most often silent or mute, until or unless something happens.

Another distinct memory I have is the space I created for myself, to have the sessions from home, with some degree of privacy. It is something that came naturally to me. I used to use a spare room, and sit on a comfortable reclining armchair, somehow reproducing the couch, if not exactly, and positioning the laptop on the side, so that I could turn towards the screen, without being constantly ‘scrutinized’ by it. I remember feeling a sense of continuity, in this way, whilst at times missing being in the same room with my analyst. Every time I was travelling back to Italy, I would arrange few sessions with him. And my experience with being online and coming back in the room was talked about in analysis.

Something I noticed, as we moved online, is that a regressive state was less present within myself; I started to feel more ‘capable’, more mature, so to speak. It did not feel like a defensive response to the loss of my analyst, as I used to know him, rather a natural progression of the analysis and of the analytic process, whereby I could be myself, as a separate being, less waiting for his words to fill me with hope and new insights. I have been reflecting on this shift as a sign that something had changed, something related to an internal transformation that marked the transition to training analysis, long after my analysis was officially registered as a training analysis in Italy, as mentioned earlier. And yet this change had been possible precisely because of my analyst’s constant presence.

So, going back to the question: what makes analysis, analysis and, specifically, a training analysis? It seems to me that the answer to this question has more to do with a disposition of the mind of the analyst and the dyad at work, rather than on the characteristics of the so called ‘external’ setting (classic vs online, for example). It is undeniable that the setting is the condition necessary to carry out an analytic process; it creates a frame within which certain phenomena<sup>23</sup> can be experienced, observed, and interpreted. Then, something has to occur, as Neville Symington (2012) said: “*What is primary, what makes an analysis, is a relationship which fertilizes into understanding.*” (p. 396)<sup>24</sup>.

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<sup>23</sup> Free association, evenly suspended attention, transference-countertransference, unconscious phantasies, dream analysis, etc.

<sup>24</sup> Symington (2012) continues by saying: “(...) If I can only truly know that which I have created, then if the aim of psycho-analysis is to know myself which I believe is its essence then to know myself I had to create myself—that there were events in my life that were lying there dead in my mind and that I needed to create them if I were truly to know them”. (...) “So the substance of psycho-analysis lies in a relationship which transforms the inner emotional direction of life whose fruit is a new understanding of the world.” (p.397).

The training, in my view, follows a similar trajectory. Like a setting, an institute may provide the necessary but not sufficient condition for a training. The question then becomes: what is it about the transmission of psychoanalysis?

## **The transmission of psychoanalysis**

I would like to share the work of two Italian psychoanalysts, Pierri and Racalbutto (2001), who embarked in the complex territory of the transmission of knowledge in psychoanalysis. They argued that what is transmitted is rooted in the affective relationships: analyst/analysand, master/apprentice, teacher/student, tutor/trainee, as well as parent/child, etc. And these relationships contain narcissistic and oedipal conflicts, too.

As Freud said in *Totem and Taboo* (1912-13), quoting Goethe: “*What thou has inherited from thy fathers, acquire it to make it thine*” (p. 158). When I think about my psychoanalytic training experience, a series of events, images, insights, interactions, feelings, readings, conflicts, frustrations, desires, possible and impossible, phantasies, dreams, etc., come to mind. My memories are embedded in significant relationships: from those idealized ones, with psychoanalysis in itself and my first psychoanalytic readings, to the encounter with the other, starting from those Italian analysts I was lucky enough to have as professors at the University. My first analyst comes to mind, with whom I had been in psychoanalytic psychotherapy at the beginning of my career. I will always remember her, as the one who gave me enough confidence within myself to continue exploring. I recalled, when I started my first control case, my feelings of insecurity, and not knowing, were scary and destabilizing. What kept me together was the internal experience of my analysis and of my analyst. And the weekly supervisions, their reassuring presence and the calmness of my supervisor, which communicated to me, beyond words, a sense of trust in the analytic process, and in myself. I have memories of different experiences of group supervision and clinical discussions I have encountered before, during and after my training.

I have feelings associated with these and many other experiences and relationships, even if I do not recall the specific words that had been said. My internal world, made up of all these different parts, has grown inside over time. Something that allows me to say with my patients in analysis: let's see!

A psychoanalyst once told me that my life looked like a ‘patchwork’; at that time, I felt hurt by this word, as if I was putting together incongruous parts of myself, and what I was interested in, randomly, with no clear direction nor meaning. Today, I am proud and grateful for the opportunity to have been able to come into contact with and to contain so many different parts within myself, and the patchwork is now identified with the art of sewing together these parts, so as to appear - beautifully - variegated.

