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STORIES OF CREATION

KEN WRIGHT

In a series of recent papers (Wright 1997a, 1997b) I considered creativity from a number of angles. I liked the theme I had struck upon which related creativity to early processes of mother-infant relatedness, but what I had written failed to satisfy me because I did not feel able to develop it further.

After one such talk (Wright 1997b), the organiser gave me some feedback from the audience. Most was favourable, but one person wrote as follows: "A double dose of the Winnicottian approach to art made me want to grow up fast and throw away my transitional object. It was *too much comfort* and rather sickening. O for a dose Kleinian austerity or Segalian gravity at this point."

This comment caused me to reflect, because it linked with something the chairperson had said at the same meeting. In his summing up, he had put it like this: "You've spent a lot of time talking about the mother and her relationship with the baby, and you've suggested a connection between mother-infant dialogue and the creative process. But where does the father come in? Surely he has a part to play, yet you haven't mentioned him at all. Perhaps next year, if we repeat the series, you can tell us about the father's part in creativity."

These remarks made me think that I had become over-immersed in a two-person framework. My interlocutors seemed to be saying that I had ignored the father and the importance of his *third position* in fostering infant development and was too much stuck with mothers and babies. When, therefore, I was asked by Ruth Pitman to do yet another paper on creativity, it seemed appropriate to try and make good my earlier one-sidedness. This time I would explore the role of the father, reinstate him into my perspective, and rather like the child within his own development, break out from the two-person mould.

That such a passage is fraught with difficulties, I do not need to tell you. There is always a tension between two-person and three-person positions (Wright 1991), and the difficulty in maintaining contact with both perspectives is not only the backdrop against which today's paper is written; it is the backdrop of development, and perhaps of creativity itself.

It may seem surprising that the father can so easily escape consideration when his role in creativity is in some ways so obvious. How could creativity be imagined without the father, unless babies really are found under gooseberry bushes, or made by the mother on her own? Surely the intercourse between

male and female is a major driving force of the living world? And is it not also the case that male and female, in some form or other – *Yin* and *Yang*, *Lingam* and *Yoni*, for example – are the primal symbols of many cultures?

I shall return to cultural myths of creation later, but I want first to *establish* the father's presence at the beginning of this talk. To do so, I shall give him an unequivocal role and call him '*the great separator*'. Not so much the great *castrator* – though he may also be that – but the great *separator*. I have him this emphasis because the father presides, as I see it, over the psychological separation of infant and mother (Mahler et al 1975; Wright 1991). He provides an alternative pole for the infant's developing experience, drawing him out of, and away from, the original symbiosis, into an enlarging world. By maintaining a space between the child and the mother, he guarantees a place in experience from which the child is excluded, and ultimately, one can think of this as the Oedipal space, or the space of parental intercourse.

That this is a space which the child can *only imagine*, and contains an interaction between the couple which can *only be represented* plays, I believe, a decisive part in symbolic development. The absoluteness of the child's exclusion from the parental space is the ultimate guarantor of the symbolic function – I'm talking here of symbols that are clearly set apart from the objects which they represent, not of those which mark the child's first representational efforts, which are far less separate. Such early, primitive symbols are less clearly differentiated from the object world, and far from accepting separation from it, they seem to aim at its re-creation. If later symbols are founded on acceptance of *absence* from the object (Segal 1986), earlier symbols would appear to be more concerned with mitigating this sense of loss (Winnicott 1951). If the mother, then, can be regarded as presiding over the first symbolic operations which are presence-creating, the father can be said to stand for a later symbolic function which includes absence and separateness in its very constitution.

If it were to be asked which kind of symbol is important for creativity, the answer might well be both. For just as pro-creation involves the father *and* the mother, so may creation itself involve a relation between the two sorts of symbolic function. The act of imagination, like the process of play, involves not only intense *realisation* of an experience (the calling up of its presence), but also the recognition of its *unreality* (in other words, its essential absence). This offers a way of thinking about the two kinds of symbol: in terms of their differing attitude towards the object represented. The transitional object, a primitive symbol, can be thought of as saying: "Has my mother gone? No! She is still here because I feel her presence!" By contrast, the later paternal symbol seems to say: "Yes! She has gone! And you cannot have her – she is mine! All that is allowed you is to think about her." So at the beginning of

symbolic development is the comforting re-creation of the transitional object. At the end of development is the stoical acceptance of the absent object of thought. But in between are play and creativity which seems to have a foot in both camps, the object being present and absent at the same time. The symbols of play seem to say: "I accept my mother (the object) *isn't* here, but let me pretend she is. Just you see! I shall summon her up and enjoy her whenever I want to!"

The paternal symbol, which is also the most purely representational, is thus experientially the most distant from the object. Because of this, it is in danger of losing touch with the object, resulting in knowledge that feels detached and pointless. On the other hand, the maternal or presence-evoking symbol remains close to the object and runs the opposite risk of becoming confused with it. It is emotionally charged and has the power to move us, but we may become drawn into the spell of its *quasi*-reality and lose our sense of involvement in the real world. Each type of symbol on its own is thus one-sided and skewed; but in the area of play, where they seem to come together, you have reality *and* passion – in other words, you have creativity.

Let me summarise: the primitive, maternal symbol exerts a retrogressive pull on the subject – the subject is drawn back towards the object, and possession of, or possession by it. The paternal symbol, by contrast, embodies a greater degree of freedom and is built on a more expansive, progressive movement – away from absorption in the primary object and towards the infinite variety of the world. But somewhere in between, in a place that gives due recognition to maternal and paternal elements, is the place of play and creativity.

In this sense, the paternal influence not only guarantees the representational symbols of thought; it protects the child (and the child's developing symbols) from the powerful lure of the primary object and reabsorption by it.

The father's anti-regressive influence is nicely portrayed in the story of Odysseus and the Sirens. This illustrates, as I see it, the intense object-pull of the Siren-Mother and the power of the father to draw the child back from her world-destructive, all-enveloping embrace. When Odysseus sails near to the island of the Sirens, he has himself strapped to the mast of his ship with thongs so that he cannot respond to their seductive call. He also stops the ears of his crew with wax, so that they cannot hear the song which would lure them to their destruction. But he does not stop up his own ears – and what an interesting detail this is – because he wants to know and savour the experience of the Sirens (feel their presence) without being dragged down into it.

Odysseus thus allows himself as near as he dare to the desired experience without actually allowing it to happen. He goes as close as he dare to this primitive mother, at the same time protecting himself from being swallowed

up in her through his powerful bond with the father (the phallic mast to which he is bound). Strapped to his mast, he exists within a protected zone: he cannot enter the space of the primary object (the isle of the Sirens), but he can peer into it and experience it in relative safety. This is the space of the imagination.

It could be said that within this scenario the father is an ambiguous figure. On the other hand he forbids – he prevents access to the thing which we want (or think we want), and tells us that we may not enter the world that is conjured up by our desires. On the other hand, he protects us (perhaps against our will) from the illusory reality of this primitive world, and keeps us from being swallowed up in it. He gives us a perspective from which we can imagine and know such ‘realities’ by anchoring us firmly in the real.

I think the act of imagination, and therefore the creative act itself, is always suspended between these two tendencies. We yearn for the thing we imagine, we yearn to have it and not be separated from it – which is the maternal side. Yet at the same time, we have to stand firm, to strap ourselves to the mast of reality – and this is the father’s contribution. It is in this sense that creativity lies between the father and the mother, between the paternal and maternal symbol. But as the Odysseus myth illustrates, such a creative position is not an easy one to sustain.

It may be that my talk today illustrates the difficulty I am talking about – of steering a course *between* the father and the mother. In trying to think about creativity, I have felt myself pulled one way, then another. I keep going back over what I have written, attempting to redress a balance which has tipped too far in one direction. I have felt genuinely perplexed by the role of the father, sometimes giving him too much power, at others not enough.

In an earlier draft of this paper, I wrote the following passage. It doesn’t capture the sense of oscillation I am talking about, but it does convey something of my personal struggle to make sense of the topic and throws up some useful images which serve to structure the rest of the paper:

“Poised between a mother, whom I do not want to leave, but who may engulf me, and a father who guarantees the world, but will take the mother from me, which way shall I turn? It could be reassuring to follow the father, and to enter the established pathways of the world. It could be reassuring to return to the mother and cling to her: I know this warm familiar place and would like to stay in it for ever! But neither of these is a creative solution. If creativity lies anywhere on the map I have sketched, it is in the field of tension between these two positions. The father pulls one way, the mother another: from the tension between them, a third possibility may arise. Perhaps this is what Janet Frame (1987) meant when she wrote at the beginning of her autobiography, The Is-Land: “From the place of liquid darkness, within the second place of air and light, I set down the following record with its

mixture of facts and truths and memories of truths, and its direction always towards the Third Place, where the starting point is myth". (p.9)

In the state of uncertainty that I felt, two images came into mind. In the first, I am a young child, with no knowledge, as yet, of the intercourse between Mummy and Daddy. But I start to notice that Mummy's tummy is getting bigger. The weeks go by and I can't ignore the impression any longer. I point my finger at Mummy's tummy, and say: "Big tummy!" Mummy, being a good Mummy, tells me that there is a baby inside her, a little brother or sister who will soon be part of the family. In due course, the baby arrives. How does the young child deal with such a situation?

It goes without saying that the world is turned on its head. Indeed, it sometimes seems that most of psychotherapy is taken up with the consequences of such a moment. But I want to focus on one aspect - the questions that are aroused in the child's mind. Whether in words or in some other way, he will want to know *why* Mummy is having a baby and *how* the baby got into her tummy. He may or may not get answers to them. But if he uses his own developing powers of thought and observation to develop a theory of babies, I think he is more likely to come up with the idea of virgin birth than to get to the heart of the matter. Unless, as is sometimes suggested, there is an inborn preconception of parental intercourse, how could the child even begin to think that the father had something to do with it? Even if the child had begun to know about his parents' intercourse (those noises in the other room), why should he ever make a link between this, and what happens so much later, the birth of the baby sibling?

This might suggest that the father's role in creation is difficult to discern. And if one adds to this inherent difficulty, an element of conspiracy to hide his role – because surely the parents do not want to be interrupted during intercourse – it is clear that the difficulty in working out the truth of the situation (in other words, imaging it) will be compounded.

In using this example, I make the assumption that our attempts to understand creativity have something in common with the child's attempt to understand the creation of babies. But now, my second image, which takes us from the making of babies into the arena of artistic creativity.

Suppose we think of a beautiful and smoothly finished piece of sculpture: there are no flaws in its surface and it dazzles with its finished perfection. Where, we might ask, did this beautiful object come from? Do we consider the effort that went into its production: the assault with hammer and chisel on the unyielding block of stone? Probably not, unless we are practitioners of the sculptor's art. We are more likely to delight in the finished product than to agonise over its origins. Here then, for a second time, is an image of

virgin birth, again with its lack of curiosity about origins. Such impaired curiosity will scarcely help my investigation of creativity, so let me alter the model or metaphor that I'm using!

Instead of a smoothly finished object, suppose we are now confronted with a sculpture in which the marks of creation are more evident. I'm thinking, for example, of certain works of Michelangelo, which give a sense almost of 'work in progress'. There is a half-finished air to such pieces which adds a new dimension to the experience of the viewer. The *Rondanini Pietà* in the Sforza Museum in Milan would be a case in point, though that work actually was unfinished, having been interrupted by the artist's death. But other works by Michelangelo come to mind – figures of slaves and captives, for example – in which the sculpture merely *looks* unfinished but is actually complete. The unfinished quality is a means to realising certain effects.

It is the impact of pieces such as this which I want to discuss because they raise an important question – the relation between form and material. This relation, similar to the relation between mind and body, is an enduring mystery of the creative process. I would like to consider it in relation to the Michelangelo sculptures I have mentioned.

As I look at such a sculpture, I have the impression of a form or figure *emerging* from the block of stone. To appreciate this, you need to visualise how the smooth and finished surface of the emerging figure contrasts with the rough-hewn texture of the original block, which still bears upon it the chisel marks produced in the cutting and shaping.

The experience here is more complex than in my first example of the smoothly finished piece: we are more aware of the artist at work. As we look, we can *see* the chisel marks, *sense* the hardness and resistance of the marble. We begin to *participate* in the artist's transformation of the resistant material; we marvel at it, and appreciate the work and skill which has gone into the process. We can thus identify with the *creator* of the object as well as the finished product. But above all, we have the impression of a moment of transition – the form which the artists has created is half in, half out of the stone, as though the form is not yet released from the marble, though perhaps struggling to be so.

In our experience of such objects, we thus become aware of the *process* of creation, though much mystery remains. Instead of relating to a *completed* form – a baby that is suddenly there – we are caught up in the *process* of creation itself: there is a more or less resistant medium, the marble block; the artist, whose efforts we share through the marks of the chisel and the smoothness of the finished form; and finally, there is the form itself, which seems to be struggling, as though on its own, to find release from the surrounding material. It is an though in this experience we share in the actual

birth of the baby: we experience something of the labour of delivery – the effort that goes into releasing the form from its place inside the stone.

But this is not the only story or metaphor we could apply to what we see: we *could* view the artist quite differently. No longer a midwife struggling to free the form from its marble incarceration, the artist might now appear as someone more godlike, imposing a form *on to* the resistant medium, forcing it, you might say, to *con-form* to his inner design. If in the first case, the artist is a kind of midwife (a maternal image of his function), helping to make manifest something that is latently there, in the second, he is master of the material, more in control of it (which seems a more male way of picturing it). In this different kind of story, the artist knows in advance what he wants to produce, and will not rest until he has forced the material to realise his designs.

The Inuit Eskimos have an art-form – I can't remember its name – which involves the carving of soft stones into small figures, usually of animals. As I recall, the Inuit way of proceeding is to look carefully at each stone in order to sense what form the stone contains. It is as though each stone is conceived of as already *being*, in some latent way, that which the carver will help it to *become*. This is another example of our first, or maternal model of creation – the artist helping the form to emerge. The artist, in this story, is an adaptive and facilitating mother, drawing out and fostering something that is felt to be latently there within the material.

The second model, by contrast, is more *macho* and dominating. If the medium or material (the *matrix*, you might say), is conceived of as the female element (*matrix* = mother), then surely the artist is the male element, bringing it into subjugation. The idea exists first in the mind of the creator, and then somehow impregnates and imposes on the material, causing the object to be formed, as though from the dark womb of the earth. In Janet Frame's terms, the zone of "air and light" now has primacy over the world of "liquid darkness". The chips of stone which the artist removes with his chisel are not, in this view of things, enclosing, or even protective elements of matter; they are obstructions to the artist's realisation, within the medium, of his in-forming, or impregnating design. Nevertheless, behind this apparently male element there may yet lurk something else. For the realisation of inner design within the artist's medium is reminiscent of the infant's creation of breast and world within the medium of the mother's adaptive response. I'm thinking here of Winnicott's account of primary creativity in which the infant's omnipotence is fostered by the mother before it is checked.

These differing accounts of artistic creation, tilted in the direction of male or female, with somewhere in the background the workings of an omnipotent deity or infant might remind an anthropologist of the differing forms of the Creation story within different cultures. The Judaic Creation story, for

example, gives pre-eminence to the male principle: *Yaweh* is a male God and the Creation is a realisation of his grand design. The Spirit of God moves on the face of the waters (the liquid darkness). In other words, the God of light and air is in control: "And God said: 'Let there be light and there was light.' " Each day God created more of the creatures according to his grand design, and ultimately he created Man: " 'Let us', God said, 'make man in our image, after our own likeness!' ... So God created Man in his own image, in the image of God created he him..." (Genesis).

A little later, in this, or perhaps a different story, we are told how "the Lord God formed Man out of the dust of the ground and breathed into his nostrils the breath of life." In this story, God is definitely the Maker and Creator; there is no doubt to whom the credit goes. The role of the earth/matrix/mother is to be a kind of passive material, which is necessary, but has no generative power of its own. All power goes to the formative imagination of the male god/maker.

In contrast to this is the Australian Aboriginal story of the Beginning of Things which I take from the poetic, though perhaps unscholarly, account of Bruce Chatwin (1988) in his book *The Songlines*. Here is an account of creation which is far more matriarchal, although there may be paternal elements too.

According to Chatwin, the Aborigines believed that in the Beginning, the forms of all things lay under the Earth, in the primeval mud. They existed, but had not yet been brought into life. The archaic spirits, the Ancestors, also lay under the mud, waiting for the Sun to warm their bodies (I suppose the Sun here could be seen as the male principle). As the Sun got to work, the Ancestors stretched and turned and broke the surface of the Earth. And once they had been born in this way, they in turn, brought all the other creations into being – into a kind of realised existence. The way this happened was as follows: Each creature had its own song which was somehow specific to it. The Ancestors knew these songs and sang them each in turn. When a creature, lying in the mud, heard its own song, that creature came to life, and rose up out of the mud into the light of day.

The leading idea in this Creation story contrasts with the male-dominated, Judaic account and seems more clearly feminine and maternal: the Ancestors are sensitive to the forms that pre-exist within the liquid darkness; and they know the tunes which they must sing to bring these forms into existence. So like the Inuit artists, the Ancestors are like adaptive and facilitating mothers – they nurture into life the pre-existing forms which lie within the primary material.

It seems then, that there are two different kinds of Creation story, and two different conceptions of the creative process. Each is a drama, and each

involves intense, though different kinds of action, upon inert material. In the first story, the artist/creator has a feminine role: facilitating, recognising, drawing out, that which is already there within the material, in an embryonic way. In the second story, the artists/creator is male and dominant, or possibly infant/omnipotent: it is the form in his mind (in the zone of air and light) which exerts the formative/transformative influence upon more or less receptive or obstinate matter (liquid darkness). Perhaps we could say that in the first story, the key figure is the mother, while in the second, it is the father.

We have then two stores, and two different kinds of relation between form and matter, between male and female elements. In each case there is a creation, but the mechanism of creation is different in the two cases. In the first story, the form is latently there, but fettered and waiting to be discovered, brought forth from within the primary material. In the second, the form also pre-exists, but in free, or *mental* form, in the zone of air and light, within the mind of the creator. In the first story, the form resides in a state of fusion or mix-up with the primary material – (remember Balint (1959) described the baby as existing in a state of “harmonious mix-up” with the mother, and how for Winnicott (1951), the transitional object was also a mix-up of subjective and objective). In the second story, the form is a free symbolic form within the *mind* of the artist or God.

Thus, the problem for the first story is to extricate, or *disembody* the form from its bondage within the physical material; in the second, it is the reverse of this – how to *give body* to a form or idea, which already exists in a free or disembodied way within the creator’s mind.

The distinction between these two activities is crucial, and I shall argue that the problem of *disembodying* a form, at least sufficiently for it to be apprehended, is the more basic problem, for both development and for art. But in both stories, I suggest, something is missing. Neither story fully apprehends what goes on *between* the male and female elements which culminates in the birth of the created object.

I am hoping it may progress my argument if I translate my two stories into the language of symbolic development. When I say there is a form pre-existing in the mind of the artist or of God, I mean that this form already exists as a *symbol* within the experience of a subject. That is actually what a symbol is, in a psychological sense – it is a meaning that exists, at least in some degree, independently of particular concrete situations; it can be carried around, as it were, by the symbol (we do in fact talk about *conveying* a meaning), and used as a tool with which to manipulate or understand other parts of the world. It

may for example, be used to examine and make sense of other objects; or, as in play, as a means of vividly recreating, or summoning up, elements of the world which are not actually present.

On the other hand, when I say that there is a form still embedded within the concreteness of lived experience – embodied in the concreteness of the world – I imply that the meaning of that experience has *not* yet been processed into a form which can be apprehended or used by the subject. The person is still, as far as this meaning is concerned, in bondage to their experience, and in bondage to the world. They are obliged, you might say, to *suffer* their experience; they cannot use it, or learn from it.

I now want to ask how such primary, embodied experience becomes transformed into meanings which can be carried around and used. How is an *embodied* meaning transformed into a *symbolic* meaning? I want, if I can, to forget what Bion has written about this (in fact, much of what he wrote was about this), because in my experience, it is essential to wrestle with the problem in one's own way. It is only now, after struggling with it in my own terms, that I begin to have an inkling of what Bion was trying to describe with his concepts of *a*-function and *b*-elements.

For me, the essence of the transforming process lies in separation – the separation of meaning from experience. This is the sense in which I understand Hannah Segal's (1986) statement, in her paper on symbol formation, that "not only the actual content of the symbol, but the very way in which symbols are formed and used, seems to reflect precisely the ego's state of development and its way of dealing with objects". In other words, as the ego begins to separate from the object – or if you prefer, as the infant begins to separate from the mother – *parri passu*, meaning begins to be disengaged from the concrete situation.

The development of meaning is thus inextricably linked with the development of symbols. Both are a function of psychological separation and both are linked with a growing capacity to tolerate separateness from the object. If this is correct, then the story of symbolic development reflects and parallels the story of the infant's separation from its primary object (Wright 1991).

