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דבר העורכת

דנה אמיד

אריך פרום הציע בספרו *מנוס מחופש*, שעסוק באופןיים שבhem כל תרבות מתווכת את מה שמורשה לחדרו לתודעה, שלושה מסננים מותנים חברתיות: השפה, הלוגיקה והטابו החברתי. השפה, טען, חוברת למני הטעבו החברתיים והתרבותיים בכך שהיא משמרת את ה"לא ניתן לדבר" התרבותי ומונעת את האפשרות לבטא אותו או לחשוב עליו. כתוצאה לכך יתכן שתנטסה במשהו שלא רק לא יעלה על דל שפתינו אלא גם לא יעלה על דעתנו; משחו שבhiveדר כלים המתירים לנו לנசח אותו יהפוך ל"לא נחשב", מודח במקורה הטוב ומוכחש או מורחך מן התודעה במקורה הרע. המאמרים והמסות היפהפיים הממלאים את הגילון הנוחחי של מארג, מציגים צורות מגוונות של חילוץ השפה מן המלכוד שלה כמסנן מותנה. כל אחד ואחת מהם מציע/ה טנספורמציה ייחודית ממה ששמסר את הלא ניתן לדבר למה שנאבק עליו הדיבור; مما שמייצר ידוע שאינו נחسب למה שמחבר את הנחسب עם הידוע; מכוח קולברטיבי המדריך כל סוג של ריבוי, לכוח קוואופרטיבי התופס את הריבוי האנושי הן כמצע, הן כאופק.

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REFLECTIONS ON THE DREAM DISCOURSE

ITAMAR LEVI

My essay traces three stages in the psychoanalytic understanding of the dream beginning with Freud's initial writings until today. Specifically, I trace (a) a Freudian stage emphasizing the interpretation of latent content, (b) an object-relations stage interpreting the dream as a dialogue between internal objects as well as the use of the dream as an object in the analytic hour, and (c) an independent stage focusing on the activity of thinking, representing, or symbolizing. In practice, these three stages may appear as three strata, or be conceived of as three points of view, each of which has received varying emphasis in different schools and eras.

The Freudian, or latent content point of view, did not change radically since Freud presented it in 1900. The analyst asks for associations to the various elements in the dream, allows her- or himself to associate as well, and then reassembles the elements so that the latent, unconscious wish and meaning are revealed.

The object relations point of view, developed among all three groups of British psychoanalysis, shifted gradually from interpreting the wish to interpreting the relationship (i.e., intra- and intersubjective feelings) between the various objects and parts of the self that appear in the dream. Quite often a dream does not manage to contain all the parts, and some dream-related role is projected upon the analyst. In such instances, the analyst's interpretations will not be based solely upon the patient's associations, but also upon the analyst's countertransference experiences as well. In this view, naturally, the analyst's task is more active and even more participatory than in the classical technique.

I then discuss a third model or point of view: *dreaming as thinking*. Although all major writers since Freud discussed the conditions of representation, symbolization, or mentalization that pertain to the basic dream function, it was Bion's idiosyncratic theory of thinking that enabled a new focus upon the experience of dreaming as a form of thinking. In Bion's overall view, thinking faces obstacles or anti-thinking forces, hence a dream brought to the analytic session must be viewed as (a) a collage of various levels of representation and

even more primitive levels of thinking, (b) can be expected to be resisted as are most forms of creative thought, and, finally, (c) will need to be re-dreamed by both partners during the unique conditions of the analytic session, so as to enable both partners to “re-think” the dream.

These three levels of interpretation are demonstrated by the reconsidering the analysis of Freud’s Irma dream. The first level is, of course, Freud’s own interpretation of the dream, emphasizing fears of failure and public humiliation. The second approach is based upon Erikson’s (1954) interpretation of the dream, highlighting the broader relationship between Freud the diagnostician, the interpreter, and Irma, the not yet fully diagnosed dreamer. For Erikson, the dream is a reflective dramatization of Freud’s struggle to interpret the dream. The third reading of the dream emphasizes the discrepancy in levels of representation between the almost formless inside of Irma’s throat, on the one hand, and the clear verbal thinking of the “Freud of the dream,” dreamed by Freud, on the other hand. In this latter view, the Irma dream is an attempt to think the unthinkable.