In a previous paper (Bartoli, 2021), I mentioned the connections I made across Italy, Aotearoa-New Zealand and Chicago, when exploring the experience of those analysts who migrated from one of

these countries to another<sup>25</sup>. I included the connections with India, as I was preparing to present at the Conference in New Delhi<sup>26</sup>. This is another attempt to build a bridge and to integrate internally different places/realities that have accompanied me and are part of my personal journey as a psychoanalyst<sup>27</sup>.

What I have missed, sometimes during my training with the Chicago Institute, has been being able to share my thoughts and feelings with the other candidates, as you would normally do between seminars or after a clinical group discussion; going for a coffee together; sharing these little moments in life, which can contribute to building closer relationships. I have been to Chicago, but not as much as I would have liked, and then COVID hit!

The dimension of the group during the training has been considered an important dimension of the training experience<sup>28</sup>. My training has been enriched by the opportunity of being confronted with a group of candidates and analysts from different cultures, realities, and analytic approaches. I imagine that it would have been very different if I were to do my training in my home country. I am aware that candidates who had been involved in the International Psychoanalytic Studies Organization (IPSO) and those who have exchanges with other candidates from different parts of the world found this experience extremely enriching and beneficial. There is something so powerful and meaningful in coming from different backgrounds, cultures, languages, and sharing one common interest and passion: psychoanalysis! I think that for me it has fostered a sense of belonging and respect of differences, the feeling to be part of something bigger, both inclusive and open to my contribution.

Nowadays, I am member of and currently Chair of training of the New Zealand Institute of Psychoanalytic Psychotherapy (NZIPP)<sup>29</sup>. Differences are at the foundation of NZIPP, as all its members come from different parts of the world and have different analytic training and approaches. I hope that differences will enrich the development of psychoanalysis in Aotearoa-New Zealand. NZIPP is now offering a new training in psychoanalytic psychotherapy, and in 2021 it has become an IPA Allied Centre. It feels like being pioneer of psychoanalysis in this country! We

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<sup>25</sup> Edoardo Weiss (1891-1970), one of the founders of the Italian Psychoanalytic Society, moved from Trieste, in Italy, to USA during WWII John Steiner (1934-), after studying Medical School at the University of Otago in Dunedin (New Zealand), moved to London, where he became a psychiatrist, joined the Tavistock Clinic and completed his training as a psychoanalyst, becoming one of the most influential analysts in the British Society. Joyce McDougall (1920-2011), originally from Dunedin (New Zealand), moved to London in 1949 to pursue her psychoanalytic training; she later became the Patron of the New Zealand Institute and established himself in Chicago, where he died in 1970.

<sup>26</sup> Emilio Servadio (1904-1995), in 1938, moved from Italy to Bombay, where he spent seven years and contributed to the development of psychoanalysis in India, before coming back to Italy and being one of founders of the Italian Psychoanalytic Society.

<sup>27</sup> By looking at experiences of migration, I have also become interested in the transmission of psychoanalysis between cultures, languages, countries, and what psychoanalysts bring with them when they moved to another place and what is about them, and what is not, that has been integrated in the new place.

<sup>28</sup> See the quadripartite training model as described by Bolognini (2022).

<sup>29</sup> <http://www.psychotherapy.co.nz/>.

would probably need a whole new paper to talk about this, and a plurality of voices: that of my colleagues from NZIPP.

## Some conclusive remarks

I hope I have been able to describe some differences as well as the specificity of my personal psychoanalytic training experience. I have done it purposefully focusing on the personal experience of the training, which goes beyond the issue of training online vs not online<sup>30</sup>. I am sure we all have different, interesting and personal stories to tell. I just happen to tell mine because it is considered so different and out of the ordinary, so that it might deserve specific attention. I am deeply grateful for having been given the opportunity to share my story, particularly now that my ‘official’ training is completed, and I continue to learn through my experience as a psychoanalyst, with my patients, my colleagues, and the groups and opportunities I encounter, including at Conferences.

So, if a training is conducted, fully or partially, via audio-video technology is definitively different from the traditional one, that does not mean that this is less formative or transformative, or less valuable. Rather, the focus shifts on how to value one’s own personal experience.

After attending the pre-congress group at the last IPA Congress in 2021, where I presented with other international candidates from the Chicago Institute on distant analytic training, a psychoanalyst from the audience commented that maybe it would be helpful for all analysts to ‘taste’ the differences of doing the training via audio-video technology, including their own analysis. I suppose COVID has made it a reality, a forced one, nevertheless, which made the ‘classic’, or ‘traditional’, setting, being mainly experienced as a loss, though, something to long for, to go back to.