It is for this reason that I said earlier that the father was the great separator. It is the part he plays in fostering separation of infant and mother which provides him with an equivalent role in relation to symbols and meaning. It is not that the father is the only separating influence in this respect – most of Winnicott's theories of mother-infant separation, for example, hardly mention the father at all. But the father provides a specific underpinning of the process, which makes the separation of meaning from its concrete roots more radical and fundamental than it could otherwise be.

Let me briefly summarise. I started with some concrete portrayals of the creative process, and out of this arose a number of ideas and concepts. Most important is the idea that meaning is originally embedded in concrete situations and objects – for the small baby, all meaning is embodied meaning. It only becomes ‘free’ and useable meaning when it has undergone a process of *disembodiment*, or separation, from these original concrete situations. The process of freeing meanings – in other words, of making symbols – thus parallels the developmental process of psychological separation from the mother, and is subject to similar vicissitudes.

It would follow that the way we use symbols, particularly our ability to generate *personal* meanings and symbols, depends on the way we travelled this early path. If there were problems on that path, so that we cannot freely traverse and re-traverse it when we need, there may be interference with the capacity to generate new symbols. Such a capacity is necessary if we are to contain and organise our changing experience in a personal way. Without it, we would be stuck with a finite set of *received* symbols – those provided for us as a kind of routine tool-kit for survival. Another way of putting this would be to say that if our fear of the regressive pull of the mother is too great, so that we cannot risk dipping back into her “liquid darkness”, we will instead hook ourselves to the father, identify over-rigidly with him and his *external* tool-kit, and abandon the more identificatory means of knowing the world and other people which is the legacy of our early relationship with the mother. This is a recipe for uncreative living and one which we find frequently in patients with a precarious sense of self. Their narratives are linear and bound to reality (the mast of Odysseus), with hardly a trace of imagination or feeling (the ears are stopped up against the Sirens voices).

Perhaps I can now begin to grasp an important dimension of creativity. Creativity is essentially linked with the use of symbols and involves the manipulation of experience with symbolic tools. There are two ways we can acquire such tools, and these are related to the two accounts of creation which I have portrayed. Either the symbolic tools are generated from *within* a person’s experience by *drawing out* its meaning into a state of relative independence; or, they are provided from the *outside*, from the generalised set of symbols which go to make up the wider culture.

The first type of symbol depends on maternal and identificatory modes of knowing objects and is personal and idiosyncratic; the second, or more detached mode of knowing, is linked to the externality and separateness of the father, and uses symbols drawn directly from the general tool-kit. They will therefore match experience less closely than symbols derived from within. One could think of them as being brought to experience *from the outside* and imposed *directly* upon experience, without the mediation of

personally derived symbols. It is as though the personally derived and idiosyncratic symbol acts as a buffer between the generalised categories of the shared symbolic world and the delicate fabric of personal experience. *It protects that experience from total assimilation and conformity to general meaning.*

If we think of the personal symbol as maternal and identificatory, we can think of it as *looking after the self* in a maternal kind of way. It mediates between the world of embodied experience and the world of generalised or separated experience in a way similar to the transitional object. Just as the transitional object protects the infant against too much hard reality, so the maternal symbol preserves the world of personal experience from obliteration by the world of external knowledge, which in a sense, is the world of the father. The maternal symbol gives to personal experience *a place to be* – it validates and authenticates it by giving it a symbolic home. However zany or incommunicable this home, it nonetheless acts as shield for, and mediator of, the personal experience; it allows such experience to come into contact with the general symbols of the culture – the language of the father – and to engage in a kind of dialogue or intercourse with them. Where there are no personal symbols there can be no dialogue, only indoctrination (cf. Winnicott's very similar statement about play); unsymbolised experience is mute, and its place is usurped by the language of the father – the dry tool-kit of experience-distant words.

Seen in this way, the role of the father takes on a more positive aspect. He does not have to be the usurper of experience; nor is he merely guardian of the prosaic world of reality and generalised symbols. He does not merely say: Give up the mother and live in a bleak world without her! – the world of maths and logic, for example. Instead, he becomes one who helps to make possible the expression of a personal world, by exhorting, dragging, pulling the personal symbol into a communicable form. Personal symbols are all very well as private possessions that exist only for ourselves. But the larger worlds of culture depends on the sharing of such symbols and their constant reinjection into the larger body of cultural symbols. This must be the way in which culture changes and keeps in touch with the living experience of its members. If its members could not express their private visions and understandings, there would be increasing separation of culture and individual: individuals would become self-enclosed – each one for himself – and the culture increasingly impoverished. From this point of view, the father is the one who draws the personal symbol into the larger dialogue.

Dialogue, however, doesn't begin with the father: it is there from the beginning, within the protoconversations of mother and infant (Trevarthen)

which shape the embryonic self. It is there in the mother's mirroring that Winnicott (1967) and others have spoken of, and later, in the rich variety of maternal attunements described by Stern (1985). All of these provide perceptual objectifications of the infant's affective experience, and thus a reservoir of potential forms for the elaboration of personal symbols. Such forms of maternal responsiveness appear to be vital for the development of a cohesive self – a sense of being there and alive within one's own experience. Without them, a world of personal experience will scarcely exist; fantasy and dream will be impoverished, impairing the currency of dialogue and communication within the confines of a personal existence.

But for these personal forms to reach beyond the self they have to find a way of communicating. *They have to break beyond the individual and link up in some way with a more general currency of forms.* These are the forms of the general culture – the language of the father – with which dialogue and accommodation have to be made.

My metaphor has changed from intercourse, which is the interaction of bodies, to communication and dialogue, which is the interaction of symbols. This is because creativity involves the manipulation of meanings.

Creative dialogue starts in a presymbolic way – even the baby's feed involves more than the passage of milk from the mother to the infant. The manner of her holding, the sound of her voice, the pattern of her smiles – these are not merely part of the experience; they subtly convey the earliest messages of safety and containment, and are already responses to equally subtle messages from the baby. *If the mother's pattern fits the baby's pattern, all manner of thing shall be well.* If the baby's message goes unanswered, things are off to a very bad start.

All later symbolic activity partakes of this early form. It is about matching and fitting together – or about trying to find something that *will match* the thing which currently feels discrepant. There is a profound need to make things match – ultimately, to bring all things into a kind of containment. This preoccupation with fitting things together doesn't mean that creativity is based on the child's conception of the sexual act. That may become a powerful image of it, because the conundrum of sex is in part the conundrum of how the sexual parts fit together. But the question of fit is ontogenetically older – it starts from the moment of birth and depends on the felt qualities of early relatedness.

If, then, creativity is about trying to fit things together, trying to match them and arrange them into ever more complete and complex wholes, it can only be understood within a currency of symbols. For symbols are the means through which we manipulate experience for whatever purpose. Symbols must therefore, be formed *from* personal experience if they are to have relevance

for the individual; this is a process which starts within the early dialogue with the mother. Within this first stage of development, such symbols are embedded within the actual fabric of lived experience; and they have to be subject to a long process of refinement before they can be linked into a shareable currency of symbols that will have relevance to others. They have to be prized away from the object, set free from it, before they can enter the very different zone of rarified objects which constitutes the symbolic world.

This painful process of separation mirrors the long path of separation which every infant has to tread. And what Freud called the adhesiveness of the libido – which is probably better thought of as attachment – has to be attenuated and made more reversible. Only the infant with a free kind of attachment to the primary object is free to explore the world; and only the symbol with a free and reversible attachment to the ten thousand things is free to dance and communicate within the creative process.

I've tried to argue in this paper, that while the other is the vital early catalyst of the symbolic process, through her lively provision of expressive forms, it is the father, through his drawing out and attenuation of the bond to the object, who ensures participation of the personal in the larger symbolic world. The meaning that remains tied to the concrete object has no freedom in relation to it. The meaning that is emancipated from its bondage to the object becomes the possession of the subject and thus can thus enter the creative dance.

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THE BODY AS INSTRUMENT

MARILYN A. F. MATHEW

Introduction

The relationship of body with soul has long been a fascination for me. In this paper I'm going to be considering the body of the analyst, concentrating on the physical experience of counter-transference. This is an exploration into the skin, bones and guts of our work in the hope of understanding more about how our bodies are used as instruments in the service of the psyche.

The body is clearly an instrument of physical processes, an instrument that can hear, see, touch and smell the world around us. This sensitive instrument also has the ability to tune in to the psyche: to listen to its subtle voice, hear its silent music and search into its darkness for meaning. Our bodies can be the instruments which receive and transmit communications ranging from the clearly conscious to the deeply unconscious; but they can also be the instruments of process: *the location and means of the soul's healing*.

It was really my first training patient, Joe, who introduced me to the physical impact of counter-transference. He managed to induce in me a number of powerful bodily feelings. Amongst the first of these were physical sensations of cuts across the skin, anal-erotic violation and excruciating period pains.

At the time when it began, within the first few weeks of therapy, I wondered if the embodied sensations were a product of my over-active imagination, but as my patient brought them regularly with him into the sessions, and took them away with him afterwards, it was clear that they were a serious unconscious communication.

At first I understood them to be metaphors for his psychic reality - the cuts in the skin were animal-like attacks on the boundary; the anal-erotic intrusion was a sneaky way of getting into me behind my back; and the period pains were assaults on maternal creativity, the *temenos* of the womb. This understanding seemed to mirror his dreams and fantasies, and to hold good. But as time went on, there was something about the physical aspect which still puzzled me, and remained a mystery.

My patient was a pretty borderline character... perhaps that had something to do with the very concrete way I experienced him in counter-transference. The period pains seemed to be about the frustration with his mother, his three stillborn siblings, and his conviction that his penis was a dagger. But the cutting and the anal-erotic sadism had another root as well.

It was after many months had passed that Joe showed me the secret scars on his back. He'd never dared look himself, but what surprised me when I saw them was that it was no surprise at all. Neither was it a shock when years later he confessed to a brutal anal punishment ritual. It seemed that I already knew it wellbut how?...and why?... was it he who had put the sensations into me?...Or was it I seeking out his secrets?...Or was there a more mutual exploration going on in our unconscious, a sniffing out of each other? Had this all been a kind of foreplay in the process of *conjunctio*.

Why are some communications experienced at a physical level? What does it say about me as a therapist... or the person I'm working with... or our complexes and sub-personalities... or the analysis we are in together... that a psyche struggling for containment, understanding and healing makes its presence felt in such a concrete way?

Our physical sensitivities to other people are well known, and part of our everyday language: we have gut feelings, cold feet, itchy feet, legs that turn to jelly, Someone can make me sick, be a pain in the neck, get under my skin, make my toes curl, send shivers down my spine, touch a raw nerve, set my teeth on edge, set my heart on fire, smooth my ruffled feathers, give me earache. And some patients in the consulting room can certainly set a metaphor in stone!

We are used to considering affects, fantasies, acting out and dreams in counter - transference, but the arena of our bodies is a less well explored end of the spectrum. Yet I would agree with Jung when he wrote (in a letter to Henry Murray in 1935):

'Body and spirit are to me mere aspects of the reality of the psyche. Psychic experience is the only immediate experience. Body is as metaphysical as spirit'
(June 1973)

Outline

I'd like to begin by considering the various languages and channels that the psyche uses with the body in mind. Then follow with some clinical examples where the body is used as an instrument, focusing especially on the therapist's somatic counter-transference. Finally I'll spend some time considering how and why unconscious communication occurs.

How does psyche speak?

The psyche gets in touch with us in the form of mental images in dreams and nightmares, fantasies and visions. It may speak in accidental slips or works of art. Or it may write its message across the body in spots and rashes, lumps

and bumps. And if the message is really important the psyche may broadcast on all channels, combining dreams and physical symptoms.

The meaning of these encoded communications, if it is to be found, depends on our willingness to catch hold and play with the nebulous and confusing 'stuff that dreams are made of', demanding both the keen nose and sharp eyes of a terrier, the blind faith of a mole, and the patience of a saint.

Each of us will have our own preferred way of making sense of our patients' communications. I might make sense of some material through bodily experience, but another therapist could come to exactly the same conclusions in another way.

I understood something of what was going on in Joe's psyche through the very disturbing physical sensations erupting in my body during sessions. Another analyst, interested in language came to precisely the same point through the word play of one of Joe's dream.

In the brightly coloured dream, Joe had rescued a baby boy from a four-wheeled pram which was about to tumble into a swimming pool. He was sitting in the sunshine holding the little man on his lap.

Where I had physically felt the gashes of the four weals and sexual intrusion in my body, the other analyst had caught the language of the 'four wheeled' pram and the 'little man' on the lap. We both independently came to the same conclusion - briefly, that as a result of early trauma, compounded by a rickety maternal container, Joe had learnt to hold onto his penis, using masturbatory fantasies as a way of saving himself from falling into the watery abyss of madness.

Well, I've described what first introduced me to this area. Now I'd like to consider the different channels the psyche uses to tune in to us paying particular attention to the body.

Psyche's channels

In order to locate psyche's channels of unconscious communication at the instinctual end of the spectrum, I'm going to use Jung's matrix to distinguish between the different kinds of interaction that go on in an analytic relationship.

It's a diagram I'm sure you're all familiar with:

THERAPIST		PATIENT
Conscious	to	Conscious
to	to	to
Unconscious	to	Unconscious

Patient's conscious - Therapist's conscious

We all know about the impact that takes place at this conscious -to- conscious level.

For instance: Fiona, returning to therapy after a summer break, storms in visibly furious with me. I have moved house. She hates my rented consulting room with its few token relics of my old home and spends the first few minutes shouting at me.

Physically, I have shrunk back into my chair, I'm holding my hands tight with my legs crossed and my head lowered against her thunder. My heart beats faster and the adrenaline pumping through my veins is telling me to get ready to fight or flee. But I sit there, taking the onslaught, observing my reactions and remembering the frequent and destabilising moves her family made all over the country when she was little, when she felt she had no say and could not protest. I feel defensive, battered and guilty under the barrage, as well as somewhat relieved that it's out in the room for us to grapple with.

And that is the nature of this communication: it is out there in the room between us. The rage has a verbal language which we can both use to talk about what we think and feel is going on.

Patient's unconscious - Therapist's conscious

Another familiar form of communication, unspoken this time, comes along the patient's unconscious-to-therapist's-conscious axis. This is often fairly immediate in its impact and sometimes not too hard to interpret.

The same young woman, Fiona greets me on the doorstep several weeks later with a broad grin. I feel irritated by her brightness and by her being a few minutes early. She waits for me in the consulting room and I wonder why I'm suddenly feeling so intolerant. It's very cold outside and she has no car, and I'd been feeling rather mellow until she arrived.

When I walk into the room, Fiona laughs and jokes in a light-hearted way that I must be colour-blind to have arranged the room the way it is. Instantly I feel the heat and colour rising in my cheeks and I'm struck by the most vitriolic uncontrollable rage. It's so strong it shocks me, so at the same time that I'm furiously biting my tongue in order that I do not spit at her, I am working double hard to think about where this has come from. I don't think it's all me. (Although I love colours and did feel hurt by her suggestion that I was colour-blind... the rented room *is* a sartorial disaster area and even the fresh flowers have not transformed it as I would have wished....) but most days I would have felt like agreeing with her - that the colours were pretty ghastly.

I tell her that although she's joking, I feel there might be a sting in the tail. Could it be that she is angry with me for some reason? After a brief pause she bursts bitterly into tears and says yes she is angry - very angry with me. She is furious because I have fresh flowers in my room. I have so much that she wants (rings on my fingers, a family, a house etc. etc.). Once she finds a voice for her fury the rage in me vanishes and I relax.

There seems often to be a bodily response when we hit the right note. The physical equivalent of an 'ah hah'. Maybe a sigh or a release of tension, a smoothing of furrowed brows, an easing of the heart rate, muscles relaxing, a bit of peace after a climax.

This time it was possible for me to collect and process my objective bodily response to my patient's unconscious material fairly quickly so that I could offer it back to her during the session. She was able relate to her fury consciously so that we could think and talk together about how much I was like her much envied older sister. The zone of thought had shifted from her unconscious to my conscious and back to her conscious mind.

I've described two instances where a patient triggered a physical reaction. These were objective body experiences. The objective body is the material body that sneezes, blushes and trips up. It was my objective body that responded to Fiona's rage about the flowers. But there is another way of gathering information, and this is through the subjective body. By the subjective body I mean the body which is an imaginal representation of ourselves, the body of our mind's eye that describes how we feel about ourselves through a mental image.

For instance: Cait, at the beginning of her analysis, speaks softly about herself, her childhood and her father. She is intelligent, articulate and is insightful, and I feel as though she's firing a water cannon in my face. My physical body is functioning perfectly, I'm not blinking or feeling the force of the water on my face, but in my mind's eye I have an image of being blasted with the water cannon, and a strong impression of not being able to approach her, see her, hear her or even breathe easily. She appears to be quite open towards me, yet it's underwritten with a forceful unconscious 'stay away!', and my capacity to link thoughts is shot to pieces.

I was denied what Kohut (1978) calls 'vicarious introspection'. Any idea that I had of being able to 'feel into' my patient in empathy was impossible. With Cait it was the water cannon effect, but it might well have been an enchanted sleepiness or the kind of stupefaction that makes one feel woolly headed, or being thrown off course by utterly fascinating red-herrings (like patients who drown you in floods of dreams).

She didn't of course have a water cannon in the room, and she was not surgically getting into my head, but the image constellated in my subjective

body felt as if she was and gave me a good idea in counter-transference about how terrified she was of what I might do to her, should I come close.

I've mentioned events which occur in the room with patients, but a great deal can go on outside of sessions. Many communications do not come to light during the fifty minutes we meet together. Sometimes they will surface in the precious ten minutes before, after or between patients, or will lurk behind after 'lights out'. Certain patients will leave their own characteristic impulses behind. I am sure I'm not alone in finding myself occasionally compelled to raid the fridge, regiment all the objects on the mantelpiece, shine the brass doorknob, bleach the sink, pee or shit, or scrub the kitchen floor, or save a bit of vicious wickedness to dish out to a beloved on their return. Some 'left-overs' take days or weeks or months to surface and some, I imagine, we are never fully aware of.

So far, everything has surfaced without too much difficulty, but the deeper we go, the trickier it gets.

Patient's unconscious - Therapist's unconscious

Activity between the analytic couple at a deeply unconscious level is much harder to know about. Intercourse in the underworld is where the true heart of our business lies. But in this foreign realm, how do we get to know about the fusions, separations and *conjunctios* that take place between the two people in analysis? Knowing about what goes on in this darkness requires using our most sensitive instruments, our most inaccessible mental and physical capacities. It means allowing the ego to be sacrificed, and our wounds to be re-opened.

So how do we know what goes on here? Bubbles from the depths of the unconscious can rise to consciousness through any of psyche's favoured routes: dreams, nightmares, waking fantasies, play, enactments and acting out and somatisations.

Let me give a few examples of patient -to- therapist unconscious -to- unconscious communication which have found different ways of becoming visible with the body in mind.

First of all there are dreams about the body: Alison dreams that her analyst is disclosing her vulnerabilities. In the dream the analyst reveals a scar running from her right breast up under her armpit where a cancer has been removed. Although she's used to understanding dreams at a personal level, this is a dream which Alison recognises as having a 'collective' feel to it. She suspects her analyst really has had breast cancer. Next session she risks telling her that through the dream she *knows* her analyst has had a cancer in her right breast removed. Alison is right - she has.

Then there are bodily communications delivered as waking fantasies: Driving along, Satchi suddenly imagines - does not feel, but imagines subjectively in her mind's eye - an explosion in her head and for some reason thinks something is terribly wrong with me. The timing of her fantasy coincides exactly with my daughter's stroke.

There is play, becoming the child and speaking through toys: Joe, at this point, had been in therapy four times weekly for two years, and we had come a long way. But, something was missing. He seemed to be pining for something - but he didn't know what. *One day I listened to the umteenth time about how he'd always wanted a train set and how he missed not having a childhood like his friends.* The next session I brought the big duplo lego down from the attic and put it on the floor by the couch. My patient spent the next year sitting on the floor making scenes with the toddler bricks and characters while I looked on. He was able to use the duplo scenes to say what he did not have words for. He played alone in my company, each session taking the previous scene apart and rearranging the theatre around the little duplo character that was his toy self.

Then there are physical enactments: After eighteen months of work together Cait began to fade from her sessions and then without any word one Christmas she disappeared without a trace. No word came and there was no response to my concerned letters. She owed me a months fees and it seemed to me that this was a way of not letting go, so I was rather disappointed when finally an envelope arrived containing a cheque but no message. Months passed and I felt sad and something of a failure that I'd lost her because I'd enjoyed working with her and I knew there was a great deal of unfinished business... perhaps my enthusiasm has scared her off. Then one day, nine months later, I decided to have my hair cut short and dye it bright red. As I poured the colour over my head I *thought about my patient*. What would she say if she saw me now, I chuckled to myself, I've copied her hairstyle! Three days later the phone rang. It was Cait. Could she come back?