I contend that dreams are revealed through this analysis to be miniature models of the mind, a collage of mental areas of different levels of symbolization and the struggles or conflicts among these levels .I then list several dream motifs or qualitative modes that indicate difficulties in thinking and representing. Such motifs may be blurriness or forgotten parts, roughly stitched collaged elements, the appearance of foreign languages and illegible scripts, formless materials, and disintegration and anxiety. These various levels of thinking and symbolization are demonstrated by the analysis of three dream vignettes. Difficulties and failures in representation are discussed, alongside creative solutions.

The essay ends with a brief discussion of Karl Abraham’s paper on scopophilia (1913), wherein he highlights the wish to represent or see things that cannot be visually represented, such as the moment of conception or the origin of thinking. While pointing to the incestuous voyeuristic wish, Abraham also points to the wish for self-healing by merging with one’s creative source.

THE MOTHER'S NAMES OF THE FATHER: ON NAMES AND SUBJECTIVITY

Yael Pilowsky Bankirer

A traditional custom in ancient societies, and still today in some cultures, was that the name of the newborn child be given by the mother. Names—denomination, in general—often reflect the mother's experience during pregnancy and birth, marking the child's life after birth with the first imprints of her internal world. Indeed, naming and birthing have been interrelated throughout history, and the place of maternal subjectivity, her experiences, thoughts, feelings, and beliefs during pregnancy and childbirth, receive recognition when entering the order of language.

While in the past maternal experience was afforded meaning through these rites of naming the child, curiously later developments tended to blur the traces of maternal subjectivity in the various imprints that the child carries into the symbolic. Maternal significance in naming—and more generally, in the child's transition into language—seems to all but disappear under an Oedipal structure that is centered around the-name-of-the-father. Under the Oedipal perspective, strictly construed, the multiple-factorial aspects of maternal subjectivity collapse into a two-dimensional dyad in which the maternal is reduced to its bodily function and in which the name—and, again, language more broadly—becomes a mere “solution” to a biosocial question of proprietary relationship. Words that are then created within an Oedipal system no longer serve as testimony to the mother's inner world, nor even as a sign of the difficult task of separating from her, but rather as a function that *shelters* the subject *from* the maternal dimension, as an antidote to the relationship with the mother, created through her omission. I am aware that the name-of-the-father is fundamentally a triangular concept, however the *mother's*-name-of-the-father often disappears in psychoanalytic theoretical discourse and the role of maternal subjectivity in the child's transition into the language is overlooked.

In my essay, I attempt to show that while most psychoanalytic thinking is focused on the paternal function through an oedipalized structure, there is special importance to the mother's complex part in assigning a name, and,

more generally, in the child's transition into the symbolic. Reading different interpretations of Julia Kristeva's conceptions of the maternal, I elaborate upon on the complexity and paradoxes inherent in the maternal role of giving a name. As well, I raise questions about a certain sense in which matricide change as to is a vital necessity in the process of becoming speaking subjects. Whereas for Freud, the law of the father creates a sharp cleavage or rupture that releases the child from the maternal grip, moving the child toward language, Kristeva's understanding (and followed by Kelly Oliver's reading) substitutes this rift with love, showing that separation from the mother's body is preceded by a process of identification with her subjectivity. By holding together both the relationship with her child together with her own longing for a "third" beyond him/her, the mother thereby links the child to his/her first symbolic space. The elementary triangular, and later on fully oedipal structure requires an identification with maternal desire through which the space is created for the entrance of the father.