It is a very different situation when an institute, as well as both analyst and analysand make the conscious decision to work online, for whatever reason that might be. It is beyond question that the reasons for this change need to lie on a desire otherwise not fulfilled; that is to say, when the traditional setting is not available, unless considering the support of the audio-video technology.

Analysis and training never end, and start long before the training itself. As Symington (2012) said, after he finished his “*formal analysis*”, he had “*been in analysis ever since*” (p. 396). What remains difficult, once a training is completed, is being constantly reminded to be ‘different’, and not (yet) part of the international community. I guess my presentation at IPA Conferences is a sign of hope and openness for a change.

I would like to conclude with a Māori whakataukī (proverb), something I’ve learnt from the country that welcomed me, Aotearoa-New Zealand, and the Māori culture:

*“He aha te mea nui ki tēnei ao?”*

*Māku e ki atu.*

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<sup>30</sup> This is an example of a dialectic paradigm ‘*et-et*’, as opposed to ‘*aut-aut*’, one that can contain and contemplate differences, uncertainties, complexity, and keep an open listening towards oneself and the other.

*He tangata, he tangata, he tangata”*

What is the most important thing in the world?

I would reply: it is people, it is people, it is people.

## References

- Bartoli, G. (2015). *No psychoanalysis' land'*. Paper presented at the 49<sup>th</sup> IPA Congress on: Changing the world: the shape and use of psychoanalytic tools today, 22-25 July 2015, Boston (USA).
- Bartoli, G. (2019). The experience of a psychoanalytic distant training in the context of the immigration to a “no psychoanalysis' land”. Paper presented at the Pre Congress Group: reflections on ‘distant’ psychoanalytic training, 51<sup>st</sup> IPA Congress on: The Feminine, 24-27 July 2019, London (UK).
- Bartoli, G. (2021). Displacement and belonging in the experience of training remotely. Paper presented at the Pre Congress Group on ‘distant training’, 52<sup>nd</sup> IPA Congress on: The infantile; its multiple dimensions. 21-25 July and 29 July-1 August, Online.
- Bleger, J. (1967). Psycho-analysis of the psycho-analytic frame. *International Journal of Psycho-Analysis*, 48: 511- 519.
- Bolognini, S. (2022). Reflections on the institutional family of the analyst and proposing a “Fourth Pillar” for education. In: Junkers, G. (Ed. By). *Living and Containing Psychoanalysis in Institutions. Psychoanalysts Working Together*. London: Routledge.
- Filippini, S. & Ponsi, M. (1993). Enactment. *Rivista di Psicoanalisi*, 39 (3): 501-518.
- Freud, S. (1913). *Totem e Tabu*. SE, 13, 1-164.
- Lopez, D. (1992). The perspective of the persona on the countertransference. English translation of two papers published in: *Gli argonauti*, XIV, 1-9; 85-101.
- Pellizzari, G. (2017). Psicoanalisi nell'era della posterizzazione. *Rivista di Psicoanalisi*, 63:895-900.
- Pellizzari, G. (2021). *Una stanza tutta per me. Manuale di psicoterapia dell'adolescente*. Mimesis Ed., Milano.
- Pierri, M. Racalbutto, A. (Ed. by). (2001). *Maestri e allievi. Trasmissione del sapere in psicoanalisi*. Franco Angeli, Milano.
- Symington, N. (2012). The Essence of Psycho-Analysis as Opposed to What Is Secondary. *Psychoanalytic Dialogues*, 22:395-409.
- Winnicott, D.W. (1971). *Playing and Reality*. London: Tavistock Publications.

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## **From hemisphere to hemisphere, from west to east: The IPSO Cross Regional Study Groups**

“Every session is a universe.”

Dr. Rosalba Bueno

There is nothing more personal than sharing a psychoanalytic session. Revealing what happens within those 45 to 50 minutes shows some of the most intimate aspects of ourselves. Taking this plunge can come with a wonderful reward; listening to psychoanalytic minds who have immersed themselves onto your field, bringing gifts in the shape of thought.

The Cross Regional Study Group Program (CRSG) is one of IPSO’s most fascinating programs. It consists of a small group of colleagues who share cases to supervise, without the need for the prefix super. It is a form of inter-vision; a horizontal approach to the study of clinical cases among colleagues from all over the world. The meetings happen online, which is a wonderful way to live the IPSO spirit without the need to travel.