I've touched on dreams, fantasies, play and enactments as channels through which the psyche can speak, but the area I really want to focus on is the instrument of the body.

Tiger

In order to describe the phenomena of somatic communication in the unconscious, I'm going to talk about a young woman in her early thirties who I call Tiger. We have been working together three - now four - times weekly for three and a half years. The therapy has been incredibly demanding and she has enabled me to learn a great deal about unconscious communication at a

physical level, how to survive it, and what meaning might be made of it.

I liked Tiger enormously right from the beginning, although it is hard to understand quite why. She seemed utterly bedraggled and venomous. Polite, but clearly furious, bitter and spiteful; viciousness and passion springing all over the place. All sorts of attempts to understand herself had ended in failure, her previous therapist falling ill. However, I was attracted by her liveliness and stubborn tenacity and, no doubt, over-enthusiastically caught up in a mad heroic rescue fantasy.

It was just as well I did feel so positive in the beginning, because otherwise it would have been impossible to hang on through the acid storms that were to follow!

Tiger always did find it difficult to begin a session. After a grunted "Hello" in response to my welcome she would sit immobile on the couch, head turned pointedly away from me, the room bristling in silence. Usually, after a few minutes, I might wonder how she was feeling. At first it might provide an opening, but after a few months it deteriorated to a sarcastic "Fine". Full stop. Nothing more.

Then, predictably after a break, Tiger stopped speaking to me altogether. I spent months working hard bearing her silence, interpreting her speechless rage and her averted head - all to no avail. I tried opening myself in an imaginal way to feel where she was and was met by images of rotweilers savaging my face.

These frenzied images lodged themselves in my mind, and like a dream that won't be shaken off, the rotweilers skulked around my waking thoughts. Sometimes holding an image in mind enables it to develop or the attention can aid an understanding, but I wasn't getting anywhere.

At the time I was attending an infant observation group, and as synchronicity will have it, an interaction between a mother and her small son seemed to amplify the image.

One of the babies presented in the group was a little boy called Robin who was 18 months old and who's mother was expecting another baby. He played peepo with his mother with a tea towel, and there was an aspect of the game that struck a chord with Tiger and the imaginal rotweilers.

Robin would cover his head with a tea towel and be pleased when his mummy pretended she couldn't see him. Then he'd cover his mummy's face with the tea towel, and the game took on a very different tone. The giggles gave way to something much more serious as he lunged at her face, teeth open to bite her cheek. Good breast and bad breast were taken a step further!

It seemed to me that Tiger was turning her head away from me and thinking perhaps that I was blind to her vicious attack, putting a 'tea towel', so to speak, over my head. I continued to struggle with the images, now enhanced by the

description of Robin and the tea towel. Tiger was never far from my thoughts, but things were not getting better.

It wasn't long before the grunt on the doorstep vanished too, and I began to really dread her arrival, feeling as if I'd been mauled every time I said goodbye. Why go on, you may well ask ... *I certainly wondered why!*

Well, there were reasons: First, I never lost sight of the fact that I had liked her so much in the beginning. Second, she kept on coming, and I certainly wasn't going to be the first to give up! Third, I could not get her out of my mind. And fourth, very important: my most schizophrenic cat, Pepa, utterly adored her. She somehow tuned into Tiger's session times and would wait outside on the doormat for her, either rolling over for her tummy to be stroked, or racing into the consulting room quick as a flash ahead of us. Once in the room Pepa would jump onto Tiger's lap purring furiously. My very standoffish cat would be all over her, nuzzling and rubbing noses, occasionally shooting me a triumphant but rather guilty 'look who I've got!' glance. In these precious moments Tiger was completely transformed, and I got a glimpse of the tenderness she hides. This tenderness, though, was reserved for my familiar, the cat. I got the usual toxic silence.

In spite of understanding, I thought, something of Tiger's rotweiler savagery, and thinking and talking about her endlessly, nothing seemed to be changing, in fact the therapy seemed to be totally running aground.

In the endless weeks of silence that followed, I began to get earache in my left ear. Not in sessions particularly, but all the time. It got worse and worse and *I turned up at my GP's*. Nothing wrong, she said, and gave me pain killers. The pain became unbearable and I returned to the surgery three times the following week. The painkillers were useless and I wasn't sleeping. If this didn't go away I was going to put my head through a wall! What was it? A brain tumour? *I needed a name for it and to know why it hurt so much.*

In desperation I returned a fifth time. I saw a new doctor who looked beyond the ear and wondered about referred pain. He thought a muscle might have gone into spasm and sent me to a physiotherapist. The physiotherapist probed around and discovered part of my neck had turned to rock. *It was one of the muscles involved in turning the head that was the problem*, and as she worked on the tortured flesh, my mind filled with the image of Tiger's silent defiant rage, her haunted face turned hatefully away from me. And gradually something began to fall into place.

It was not I who had my head turned fixedly away for hours on end, it was Tiger, and yet it was my muscle that had seemed to somehow incarnate her frozen attitude resulting in excruciating earache... and the pain in the neck. The image of the averted head, unlocked from its muscular prison was the emerging symbol that enabled meaning to be released from the unconscious

linking of my body with Tiger's.

As Jung (1959) said:

"The formation of symbols is frequently associated with physical disorders of a psychic origin, which in some cases are felt as decidedly real... The symbols of the self arise in the depths of the body, and they express its materiality every bit as much as the structure of the perceiving consciousness. The symbol is thus a living body, corpus et anima"

I recognised that Tiger's deafening silence was giving me earache. This pain in the neck of a patient had got much further under my skin than I had realised, in a very concrete way. She was damaging me, but also giving me the opportunity of discovering more about myself with her. I decided that if I was experiencing a psychic infection at a physical level, that I would address it with some physical therapy. It has been fascinating to discover what comes to mind as the body is worked on - giggles, terrors, sadness and sweetness all have their territories in the skin, muscles and bones of the body...but that is a story in itself.

All this went on behind the scenes of Tiger's therapy - she has no idea of the frantic work that has gone on in the wings on her behalf! At least she has no conscious idea.

Along with the healing of my neck and the easing of the earache, something between us began to change. Tiger began to talk to me again and the atmosphere in the room gradually lost some of its prickles. There were little rays of sunshine when she talked about her love of the sea, the natural world, the butterflies and forests and the terrible damage we are doing our earth. She has managed to look at me directly for the first time. I have seen a smile and this Christmas, although I know she had been struggling for ages to find the words she thanked me for everything I have done.

Now zoom ahead to the first session after the Christmas break. As soon as Tiger comes through the front door, before she said a word, I notice a sensation in the back of my head. It's a curious and physical feeling, as if some sort of receptive field has fanned open like a peacock's tail behind me, or several periscopes have grown out of my head. At the same time I notice that my eyesight has altered, broadening my field of vision. I'm reminded of the expression 'I've got eyes in the back of my head'. It isn't a new feeling and I associate it with being extra-receptive. The unusual thing about today is that it happened so readily and I'm surprised because it makes me feel somewhat undefended. Tiger returning after a break can be so icy.

Tiger says something has changed, she doesn't understand how but she feels different. She says it and I feel it. In the almost palpable atmosphere between us. It feels to me as if her spiky porcupine quills have become smooth and soft. My breathing slows, I'm aware that I am centred in my solar plexus and

I notice a dull ache developing in my heart.

Tiger has spent Christmas and New Year with her dog in the deserted family holiday cottage by the coast. The temperature dropped down to minus twenty one degrees in the freezing wind and there was no central heating. She braved the snow and loved the beautiful white stillness but felt such confusing emotions. I felt something in her was dying and letting go. Tears rolled down her cheeks as she described the frosty home coming, and the beast she had been to her mother. She seemed such an unwanted baby. Perhaps that is why she made me into the ferocious Mummy Tiger who will fight tooth and claw for her survival. The ache in my heart deepened and the quality both physically and emotionally became more profound as the session continued.

James Hillman's (1984) paper 'The Thought of the Heart' came to mind. In this paper he describes three kinds of heart. The first is the 'Coer de Lion' which comes from folklore, astrology and alchemy - Coer de Lion is about humanity, the courage to live, about strength and fierce passion. The second heart he calls the 'Heart of Harvey'. Harvey produced a seminal volume about the heart and the circulation of the blood in 1628 and so the heart of Harvey is the organ of the body, a muscle, a pump, an intricate mechanism and secret holder of death. Finally, the third is the 'Heart of Augustine' - the heart of love, and of feelings, the locus of the soul and sense of person. The place of intimate interiority, where sin and shame and desire and the unfathomable divine reside.

James Hillman talks about the heart as being an organ of perception through an aesthetic link. Has my aching heart in Tiger's sessions an image? Visually, no.....but poetically, yes, I was feeling Tiger's broken heart as a physical ache and mental anguish. I recall the quotation from Paracelsus which James Hillman used:

"Speech is not of the tongue, but of the heart. The tongue is merely the instrument with which one speaks."

Clearly there are three important questions to be discussed about why Tiger's therapy has taken this form. First there are issues that concern Tiger and the difficulties she is grappling with, then there are issues that concern me and why I might be receptive to somatic counter-transference, and finally, as a third area, there is our combined chemistry.

Tiger and her difficulties

"Why was I born!.....I should never have been born!", was Tiger's constant theme. She is utterly convinced she was an unwanted baby. Whatever the truth of this, there was certainly a needy snarling despised unwanted baby inside

her. And we went through a phase when I dearly wished she would abort herself. Tiger was a small vicious paranoid monster desperate to be held firmly and kindly, and terrified that the growling which scared everyone off would be too much for me too. I often found myself relating the story of Androcles and the Lion. She was roaring because she was in pain, I'd tell her. Behind the bundle of venom and claw I saw a bedraggled half drowned kitten.

Tiger is the fourth and youngest daughter. She has three step-sisters from her mother's first marriage, who are the apple of her father's eye. He is a smart, secretly alcoholic man, many years younger than her mother. She is a timid but clever businesswoman, devoted to her church and a passionate gardener, generous with a cheque book but deaf to Tiger's emotional needs. The whole family were traumatised when the favourite son-in-law was unexpectedly murdered. Tiger often gets premonitions, as she did in this case, and was outraged that her good, kind, innocent brother in law should have been murdered. "It should have been me!" she sobs "I'm the loser!". It appears that the shock of the bomb was the final straw, fracturing her life, tipping her out of work into depression and out of her relationship back into the family home. She slowly withdrew from humanity and clung to cannabis as an anaesthetic until her agony drove her to betray the family code and seek help. She saw a counsellor who then referred her to a psychotherapist. The therapist became ill and Tiger became convinced that no one could cope with her.

Tiger has always felt abnormal. She was referred to a psychiatrist at school because she never smiled, but the appointment was never followed up as her mother considered it shameful to be what she calls 'mental'. She has no memories of being small and cannot relate to photographs of herself as the smiling toddler in her sister's arms.

There have been relationships with men - one lasted eight years - but Tiger loses herself in their lives. She recognises that in many ways she has never left her mother.

Tiger found it very hard to trust me, or relate happily to any human being, but she did relate incredibly well to my cat, and relationships with cats are particularly interesting to me. When I was involved in ante-natal groups, one of the things I discovered was that pregnant women share common dreams. By far the commonest dream is of giving birth to kittens. Cats are baby sized, warm, cuddly and will go to sleep on your lap. They love being stroked, and invite physical contact. They have soft paws but cruel claws. They are born blind and like human babies are totally dependant on their mothers. There is definitely a strong element of an animal nature in the therapeutic relationship with Tiger. Look at the name I give her, and the relationship with Pepa my cat. The living world for small defenceless creatures is defined by an empathic link of mind, heart and gut expressed in physical contact, sound and tone

rather than words.

It seems that the Tiger's unwanted baby had managed to implant itself deep in my psyche and soma. Both Thanatos and Eros had become incarnated in my self: body and soul. Thanatos had struck as a pain in the neck, and excruciating earache challenging my physical strength to withstand her poison. Counterposing Thanatos. Eros had pierced my heart, making sure that I cared about her because she couldn't. Maybe the intense somatic experience is a clue to Tiger's troubles. If they lay rooted in a time before speech or image had meaning, maybe she had to recreated the world of a new-born baby in the relationship with me. A world where psyche is soma in a very concrete way.

Me and my body

The next question is to do with me. Clearly not every therapist works with counter-transference, particularly at the somatic end as I do. So what is it about me and my body?

Tiger managed to find her way through to a particular weak spot in me, an unhealed wound in my psychic skin where several borderline tendencies meet - the line between body and soul, the line between me and you and the line between conscious and unconscious.

When I was little, I experienced others only too easily as if they were myself. My protective feathers had no oily sheen and I'd soak up other people like a sponge. Then if I anticipated something in a dream, I thought that I had actually caused it to happen. On top of this, when my unconscious felt I was heading for something that was going to be unbearable, that I had no say in, it would do me the dubious favour of speaking through my body. So I managed to produce measles, tonsillitis, earache and roaring fevers whenever there was an exam to be taken. Conversely, illness could be held off until I could afford to be ill - a phenomenon many of us find in holiday breaks!

In fact it was the combination of a numinous dream and physical illness which drew me into training with BAP. A dramatic nightmare combined with a pre-cancerous condition of the cervix made me realise that the gate to the underworld needed attention. Psyche was demanding that my life took the direction I didn't dare imagine and everything was turned upside down so I could work at this coal-face.

Gerhard Adler wrote:

"To be wounded means also to have the healing power activated in us: or might we possibly say that without being wounded one would never meet just this healing power? Might we even go as far as to say that the very purpose of the wound is to make us aware of the healing power in us?" (Adler 1956)

Analysis and therapy can heal some wounds leaving only the faint whisper

of a scar. Some wounds we know only too well. Others are obscure, needing a lot of untangling before we can give them names or comprehension. And there are wounds that the analytic process opens up and does not or cannot heal. These are the wounds we learn to live with, and in the best circumstances, learn to use. These are our curses and potentially our greatest blessings. Knowing about these enables us to be in touch with our patients.

Much of the work in my own analysis was about being able to identify myself with the reality of my body as well as my dreams, and sort out the confusion between the two. I realise that I fled from the material world because my psychic skin, experienced concretely as the skin boundary of my body, felt too thin, too vulnerable, and could be breached too easily. This is an Achilles heel so to speak and where a wounded healer in me resides.

Being damaged and living with it - not being totally healed but healed enough has long been the requisite for a therapist. As James Hillman reminds us:

"Healing comes (then) not because one is whole, integrated, and all together, but from a consciousness breaking through dismemberment." (Hillman 1979)

Asclepius is often considered the archetypal healer, but in Tiger's case I am more interested in his mentor, Chiron the centaur. Chiron was born after Chronos, in the form of a horse, had coupled with Philyra. But his mother couldn't stand the sight of her baby's monstrous half-equine, half-human body and abandoned Chiron in infancy. Chiron grew up to become the wisest and kindest King of the Centaurs and foster father to many heroes like Achilles, Aeneas, Heracles, Jason and Asclepius, instructing them in medicine, hunting, ethics and music. Chiron was particularly gifted in medicine and surgery, reconstructing Achilles' damaged heel with a bone taken from a giant. His nature combines the animal and divine, but for all his wonderful medicinal skill this god could not cure his own poisoned wound. Finally, unable to bear the excruciating pain, but being immortal and unable to die, Chiron exchanged mortality with Prometheus and was set among the stars as the archer, Sagittarius.

Chiron joins the instinctual and spiritual worlds together with wisdom and vulnerability. It is the primitive wisdom of an animal nature combining with a faith in Tiger's ability to find a hero within that Chiron works in the therapy.

You've heard something about what Tiger and I brought individually to the work. Now I want to concentrate on the chemical reactions of our substances combining, and how I made sense of it.

To begin with. I would like to consider some of the different ways of thinking, and knowing.

Thinking and knowing

First, operating in a very conscious way, taking its name from the god Apollo, there is 'Apollonic' thinking. It's very clear and intellectual - a great way of making sense of a plethora of feelings, sensations and intuitions. Apollonic thinking shapes many a fine interpretation. It can be brilliant and liberating in its sharp sight, or it can be used as a defence against feelings and experience. It's a bit like the illumination of a powerful torch - a bright light with a deep shadow.

Secondly there is a more fluid quality of thinking. A way of thinking that plays with metaphors, images and symbols. This can be a tremendously creative way of giving voice to a thought which is trying to find its words, or giving shape to an archetype which is trying to find its image. Working and playing in this imaginal day-dream way demands unfolding the mind to fantasy and seeing what happens - a bit like going into a dim cave and waiting for your eyes to become accustomed to the darkness. Here, if we are able, we can play on the shores of the unconscious, and some analytic couples can meet each other here, as Nathan Schwartz-Salant describes.

He uses Jung's term 'subtle body' to describe an almost visible, almost tactile field of psychic energy that is not tied to the physical body. A subtle body has a life and autonomy all of its own and can lead an imaginal life with imaginal relationships. Schwartz-Salant writes:

"Two people can become aware of a state in which their subtle bodies are interacting. This often felt as a change in the quality of space between them, it is experienced as energised and more material in nature. They are then at the threshold of an awareness of archetypal process, a mundus imaginalis." (Schwartz-Salant 1986)

Following on from imaginal thought, our mind can sink down through a lightly hovering attention, and open into a deeper meditative state of mind, akin to trance or reverie. This is a form of blindness where we are barely awake and have to rely on an unfamiliar collaboration of senses. Now we are in the shadow-lands, on the farthest reaches of our conscious world. Engagement in this twilight realm occurs below verbal or visual thought, and can remain as invisible as the wind. Time changes, Chronos gives way to Kairos. The relationship is now utterly unrestricted to the analytic session or the few hours either side. We tread in this territory on a wing and a prayer, in spite of our wide-awake selves.

As far as Tiger was concerned, Apollonic thought was usually meaningless. And she found it impossible to symbolise - there simply was no 'as if'. I tried to find a language in which we could talk about the patterns that were being repeated inside and outside of the consulting room, but all I would get (when

she did decide to respond), was: "I don't understand, I don't know what you're talking about". Or she'd twist my words so I'd get thoroughly tangled up, and then I wouldn't know what I was talking about either. I had the hope that the words I struggled to put together would filter down to her unconscious but there was never any sign that they had gone anywhere.

Eventually I gave up being the clever thoughtful analyst, full of mouth-watering interpretations that would only get spat back in my face. For all the effort that goes into finely assembling and offering up them up as a delicacy, interpretations can be a worthless, even inedible food, serving nothing but the therapists ego. If I cooked up any juicy interpretations for Tiger I learnt to eat them by myself!

So intellectual thinking got us nowhere, and she couldn't join in active imagination with me, but I thought at the time that the work I was doing at the imaginal level with the fantasised rotweilers might make a difference. It was certainly hard enough, but I was fooling myself.

I knew that working with Tiger was tougher than anything I'd come across before. It meant sometimes drawing a protective magic circle around myself or invoking the power of prayer. It meant laying down the law, fighting her, being furious with her, being afraid of her, being afraid for her, being exasperated and feeling useless. It meant facing the fact that she may well rubbish all our work together by wiping herself off the face of earth.

Apollonic thought and image were redundant until I could understand more about her world. How, then, was I to really know - know in my heart rather than in my head - about the experience of being Tiger, if I could not join her inside this concrete participation mystique? I think she needed me to feel physically hurt, to feel useless and unwanted and survive her demonic poison. If I could not join her in her world, I was to be useless.

The lion's share of work with a borderline personality is struggled with and achieved using the working knowledge of our own borderlands, and seems to happen regardless of our conscious will.

It is here, in the confused, merged unconscious -to- unconscious area that the heat of the action with Tiger took place. Here is where we get a chance to get to grips with some of the more toxic infections or sympathetic symptoms - both psychic and somatic - set off in us by our patients and where the battles and resolutions of the transcendent function take place in their fiercest forms. Here is where we are blessed as well as cursed by our vulnerabilities, and here is where we might hope through the positive re-opening and deepening of our wounds to really make a difference.

Along the axis between our unconscious and conscious is where we struggle to survive and make sense of the bubbles that rise from the depths as counter-transference experiences, trying to discriminate between what is and what is

not me. We often wince when we talk about borderline states, focusing on the difficulties and intensity of working in this area, yet we learn so much from them, and they provide us with incomparable opportunities to work on ourselves!

Those of us with 'borderline' characteristics do not have a solid wall of steel between the land of dreams and the land of the rising sun, nor between imagination and reality, nor between 'I' and 'thou' or me and you, nor sometimes between psyche and soma.... The borderline is not so much an iron wall as a colander! This can be a terrific handicap, but if the ego can find enough strength to think, being sensitive along the borderline of the psychic skin can be pretty useful.

I'd like to suggest a way of thinking about what I call 'the psychic skin' as a way of getting to grips with the experience of non-verbal, non-visual communication.