I maintain that the *mother's-name-of-the-father* is too often relegated under a structure that denies maternal subjectivity, and that it is not only women that pay the price. What is the cost of a language that is unable to carry within it the traces of the maternal; a language that erases not only the presence of the mother but also the marks of separating from her? Through a clinical example I elaborate on the costs of growing up in a culture that encourages both male and female children to have to create their identity through a violent negation of the maternal and in which the necessary identification with the mother's own subjectivity is at least partially blocked or blotted out. Where there is repudiation of maternal love within the budding rudiments of language and identification with her subjectivity, the gradual process of becoming familiar with the *name-of-the-father* is also prevented from unfolding smoothly. Instead of being allowed to experience the gradual growth of semiotic links that will bridge between voice and meaning, enable the child's first steps into the symbolic, the dimension of the maternal becomes an anxiety-inducing spectral realm, wherein lurks uncannily the ghost of the *name-of-the-father*. In short measure, this aggravates the already inherent quality of alienation that all language carries.

I enlist the Bionian concept of the "no-thing" in order to explore the elusive traces of the *mother's-name-of-the-father*. Under the classic Oedipal structure, subjectivity had come to mean the negation of motherhood, and the maternal had been marked as an absence, as a radical otherness or nothingness. However, as Bion writes, the "no-thing"—which, by isolating

the negational prefix, resounds in the Hebrew word for motherhood (*e-ma 'hut*, or, no-mother)—is not sheer nothingness (that would be a “*non*-thing”), but rather an essential negativizing element of psychic life that can give birth to things and create new meanings. As Bion explained, meaning itself is not a thing but a no-thing, and when the no-thing is denied, when crucial no-things are treated as objects or as mere nothingness, the creative space inherent to it collapses. By extension, in the case of the maternal, we would add the ability to think, to imagine, and to understand its various aspects of maternal subjecthood, beyond her mere corporality.

**SIDE BY SIDE:
RELATIONAL PERSPECTIVE ON WORKING WITH DREAMS
USING EARLY PSYCHOLINGUISTIC FREUDIAN IDEAS**

RAVIT RAUFMAN

I present an approach to working with dreams in the psychotherapeutic endeavor, that combines Freudian psycholinguistic ideas with a contemporary Relational view. The basic premise relies on previous publications, emphasizing the unique status of idiomatic expressions as bridging the gap between concrete and symbolic aspects of human thinking, and more specifically: the unique status of idiomatic expressions which include body parts, or associations with bodily experience. On the spectrum of somatic-sensorial and abstract layers of human experience, these idioms play a pivotal role in the way by which bodily sensations express themselves through language. I believe that this argument is different than other psychoanalytic formulations dealing with the affinity between language and body, stating that language has found its way to connect with early primary sensations. However, in previous research this idea was developed within the study of fairy tales and behavioral symptoms, whereas the current work focuses on working with dreams. The current essay focuses on the way this approach may be used to better understand dreams and the meaning of their sudden appearance in the psychotherapeutic dialogue.

The early Freudian psycholinguistic view, which suggests understanding the phenomenon of realization of idiomatic expressions as a border between different qualities of thought processes, is augmented here by a Relational view, emphasizing the mutuality aspects of the therapeutic relationship—not merely as a state of mind, but as a fundamental ingredient in the task of processing traumas. In so far as all language includes a communicational component, the Freudian idea of viewing realizations of idiomatic expressions as simply bridging the gap between different qualities of thought processes should be better understood in a dialogic context, including the psychotherapist's own subjectivity. On this reasoning, I try to portray the affinity between early ideas formulated in psychoanalytic thinking and more contemporary Relational streams.

I illustrate my views with vignettes from the therapy of a woman who struggled with physical disability during her infancy. I emphasize a pivotal point in the therapy, in which the patient shared a dream that enabled us to identify the realization of somatic idiom. The therapist worked with this realization, attempting to decipher its various meanings and how such idiom functioned in the analytic endeavor in both content, form, and communicational qualities. Deeply meaningful progress was enabled after the therapist could identify a realization of idiomatic expression in her own dream, which articulated with the patient's dream. I found that by deciphering the phenomenon of realization of the idiomatic expressions that appeared in her dreams, including how I myself used these revelations in order to guide my therapeutic interventions, helped us to understand not only the language of the patient's trauma, but also the special language unique to our therapy, co-created by both patient and therapist.