What is the IPSO spirit?, one may ask. Here is my view of it: we are a community of analysts in training who find vigor in creating connections throughout the globe with people who are going through the many challenges of becoming an IPA Psychoanalyst. We create bonds that enrich our path in the career we have chosen; to make the impossible profession, possible.

Each CRSG is an experiment. We receive applications and carefully match candidates by their professional and personal topics of interest, their background, and many other factors. After each process of selection, we have recently met for an onboarding session in which we get to put a face on the names and biographies we worked with, and the applicants are introduced to how the CRSG work. After this meeting, which aims to strengthen IPSO's sense of community and belonging, each group will manage itself. The group decides how and when they will approach the clinical material to be presented.

A call for applying to a CRSG goes twice a year, during the months of April and October. This program—which started in 2014—has grown exponentially and received boost during COVID lockdowns. We now live in a hybrid world, and meeting online has become part of our lives. The project started in a pre-zoom era, and has been transformed by a changing world. Our CRSG Program exists thanks to the energy put into it; from those who have managed the process of group formation, to those who meet monthly and share clinical and personal stories.

The feedback received from each CRSG Chairperson has ranged but it is vastly dominated by stories of colleagues who have become friends, who have found a window in their development as clinicians, with enthusiasm and enjoyment.

During the past year, I decided to try a new method for creating these study groups. From many pieces of paper, mind maps, to spread sheets, here are the keywords I found during last semester's applications:

Racism / Community / Children / Families / Hospital / Medical Unit / Psychosis / Psychiatric / Justice / Adolescent / Couples / Public / Addictions / Eating Disorders / Accessibility of Psychoanalytic Treatment / Trauma / Educational / Different backgrounds / Immigration / Migration / Politics / Psychosomatics.

These words are the essence of our last CRSG formation. They are the interests and the experience of members who have applied. While English is the most common language, we have been able to create groups in Spanish, French, and Portuguese. We are eager to grow in languages, and we encourage you to apply for our next call, which will go out on April.

I invite you to embark upon the delightful experience of sharing analytic fields from around the world, to see psychoanalysis take place in different cultures, to go around the world, from one consulting room to another. I can tell you from experience; the ride can be fascinating. Buckle up.





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## Interview on the book : “*Dear Training Analyst*”, edited by Agrawal Himanshu and Charles Baekeland

**Valerie:** What was your interest in writing this book?

**Himanshu:** First and foremost, I wish to acknowledge and thank Charles Baekeland, who helped this idea soar, and without whom there would be no book, nor this interview.

This book is, in some ways, the natural convergence point of several different roads that my professional journey had taken. It emerges from attempts at sublimation to try and work through neurosis created by my own psychoanalytic training. As I wrote in [The American psychoanalyst magazine](#), I reached out to candidates across USA to help understand if my trials and tribulations were unique, or whether there could be some misery in company. I found this timely networking to be a lifesaving intervention for my training and my budding psychoanalytic identity.

Simultaneously, I started dabbling in research, with a focus on exploring the needs and the challenges of the modern psychoanalytic candidate (and perspective candidate) in USA. Then, when [Dr. Busch's book](#) was published, I found myself reading the letters over and over again, to quench my thirst and assuage my anxieties. One day, I put these three ideas together and wondered what if there was a book that provided the perspective of the candidate- not as a sequel or a rejoinder to Dr. Busch's book but inspired by the spirit *Dear Candidate* imbibed.

**Valerie:** What was the experience like?

**Himanshu:** The experience has been one big, joy filled ride full of happy surprises! Everyone- from Dr. Busch, to the team at Confer-Karnac publishers, to leaders at IPSO, APsaA (American Psychoanalytic Association) and IPA(International Psychoanalytic Association) , have been so supportive, and have helped the project go from strength to strength. What was initially envisioned as a collection of local letters from USA, has now turned into 38 candidates from 29 countries

across all 6 inhabitable continents, all pouring their minds and hearts out to create letters to their 'institute.'

**Valerie:** What have you learnt?

**Himanshu:** It has been a truly humbling experience. For starters, I have learnt how much I have internalized my beloved adopted land (USA) and how I need to unlearn some of it, so that I may remain true to the spirit of this global project. The letters pouring in from all corners of the world have moved me to my core, filling me with awe and inspiration. In addition to the rich historical and cultural lessons embedded in these letters, the letters remind me how lucky we all are to belong our 'flock'- this esoteric clan of like-minded individuals!

**Valerie:** How did the letters reflect the differences between the trainings across the world and what was the common ground?