When there is nothing going on to excite it, our psychic skin is identified more or less with our physical skin. When we meet another living being, our psychic skin springs into action - rather like curious cats whiskers. Depending on what is out there we can send out psychic feelers to explore, receive information or retreat, a bit like an amoeba does with its pseudopodia. When our psychic skin touches another's there's an exchange of energy and information. Somewhat similar to Fordham's deintegration - reintegration (Fordham 1957), we then take it back to mull it over, taste, digest or spit out. It's a way of describing a sensory system based on our animal instincts. Perhaps something of this nature happened when I saw Tiger for the first time after Christmas when the back of my head felt so strange.

This is quite different from empathy. Empathy is commonly thought of as the process where we might feel what it is like to stand in someone else's shoes. Nathan Schwartz-Salant makes an interesting distinction between two different kinds of empathy: psychic empathy and somatic empathy. Writing about psychic empathy, he describes it as a

..."process in which there is an observer (the analyst) acting upon a field of information, the patient's psyche." (Schwartz-Salant 1982)

However, closer to the somatic pole of the unconscious he observes something which is closer to the operation of the psychic skin. He describes this as:

..."very much a function of mutual participation in which both psyche's operate simultaneously." (Schwartz-Salant 1982)

Less a process of projection than a shared participation mystique.

The difference between the way I understand Schwartz-Salant's subtle body experience and the psychic skin / somatic empathy experience is that subtle

bodies can find image or voice. Psychic skin is a primitive precursor, having no words or image, but a jumble of mental and physical feelings. An experience of the archetypal before image reveals it to our perception.

Perhaps the strength of the chemistry with Tiger was that we recognised unconsciously in each other a willingness to explore this primary connection. After all, I am passionately interested in the state of pregnancy and Tiger is desperate to be a wanted baby. Perhaps that is why I felt her kicks so physically and why she is never far from my reverie.

Nathan Field has an interesting angle on this. He says it is:

...not simply that we can enter into states of merger; but that we already exist in a state of merger. From the point of view of consciousness we appear separate individuals with a regrettable tendency to lapse into fantasies of fusion; but if we look through the other end of the telescope we will see that the fact of our connection is primary and that our sense of separateness is sustained by a system of defences that differentiates us from one another" (Field 1991)

In thinking about the somatic pole of the psyche, I could not ignore the work of one of Jung's younger contemporaries. Wilhelm Reich was another of Freud's 'sons'. And although he and Jung were chalk and cheese as far as personality goes, the two men shared some striking similarities.

Like Jung, Reich felt that mind and body were aspects of the same thing (Conger 1988). Both were fascinated in the electrical charge of the skin and the impact of emotions on the charge. While Jung focused his life's work more on the spiritual pole of the psyche, Reich concentrated on the other extreme, the body. Reich was something of an alchemist. He literally boiled earth in retorts and measured his experiments with geiger counters. He extended the concept of libido into an idea of a collective sexual energy and identified an immense cosmic energy field he called the orgone ocean. While the rift with Freud and its subsequent breakdown left Jung with the label of mystic, when Reich broke down after his split with Freud he was considered a lunatic, and it dogged him for the rest of his life. Maybe the study of the bodily aspect of psychic energy fell into the shadow along with Reich's reputation.

In fact, Jung had suggested that the body could be viewed as the shadow. He says:

"We do not like to look at the shadow side of ourselves; therefore there are many people in our civilised society who have lost their shadow altogether, have lost their third dimension, and with it they have lost the body. The body is a most doubtful friend because it produces things we do not like: there are too many things about the personification of this shadow of the ego. Sometimes it forms a skeleton in the cupboard, and everybody naturally wants to get rid of such a thing." (Jung 1956)

I suppose the body can easily fall into the shadow of our analytic work. We sit strangely still and we seldom have physical contact. We may think in terms of part objects and talk about nipples, breasts, wombs and penises, but much of the time we use sexual words as a way of addressing primitive affects and as metaphors for the process and pathologies of creative thought. We speak of *conjunctio* and use the term intercourse as a way of describing the non-tactile relationship in the consulting room but the experience for many is surprisingly physical. Sometimes when we speak softly we stroke, when we're sharp we slap and often when we feed the mind, the body is satisfied too.

Henry Reed's research (Reed 1996) has uncovered some interesting findings about psyche and soma. He has been investigating the qualities of psychic contact between couples who are strangers. In his workshops he found that most participants experienced non-verbal / non-visual contact with another most often as physical sensations. Sensations of heat and warmth were especially common, but he also reported physical bumps, clicks, taps, prickling, static charges, energy flows, altered breathing and heart rate, as well as sensations of touch, floating, rocking, pain and smell.

In his study, verbal and visual communication between the pairs was ruled out after a brief mirroring exercise. Maybe excluding sight and sound was an important factor in allowing other sensory organs to come into play. Mario Jacoby (Jacoby 1986) has noted that somatic empathy, or syntonic counter-transference occurs more readily when patients are silent for longer periods. It makes sense to me that quietness in a still body provides an excellent backdrop for self reflection and observation allowing our unfamiliar senses to be activated. That does not mean, however, even when a session bustles with hullabaloo, that the deeper tones of somatic counter transference are absent.

I have almost come to the end of my paper now. We have thought about how the psyche speaks through the body and the channels it uses. I have introduced you to a few of my patients, and wondered about how and why somatic counter-transference phenomena find a home so easily in my work with Tiger.

We still know so little about precisely how the art of psychotherapy works... or how we are used as instruments in the service of the psyche, the *anima mundi*, the world's soul. Maybe it is easier to know about the psyche through the heart than the head. To know (in the head) is to appreciate, to perceive and to fathom. To Know (in the heart or guts) is to suffer, to see and to experience. The second is closer. I believe to the Biblical sense of Knowing, of intercourse. Knowing in the heart brings us closer to the heart of the matter, the other in ourselves. The other that is the still point of the turning world, and without which there is no point.

Finally a wry comment from James Hillman:

"The soul can live without its therapists', *Hillman reminds us*, 'but not without its afflictions.'" (*Hillman 1975*)

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OMNIPOTENT MECHANISMS IN DESTRUCTIVE PROCESSES: SOME THEORETICAL AND TECHNICAL CONSIDERATIONS.

JESSICA SACRET

Introduction

Most therapists probably have the experience of finding that some patients simply do not make much progress in psychoanalytic therapy, or not as much as expected. The therapies I am thinking of seem to go on interminably; the therapist often feels stuck, or impotent, or the patient appears stuck in a self-defeating pattern which does not yield to interpretation. In one way, the whole history of psychoanalysis is devoted to a study of defences, and much work and many case studies have been done to illuminate areas of particular difficulty with patients who seem not to respond or who get stuck. (See for example Steiner 1993 p.41, Rosenfeld 1987, or Lax 1989). The patients I want to describe in this paper are those in whom a dynamic develops in which the essence of the problem seems to be that there is a determination to obstruct and thwart the therapy and the therapist. The problem can be more or less severe in different patients, or at different stages in a therapy, and can be more or less obvious in any one individual. This is more than resistance in its normal sense, however tough that can be to work through, and different from the negative transference per se. It is where the wish to defeat or triumph over the therapist dominates and persists in an obstinate way over the wish to progress. I began to think about this problem and to study the issues involved. Looking at the literature also helped me to find ways of understanding and of thinking that have helped me in my work with these patients. In this paper I have attempted to draw together ideas that I have found useful.

Firstly I shall briefly describe three patients who display differing aspects of the kind of dynamics I have in mind. With the first two patients whom I will refer to as Janet and Bill, it was obvious from the start that something angry and destructive was going on. With the third patient, Paula, it was less obvious, although it became clear in time that all insights were negated and that nothing in the sessions was being used to build on or made use of.

The patients

Janet had always displayed self-destructive behaviour in obvious ways.

Although talented as a dancer and an actress, she had been thrown out of ballet and drama schools because she had been unable to learn her steps or her lines. As an adult she would get drunk rather than attend an important interview, or somehow managed in other ways to put off prospective employers. In the therapy similarly she became unable to take things in; she often seemed to invite me to make critical interpretations; she often expressed anger and contempt apparently because I could not magically cure her. I usually felt that my interpretations went nowhere, and I was often made aware of the sense of triumphant control she felt over me. At the same time there was a subtle appeal to my own narcissism as, paradoxically, she appeared to genuinely feel and protest that I was helping, a state of affairs I was forced to doubt. She was often extremely contemptuous and belittling in her manner, but when I tried to address this, she would say she did not know what I was talking about. I began to realise she was evacuating her own sense of humiliation which could be readily evoked if her somewhat grandiose picture of herself was not confirmed. Still in the early stages of the therapy she was made redundant, lost her boyfriend and got herself into severe financial difficulties. She then developed the delusion that I would somehow look after her. Meanwhile she regularly behaved in confusing ways, particularly in regard to session times, which she was often trying to rearrange, ostensibly for good reasons. If I complied with such a request, however, I found that Janet displayed an increase in her tendency to manic flight, or she would come so late to the session in question as to make it virtually useless. This alerted me to the split off destructiveness underlying this behaviour, where the reality of a sometimes genuine problem with times was used to attempt to mess me about. If I responded to the reality need, I was then also experienced, in being humane, to be weak. However, although the picture seemed so gloomy, there was also a genuinely loving and creative aspect to Janet which made me want to help her and which in her outside world attracted friends and partners, although she always managed to alienate people she got close to. But there were also times when she was genuinely working with me. Ten years later, her manic and grandiose tendencies have greatly receded. She is capable of pursuing her own interests without puffing herself up or belittling those from whom she needs help. However, we are still grappling with something powerfully self-destructive. At present she is threatening to mess up what is a particularly good professional opportunity. In a moment of insight recently she has realised that this self-sabotage is intended as a way of "getting at" me, as she put it. Unfortunately this insight has disappeared or is disregarded as she is again getting caught up in sabotage and I am having to witness her again ruining something which could have been potentially very rewarding to her.

Bill, whilst less disturbed than Janet, has had a rather similar pattern in that

he can be creatively involved in trying to understand himself; but for the four years he has been in therapy, he has had a repetitive way of behaving which manifests itself as a triumphing, provocative and belittling manner where he pretends to be cooperating but in reality is clearly aiming to block or negate the thinking I am trying to do. When I attempt to challenge this behaviour there is a perverse distortion in which I am represented as a persecutor of him as the victim, although he is clearly not in distress, but is rather enjoying making me impotent. Fortunately after such an episode he is usually capable of thinking about what was happening, and I have been able to use insights gained to make more accurate interpretations. As he has extended me more trust, he is able to see that he has, as he now describes it "put smoke screens up against me". We have come to see that he is defending himself against frightening states of fragmentation which occur when faced with a separation of a weekend or a break.

For five years Paula seemed to be unable or unwilling to take in or make use of my best efforts, beyond the most superficial level. She would regularly bring issues which we would go into at some depth. But although she was apparently understanding and gaining some insight, by the next session it would be as if we had never talked about it, as she brought exactly the same issue again. Not only was there this kind of negation or dismantling (Melzer 1968), between sessions, but even within sessions she would abruptly change the subject just as we were getting somewhere. My drawing attention to this got nowhere. However her material and her dreams have been very illuminating. As a manager, she regularly describes with some prescience in her staff those very qualities that I find that she possesses. I hear about staff who will not work, who mess about, who ignore or disparage her efforts to help. She appears to consider and find interesting the links I make with her own behaviour, but nothing changes. Indeed she appears to have forgotten all about it by the next session, so that similar issues are presented time and again. Recently, however, insight seemed suddenly to be all there. She realised that she was often "playing games" with me, not allowing me to help, and refusing to take things further. She is now mostly more thoughtful, but it is still very hard going, with long periods when nothing is allowed to happen.

Dreams

Although dreams are always extremely helpful in a therapy, I have found them particularly so with this group of patients. Perhaps as an example of a sane part that is trying to communicate to me, dreams are often quite explicit in demonstrating some of the mechanisms involved.

Janet had a dream which seemed to illustrate the manic triumph over my

efforts to help: and also that there was something more angry and bitter being split off.

She was in a bath being washed by a woman in a motherly role. But she was shitting into the bath and laughing at the woman's discomfiture. Later she was putting a container full of 'hard shit' on a high shelf out of reach.

Bill had a dream in which he was feeding film tape into a video recorder. As he did so he was twisting and tangling the film, enjoying the mess that appeared on the screen.

Paula had a dream in which she was on a motorcycle which was careering off at top speed. But instead of concentrating on the need to steer the vehicle, she was turning round waving merrily to a figure on the pavement (She is on the couch). The motorbike crashed into a wall.

Some theoretical issues

Many writers have discussed obstacles to progress in therapy and analysis from many different points of view and with differing theoretical biases, to which I have referred in my introduction. It is clear that our theoretical understanding of these or other issues whether conscious or unconscious largely determines the interpretations we make, and interpretations may differ according to our theoretical school. A Kleinian does not find it difficult to believe that something intrinsically destructive might be at work; the non-Kleinian may see it more in purely defensive terms. The crucial theoretical difference here is to do with the notion of the possibility of innate or constitutional destructiveness linked with the death instinct and envy as against a view that these kinds of phenomena are purely secondary or defensive against stresses or trauma originating in the psycho-social environment of the infant.

This is not the place to rehearse arguments for and against the death instinct. Its existence or otherwise as a force within the psyche cannot be conclusively proven, and experienced clinicians working in the field disagree on the issue. (e.g. Rosenfeld 1971, Kernberg 1967). However, it has seemed to me that a lot of the Kleinian work of the last two or three decades has been illuminating concerning these kinds of patients, but may be disregarded by non Kleinians, because of the stereotyped view of the former, as overemphasising destructive and aggressive components and putting too much weight on innate factors such as the death instinct and envy. A belief in the death instinct implies a belief in innate destructiveness, and since for Klein, envy is a derivative of the death instinct, it also implies a belief in innate envy. However, as Steiner (1993) points out, we do not have to believe in the death instinct to recognise destructiveness and envy in a patient. To my mind it is the context within which we understand these phenomena which is crucial, and the reasons for

the development of destructive and self-destructive patterns require careful attention.

Dualism in Freud and in Klein

Freud propounded his theory of the death instinct in 1920 in 'Beyond the Pleasure Principle.' It has remained a controversial concept and not universally accepted amongst the psychoanalytic community. (Laplanche and Pontalis 1973). However, Freud found that he could not explain certain clinical phenomena - the repetition compulsion, hate, sadism and masochism - as derivatives of the libidinal instincts alone. He referred to it as 'the destructive instinct' insofar as it is directed against the outside world. In postulating two basic instincts he introduced a dualistic view of human nature, the fundamental conflict between the forces of life and death, or between love and hate.

Klein placed greater emphasis on the death instinct than did Freud, because she found in her work with very young (though also mainly very ill) children that they revealed powerfully aggressive and destructive phantasies in their play. As with Freud, some death instinct was said to be directed outwards, and some remained inside and directed against the ego, forming the basis of the harsh superego.

As a consequence of this dualism, Freud, (1911) in his discussion of the Schreber case, notes that there was a sane part remaining in existence even when the patient was at his most deluded. Bion (1957) emphasises this position. Even when psychosis seems to have taken over the personality, he distinguishes a sane part of the patient that can be available for communication, even if it seems entirely hidden.

"I have no doubt that the analyst should always insist by the way he conducts the case, that he is addressing himself to a sane person and is entitled to expect some sane reception." (Bion 1997)

When a patient seems to be very destructive, either overtly like Janet or Bill, or covertly like Paula, it has helped me both in my counter-transference and in my technique to keep in mind that there is, however hidden it may be, a healthy part of the patient to which I try to speak and interpret.

Concepts of destructiveness

In an early discussion of a patient who was dominated by a self-destructive element in his personality, Melzer (1968) describes a man who consistently allowed a 'foxy', 'know-it-all' aspect of himself to dominate and obstruct the therapy. In 1971 Rosenfeld wrote a seminal paper in which he developed the notion of 'destructive narcissism' where he describes personalities or temporary

states within personalities in which there is a splitting between healthy, libidinal parts of the personality, and destructive and self-destructive parts. Whereas in the healthy psyche the libidinal and loving aspects can mitigate the aggressive and destructive aspects as Freud (1937) indicated, in others the destructive aspects dominate and come to be fuelled by the libido, so that the rejection of or attack on healthy parts of themselves or of helpful others comes to be desired as an end in itself. This situation produces the excited, manic aggression as demonstrated in the dreams described, although the excitement in the session may be hidden, and may also be underlaid by something more bitter and envious, like the 'hard shit' in Janet's dream that was put out of reach.

The pathological organisation

Early work on sabotaging phenomena emphasises the dominance of 'bad' over 'good' parts of the self. A later development has been to think in terms of a fixed constellation of defences, a phenomenon that accounts for the power and persistence of the resistance to change. The notion was elucidated by O'Shaughnessy in 1981, of a system conceived as a defensive organisation operating in a systematic way, as opposed to the previous general notion of defences acting in a comparatively piecemeal way. This sort of defensive system has come to be generally known as a 'pathological organisation'. A crucial aspect of such a structure is that it is organised around omnipotent phantasies and defences.

Spillius (1988) summarises the current Kleinian thinking;

"There are two main strands of thought in the idea of the pathological organisation. The first is the dominance of the bad self over the rest of the personality; many authors point out a perverse, addictive element in this bondage, indicating that it involves sado-masochism, not just aggressiveness. The second strand is the idea of development of a structured pattern of impulses, anxieties and defences which root the personality somewhere in between the paranoid-schizoid and depressive positions. This pattern allows the individual to maintain a balance, precarious but strongly defended, in which he is defended against the chaos of the paranoid-schizoid position, that is, he does not become frankly psychotic, and yet he does not progress to a point where he can confront and try to work through the problems of the depressive position with their intrinsic pain. There may be shifting about and even at times the appearance of growth, but an organisation of this kind is really profoundly resistant to change There is considerable variation in the psychopathology of pathological organisations but the analyses of these individuals tend to get stuck, either to be very long, only partially successful, or sometimes interminable."

Steiner's contribution

Steiner (1993) has particularly elaborated the notion of the pathological organisation in his book 'Psychic Retreats'. He suggests that such an organisation

"serves to bind, to neutralise and to control primitive destructiveness whatever its source, and is a universal feature of the defensive make-up of all individuals". (p.4)

I note here that Steiner is careful to state that although he thinks that primitive destructiveness is universal, he refers to it as defensive and is wanting to make it clear that he is not assuming the existence of innate destructiveness implying a belief in the death instinct. In fact he says:

"it is not necessary to resolve controversial issues about the death instinct to recognise that there is often something very deadly and self-destructive in a patient's make-up." (p. 4)

I do not think it is necessary to accept that destructiveness is universal and part of the constitutional endowment to agree with the main point of his further contention:

"an important determinant of the outcome will be the way the destructiveness is dealt with by the remaining aspects of the personality. In psychotic patients, this destructive part of the self dominates the personality, destroying and immobilising the healthy parts. In the normal individual the destructive part is less split off so that it can to a greater extent be contained and neutralised by the healthy parts of the personality. There remains an intermediate situation in which the balance is more even, which results clinically in borderline and narcissistic states. Here the destructive part of the self cannot completely ignore the healthy parts and is forced to take account of them and enter into a liason with them."

This latter borderline group contains the kind of patients I am referring to: and I have found this way of thinking most helpful in distinguishing the degree of the severity of the disturbance in patients who are being destructive.

Psychotic mechanisms in a patient

The kind of patient I am describing is not frankly psychotic. However, when omnipotence and omniscience are dominating, the capacity or the will to detect reality is lost or impaired. With Janet I described the more psychotic elements emerging when she is under stress when she seems to deny and project into me her awareness of reality so that she developed a delusion that I would look after her when she lost her job, when she could not face the threatening reality. She has also habitually resorted to manic omnipotent mechanisms when

uncertainty arises. Early on in the therapy she had a dream that demonstrated these defences.

She was on a train, being persecuted by a lot of students. She got off and into a car driven by a young and beautiful female doctor. The car took off and soared into the air like a plane.

I thought the train was the therapy in which Janet felt at this time persecuted not only by me (I was a student therapist at the time, which she knew), but also by the healthy part of herself that wanted to learn, now fragmented into bits. Her associations showed that the young and beautiful doctor was herself, displaying not only her wish fulfilment of being young and beautiful, but also the taking over of the 'curing' function from me. She seemed to be feeling that the only 'cure' was to sail in a manic flight above the ground of reality.

Although Janet has made important progress in containing certain aspects of her self-destructiveness and omnipotence, I am not hopeful that she will ever be able to satisfactorily contain the deeper and more split off hatred and envy - the 'hard shit' - where she cannot seem to stop herself from attacking, directly or indirectly, those who try to help her.

Reasons for the development of destructive and self-destructive behaviour.

Although the consensus amongst Kleinians today would be that there is a constitutionally determined destructive element in chronic psychotic personalities, this, in common with borderline and neurotic difficulties, is also normally linked with the idea of a corresponding failure of maternal containment. The consensus amongst Kleinians probably largely follows Bion (1959) who says:

"On some occasions the destructive attacks on the link between patient and environment, or between different aspects of the patient's personality have their origin in the patient. in others, in the mother." (p. 106)

It is summed up by Britton (1992 p.109) speaking of a rather severe borderline personality:

"on the one hand there is the patient's inborn disposition to excessive destructiveness, hatred and envy, and on the other there is the environment that denies to the patient the use of the mechanisms of splitting and projective identification." (p.109)

Containment

The notion of containment is quite technical in Bion's formulation, but generally involves the mother's capacity to accept and modify through reverie the baby's projections of rage, terror and envy and also of sensations and proto-mental thoughts that are unmanageable to the infant psyche. An inability to accept and contain projections on the part of the mother can result in an experience of nameless dread for the infant and a sense that his communications are stripped of meaning. Hence, although there may be an innate disposition towards destructiveness, a crucial factor in the infant's development is the mother's capacity to contain and modify that destructiveness. The mother's containing function, then, is crucial. Britton (1992) also suggests that a vital contribution of the mother's capacity to contain her infant's feelings is the contribution of the father in his ability to contain the mother in her relationship with the baby.

Britton (1992) adds:

"What Bion suggested was that if this relationship between mother and infant goes badly wrong, instead of a helpful superego, an 'ego-destructive superego' develops....when containment goes wrong in some people, it produces a part of themselves opposed to themselves..."(p.107)

This would be the state of affairs that leads to the development of the ego-destructive superego and the elaboration of this structure in terms of internal objects which attack the ego. This is linked with the development of self-destructive and outer-destructive states of mind as described in the notion of the pathological organisation.

Britton's theory is (p.110) that he has noticed that in patients whose problems stem from parental difficulties in containment, that those patients are often very responsive to analytic work. This is in contradistinction from patients in whom a more severe pathology betokens an innate component.

The notion of catastrophic change

Another problem of inadequate containment is when the situation develops where all change is felt to be catastrophic. Thus Bion (1967) states:

"some aspect of the personality is stable and constant and this is maintained as the only force likely to contain emergent ideas which express new awareness of reality of the self or the world."

But if the internalised container is inadequate, psychic change is experienced as catastrophic, as change disrupts the psychic sense of continuity. The subjective experience is then of fragmentation, and change is resisted. Hence, for the borderline personality, change is very frightening. Britton (1992)

describes the consequences for the individual of this aspect of inadequate containment as resulting in an underlying phantasy of either incarceration or fragmentation. The alternatives are felt to be:

"a deathly container, or exposure in a shattered world." (p.111)

One conclusion I draw from these considerations is that however difficult and provocative a patient may be in the consulting room, it is important to bear in mind that what is being defended against may be terrifying states of fragmentation and disintegration which follow the environmental failure at a primitive level of development.

At the present time Paula is approaching a break. Circumstances also dictate that she has to give up one out of three sessions. On and off during the past year, following five years of the kind of stalling I described above, she has had dreams and associations linked with the idea of being incarcerated. She had a dream of being completely shut in a vault with thick steel walls; nearby there is a store of gold (ie, she can feed herself). At another time she is burrowing under the surface of the earth. But recently there are images associated rather with the sense of exposure: she agonised about a little girl running into the road; a cat that got run over; and she dreamt about being in an aeroplane which was splitting open to leave her tipping over into empty space.

Parenting failures and trauma

In patients who are not primarily psychotic, there may be borderline states in which maternal failures of containment play a large part. But clearly there may be other environmental failures and traumas in a childhood. Steiner (1993, p.4) speaks of traumatic experiences of violence or neglect as being significant factors in the formation of a pathological organisation, whilst also pointing out that the resulting violent and disturbed internalised objects serve as suitable receptacles for the projection of the individual's own destructiveness. Janet's family, for example, suffered a crisis just at the time of her birth and her early infancy was severely disrupted. Her family moved countries, and she was sent away for long periods for many years to be looked after elsewhere. Later she was allowed to wander around London during the war whilst bombing raids were in progress. She was regularly abused by casual acquaintances whilst in this totally unprotected state. Bill was beaten with a broom for years by his mother when she was apparently in an uncontrollable rage. In time we came to understand that the provocative bravado he displayed so disconcertingly in the sessions had been a way of maintaining his ego integrity in the face of this constant physical and emotional assault. Paula was abused sexually by her father. Other patients, not described here who I would nevertheless link into

this group, have all suffered abusive or traumatically neglectful parenting. It seems clear to me that sometimes the destructive behaviour develops in order to try to gain a sense of control through identification over what was originally traumatically uncontrollable. However, in such cases, the patient's own violence and rage which may have been disowned and projected into the abuser or into the abusive situation, has to be worked through in the therapy. It is then the therapist who is made impotent and helpless in the face of attack. Other trauma inducing behaviours from parents include the projection, sometimes violent, into the child of unwanted or hated parts of the parent.

It is in the borderline group of patients amongst whom we find the individuals I am referring to in this paper. There may be psychotic mechanisms operating but these are not so severe as in those who are overtly psychotic. In the former group of patients, splitting and omnipotent projective mechanisms predominate. When we are dealing with known trauma, the situation is clearer from the point of view of technique, although trauma is very hard, perhaps sometimes impossible, to work through. Also, clearly, the existence of obvious trauma does not preclude the possibility of early failures in containment. As Britton conveys, the borderline defences are defending against psychic catastrophe. The point I am making in this paper is that whilst there may or may not be innate destructiveness, to think in terms consistent with the theory of containment is to accept that there has somewhere been a failure in the global situation of early containment whether or not there have been other clearer examples of trauma. The result can be that primitive omnipotent defences are maintained when in normally healthy development they are given up under the aegis of the Reality Principle. The way, then, is opened up for the development of the pathological organisation. Thus the onus of responsibility has shifted from the original Kleinian position that infantile phantasy is the primary determinant of pathology, to a recognition that the psycho-social environment in the shape of the containing function of the mother/father duo carries a great responsibility for the infant developing in a healthy direction.

Omnipotent mechanisms and rage

Problems in early infancy, whether it be a mother's difficulties with containing her infant's projections, or other trauma, will result in that individual maintaining omnipotent defences with all the characteristic hallmarks of grandiosity and manic defences. Denial of vulnerability and dependency are consequent on the phantasy of omnipotent control. There are massive projections into the mother and later into other important figures as a way of getting rid of unwanted feelings and to deny separation.

Although omnipotence is a normal state of the primitive mind, related to the

early dominance of the Pleasure Principle (Freud 1911), in the healthy situation, where there is no excessive destructiveness, and where there has been good enough containment, omnipotent phantasy has to be given up in the interests of contact with reality under the demands of the Reality Principle. The original response to frustration, the hallucinatory omnipotent phantasy of the need-fulfilling breast, has to be replaced by the recognition of a need that is not being met and the possibility of containing the frustration. Thinking evolves in the gap between the experience of the need and its satisfaction. Segal (1981) speaks of the

"longing for omnipotence (p.220)".

When there is a problem with early containment, omnipotent phantasies persist in the form of the phantasied discharge or evacuation of unwanted feelings and needs. This has the dual function of ridding the psyche of pain and frustration and rage, and of denying separation, as the object is felt now to contain these feelings. In more extreme situations there is the expulsion of fragments of the ego which are then controlled, re-internalised to form a pathological container. (Steiner 1993)

An important point I want to emphasise in this paper is that when these omnipotent defences start to break down as the result of progress in the therapy, a normal response is rage (Rosenfeld 1971). How this rage is understood and interpreted is crucial in the negotiation of this stage in a therapy, and in particular with these destructive patients in whom omnipotent phantasy is well developed and entrenched and not easily given up.

It seems to me that there are two important aspects to this rage, distinguishable in principle, which stem from different aspects of the personality. These link in with the dualism discussed earlier, the conflict between the life and death instincts, or between the libidinal and the aggressive, and between love and hate. I would agree with Segal (1988) in her description of two trends in mental life which are present from the beginning of life. She points out that pain and anxiety come from the urge to live. Death, on the other hand, is the absence of pain and conflict, and there is a parallel urge towards oblivion. I would like to add that the rage that emerges in therapy has both aspects also to it. In one aspect there is what I call 'realistic rage', which comes from failures in the parenting or environment as discussed earlier. It seems to me that this rage is realistic in its recognition of an original failure and expresses the healthy part of the personality in its wish for containment and good parenting (see also Berkowitz 1996). Thus this aspect of the rage is directed at the original failures which may have resulted in traumatic experiences of terror, humiliation, pain and frustration; that is, rage which is linked with libidinal aspects of the self and which then become directed at the therapist as the present day

representative of parental failure. It may then also function as a defence against psychic pain. This pain may feel unbearable, linked with real failures in containment, or real abuses, whether emotional, physical or sexual, as well as with the inevitable pains of loss and separation which expose the patient to envy and jealousy. The person who has not been adequately contained will find it harder to accept and work through the reality of separation and the necessity of giving up phantasies of omnipotent control. He or she will also find it harder to acknowledge the need for reparation to parental figures who were also human and who may equally have been inadequately contained or traumatised. This pain, depressive and reparative in Kleinian terms, has then to be worked through. The rage that defends against this can often be expressed in destructive ways for prolonged periods. This seems to me to be the territory where the interminable and self-defeating, self-destructive patients are operating. Sometimes it is easier to try to keep the therapist bad and the therapy useless than to accept the pain of reality.

Psychotic omnipotent rage

The contention of this paper is the need to distinguish, however, between the rage just described from a rage that belongs to the omnipotent part of the personality which wishes to remain omnipotent, wishes not to suffer and therefore wishes to deny reality. It wishes to attack the healthy part of the personality for being vulnerable and dependent, and to attack the therapist for arousing need and dependency. At first when there is progress in therapy, the rage that emerges is a fusion of both aspects, a rage which is uncontained and uncontainable of which the therapist will be the recipient, however containing he or she is in reality. It is important at this point to distinguish and acknowledge both aspects of the rage: that which relates to real grievances which requires empathetic understanding, and that which is omnipotent and is now attacking the therapist's containing function, which has to be interpreted and stood up to. What I am calling psychotic omnipotent rage may become more ferocious as the patient's healthy desire to depend on a helpful figure (Rosenfeld 1971) gets stronger. It is crucial therefore to understand the dynamics and to support the healthy wishes of the patient which may at times be dominated by psychotic omnipotence and which may be more or less invisible. The therapist may be attacked for being the representative of sanity and for possessing the capacity to help which in itself may arouse envy. Vulnerability and dependency are projected and attacked in the therapist, or the therapist may be belittled for not being omnipotent. Strategies can be powerful and subtle. The omnipotent part may masquerade as healthy (Lucas 1992) and make persuasive attempts to offload responsibility for destructiveness: or it may represent itself as the victim

when in reality the patient is victimising others or the therapist. It is at this point that perverse strategies may appear.

As mentioned above, Bill came to the point of giving up his perverse, triumphing attitudes, and what emerged was a rage that was terrifyingly explosive. What Bill knew about was that his mother had beaten him physically, severely, habitually and over many years. What I had discerned from the counter-transference was that there was also an internal situation of uncontained rage which had no doubt exacerbated his mother's evident inability to contain her own frustration and anger. Bill's father was unavailable to help the mother-infant duo. During this time in the therapy, Bill attacked me regularly and unmercifully as I attempted to both empathise with and contain the very real traumas he had suffered, whilst trying to show him that his attack on me was his way of trying to avoid the awful pain of the reality of his mother's behaviour. Although this situation is ongoing, when Bill can listen, and when he is not overwhelmed by this ungovernable rage, he is ready to understand; and I have little doubt that he will finally find a way to largely contain his anger. Janet, however, I think will have insuperable difficulties in doing so. Paula has gained some real insights, but is still very defended against a rage that only appears in her dreams.

Conclusion

The dualism in the notion of complementary life and death instincts permits of a division between healthy libidinal forces on the one hand, and destructive death instinct forces on the other, operating within the psyche from birth. However I have stressed the fact that it is not necessary to accept the putative existence of the death instinct in order to make use of the notion of conflict between healthy and sabotaging or aggressive aspects of the person, however constituted. I have found in the consulting room that to hold in mind the healthy aspects of a patient who is being chronically destructive, and to speak to those constructive parts even when there is no evidence of their existence, is helpful to me in my counter transference as well as to my patient. The distinction made between what I have termed realistic rage and omnipotent rage is also invaluable in traversing what can be a very trying and testing time in a therapy for both patient and therapist.

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THE SEARCH FOR EMOTIONAL TRUTH IN A PERVERSE SCENARIO DOMINATED BY THE TRICKSTER*

MARISA DILLON WESTON

From feelings in the countertransference to the narrative of a life,

What struck me most from the very beginning of my work with S. were the intense, uncomfortable feelings he seemed to trigger in me. This reaction started even before I met him. He rang me to arrange an appointment. He was friendly and chatty and went into all sorts of details about practical issues. I felt overwhelmed by the flood of speech coming my way, which seemed to have no self-containment. I also felt that there was something inappropriately seductive in his friendliness and this irritated me. I had to make quite an effort not to be curt and openly hostile. As I put the phone down I felt drained and confused. Why did I feel so emotionally entangled? Thinking of my first reaction later on, I thought that the trickster psychology was already at work.

When I met him in person, at the first session, he seemed pleasant, easy-going, suave in an effeminate fashion. He was dressed casually, but with great care and he spoke softly, choosing his words and gazing at me in a way which felt both flattering and possessive. The words 'ensnaring glance' came to my mind and my discomfort grew. For the first time I asked myself a question which I would repeat endlessly in the months ahead and which rose from my perception of the defensiveness under the seductiveness. I asked myself "Where is he hiding? Where is he?" And yet somehow I realised that before I could even begin to answer these questions I would need to become familiar with what Jung calls "island fortresses from which the neurotic tries to ward off the octopus." According to Jung (CW 16, p. 181) "the patient needs an island and would be lost without it. It serves as a refuge for his consciousness and as the last stronghold against the threatening embrace of the unconscious." Were my feelings a guide to S's unconscious as well as a reaction to his defences? Was my frustration at being deprived of real contact with him linked to his frustration? These were my thoughts as I was listening to his empty talk. Then suddenly his manner of speech changed, he looked at me in a different, freer sort of way and he said "Why is it that you therapists are so cold?" I was stunned. Suddenly the layers of defensiveness had been cast off and I was exposed to a genuine feeling, straight from his unconscious. Before I had been able to recollect myself he had retreated again to his "island fortress", denying

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his moment of truth.

With this moment of truth I thought that he had expressed his longing for warmth together with his conviction that no warmth would be forthcoming and yet, if the question had been formulated, the negative expectation could not be total. "Why is it that you therapists are so cold?" was perhaps a rhetorical question, but it invited a reaction, it opened up the possibility of genuine contact and it expressed a whole range of feelings waiting to be deciphered. So I referred back to that question and I said "You seem to be wondering what kind of a presence I might be for you. Will I be a cold, remote presence, or will I be emotionally available to you?" Quickly he cut me off, almost in mid-sentence. Having glanced at his watch he said "We have got to come to a close now" and immediately after, he added "I know that I am not supposed to say that." I felt angry and confused. What was he playing at? It seemed as if he had to try and outwit me at all costs, in order to be ahead of me and forever elusive.

With these thoughts and feelings I listened to his story. As I listened I felt that the reaction he had triggered in me had already begun to tell me in a different, but not less effective way, that his had been a history of abandonments and losses and humiliation. Perhaps playing tricks was the only strategy he knew which allowed him to survive.

Personal History

S was born and brought up in Kenya of Asian parents. His father ran some sort of financial business and the family had money and status. S. was the second of two boys, his brother A. being seven years his senior. S's family lived with father's brother and his family, which consisted of his wife and five daughters.

At birth S needed special medical attention and so he was kept in hospital for a longer period than usual while his mother went back home. This was the first traumatic separation S. was to experience in the course of his life. At the time of his birth, his father was away in London and he only saw his son when he was six weeks old, but in spite of this, the two of them became strongly attached, indeed inseparable. When S. was six months old, he developed a problem with his kidneys and his doctor suggested that he should be taken to London for treatment. He was taken by his mother.

The separation from his father was traumatic. S. did not want to let go of father when the time came to say good-bye and in the end father was allowed on to the plane to help calm the little boy down. In other words S. was tricked into believing that his father would accompany him. He was tricked into giving up his fight not to be separated from his father and so he was defeated. The little boy psyche must have registered this deep blow, and experienced the confusion of the cruel deception. In London, the doctors found nothing

seriously wrong and mother and son could easily have gone back, but mother stayed in London for six months, visiting relatives and friends. This development revealed another trick: S.'s health had been only a pretext to justify a separation between the parents. Nothing was what it seemed. When finally they returned, S. would have nothing to do with his father. In his own words he had become 'mother's boy.'

In order to be mother's boy, S. had to be nice, obedient and properly trained. S. personally remembered very little of his childhood, but he knew that it had been difficult for him to become toilet trained and he often wetted himself. Whenever this happened mother would become extremely angry and hit him. His older brother A. used to intervene vigorously on his behalf and shield him against mother's attacks. S. tried to pacify his angry mother by cancelling out his messy sides. Not only did he become toilet trained, but he cultivated an interest for feminine pursuits, he loved shopping with his mother, he loved women's clothes and jewellery and he learnt to dance, dressed as a girl and performed in front of family and friends. A. was always tough and combative, whereas from a very early age S. became the delicate, sensitive and weak one, who let mother control him. The scene was already set for him to become homosexual. In describing the mother of the homosexual to be, Stoller (1978 p.129) writes that she is "a woman who hates males". The son of such a mother learns "by the system of reward and punishment she has set up, that behaviour she considers masculine will be punished but that soft, graceful, passive, 'sweet' behaviour will please her." So the boy tries to "suppress evidence of masculinity" and he learns to hide anger. "The disguise is in the effeminacy, where, in his mimicry, he subtly adds anger to his gentle, unmasculine appearance." (Stoller, 1978 p.129)

When S was nine, his father, who had lent a great deal of money to the Kenyan government, was told that he would not be repaid for many years to come. As a consequence, his business collapsed and he decided to move to London with his family and to try and start a business there. S. lost his familiar environment, half of his family, his school, his friends, the Asian community, his status and his identity. The family went to live in Sussex, in a middle class, mostly white area. S. and his brother were the only two non-white children in the school and S. remembers being teased endlessly because he was Asian and because he was effeminate. In his smiling, impersonal manner S. told me how tough his first months in England had been and how his brother always defended him until their paths parted. A., the tough one, was sent to a state school whereas S., deemed unsuitable for that environment, was sent to private schools, first in Sussex and later, after yet another move, in London. He was academically gifted. He passed eight "O" levels and had started his "A" levels when he became infatuated with Richard, a boy in his class, and then he lost all

interest in his work. Richard was white, tall, blond and athletic. His father was a rich and respectable English lawyer and they had an upper class type of family life, which must have seemed like a fairy tale to the little boy from an ethnic minority whose family life was crumbling.

At this time S's father had lost any hope of starting a business and he was going through a deep depression. For seven years he led the life of a recluse, not even bothering to get dressed, listening obsessively to Asian popular music, cut off from the world and from his family, a ghost of a man.

As I pictured S's father in his seven years of depression and penury, themes from the Bible and from classical literature echoed through my mind as well as memories from my visit to Asia and from what I knew of the history of that country. I felt that what happened to S's father expressed not only something of the man's individual and family history, but also a deeper and wider fatalism which belonged to his culture. Within such fatalism, disasters happened, years of abundance were followed by years of famine and man's will was powerless. *It was all in the hands of the 'gods' or of the colonising forces, or of the higher caste.* The only way to deal with it, as an individual, was to be resigned. I realised that the burden on my patient's shoulders went beyond what his personal history had impressed on his unconscious. Beyond that was the unconscious belonging to his culture *which is in itself a complicated conglomerate of many cultures with different languages and histories and religions and all this lay upon the background of the collective unconscious.*

As his father yielded to the power of the archetypes and withdrew from the reality of those around him, S. tried to drown any consciousness of his second loss of his father in a fused state with an idealised self represented by Richard, a hero figure, with which he hoped to be able to identify. Engrossed with Richard, he scraped through his "A" levels, stayed on at school for another year and took the exams again, but with the same results. He decided that he could not apply for university and found employment as a clerk. S. continued living at home with his parents until he was twenty-six. By then he had a job as office manager with a small company selling baseball caps.

At twenty-six, S. left the job and London when his brother A. offered him work in Morocco where he had a business. S. felt that this was his chance to leave home, although he did not realise that he was exchanging one type of dependency for another. A. was another hero figure although he was, in his excesses, almost the caricature of the hero. S. was totally dependent on his brother who treated him with generous condescension giving him no proper salary, but all the money and privileges he wanted. His brother led a princely life and was well known; he was extravagant, profligate and a great womaniser. S. was very much A's little brother. When A's business began to collapse, as super-heroes' dreams inevitably do because they are not tempered by the

mediating influence of humanity, S. was caught in the middle. He lost his work and his savings.