**Himanshu:** I was born in New Delhi, India and because my mother was a diplomat, I spent formative years of my childhood living with my family in Bangladesh, London, Moscow, and Nepal. These formative experiences have helped establish my firm belief that 'no matter where we reside, we human beings are more similar than different.' Above all else, this experience (perhaps the most ambitious of all my projects so far) has re-affirmed my belief in how similar we humans are- our fears and our wishes- including our deep-rooted proclivity for 'othering' fellow human beings!

**Valerie:** Candidates can bring something new and different to the community, which might be thought provoking to senior psychoanalysts. At the same time candidates will be enriched by the thinking of senior colleagues – how do you see this exchange as a dialogue and not merely teaching?

**Himanshu:** Very well said. Let me put my thoughts in this way- I believe that if such an exchange is not a dialogue, then in no way should it be called 'teaching'!

**Valerie:** This interaction between training analysts and analysts in training has been fruitful and based on mutual recognition of both different and valuable roles. Are there aspects of the life of the analytic community in which candidates can be more involved?

**Himanshu:** I am a staunch believer in the 'alliance' model. As a child psychiatrist and an associate professor at the medical college of Wisconsin, I try and practice this model with my patients and my students alike. I believe the psychoanalytic community as a whole is most likely to survive and thrive if candidates have a seat at the table in each and every aspect of the community- from policy and procedures related to psychoanalytic training, to curriculum development, to maintenance of standards of practice, to goals of professional organizations. So far, whenever I have seen, this model being put to effective use, I have seen success and growth. I am so heartened to see that several leadership organizations in the world of psychoanalysis seem to be heading towards making such reforms (thanks to the efforts of groups such as IPSO!). The hopes (and fantasies) of several people I have talked to along the way, is that this book might play a small part in helping Institutes across the world in their goal to align with their students.

**PSYCHOANALYTIC  
PERSPECTIVES ON  
CONTEMPORANEITY:  
REFLECTIONS ON ART,  
TECHNOLOGY and SOCIO-  
CULTURAL ISSUES**

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## Technology-mediated relating: A mass seduction

### Abstract

Teleanalysis prior to the COVID-19 pandemic had been used by some analysts as a matter of course and for others only in exceptional circumstances such as to provide continuity of care for those who traveled or moved during treatment. Many more of us have used teleanalyses in a greater proportion of our work if not all of our work in the last years due to the COVID-19 pandemic. At the same time, also due to the COVID-19 pandemic, we have also engaged in more technologically-mediated interactions in addition to teleanalysis altogether in the form of video conference meetings, online seminars, and increasing use of various apps for billing and payments, grocery, prepared food delivery and so on. Psychoanalysts have begun to theorize some of the differences between traditional in person psychoanalysis and teleanalysis, but we have largely not extended psychoanalytic theories to the dynamics of technologically-mediated interactions outside of the consulting room. It has been made infinitely clear during the COVID-19 pandemic, to even to the most ambivalent users, that there are many benefits to technologically-mediated interactions, and yet our collective increase in use (e.g., total time spent on screens and total increased diversity of applications used) of technology might be understood as a grand intrusion by consumer technology into our relationships, a mass seduction facilitated by the tech industry, closing gaps in space and time, where reflection, dreaming and negative capability might otherwise live. This closing of the gaps in space and time, I argue, is compelling even as it is overstimulating, (as all seductions are) urging us to spend more time in convenient virtual interactions, unconsciously

shaping our views of time and space, our bodies, ourselves, others, and groups both through the media themselves and through the messages imparted within the media. If we were to analyze this slide toward more and more technologically-mediated interactions as a seduction in the ways that Laplanche discusses seduction, we might find that it is critical to side step the question of whether or not technology is good or bad but to begin to consider how we might maintain some observing function capable of reflecting and thinking about what might be communicated in these interactions and the dynamics embedded within technology-mediated relating. Psychoanalysis with its emphasis on unconscious dynamics within individuals and between them as well as sophisticated understandings of group dynamics, including seductive ones, may be well-positioned to extend our theories to include the dynamics of technologically-mediated interactions.

**Key words:** *Technology, teleanalysis, seduction, negative capability, seduction theory, embodiment, psychoanalysis, Laplanche*

The consequences of the use of a technology product or service is not always fully understood by those who develop them or by their end users, despite well-developed product design processes and user testing. Only after larger numbers of people use a new tech product or service for a longer period and there is time to reflect and consider the impacts do the unintended social and emotional consequences, (not to mention the unconscious dynamics they evoke within and between people), become somewhat apparent. Some strikingly negative recent examples of unintended (or perhaps denied or disavowed) impacts include: Twitter and Facebook's impact on our recent elections; TikTok's influence on teen risk-taking behavior in the form of dangerous TikTok challenges; Microsoft and Amazon's racially-biased facial recognition programs, and, experiences with Alexa violating our privacy despite promises to the contrary. These outcomes, and countless others, were either unthinkable during the product design process or if they were considered at any point in the process, they were dismissed prior to product launch or at each product update, ostensibly in service of timely product releases and profitability.