At twenty-eight S. was back in London without a job. He visited his parents who had gone to live in Asia and then came back to London where he lived with his brother and was able to go back to his old firm in a less prestigious position. At the same time he was given, by his brother, a flat in central London where he could live rent free. It was not clear to S. to whom this flat belonged, but A. promised it to him. His brother's promise seemed rather unsubstantial if not a downright trick and S's life was once again rootless and devoid of any secure attachments. This is the time when I first met him.

Beautiful images as aesthetic disguises for primitive sexuality.

S. told me the story of his life in an impersonal, unemotional kind of way as if all the feelings attached to these events had been cast off and all that was left was an empty shell. The shell however had been polished to its utmost sheen and it was being used to reflect and project a sequence of beautiful images, with which he had carefully woven the texture of his "false self." (Winnicott, 1985, p.140-152)

"I am extremely lucky," S. would regularly say, "I have a nice flat in Knightsbridge, a job, a boss who loves me, lots of friends, an interesting, cosmopolitan life and now I even have psychotherapy three times a week." Psychotherapy had become a social asset, to be paraded in front of others as a sign of privilege. In the countertransference I felt consistently cheated and infantilized, caught in the web of his make-believe strategy, wanting at times to break through the illusion and get hold of the horrors behind the screen and at the same time instinctively aware of his fragility and of the need to respect the defences surrounding what Steiner calls "psychic retreats". In Steiner's view (1993, p.1): "Perhaps the most difficult type of retreat is that in which a false type of contact is offered and the analyst is invited to engage in ways which seem superficial dishonest, or perverse."

Style and beauty seemed to be major reference points for S. Experiences had to be aesthetically pleasing and he made every effort to ensure that they were. When he went out to eat it was not just to any restaurant, it was to a nice or an extremely nice one; on business trips, he carefully selected where he would be staying, always choosing on the basis of beauty and class rather than convenience. He often told me about the way he had arranged his flat, what colours he had chosen, what objects were around and it was clear to me that he tried to create an aesthetically pleasing environment.

I wondered to what degree this concern for a polished frame was a defence against something which he perceived to be ugly, primitive and violent in his

psyche and to what degree it was a sign of his creativity. His concern for beauty seemed to me in strong contrast with the rawness of his sexual fantasies and behaviour which often consisted of brutal encounters and mutual, perverse abuse. In her book on *Creativity and Perversion*, Chasseguet-Smirgel (1985) gives a psycho-analytic view of this contrast when she writes about a pre-genital, anal level of sexuality, typical of the man who was seduced by his mother into believing that he was an adequate sexual partner for her and could take the place of his father. According to this writer, the boy in this position, instead of choosing "the long path which leads the subject to the Oedipus Complex and genitality", will choose "the short path" (p.29) which perpetuates fusion with mother, ensures instant gratification, but leaves him feeling stuck at a pre-genital level of sexuality and therefore unfulfilled. Unable to idealise Father and the genital sexuality he represents, such a man idealises instincts and part-objects from the anal stage to convince himself and others of their superiority. She adds that "This accounts for the pervert's obvious affinities for art and beauty; the pervert is often an aesthete". She distinguishes between aestheticism and creation "Idealisation tends more towards aestheticism than creation, and when creation nevertheless develops, it often bears the stamp of aestheticism," (p. 92). Chasseguet-Smirgel understands the tendency to idealise the environment as an attempt at turning everything which surrounds the ego into a mirror. "This mirror must be refined, and in exquisite taste in order to disguise anality, covering it with a thousand glittering jewels." (p. 95)

Jewels were important in S's imagination. He told me early on in the therapy that he would like to buy his mother some good jewels, with real pearls and real diamonds. Whenever he talked about women he knew, he would include in his description what kind of jewels they wore or failed to wear. He said that he was a Sindi and that Sindis love 'all that glitters' and they have a reputation for being rather materialistic and *nouveau riche*. In the sessions with me S. was trying to turn therapy into an aesthetic experience, where we would gracefully play-act our roles and create a pleasing fantasy world.

However, his eye for shapes and colour could also be used towards creativity. I realised this when he told me about his 'painting'. When he was living in Morocco, he suddenly started painting. He just bought brushes and paint and found himself covering one large canvas after another in abstract patterns of colour. Unexpectedly he gained some recognition. Local gallery owners sold some of his work and commissioned him. He accepted the commissions, but lost the inspiration and soon stopped painting. I felt that there had been a creative urge in his spontaneous turning to painting, but this had been spoilt when the paintings had to be on show and had to please others. In a way this was a sign of genuineness. He had not wanted to paint for others, for effect, so to speak. However he had allowed others to spoil something which was his

and could express something important for him.

What his painting indicated to me was an ability to symbolise and symbols are at the centre of psychic development and particularly so within a Jungian perspective. In his essay 'The transcendent function', Jung (1916) wrote at length about symbols, their formation and their value in acting as a bridge between conscious and unconscious. In S's case, I had felt from the beginning of our work together particularly bereft of symbols as, for the first six months or so, he never brought a dream and very rarely a day-dream.

S. found it difficult to talk about his painting. He said he had enjoyed it at the time, but it had led him nowhere, another proof of his inertia, another failure. His pictures were "just blobs on canvas." I felt that those pictures had been an expression of a genuine core of the self, the "blobs" being fragments of his personal unconscious on the backcloth of the collective unconscious. It seemed to me that those "blobs" were clusters of painful feelings and brought with them an awareness of emptiness, fragmentation and possible annihilation. That is why S. tried so hard to bury them behind the beautiful, well-formed images with which he presented himself to the world. He constantly needed to see a reflection of those well-formed images in other people's eyes to try and avoid knowing their illusory nature. At the same time, he was searching for some confirmation that others existed and would confirm his own existence by becoming the 'mirroring mother' (Kohut, 1977) who had to a great extent been lacking in his early life.

S. seemed to need a constant audience. This led to a hectic social life: if he was alone, he was on the phone. In the sessions with me he tried to get me to perform the role of an approving audience. He referred to me by my name over and over again, he used expressions like "do you agree?", "as we have said", "don't you think?", all the time. He also had a way, whenever he made a statement, of looking at me tentatively as if to check whether I approved. There was something controlling in his attitude towards me, but I also sensed that he needed to keep my presence alive and to make me respond to him as a way to keep himself alive. I thought he could not be alone. It was almost as if being alone threatened his psychic survival. In his paper 'The capacity to be alone', Winnicott, (1958) looks at such capacity as "one of the most important signs of maturity in emotional development" and sees it as stemming from the experience of "being alone, as an infant and small child, in the presence of mother." He continues "In the course of time the individual introjects the ego-supportive mother and in this way becomes able to be alone without frequent references to mother or mother symbol" (p.30,32). In his anxious references to me, S. was showing me that he had never been sufficiently sure that someone was truly available, in the sense that "an attachment figure is both accessible and responsive" (Bowlby, 1973). In object-relations theory

terms, S. had internalised unreliable objects on whose presence he could not count and whose response to his needs, was dictated by "misattunements" (Stern, 1985), "a lack of fit" (Balint, 1979) and "deprivation in the area of the sustaining matrix of empathy" (Kohut, 1977, p.188). This resulted in an early "narcissistic injury" in Kohut's terms, which lay hidden in S's unconscious together with the feelings of terror and anger derived from it.

On the surface were the beautiful images and the soothing empty words behind which he hid his depleted, hungry and murderous self.

Perverse defences

In spite of S.'s continuous effort to turn his life and his therapy into an aesthetic experience I often felt as if, in his transference to me, he was throwing shit on to me, and yet he was trying to seduce me at the same time with the honeyed forms of his delivery. In the countertransference, I often felt driven by frustration to feeling nasty and aggressive, wanting to shake him out of all his tricks. Not only was I being shitted upon, but he seemed to gain a sense of triumph from it. These elements, put together with what I learnt from listening to him about the way in which he related to people, made me think that he had assembled a powerful *perverse mechanism* as part of his defences.

I often had the impression when I was with S. that I did not exist for him as a separate person. Often, when I said something, he would say something back which was like a repetitive echo. On one occasion he put words to my feeling when he said "I never think of you as a person, you are just my therapist." Everything was related back to himself, separateness was denied. Other people were just instruments in his hands. This attitude was particularly evident in the case of his boss, John. On the surface S. liked John and was grateful to him and yet he also resented him and tried to extract favours from him. In his relationship with Maria who was his tenant, one minute he would be declaring his deepest love for her and the next minute he would be feeling used by her. With me, he put off paying me until the last possible moment and then only if I reminded him. Others and their needs did not seem to exist for him, others were only potential robbers of what he needed and wanted. When, later in the therapy, he started remembering his dreams, the 'robber' often appeared in them, leaving him in a state of terror.

However S. seemed to apply the same 'de-humanisation' (Cooper, 1991) process to himself as he did to others. He did not seem to have a sense of himself as a separate person or as a whole person. "Dehumanisation is the ultimate strategy against the fears of human qualities - it protects against the vulnerability of loving, against the possibility of human unpredictability, and against the sense of powerlessness and passivity in comparison to other

humans." In Cooper's (1991) words the core trauma is "the experience of terrifying passivity in relation to the preoedipal mother perceived as dangerously malignant, malicious and all-powerful, arousing sensations of awe and the uncanny." (p.23) According to Cooper the perverse defence makes use of three key unconscious fantasies: the first denies the power of the mother, the second denies the pain inflicted by the mother, the third turns the pain of being controlled into pleasure. S. resorted to these defences all the time both in his life and in the therapy. He denied my separateness and therefore my existence, he deadened himself so he would not feel, and he set up situations where he engineered his own powerlessness and then derived pleasure from it.

This last scenario emerged very clearly in his sexual encounters. He was attracted to strong men who dominated him, devalued him and usually disposed of him in a brutal way. In telling me about these encounters he stressed the violence inflicted on him, but he remained emotionally detached from it. I felt and said that he might be attempting to reproduce the sado-masochistic interaction in the consulting room, by trying to turn me into a silent accomplice as a horrified spectator or a perverse *voyeur*.

Although he labelled himself homosexual, in the past he had had sexual relationships with women and he still does occasionally although he does not desire women. In his own words "they just don't make my heart go boom, boom". They seemed to desire him and he "just went along". He continuously thought about men and became totally absorbed with them or parts of them. He seemed particularly fascinated with men's hands. He wanted to be in their hands, totally passive and at their mercy. In his fantasies as well as in his real sexual encounters with men he was always the passive one. This behaviour, which put him in the role of the victim, seemed to be re-creating the scenario of his early childhood, but with one major difference. As a child he was totally powerless in the hands of his powerful mother. Now he stage-managed his humiliation and derived sexual pleasure from it. In a perverse way he was in control.

As the therapy progressed S. started to bring dreams. Two dreams he had at the beginning of the second year reflected the perverse defences and early humiliating experiences.

In the first dream S. woke up one morning expecting mother to be there for him, waiting on him, hand and foot, and ready to cook his breakfast. But mother was not there. When later she came back S. insulted her and reduced her to tears by shouting at her that she was not fit to be a mother. In this dream S. demands from mother to be treated like a child, to be 'spoon-fed' and reduced to a state of total dependency and yet at the same time he takes on a controlling position and uses it to take his revenge on her.

In the second dream S. was walking across Leicester Square trying to get home where two women friends were waiting for him. He had invited them to stay out of politeness but now he was feeling imposed upon. He stopped to go to a men's loo where he saw three Asian men having a pee. They were strong, 'macho' men, dressed in black leather and he realised that there was some sexual interaction taking place between them and reassured them that they did not need to stop, in fact he encouraged them to continue so he could watch. The men did as they were told and S. went up to them and started rubbing their thighs and their crotches, deriving excitement from it. While this was taking place the two women friends he had invited were in a room just outside the toilet, no longer flattered by S's compliant niceness, but almost forced into the role of spectators of his more brutal side. In the second part of the dream, S. was back in Leicester Square. In front of a pub he saw two unknown women, one of whom suddenly collapsed on to the pavement saying she was going to faint. As well as her friend there were several people watching, including two policemen and nobody offered to help, in fact the two policemen were just 'smirking', apparently drawing pleasure from the woman's helplessness. S. himself stood there without lifting a finger. He thought to himself "If she faints, she'll pee, let's watch her pee." This in fact happened, the woman fainted and then peed and then S. realised that she was a 'hooker' and he thought "She's just a hooker, that's why she has no value in the eyes of the police". In this dream S. is the onlooker, a voyeur, watching men and women pee and collapse and engage in mechanical sexual interactions. Both in this and other dreams he seems particularly fascinated with the act of peeing, and I wonder whether this amounts to a "revisiting" the original place/experience of his shame when mother humiliated him for peeing in his pants.

In both dreams S. gets his control by cheating. In the first dream he cheats mother by using her own sense of duty against her. In the second dream, he is the manipulative *voyeur* who exercises control and extracts pleasure in secret, mainly through looking. Writing about a case of voyeurism, Hume (1996) writes that the intention of the voyeur may be "to harm and triumph over another. For example, looking can become sexually exciting if the voyeur believes he is acting forcibly upon an unwilling woman." Hume refers to Strachey, according to whom "the person looking makes an onslaught with his eye upon the world in order to devour it, and to render the object paralysed and defenceless." (p. 162). In his dream S. watches men and women in a state of uncontainment and collapse, without a will of their own, sneered at or hiding from the public eye, 'the dregs of society.' S. is able to identify with them and control them at the same time and he draws sexual pleasure from this double role.

The perversion in the consulting room: tricking me into beating him.

With me there had been several incidents where I felt skilfully set up to beat him with a stick, so to speak; having tricked me into putting him in the victim position he seemed to gain some sort of elation from my bewilderment. There was one particular occasion when he was talking to me about his job and he started talking in a jocular way about the baseball caps he was in charge of selling. He was very funny and I laughed. I thought I was laughing 'with' him, but he took it as if I was laughing 'at' him and he was deeply hurt although he said nothing at the time. When he later talked about this event, I thought of Freud's (1919) paper 'A child is being beaten: a contribution to the study of the origin of sexual perversions' in which Freud stresses how 'beating fantasies' play an important part in perverse psychopathology. This concept has been developed in more recent studies of perversions which stress how "Most males with beating fantasies are likely to maintain an identification with a castrated mother," and a more hidden "identification with, and a vengeful fury toward, the phallic mother." (Rosen, 1979, p.44).

In the language of the core complex theories this is the area where subjugation and control, pleasure and pain, mix in a rigid pattern which promises an escape from the engulfing mother while creating an addictive bond with her which both protects her and prevents her from ever leaving. So the pain one receives or inflicts in perverse behaviours defends against the pain of separation and loss, but does so at a cost, because "in our real psychic economy, if nothing is ever permanently lost, then nothing can ever truly be gained. For the price the sadomasochist pays by denying castration, loss, and death is to remain forever frozen into a lifeless stereotype, which he is doomed to repeat." This way of being "requires the suppression of real emotionality." (Bach, 1991, p.87).

In the grip of the archetypes

Within a Jungian perspective, S's psychopathology could be described by referring to the archetypes by which he seemed possessed, in particular that of the 'victim' and that of the 'trickster' which allowed him to turn from 'victim' to 'dragon' and back again in an orgy of adaptability and rapidity which left him dizzy with excitement and unawareness.

The trickster is extremely difficult to define because of 'his powers as a shape-shifter' (Jung, CW 9 p255-272). The trickster was associated by Jung with the alchemical figure of Mercurius with "his dual nature, half animal, half divine." (ibid.). Jung sees in the trickster a "collective shadow figure" with a very primitive level of consciousness which, however, is in motion and is capable of achieving higher awareness and can even turn into a "saviour" like

figure. "He is both human and subhuman and superhuman, a bestial and divine being, whose chief and most alarming characteristics is unconsciousness." (ibid.) "He is so unconscious of himself that his body is not a unit, and his two hands fight each other." (ibid.) "Even his sex is optional despite its phallic qualities..." (ibid.). According to Jung, there are many versions of the trickster belonging to different periods and different cultures.

The trickster which seemed to be dominating S.'s unconscious was certainly a "shape shifter". S. could turn into many different shapes according to the people he was with. This behaviour seemed to be always dictated by a wish to manipulate so he could extract some gain for himself. He would do everything he could to be liked and trusted and then when the moment seemed right, he would become demanding and reveal his all consuming greed. At that point, if the person involved reacted with disdain, he would quickly retreat and take on the loving disguise once again. He was as much taken in by the deception as others were. When he proffered love, he thought it was real and when others were hurt by his sudden *volte face*, he could not understand why. He was telling himself beautiful lies about himself in the same way in which he told others. It was only in the course of his therapy that he began to see through the lies and acknowledge that he did not know who he was.

I commented that he seemed to feel that he had no rights. Everything had to be obtained through calculated operations which made it impossible for him ever to relax or be off guard. How exhausting for him never to be able to be spontaneous! He seemed to have learnt that lesson particularly from mother who appeared extremely calculating, telling S. "Never say no to anything, you never know what it might bring"; or "Play your cards well in life and you'll be rewarded".

However, beyond mother was the family and the culture. It is a culture where the individual wishes are often sacrificed to the family wishes as the practice of arranged marriages proves and where the servant/master psychology has been particularly strong especially vis-à-vis the colonial masters. When S. became more aware and began to fight towards autonomy and individuation he came up against, in those around him, this culture of servility and trickery and lip service being paid at all cost to appearances. Often his individual struggle seemed doomed to fail because the culture around him appeared so heavily biased against any form of emotional truth.

The trickster is a perfect presence in a sadomasochistic psychopathology, helping with role changes between victim and persecutor and with secretiveness. In his paper, "The archetypal themes in Uccello's painting," Gee (1995) sees the relationship of the dragon and the innocent maiden as a "good portrait of the nature of sadomasochism" because "the maid with her helplessness and the dragon with its sadistic power have all they need for an exciting and

everlasting trap.” “The more innocent the maid tries to be, the greater is the danger of the dragon. When such a strong specialisation occurs then we see a relationship that can never come to an end, because no child can separate without having first integrated their capacity to be angry as part of their strength and therefore enabling aggression.”.

A number of people were seen as dragons by S., among them Maria, his tenant, who, spending more and more time with her boy-friend, was less available to him. S. felt she had discarded him. In his view, his parents too conspired against him, his father by never making himself available to him and his mother for being so self-centred, expecting letters and telephone calls and presents from him, but giving very little in exchange. His brother too, made use of him, asking him for help when he was down and forgetting him when his own life took off.

The anger S. found so difficult to acknowledge, seemed to explode at times in the consulting room. I was stunned by the vitriolic viciousness behind some of his most unguarded comments. Of Maria who had just got engaged he said “She got what she wanted, she swung her bottom and hooked her fish.” Of girls in general “These girls know what they want and everybody else can go and fuck themselves.” Of his mother “She’s no great beauty and has no finesse, just like the fake pearls she wears.” Of his parents “They live in a cocoon of suburban nothingness.” Of me “You are just a middle aged Italian woman, living in a suburb.” Of Maria’s fiancé “He thinks he can rule the roost because he went to Eton, but he’s just a fucking, boring cold fish.”

Towards emotional contact

These remarks betrayed an intense hostility which seemed to stem from envy. The hostility was hidden behind the contempt. He could not own his aggression for fear of retaliation which would lead to punishment and rejection. Yet, when his hostility surfaced, I felt that he became much more real and it seemed possible for us to make genuine contact. So I drew his attention to the anger expressed and to the authenticity which came with it. I said that he might be afraid of punishment coming from me if he allowed me to see his resentment and his envy and yet those feelings are present in every human being and it is all right to experience them. If we do not acknowledge them they tend to dominate us, but if we can become aware of them and accept them, they become freeing and help us towards creativity because where there is destructiveness there is creativity. Perhaps as a child he had been given the message that he could not be ‘bad’, he had to be good and pleasant rather than being free to be himself, warts and all. He listened very intently and yet he seemed at the same time to be following an internal thread as if what I was saying had stirred

something powerful inside himself, but he did not know what it was and he was battling to get hold of it. Then he was quiet for a few seconds, totally quiet and still, but immensely focused as if in his search he had come upon something. Then he spoke. He said there was a photograph of himself as a baby. He was in his pram, in the middle of the courtyard of their African house, he was clutching a toy tiger in his hands and he looked very serious. As he grew up he had looked at this photograph and had felt both enormously sad and angry. He had thought "How could they leave me all alone with a tiger?" He said that to this day he cannot look at that picture without feeling overwhelmed by a sense of abandonment, fury and terror.