Of course, technology products and services also offer us a host of positive, useful, and sometimes unintended or surprising benefits as well. Consumer technologies can be thought of as offering a potential space (Benjamin, 2018) or a transitional space (Winnicott, 1971) in which to play or dream, with all the hope and development that is implied in these psychoanalytic concepts. During the COVID-19 pandemic in particular, which continues as I write, there have been concrete and tangible benefits to technologically-mediated relating that we have all experienced through being able to continue our work and to remain in contact with others personally and professionally and avoid contagion. Regardless of whether the consequences of tech use is negative or positive or intended or not, the impacts are often amplified through the scale and speed of its use, leveraging social sharing at the pace of machine time, in a disembodied and potentially intrusive manner which may have "...the negative effect of foreclosing many, if not all, of the values that practitioners of depth psychology...tend to affirm, such as the freedom of imagination, 'negative capability', interior depth and the privacy of the self..." (Frankel & Krebs, 2021, pg.113).

These are not new phenomena or concerns. Decision scientists have been documenting problematic human decision making with attention to the social and emotional consequences of poor risk assessment associated with technology for decades (Kahneman, Slovic, & Tversky (Eds.), 1982). Business and tech sector leaders have taken up these concerns and have been calling for experts from more diverse disciplines to help them consider the unintended consequences of tech products and services earlier in the design process (Nohria & Taneja, 2021). Their current processes consider these issues through attention to design thinking, usability testing, and human factors research (Rosenbaum & Chisnell, 2000), yet these studies and theories do not take into account unconscious processes or group dynamics in the ways these are understood and well-developed within psychoanalytic theory and practice (Bion, 1961; Stokes, 2009; Shapiro & Carr, 2012). Psychoanalysis is perhaps uniquely positioned to enter this dialogue because there is a great deal of evidence to suggest that how we interact with technology and with each other via technology is governed by unconscious processes and dynamics (Frankel & Krebs, 2021).

Just because there are unintended consequences and technology motivates unconscious processes does not denigrate its benefits nor suggest we should turn away from technology. The benefits of its use were made strikingly clear during the last few years and we responded by increasing our use. Various technologies and apps, including telephones, allowed us from the spring of 2020 when COVID-19 required most of us to shelter in place, to maintain our clinical practices with patients, continue with our analyses, consultations, and training. We could stay in contact with those who were far from us without having to travel or risk getting sick. We saved time, we believed (and there is more to say about whether time is really ever saved, I think), and we have begun to bend space (and there is also more to say about what happens when we have the experience of closing distances without our bodies moving through actual space) by cutting our commute out some days or every day altogether, living in less expensive, or more desirable locations all the while serving patients in larger geographic areas than ever before. We convened meetings with participants who live in multiple locations at the same time. Some of us were in different locations throughout the week or year and while using a static background in zoom, doxy, or Skype (or whatever teleanalytic video conference platform we used) of our office, we gave the illusion that we were in the same place, and thought this strategic (and I would add, somewhat duplicitous). We have begun to live in a way that has the feeling of disregarding the limits of space and time and therefore that begins to disregard what it means to have a fully alive and always-in-the process-of-dying physical body. And perhaps this is simply what happens when the first world has the feeling of running out of new markets of people to exploit so we bend time and space to continue to compete with each other for the best ways to optimize things.

In some cases, as we moved from in person analyses to more teleanalyses in the last years, we experienced examples of unexpected growth and development in the transference that we surmise wouldn't have happened in person. There are cases of various (bodily) concerns being more available and comfortable for analysands to bring forward in a teleanalytic format, for example (Wooldridge, 2017). We were able to serve analysands who began treatment during COVID-19 who otherwise would not have been able to participate in psychoanalysis at all, were it not for

teleanalysis, and we heard of candidates, or we were candidates, who otherwise would not have been able to participate in training if it weren't for teletraining. The benefits of teleanalysis and teletraining for our field are clear. We justify to ourselves, that while it is not the same as in person analysis, it is an analytic process, there is a transference and there is movement and progress or in the case of training, there is learning and growth. These positives are counterbalanced with tales of those who missed the embodied experience of in-person analysis or training or felt too difficult to tolerate the ersatz experience that 2-dimensional telephone or online relating provides. We also experienced fatigue from looking at screens, aches in our bodies from moving less, or eyestrain and loss of hearing from ongoing use of earbuds. Our social lives and social skills may have atrophied. As we all entered this COVID-19 phase, and without perhaps noticing, we began engaging in more technologically-mediated relating outside of psychoanalysis as well, altogether, more than ever before. This is precisely what the consumer technology industry wants – more users, more clicks, more views, more engagement, more data, and more different apps that each of us use. Interestingly, several tech CEOs in Silicon Valley (an area near San Francisco where many of the big technology companies are) do not allow their own children to have access to the products they develop and/or restrict access to cell phones, ipads (which are responsible for a large uptick in technology-mediated relating for each of us due to their portability) and Netflix for their children until the age of 14 (Lopez, 2020). I am suggesting that they are developing products that are seducing us in the Laplanchean sense and while they may not know what the enigmatic messages are that they convey along with the tech they offer, they know enough to protect their own progeny from it.

According to Laplanche, seduction occurs every time the child is confronted with the parental universe. He writes, "I give a kind of essential primacy to 'seduction'.... Seduction, as an enigmatic message addressed unilaterally by the adult to the child is to be found at the very heart of the other 'primal fantasies', and particularly in what renders the 'primal scene' enigmatic and traumatizing." (Laplanche, 1995). He goes on to note that the other primal fantasies are ones of various forms. He states, "The messages of the primal scene are frequently ones of violence, savagery, castration and anality. A message of exclusion is virtually inherent in the situation itself: I am showing you – or letting you see – something which, by definition, you cannot understand, and in which you cannot take part." (Laplanche, 1995).

In the case of consumer technology, we are confronted with messages from the universe of others delivered into our offices and homes almost immediately and sometimes without knowing what we might hear or see before we click. We are being shown or let see enigmatic messages that are present in the content but also are part of the medium we use itself. Think for a moment about ads that appear in the margins of various websites for products we did not ask to see or notifications that ping us without us asking to have these served. The skilled tech user can turn these off but most of us either do not know how to do so or are in an ambivalent relationship with this kind of content. We both like shopping recommendations and notifications but we are also intruded upon by them. Even if we turn them all off, we are still served enigmatic seductive messages through that which we receive and through the simple act of feeling as if we are in control of what we

search for or access but when it is returned, we may not have received what we expected or are prepared to take in. We are in the roll of child as user of technology relative to the tech executive creator/parent or the group of parents on megaphone who come through these apps in the form of memes, trolls, internet influencers and so on. They insinuate what we should wear or buy to garner sexual attention and to have power and what we might fantasize about or fear. Neither end user nor developer nor influencer is fully conscious as to what is communicated in these interactions. And some of what is communicated constitutes and is constituted by a seduction. Good notes, “LaPlanche’s idea is that human sexuality is constituted through what we might call an intersubjective unconscious, through the child’s failed translation of enigmatic sexual messages that are sent from parent to child and that are unconscious to the parents themselves. This is not seen as a pathological process per se but rather as the very way sexuality is constituted.” (Good, 2006).

To call consumer technology seductive is again not to disparage its usefulness. In fact, according to Laplanche, “...seduction is merely a process: seduction is neither more nor less real than a parapraxis, the reality of which is not reducible to its materiality. A slip of the tongue is no more or less real materially than a correctly pronounced word. But a slip also does not boil down to each of the interlocutors' conceptions of it, which are often incomplete and reductive. It conveys a detectable, observable message, which is partly interpretable by psychoanalysis. It is in terms of this third domain of reality and not of material reality that I persist in saying ‘seduction’ rather than ‘seduction fantasy’.” (Laplanche, 1995). The same can be said, I would argue, for how enigmatic messages of racism, sexism or various forms of violence, might be communicated within and through technology, in addition to other dynamics.

Many of us continue to provide teleanalysis for a portion of our schedules if not entirely, even as others are returning to in person work. Instead of receiving payment in person many of us now submit online invoices and use various payment apps to process payments. We take part in online versions of parties, meetings, performances, seminars, graduations, memorial services, and the like. There is more food and grocery delivery ordered online and online reservation services being used. All of this is very convenient, and we are happy to have access to alternatives to keep our lives going during COVID-19. What we perhaps did not notice, or perhaps we are still in the middle of and therefore there isn’t enough *Nachträglichkeit* yet to allow for a full reflection, is that we are now more embedded in 2-dimensional interactions, with the accompanied unconscious communications that are included in the medium itself than ever before which implies less in person face to face relating and we may not be aware of how this shift is impacting us. I suggest we may be succumbing to the seduction of technology without pausing sufficiently to allow a gap in time to reflect or to use our analytic minds to consider and theorize the dynamics that are new in this new context. The seemingly simple and convenient act of bending time and space, which gives the illusion of saving time and traversing large distances, may be changing how we see or feel about ourselves, others, our bodies, time, and groups. And perhaps this seduction is traumatizing and it may call for theorizing. In Frankel & Krebs’ (2021) recently published text addressing the human virtual, digital technologies, and philosophical and psychoanalytic ideas about these phenomena, they present a weighty concern. They suggest that perhaps not only is technology influencing how