I felt that I was hearing his real voice as never before and it moved me deeply. I thought and said that it brought to me the anguish of the child who makes no impact on those around him so that his emerging self gets no responsiveness and he finds himself alone with his fears, the tiger, threatening him with the disintegration of his very fragile, incipient self. I said I thought that the tiger also represented his 'dragon' mother in whose hands he felt powerless, unprotected as he was by father. He looked at me with a mixture of total astonishment and gratitude. Something which could appear irrelevant, but was of fundamental importance to him, had been understood and valued by me. We had visited together the 'place' of his abandonment; that photo was like a symbol for all his experiences of abandonment and deceptions. They had left him alone with a terrifying tiger, but tried to trick him into believing that it was only a toy.

It was the end of the session and I wondered how he would feel walking away from me with that experience of deep closeness. Would it frighten him by re-awakening deeply embedded fears of abandonment and annihilation? Would he be able to bear those fears or would he return time and time again to the relative safety of sado-masochistic interactions?

As we moved towards the Christmas break at the start of his second year in therapy, S. seemed better able to tolerate difficult feelings by expressing them rather than trying to dispose of them. When he resorted to 'acting out' behaviour, he seemed to tire of it quickly as if the old buzz had waned and he seemed able to bring his sadness to me rather than blow it away.

But however, at about the same time, S. experienced a series of difficult losses. Maria, his tenant, moved out of his flat; his brother disappeared for many weeks; John, his boss, announced that within six months he would close the company, leaving S. jobless; Gianni, an Italian man with whom S. had developed an intense friendship, went back to his country and, to top it all, I would be leaving him too, during the break. S. talked about his emptiness and desolation, he said that his life was bleak and monochromatic, with no colour and no joy. He felt like a wounded animal, left alone in an uncaring world. He

dreamt of a puppy drowning in the bath and soon the puppy took on a human face with a look of helplessness on it and S. recognised himself in that image.

I felt and said that his increased ability to bear depressed feelings without turning compulsively to manic action allowed him to have a more genuine type of contact with himself and with me. I was, however, extremely concerned. I feared that he might enter into a severe depression or even have a breakdown. I said that it might be difficult for him to trust that I was there for him when I was about to leave him.

During the break I thought of the helpless puppy in S.'s dream and how he represented the anguish S. was experiencing now that he had established an intimacy with me and with himself. Would he be able to tolerate that anguish or would he run away?

From painful intimacy to the trickster's master twist and to a new beginning.

When therapy resumed after Christmas, S. seemed very detached. He had missed me, he said, but only for a day or two. He had spent most of his time with an Asian girl who was in London on business. Shareen was the daughter of one of his father's friends and she was 'wonderful'. As he recited Shareen's praises I felt and said that he was blaming me for not having been there for him. but he laughed in dismissal. The next session he missed. He said he had failed to hear his alarm clock. In the third session he commented on feeling cut off from everybody and from himself. After a few minutes of silence, during which I experienced an acute sense of depersonalisation, he told me that the night before he had had sex with Shareen, not for the first time. He did not desire her. he just went through the motions as if in a trance. She knew that he was gay. but she did not mind.

I was totally confused. What was going on? He seemed to have reverted to servicing women. I felt that this regression was linked to the break and to my 'abandonment'. All this made some sense and yet I still felt I was in the dark and that an essential part of the picture was missing. Eventually I was told that during the break he had asked Shareen to marry him, as a joke, but she had taken him seriously and he had found himself unable to take back the offer, so now they were engaged. I felt stunned and overcome by a sense of dismay I could hardly contain. He seemed to have staged an act which corresponded to a complete mockery of the concept of a couple, an act which saw everybody in it as both victim and torturer in a vicious circle of sado-masochistic enactment. My dismay deepened when he described the complicities surrounding this act of trickery, his brother's collusion and his parents' joy.

This was the masterpiece of the trickster's creations. In the countertransference I felt that this had been an act of revenge against me as a

symbol of his abandoning mother. Shareen too was a symbol of such a mother and in deciding to give in to her demands he seemed to be performing the ultimate act of subjugation, but he knew that his performance amounted to a gigantic tease within which words of love covered feelings of hatred. I felt that he had acted behind my back, savouring my surprise and my defeat. I had been at his side encouraging him to separate from the castrating mother inside him, like a caring, strong father might have done, but when I left him, in his rage he had gone back to his engulfing mother.

I said some of this to him. I also said that unless he could acknowledge his anger, he was in danger of giving up his therapy. I felt this danger very strongly. It was impossible that he could pursue at the same time a perverse plot of such magnitude and a search for genuineness. This comment shook him out of the unreality of the perverse behaviour allowing him to re-establish contact with the healthy part of himself. Slowly he realised he did not want to live the lie of a loveless marriage and he began to disentangle himself from the deception. One day he found 'his voice' with his mother. After listening to her ecstatic comments about the impending marriage, he told her there would be no marriage as he was gay and it had all been a mistake. His mother tried to sweep this stark truth under the carpet, but over and over again, in the period that followed, he repeated his truth to her and asked her to stop turning him into a product of her imagination. In his work with me, he became more challenging, better able to acknowledge both his angry feelings and his loving ones. A new phase was beginning.

I wondered whether his sado-masochistic masterpiece had been not only a road to revenge, but also a road to freedom and authenticity. After all, he had taken the mockery so far that it had to blow up and crumble, giving him the opportunity to rise from the ashes. "If, at the end of the trickster myth, the saviour is hinted at, this comforting premonition or hope means that some calamity or other has happened and been consciously understood. Only out of disaster can the longing for the saviour arise...."(Jung, CW9, p.271).

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RESPONSE TO HELEN MORGAN'S PAPER; BETWEEN FEAR AND BLINDNESS: THE WHITE THERAPIST AND THE BLACK PATIENT

BY LENNOX THOMAS

B.A.P. LIBRARY
37 Mapesbury Rd.
London NW2 4HJ

Helen Morgan has written a paper which is rich and stimulating both clinically and theoretically. The paper's title belies the interesting and new ideas on transference and the shadow that is evident in the work. Because this is such new work, her clinical work illustrates her ideas well. The paper begins with the author pointing out that the issues on racism are from her perspective, that of a White middle class woman. With this, the reader is given the opportunity to think about the many other perspectives and contexts for thinking about race and psychotherapy. This in itself seems novel that other perspectives male, female, black, white, heterosexual, homosexual, can be brought to bear on issues of psychoanalytic therapy.

Ms Morgan focuses on black and white issues starkly and for some perhaps cruelly, thereby cutting through the many escape routes to denial or disavowal of racism. These routes so often lead to the view that, we are all different (and oppressed and so cannot be oppressors too).

Racism is irrational as a phenomenon but it is also a highly organised functional instrument not only regulating us socially and structurally, but also psychically. The paper seeks to study the type of racism that reasonable liberal people use and are caught up in.

Morgan discusses the racist self as an ugly creature which in some ways resembles the race hate groups in society. Whilst this offends most liberal sensibilities, the overtly racist person, like the black other serves the function of containers of disgarded negative parts. By projection the good liberal can be unaffected by their own racism or the remains of it, that space where it once was. If as Lousada puts it, that recognition of racism ushers in "obsequious guilt" which seeks to make reparation, then the process of dealing with personal racism is a complex and long drawn out matter. Psychotherapists need to have a good understanding of the various psychic postures that take place in the process of working with this analytically.

Racism, anti-Semitism and other hatred of cultural or ethnic groups is something that for many people was and still is a social reality connected with movements to persecute, exile and murder on a large scale. The way that this *thinking relates to the thoughts and feeling of reasonable people* is something only recently pursued in psychoanalytic writings.

Morgan's section, "on being white" is very interesting because she discusses

how she went on to re-evaluate the basic assumptions she had about her identity as a white person in relationship to black friends, colleagues and clients. From that vantage point of being a white person, she was able to think about the experiences of the black person growing up in British society and developing a sense of who they are. This is a most important process to know about particularly for the child and adolescent psychotherapist. The white therapist's identity as a sealed immovable object can at times prove an obstacle to black patients receiving a good enough therapy. It is my view that a thorough training analysis can go far to helping us develop greater agility in terms of identity and relating to our "other". The training therapist/analyst of course needs to have embarked on their own path of discovery in this regard.

The two case examples in the paper excellently convey the points made by Helen Morgan earlier in the paper. The second, the case of D, is a sophisticated account of an analysis. We are given privileged information on the analysis of D's complex problems and an intricate analysis of the (racial) transference and counter-transference. This was clearly not easy because of the many masks and proxy identities with which the therapist was confronted enroute to helping D. to see a more realistic, or truer self. Dealing with the black patients "hated black self" is not easy for black or white therapists but Morgan appears to have succeeded where many fail, or more often reach impasse. Like Helen Morgan, I have found Jung's concept of the shadow most helpful when working across race and culture barriers but also when working with patients from the same ethnicity as my own. How the patient uses the other to prop up their own "ready made" identity is always of interest to me and exploration is an integral part of their treatment.

I found this paper very interesting, written with modesty and humility, but its contribution to psychoanalysis and race in the transference is enormous.

NOTES ON CONTRIBUTORS

Dr Ken Wright

Psychoanalyst and psychiatrist in private practice. Trained with the Independent Group of the British Psychoanalytic Society and at the Tavistock Clinic and Maudsley Hospital. Author: *Vision and Separation: Between Mother and Baby* (London: Free Association Books, 1991) which won the 1992 Mahler Literature Prize. Particularly influenced by Winnicott; interests include the development and use of symbols and the relation between creativity and the life of the self.

Marilyn Matthew

Associate member of the BAP. Previously published in *The Independent* and *the British Journal of Psychotherapy*. Jungian Analytic Psychotherapist in private practice in South London, runs an Infant Observation group.

Jessica Sacret

Full member of BAP. In full time private practice. Recently completed a Masters Degree. Background in the psychiatric services and therapeutic communities.

Marisa Dillon Weston

Group Analyst, member of IGA; Jungian Analyst, Associate Member of BAP. Works in the NHS and in private practice.

Lennox Thomas

Full Member of BAP. Clinical Director of NAFSIYAT Inter Cultural Therapy Centre, works in private practice.

Book Reviews

Therapy or Coercion? Does Psychoanalysis Differ from Brainwashing?

By R D Hinshelwood. Karnac Books, London, 1997 pp 249, p/b£19.95

R D Hinshelwood, a Kleinian himself, wonders whether he should content himself with speaking only to Kleinians. Fortunately he has decided to write *Therapy or Coercion?* for a wider audience. All psychoanalysts and psychotherapists need to consider the arguments and paradoxes which he addresses; all patients will be safer with therapists who have understood the ethical dilemmas of their trade and who have established a moral basis for their practice.

But this is also a very personal book. In his introduction Hinshelwood says that his search for ethical criteria for psychoanalysis goes back to the 1960s when, as a young psychiatrist, he became increasingly aware of the conflict between freedom and force in the treatment of mental illness. Furthermore, there is no doubt, he writes, that 'in therapy abuse of persons does exist' (p 10). On what basis, then, can therapy be distinguished from, for example, the techniques of thought-reform in China in the 1960s? Here, in this book, is the result of his struggle over the last ten years to find an answer to this question.

This is a book about the ethics of what analysts do but, in order to answer to his own satisfaction the questions he poses, Hinshelwood looks outside his own discipline to philosophy, and particularly to the philosophy of mind: 'in researching for this book, I have concluded that issues in the nature of mind and professional ethics cannot be separated' (p 5). One of his conclusions is that a real division in the mind can be observed in the phenomenon of an analysis and that this division represents a challenge which philosophers for their part need to address. Not many contemporary philosophers are in the habit of examining contemporary analytic case material. Hinshelwood believes that neither have psychoanalysts been sufficiently involved in philosophers' debates about the nature of mind 'in part because psychoanalysts have not been sufficiently philosophers' (p 6). His book makes an important contribution to the dialogue between psychoanalysis and philosophy which is beginning to develop.

Therapy and Coercion is in four parts. In Part One, Hinshelwood examines the professional ethics of medicine and psychiatry. Part Two discusses autonomy and rationality in the light of primitive psychological mechanisms. and out of his argument he comes to the 'new and more fundamental' (p 11)

concept of integration. In Part Three he reviews professional ethics and comes to a verdict on the ethical status of psychoanalysis. Part Four is given to more general considerations.

Standard medical ethics are not sufficient for the analyst who cannot assume (as perhaps the physician or the surgeon may usually be able to) that the patient is either autonomous or rational. In practice the analyst will be confronted with the moral dilemma: 'Should the analyst respect the resistance to his work, as a withdrawal of consent?' (p 98). Patients in analysis are divided in mind: they cannot be described as whole or united. If the patient who seeks analysis or therapy is at the same time rational and irrational what is the nature of the division within him? Hinshelwood's discussion of that division not only includes some of his most telling clinical examples but also addresses the divergence, and the implications of the divergence, between the concepts of repression and splitting (a divergence which he believes has not hitherto been adequately examined).

Hinshelwood argues that paternalistic justifications for analysis are inadequate or paradoxical. At the same time concepts of paternalism and autonomy have become seriously confused. Hinshelwood's way out of this confusion is to define the paternalistic act involved in psychoanalysis as an act of learning not doing. Through learning the patient regains lost parts of himself, links conflicting parts, resolves old conflicts and takes a step towards the integration of his personality. 'Viewing the mind as integrated overcomes the conflict of the autonomy of conscious and unconscious parts of the mind. We can accept division and work towards its integration' (p 112). While acknowledging how difficult it is to 'measure' integration, Hinshelwood does produce a definition: 'integration is a kind of internal pluralism' which implies a plurality of parts available to be known and arranged as alternatives to choose between and to be recruited for thought, judgement and creativity (p 196). Hinshelwood's arguments, for example about the capacity for self-reflection, imply some concept of a self which enables the integration of divided parts to take place. Towards the end of his book he concludes, 'We act in accord with the concept of a core self' (p 198). While this may not be the Self as Jung or Fordham conceived it, Hinshelwood's core self will have a familiar ring to those who think of the self as, in James Astor's phrase¹, an 'identity preceding identifications'.

Hinshelwood believes that the technical aim of psychoanalysis - integration - is a powerful principle underlying ethical practices. He also argues that the analyst, unlike the torturer, intends to bring split parts together, not to promote splitting. This can only happen when the patient's own agency is preserved and the patient's capacity for self-reflection allowed to develop. The more technique and intention aim to promote integration of the personality, then the

more ethical the psychoanalysis.

Hinshelwood says that this was a difficult book to write and warns that it may be a difficult book to read. Perhaps he has written three books in one: a book about the clinical implications of the differences between the concepts of repression and splitting, another about the contributions philosophers and psychoanalysts can make to each other's concepts of mind, and a third about the ethical basis of psychoanalysis and the moral contribution psychoanalytic thinking and practice can make to society. *Therapy or Coercion?* repays the close attention it requires; dense and complex it may be but also provocative, stimulating and important.

GINA ALEXANDER

¹Astor, J. (1995) *Michael Fordham, Innovations in Analytical Psychology*. London Routledge.

Father Daughter Mother Son

By Verena Kast. Element Books. Shaftesbury 1997. pp 181 £7.99

Verena Kast is a practising analytical psychologist who teaches at the University of Zurich. She is also the current President of the International Society for Analytical Psychology. She is the author of several books, including a best seller called *Loving*. She has a particular interest in fairy tales and how they can help us understand our inner lives and psychological processes.

Father Daughter Mother Son is a self-help psychology book for the general reader though it is packed with experience, case histories and wisdom that psychotherapists will find relevant and useful. Several patients came to mind as I was reading it.

The book examines mother and father complexes from both positive and negative aspects and how these affect our lives. Complexes (for the uninitiated) were originally described by Jung as 'specific constellations of memories formed from condensed experiences and fantasies'. These are highly emotionally charged and can force the ego-complex (the 'I' part of us that thinks it controls events) into the background. The degree of influence of a complex in relation to other complexes and to the ego complex can be discovered through the word association test which Jung developed. Indeed, it was the word association test that led Jung to the concept of the complexes (Jung 1973). Although in common parlance we talk of 'having a complex' Jung described the complexes as *having us* (Jung 1960) that is they can control and determine our behaviour without our conscious awareness. In mediaeval times it was called possession.

Kast states that though analysts may characterise their patients as having a positive mother complex or a dominating father complex *these have not been* fully examined or described (although Jung did describe the mother-complex especially in its relation to the mother archetype) (Jung 1959).

She openly acknowledges several aims of the book.

1. To describe the mother/father complex in both their positive and negative aspects. These are described in 'pure forms' that she accepts are found only rarely.

2. To redress the balance between the parental complexes by stressing the importance of the originally positive mother complex which is often devalued (the devouring mother) along with the feminine in a largely patriarchal culture. This includes psychoanalysis which Kast sees as 'a patriarchal field of knowledge within a patriarchal world.'

What her book demonstrates is the importance of the *balance* between mother/father complex (whether it is the father who gives some mothering and

mother who gives some fathering) and the paradox that being trapped too long in a positive mother or father complex can stultify growth and change for both sexes. There is a need to emancipate ourselves by separating from our parents at the right time so that we can live our lives as fully as possible. She quotes Fromm (1989) who sees human life as a continuing process of birth in which every stage is only transitory and whose aim, ultimately, is 'to be born before we die'. Courage is needed to separate from others and to open ourselves to them again (page 164).

There are some lovely apposite subheadings that lead to instant recognition even if one knew nothing about complexes e.g. the originally positive mother complex in men - 'the world should like someone like me', the originally positive mother complex in women - 'you can cope with just about anything as long as you've eaten well'. 'Dutiful daughters' - the original positive father complex in women and 'a rotten person in a rotten world' - the originally negative mother complex in women. Complexes can be revealed through 'complex-phrases'. Patients remember them like mantras that hover about them and seem to determine everything they do. As Kast writes 'expectations, longings, visions of the future are cramped into the strait jacket of an immovable past'. One such from a female patient was 'There's no point in doing anything. I can never say anything when it really matters'.

Kast uses fairy tales, an Irish one, *'The Knight with the Shadow of a Laugh'* and a European one *'The Goose Girl'* to illustrate the journeying needed by each sex to free itself from the originally positive mother complex.

In describing the originally negative father complex in men Kast refers extensively to Franz Kafka's *'Letter to my Father'*. Kafka wrote it at the age of 35 years when his creativity was at its height. One of his many attempts to marry had again come to nothing. The letter was probably written to try and emancipate himself from his father who was cruel and oppressive and made Kafka *'feel like nothing'*. His father did not abide by the rules he imposed on his son. Kafka's stories reflect the tyranny, the arbitrary rules, the oppressive judgements that Kafka continually faced from his father.

However there is hope. Though complexes are usually seen 'as a hindrance, as something that compels people always to react in a certain stereotyped way to situations which need various and differentiated responses' yet they also 'contain the seeds of new possibilities' (Jung 1960), experienced in symbols.

As with all self help books, there may be limits to what one can do for oneself alone. The mediation or transcendent function provided by therapy and the therapist may be necessary, with the transference and countertransference re-enacting the past hopefully with a more creative outcome.

Nevertheless this is an interesting and thought-provoking book which I

have enjoyed reading. It can be recommended equally for those interested in the evolution of Jungian ideas and those with no knowledge of them.

ELPHIS CHRISTOPHER

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Heinz Kohut and the Psychology of the Self

by Allen M Siegel. Routledge. London. 1996 pp.226, pbk £14.99

Siegel's book is intended to broaden our understanding of the work of Heinz Kohut, the Viennese-born, Chicago-trained psychoanalyst and founder of Self Psychology. In the period from 1966, when Kohut published the article 'Forms and Transformations of Narcissism', to the appearance of his *Restoration of the Self* in 1977, Kohut moved gradually from an interest in both pathological and healthy narcissism within a broadly classical analytic framework, to the proclamation of Self Psychology as a radical departure from mainstream psychoanalysis. This rift, and the theoretical justification for it, echo through the book and ultimately undermine its accessibility to a modern British readership. It is as if the wounding charges and counter-charges of the late 1970s are still too recent, or too personal for Kohutians like Siegel, for the necessary level of objectivity to be possible. This strikes the reader in the very first chapter, a contribution by Kohut's colleague Ernest Wolf. Wolf's superficial memoir is flawed by a strident sectarianism, and fails to deliver the 'penetrating insights' promised in the introduction.

The next chapter is entitled 'The classical foundation of Kohut's thought'. The presentation is based on lecture notes from a course jointly run by Kohut and Philip Seitz, a course which, Siegel states, 'reveals [Kohut's] mastery of Freud's work better than anything else I have read' (Siegel p.3). Again the reality cannot sustain our heightened expectations. The result is confused and confusing: it contains many questionable conceptual formulations and some factual errors - for example the assertion that Anna O was Freud's patient after she was Breuer's, and that she invented free association (ibid. p.20). These shortcomings would seem to flow from the need to underpin Self Psychology with a convincing rationale, an issue I shall return to below.

The main sections of Siegel's book provide detailed summaries of Kohut's major works, illustrated with clinical vignettes from Kohut's or Siegel's own practice. Here we are taken through the central concepts of Kohutian psychology: the grandiose self, the idealised parental imago, the selfobject (where the absence of a hyphen parallels the experience of the early self merged with the 'function-providing object'), the bipolar self, optimal frustration, the transmuting internalisation and so on. He succeeds in giving us a thorough outline of Kohut's intellectual development, setting his better known concerns about narcissism in their sequential context as the forerunner of a more ambitious attempt to establish the foundations of a new 'psychology of the self'. However, an adherence to the structure of the original texts prevents the reader from feeling party to a living investigation of their contents.

Siegel ends with a ten page 'Critique and Conclusions'. Here he indicates his personal reservations about some aspects of Kohut's model, notably the bipolar self, and points to inconsistencies in Kohut's attitudes towards the drives. In general, however, the discussion is more restrained and less penetrating than that found, for example, in Greenberg and Mitchell, and tends to centre on aspects of Kohutian theory which subsequent Self Psychologists have themselves rejected, or gaps which they have since filled.

Despite the apparently syncretic nature of the book's aims, Siegel's stance is not simply that Kohut has ideas that analytic psychotherapists might find useful; it is that Kohut provides the only acceptable psychology for modern therapists. He is presented as a man with unique insight struggling against the suffocating orthodoxies of his day, a thinker whose true voice is heard only to the extent that he shrugged off commitments to earlier theories and their institutional representatives. Freud is also a hero - the founding father - but as his work is now superseded he, or rather the movement he founded, is now the enemy. Those who retain an allegiance to the old ways are castigated as rigid, inadequately analysed dogmatists whose outdated theoretical baggage prevents them from understanding their patients.

The basis of these claims lies in the argument that the psychoanalytic tradition was fatally flawed by its being founded on Freud's instinct theory. Hence the centrality of Siegel's chapter on the 'classical foundations' referred to above. In this chapter Freud's earlier models are given excessive weight in comparison to his later writings; and the basic concepts even of the early period are presented in such perfunctory fashion that they lack sense or clarity. Given the subject matter of Kohut's writings a treatment of Freud's views on narcissism, and a discussion of the ego in Freudian and post-Freudian thought, are conspicuous by their absence. After a passing nod to the structural model, for the remainder of the book the reader is invited to view 'classical theory' as more biology than psychology, a crude preoccupation with drive-determined conflict, indifferent to the subjective experience of the person and to their relationships with others.

Kohut, blessed with an unrivalled empathic capacity - or rather a novel understanding of the place of the empathic presence of the therapist in effecting change - is thus alone in a position to gather the 'new data' from which a valid therapeutic system could be constructed (e.g. Siegel p.50). This is not a simplification concocted by Siegel for what is an introductory text: it has been common to Self Psychologists since Kohut himself (see, for example, Paul Ornstein, 1990, p.10). It is no accident that no other theoretician is mentioned in the book. By their refusal to accept that the issues they address might have been usefully considered within other analytic models, Kohut and his followers have provoked criticism which they then portray as persecution and intolerance,

or as confirmation of their critics' rigidity. Those directly engaged with them in the American Psychoanalytic Association were exasperated (see Rangell 1982, and the references it contains); but even sympathetic writers like John Sutherland have found their claims bewildering (Sutherland 1989, pp175-6). Greenberg and Mitchell (1983), who present an incisive critique of Kohut's theories, make what amounts to a charge of systematic plagiarism. They show 'striking similarities' to the work of Fairbairn, Winnicott, Guntrip, Mahler, Jacobson, Horney and Fromm and comment that 'these similarities are never openly addressed or considered by Kohut, who presents himself as if he were working in a vacuum, continually breaking new ground' (p.366). However dominant classical theories and technique were in the United States, Kohut's ideas were not as original or as unheralded as Siegel suggests. One would not think, reading Kohut or Siegel, that Fairbairn has been proposing similar revisions forty years previously, or that many other writers in the States and Britain had been extending analytic enquiry in the same areas in the intervening decades.

A strict adherence to the over-simplified bifurcation between 'drive-conflict theory' and Kohutian self-psychology haunts all of Siegel's attempts to place Kohut's work. This focus prevents him from exploring areas of agreement and difference with other analytic schools. Paradoxically, this attitude also prevents due weight being given to the impact that Kohut's ideas have had on the analytic world. That his writings, particularly from the middle period, are widely discussed in the psychoanalytic literature is ignored: to acknowledge this would, perhaps, contradict the view of Kohut's thinking as an oasis in the midst of barren desert, and detract from the exclusive pretensions of Self Psychology.

A further consequence of Siegel's approach is that ideas advocated by Kohut are wrongly attributed to him. To cite one minor example (and there are many): 'passage through the object' is a concept said to be 'first described in 1963' by Kohut (Siegel p.71). It refers to a process where narcissistic libido is projected to form the idealised parental imago, and is then reintrojected as a consequence of gradual disillusionment with the actual parent. The mechanisms involved are common ground to probably all analytic schools, and the precise formulation had been prefigured by the encyclopaedist of 'classical' theory, Otto Fenichel (1945 p.388).

According to Siegel, Kohut responded to criticism of the way he presented his ideas by saying that he needed to develop his ideas 'uninterrupted by concerns over integration. The time consuming scholarly work of integration ... would be done by his colleagues and students' (Siegel p.197). There it is left. Siegel does not attempt such a scholarly exercise, and there is no longer any sense that it might be necessary. It is as if he wants us to accept that Kohut's ideas can be assessed in isolation, an attitude that does poor service to Kohut

and to his readers. Nor can the book be recommended on stylistic grounds. The writing is uninspiring and shows little sign of editorial care; the bibliography is poor and the index incomplete and inaccurate.

MARTIN KEMP

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Living Together

by David Kennard and Neil Small (editors) Quartet Books,
London, 1997, 223 pp p/b £9.00

Eighteen people contribute directly to *Living Together*. An original eight first met in 1994, not to write a book, but to ask themselves whether as psychotherapists and counsellors they had something useful to say about and offer to our rapidly changing society. They formed the Social Project for Psychotherapists and Counsellors. It was only after some meetings that they felt that the first useful thing they could do was to bring together a book that would open up lines of communication between the therapeutic world and wider society. They decided not to write it themselves but to invite others, writers already, with things to offer in this kind of bridge-building. The number involved thereby rose from eight to eighteen, the original Project Group discussing each chapter as it came and, in most cases, adding a commentary to the chapters, sometimes for further stimulation, sometimes to clarify. The book is edited by David Kennard and Neil Small, two of the eight. To give continuity they gave all contributors the same three questions to think about:

1. Through your work in the field of mental health what do you think you have learned about what it is like to live in today's society?
2. How do you respond to what you have learned, personally and professionally?
3. In the light of your answers, what new arrangements/activities/structures do you think would make our society a better place to live in?

The chapters are written by psychotherapists: Susie Orbach, Dorothy Rowe, Andrew Samuels and Valerie Sinason; psychoanalysts: Bob Hinshelwood and Roy Weatherill; and Eric Miller, Barry Richards and Stuart Whitely using psychoanalytically informed thinking in working respectively with organisations, sociology of popular culture and therapeutic communities.

In their response to these questions the authors look at individuals and society, though they have different emphases and preoccupations.

The editors use the analogy of themselves as hosts at a dinner party, with different authors providing separate dishes for the reader to taste and enjoy: some new, some familiar, some strange, perhaps some more palatable than others.

Three chapters can demonstrate something of the range on offer.

Valerie Sinason, who was a teacher and is now a child psychotherapist, challenges the idea that as individuals we assume we inhabit the same society. Thinking of childhood experience, she asks 'which child are we considering?' She believes that 'class, living conditions, nature of attachments and attachment figures, religion, gender, intelligence and health' (p210) deeply affect the child's experience.

With her use of three poems (written by her during her earlier years of teaching experience) and her own memories as a child, she sensitively highlights that most vulnerable individual in our society, the child.

*That child in the back row
tired from the paper round
sips his school milk
and shrinks.*

*His book is open at the wrong page.
It is the wrong book too.
He fills his pen with failure
A slow inkstain covers all.*

*I am looking at the stars of skin
that stare through his shirt
and never shine.(p42)*

She stays close to the deprived child and challenges us, the readers, to stay close too to vulnerable children's experience within adult society, which can so painfully disregard, confuse and invade them. She believes that staying close to this pain (which can be so disturbing and alien) can strengthen us.

Perhaps it is this hope of hers that enables her to think that the treatment of the child will improve in future years. Corporal punishment has been abolished in schools, but is still a fact of life in many homes. Valerie presents disturbing statistics about the frequency of physical punishment in the home, and the connection between that and later delinquency, but she believes that present trends are towards 'a progressive lessening of physical punishment in the home'. (p44).

Valerie Sinason's contribution emphasises the immediate, the personal. The group commentary uses her idea and widens the discussion to an assertion that generally we know so little about other people's experience and we want to keep it that way to avoid the discomfort of having our assumptions challenged. If we allow ourselves to appreciate other people's experience and pain (the refugee, the mentally ill, the unemployed) false assumptions can be exposed. 'The more we organise our lives on false assumptions, the more likely we are to misjudge the effects of what we do, whether as an individual or a society. Such misjudgements weaken our real effectiveness'. (p47).

The particular focus of the chapter by Eric Miller who was an anthropologist and is now in organisational research and consultancy, is on the changes in the last fifteen years in how the individual relates to the work organisation. Eric sees what has happened as a process moving from the 'Dependency Culture' from the end of World War Two, to the 'psychological withdrawal' of the individual from the work organisation which he thinks is prevalent now. He views the family, school and work place as institutions which traditionally have given us our different identities where we struggle with interpersonal, inter-group relations. Presently all this has changed, and is changing. Right through this contribution, the external is woven in with the internal. At an unconscious level we are constantly moving forward or backward along the developmental stages. He draws on Melanie Klein's view of a child's psychological development and developing need of a sense of self. We are unpredictable, longing for order and the predictable. We each develop a 'repertoire of defences to cope with inconsistencies and contradictions'. (p101) both within ourselves and in the external world we inhabit.

Eric says that in writing the chapter he found himself at times caught up in the defence of spitting, identifying with the 'betrayed' against the 'betrayers'. This is not surprising because he has strong feelings about the devastating toll on individuals and families of redundancy, of top management's blindness to the effect of gross inequality of salaries, about the despair of the unemployed: "millions of individuals have been deprived - some of them permanently - of an identity that has been a component to this sense of self....". (p115).

The group's commentary examines further the uncertainty and stress in the world of work since 1979. They cite surveys of the impact of changes in work on individuals and families' well-being and give statistics which demonstrate deep anxiety in relation to job security.

There may be room (as Eric suggests) for some optimism and interest as to new evolving patterns of work, but the overall thrust of the group's commentary is to do with the present experience of work as part of our 'anxious society' and how it impacts on the internal world of the individual. So organisation 'speak' such as 'downsizing', 'outplacement', 'outsourcing' refer to new ways of organising work but may intensify the individual's insecurity and sense of alienation, resulting in psychological withdrawal from the world of work.

As the editors point out this is an 'ideas' book. Bob Hinshelwood (psychoanalyst) in his chapter warns against the idea that passes from the mind of the originator to become the driving force in a group which takes it as its inspiration. The combination of a group with an idea, which is seen as a 'truth', produces an ideology.

The idea of a group holding a truth rests on what Bob calls 'a position'. A group will see its true idea as obvious objectively. But for a human, standing apart and being objective is an unattainable wish. The lesson of history is that humans are not reasonable or objective. We take up positions from which our view is only partial and always abstracted by passions which we do not (cannot) acknowledge. 'Whatever idea we have and impart are always driven by the moment and place' (p134).

The example is given of the 'aggressive begging' debate which came up in the mid-1990s. Thus an idea about the unacceptable presence of beggars on our streets was presented as a social issue. What was not recognised were the unconscious emotional processes (Hinshelwood's 'passions') involved in this idea. The unacknowledged guilt and responsibility which the presence of the beggars aroused were pushed back onto the beggars who were seen as aggressive and blame-worthy.

In looking for solutions the idea of pluralism and neutrality are considered. However both are seen as only partial solutions because neither give proper place to the passions.

Bob Hinshelwood puts forward some ideas he has about creative solutions and talks about the 'creative impulse' (rather than an ideology) as a basis for social bonds in a group. He gives the obvious example of the family or of artistic groupings which have happened throughout history. The commentary on this chapter sees this 'solution' as perhaps somewhat 'fanciful', as it considers small groups as examples, which may by the nature of their size, avoid some of the more hidden passions.

However his idea coincide with other writers in the book who acknowledge the move from individual psychology to social psychology. This is a 'major transition' (filled with pitfalls), but nevertheless they advocate using the understanding that painstakingly emerges between therapist and client in the safety of the consulting room, to try to understand the issues of our society today. The use of a psychodynamic lens to see society is no more objective than any other position. It can, however, alert us to processes that will otherwise be unacknowledged.

This book grew out of a group process and the group filters back into the book. This results in a lively sense of different themes reflecting, developing, relating to each other. It would certainly be a very effective stimulus for any group in society which wishes to grapple with the central issues about 'what it is like to live in today's society'.

JILL WALKER

On Private Madness

by André Green, Karnac Books 1997 pp 380 p/b £17.95

This dense and wide-ranging book brings together fourteen essays in which the author defines his position in the contemporary psychoanalytic world by writing on a number of issues which are at the core of the present debate, mainly narcissism and borderline states.

In his introduction Dr. Green describes himself as a 'fairly representative sample of the French psychoanalytic movement of the second half of the twentieth century' and, though he chose to be analysed by a non-Lacanian, Bouvier, he acknowledges his debt to Lacan who led him to a rigorous re-reading of Freud and awakened in him and others, as he says, 'the ardent wish to work and think'.

However he was never more than a fellow traveller and his criticisms of Lacan are both theoretical and personal; theoretically, it concerns the occultation of affects in Lacan's understanding of Freud and, personally, an arrogance which lead to a manipulation of the transference and an absolute allegiance to his person.

The second influence in the development of Dr. Green's thinking is that of the British Psycho-Analytical Society, mainly Winnicott and Bion. In their work and his encounters with them, he found what he had missed in Lacan's excessive abstractions, a new way to hear and interpret; they (Winnicott and his followers), he writes, 'gave an airing to psychoanalytic space, stripping classical technique of its rigidity and giving renewed freedom to the analyst - analysand pairing'.

In the debate French Intellectualism versus Anglo-Saxon Empiricism he refutes easy classifications and finds Bion to be the most authentic intellectual. This collection of papers, however, is, in my view, the product of a French intellect, eschewing clinical illustrations and remaining uncompromisingly theoretical.

The theme which unites the essays is the Private Madness of the title to which he often refers and which he describes more fully in the chapter entitled 'Passions and their Vicissitudes.'

There he makes an important distinction between madness and psychosis and claims that madness is present in all transferences, indeed it is only when the subject's madness enters into the transference situation that analysis can really take place. He notes that madness has disappeared from the classification of disorders as a shameful reference and that though Freud neurotified hysteria according to the clinical categories of his time, his hysterics were no more neurotic than psychotic, they were in fact mad, for.

he says, 'madness is at the heart of human desire.'

'The madness at the heart of man is not the prerogative of pathology. Madness which is component of the human being, is linked to the vicissitudes of primordial Eros which are in constant conflict with the destructive instincts. When Eros prevails, it is because the passions which inhabit it become bound and psychosis is averted. But when the destructive instincts triumph over Eros, the unbinding process is stronger than binding and psychosis wins through.'

The analytical task then becomes an attempt at binding this unquenchable libidinal tension through meaning. We recognise here the influence of Bion. He then adds to his thesis of normal madness that of 'normal maternal madness' assuming that during pregnancy and later in her exclusive relationship with her infant the mother's need for a reorganisation of perceptions and remodelling of feelings towards the world in order to focus on her baby, amounts to a state of quasi madness. It is important that this maternal madness be counterbalanced by her role as auxiliary ego and for that she must be able to accept and contain her own instinctual life so that she may accomplish her double task: enabling the child to recognise his own instincts in her and returning them to him in a more acceptable form.

This serves as a template for an analytic couple which is very close to that of Winnicott or Bion. Where Dr. Green differs, is in his revaluing of the role of the father who not only contains the mother's madness but is present from the beginning and is included in the mother-baby relationship. Without the father, there could not be a mother-baby couple. He insists on this triangulation throughout the book; in 'The Dead Mother' for example:

'The Oedipus complex should be maintained as the essential symbolic matrix to which it is always important to refer, even in cases of so-called pre-genital or pre-oedipal regression, which implies the reference to an axiomatic triangulation. However advanced the analysis of the decathexis of the primary object may be, the fate of the human psyche is to have always two objects and never one alone, however far one goes back to try to understand the earliest psychical structure' and further in a different context.

'And here my agreement with Winnicott reaches its limit.... I would maintain, for my part, that there is no such entity as a baby with his mother. No mother-child couple exists without a father somewhere....the child is the product of the union of the father and mother. Of this union he is the material, living, irrefutable proof.... thus we can assert that ultimately there is no dual relationship.'

For him the third element in the analytical situation is supplied by the analytic setting.

This is a very rich book and I can only enumerate some of the topics which it addresses.

One is the author's preoccupation with mental processes which he shares with Bion. He links the birth of thinking to the Lacanian concept of absence which is neither loss nor death but a potential presence, a condition for the possibility not only of transitional objects but also of potential objects which are necessary to the formation of thoughts. He states that the presence - absence pair cannot be dissociated, the two terms being interrelated as perception and representation but recognises that a tremendous effort is necessary to tolerate absence and differentiate it from loss, thus giving to the representational world its full role in one's imagination and thought. - 'only the absence of the object can be the stimulus for imagination and thinking, in other words for psychic activeness and aliveness'.

He questions the wisdom and even the possibility of transforming primary processes into secondary processes but suggests the initiation of play between them by means of processes which he calls tertiary, and which he believes to be the most efficient way of establishing a flexible mental equilibrium and a safeguard against splitting. This is reminiscent of Winnicott's transitional space but for Dr. Green this space can be located in the preconscious of Freud's first topographic model. He sees the preconscious as mediatory and transitional, a binding agency of mental energy, linking the primary and secondary processes and quotes Freud in support of his hypothesis: 'The inside of the ego which comprises above all thought processes has the quality of being preconscious.' Technically and in a veiled criticism of Kleinian interpretations he suggests that establishing links which are proffered by the preconscious, which supports the tertiary process without shortcircuiting it by going directly to the unconscious fantasy, is never intrusive.

Writing on narcissism he distinguishes a positive and a negative. One, a unifying factor from the ego where its libido endeavours to achieve ego cohesion and tends towards oneness, and the other, arising from the destructive instincts, which tends to reduce ego cathexes to nought and manifests itself in the yearning to vanish, to be drawn towards death and nothingness.

There are references to, and expansions of, themes he has treated elsewhere, for example, blank psychosis, negative hallucination, the concept of the double and his distinction between red anxiety (associated with fantasies of a bloody act) and black as in severe depression or blank (*blanc*) as in states of emptiness.

As for the apparent increase of borderline patients as opposed to neurotics, he believes that it has more to do with the increased sensitivity of the analyst's hearing which enables him to pick up archaic conflicts which might have passed unnoticed in the past.

Throughout the book the writer's preoccupation and concern about the present crisis in the contemporary psychoanalytical world is tangible. He

regrets our inability to hear each other and hopes that out of the present confusion a creative resolution will emerge.

I have only had space to speak of the content of the book, the signified, not of the *signifier*: the actual process of writing to which Dr. Green addresses himself in the introduction ('why do I write?') and in the last two essays. In one he underlines the significance and value of psychoanalytical literary criticism, in the other he wonders about the future of literature as we know it i.e. in its preoccupation with representations. These are fascinating pieces which show the wide spectrum of Dr. Green's interests as well as the rigour of his thinking. I cherished specially a passage on Henry James's *The Ambassadors*, in which the reader had felt the unacknowledged presence of the father and later on found confirmation of his intuitive understanding through a meticulous examination of the texts containing the genesis of the novel.

I found this book difficult but never arid. Dr. Green uses paradoxes elegantly and he can animate the most abstract theoretical elaborations with a powerful poetic image. Some of his writing shows the clarity and poignancy of the Freud of *Mourning and Melancholia* and there is an almost Racinian echo in the following passage : 'The object is "dead" ... hence it draws the ego towards a deathly, deserted universe. The mother's blank mourning induces blank mourning in the infant, burying a part of his ego in the maternal necropolis.' His erudition and curiosity of mind are somewhat awesome but there is a passion - madness? - in his wish to communicate what he knows and what he believes, which is both illuminating and deeply moving.

YVETTE WIENER

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Applications for training need to be in by 30th November 1998.

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NOTES FOR CONTRIBUTORS

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James, H.M. (1960) Premature ego development: some observations upon disturbances in the first three months of life. *Int. J. Psychoanal.* 41:288-295. Winnicott, D.W. (1971) *Playing and Reality*. London: Tavistock.

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