we think, feel, pay attention, and relate to others, ostensibly through unconscious messages, but it may, due to its pace and intrusiveness, be potentially closing the gap that we need in order to have the space in which to think and feel at all. This is counter to the objectives of psychoanalysis, with its emphasis on free association (Freud, 1904), negative capability (Symington & Symington, 1996) the need for triangular space (Britton, 2004) and an emphasis on deep relating and working in the transference (Joseph, 1985). In fact, it may be that conducting psychoanalysis, or perhaps doing anything at all in the time of ubiquitous digital virtuality is somewhat different and more concerning than in eras previous. This is a call to us all to consider the possibility of actively engaging a gap, like the protected space and time of an analytic hour, so that we can protect a way to think about the dynamics of technologically-mediated relating and our minds.

Currently my clinical practice includes much more teleanalysis than before COVID-19 and I don't go to my office everyday. While I do delight in having more free time due to a smaller commute, this time isn't really saved. I end up spending some of my "saved time" actively observing or counteracting the impact of bending time and space on my body and mind as well as considering the implications for the decisions to continue to offer my services in these various formats. I also spend some of the "saved time" challenging myself to attempt to manage what I believe is the intrusiveness and seductiveness of technology-mediated relating. Perhaps I have lost something that occurred too conveniently and quickly to warrant thought that deserves to be fantasized and articulated.

## References

- Benjamin, J. (2018). *Beyond Doer and Done To: Recognition Theory, Intersubjectivity and the Third*. New York, NY: Routledge/Taylor & Francis Group.
- Bion, W. (1961). *Experiences in Groups and Other Papers*. London, UK: Tavistock Publication.
- Britton, R. (2004). Subjectivity, objectivity and triangular space. *The Psychoanalytic Quarterly*, 73(1), 47–61.
- Frankel, R. & Krebs, V. (2021) *Human Virtuality and Digital Life: Philosophical and Psychoanalytic Investigations*. New York, NY: Routledge.
- Freud, S. (1904/1953). Freud's psychoanalytic procedure. *Standard Edition*, 7:249-256. London, UK: Hogarth Press.
- Good, M. (Ed.) (2006). *The Seduction Theory in the Twenty-First Century: Trauma, Fantasy and Reality*. Madison, CT: International Universities Press.
- Joseph, B. (1985). Transference: The total situation. *International Journal of Psychoanalysis*, 66():447-454.

- Kahneman, D., Slovic, P., & Tversky, A. (Eds.). (1982). *Judgment Under Uncertainty: Heuristics and Biases*. New York, NY: Cambridge University Press.
- Laplanche, J. (1995). Seduction, Persecution, Revelation. *International Journal of Psychoanalysis*, 76: 663-682.
- Lopez, C. (2020). Seven tech executives who raise their kids tech-free or seriously limit their screen time. *Business Insider South Africa*. <https://www.businessinsider.co.za/tech-execs-screen-time-children-bill-gates-steve-jobs-2019-9>
- Nohria, N. & Taneja, H. (2021). Managing the unintended consequences of your innovations. *Harvard Business Review*, 19
- Rosenbaum, S. & Chisnell, D. (2000). Choosing usability research methods. *Proceedings of the Human Factors and Ergonomics Society Annual Meeting*. 44(37): 569-572.
- Shapiro, E. & Carr, W. (2012). An introduction to Tavistock-Style Group Relations Conference Learning. *Organizational & Social Dynamics*, 12(1) 70-80.
- Stokes, J. (2009). *The Unconscious at Work in Groups and Teams*. New York, NY: Routledge.
- Symington, J. & Symington, N. (1996) *The Clinical Thinking of Wilfred Bion*. New York, NY: Routledge.
- Winnicott, D. (1971) *Playing and Reality*. New York, NY: Brunner-Routledge.
- Wooldridge, T. (2017) Now I see you, now I don't: Screen services, short stature, and the fear of being seen, *Psychoanalytic Perspectives*, 14:2, 193-205, DOI:10.1080/1551806X.2017.1304116