**THE RAVAGE WRECKED BY LOVE:
SEXUAL TRAUMA FROM THE PERSPECTIVE OF
LACANIAN JOUSSANCE**

LITAL PELLEG

While the extensive impact of early sexual trauma is well-known and most of the relevant clinical issues are more or less agreed upon, sexual trauma continuously raises questions regarding the unique and decimating nature of the specific psychic mechanisms that are activated in response to such trauma. In this paper, I wish to utilize Lacan's language and conceptualizations to focus on a particular aspect of this issue. Namely, I will discuss how sexual trauma creates what Lacanians refer to as "surplus knowledge" of the other's imprint on the development and formation of self, or upon the sense of ongoing selfhood. I believe that it is this element of surplus knowledge that hinders the survivor's ability to identify with their own singular jouissance, thus preventing them from leading a creative and passionate life, which they experience as being insufficiently under their control. I will present several clinical vignettes to illustrate the destructive effect of this aspect and its relation to suicidal symptomatology.

One of the basic assumptions of contemporary psychoanalysis has to do with the capacity to recognize the essential impact of the imprints of otherness, expressed through object representations and relationships, on the formation of the subject. This line of thinking is emphasized by Lacan (though he did not prefer to speak of "object relations" as such), who depicted how the encounter with the other structures jouissance and the unary trait—an erotic trace that becomes assimilated as the imprint of otherness in the subject's body, establishing their unique and singular "first name." Seeing as, in Lacan's view, the handprint of the other shapes the fundamental trait of selfhood, the formative process of any subject must traverse the expropriation (by the other, intentionally or unintentionally) of the potential for absolute 'authentic' selfhood. The subject cannot erase the jouissance and the unary trait, nor rip them from their flesh as it were (and sometimes literally), because they have been welded onto the body at such an early stage of development as to be

experienced as identical to what the subject feel to be his or her actual “self.” Accordingly, the subject who wishes to establish a life that is driven by self-originating action and desires must ‘make-do’ with identifying with the unary trait, while doing his or her best to shed imaginary identifications and by refusing to become obediently, slavishly assimilated into the symbolic-cultural order.

In this paper, I propose that this psychic process is precluded in survivors of early sexual trauma. Sexual trauma in early childhood is recognized to have a crucial impact on shaping the victim’s psychic structure. In my view, the sexual assault creates a distorted duplication of the primary *jouissance* environment, in which the imprint of otherness is registered in the body in an exceptionally self-negating manner. In normal development, *jouissance* and the unary trait are interwoven through a relatively adapted encounter between the baby’s body and the mother’s body and psyche. In good-enough circumstances, this process facilitates the assimilation of *jouissance* and the unary trait into the baby’s self-experience, alongside the vital illusion of authentic selfhood or “true self.” However, in instances of sexual assault, sexual contact creates a senseless and unrepresentable excess of stimulus, which radically exceeds the victim’s natural needs and therefore cannot be assimilated into the budding sense of selfhood. The victim is thus removed from her role as co-creator of the unary trait, precluding the soft, osmotic settlement of *jouissance* in the body. Instead, *jouissance* is imprinted on the body with violent alienness, through an overstimulation that exceeds the capacity to tolerate and assimilate it into what is experienced as the self. The destructive result of this course of events is what I consider a “surplus knowledge” of the imprint of otherness in the body, generally overshadowing and overwhelming the self. This, in turn, leads to the inability to identify with the unary trait as a foundation for a life that it supposed to be free to revolve around the various manifestations of desire.

The sheer force of the alienness of the *jouissance* that is imprinted in the body, together with the “surplus knowledge” of the experience of having been imprinted by the other, is manifest in a variety of symptoms, including a fascination with death. Through several clinical vignettes, I propose two perspectives for understanding the relationship between the surplus knowledge of the imprinting of *jouissance* and unary trait by the other, and suicidal symptoms and preoccupations that tend to characterize survivors of sexual trauma. The first perspective, a Lacanian one, views the yearning for death as a destructive yearning for the fatal *jouissance* that is imprinted on the body

of the survivor. The second perspective highlights the struggle to annihilate jouissance by resisting the original violence with which the body-self had been imprinted.

In concluding, I explore whether the experience of the alienness of the other's imprint in the individual's psyche is exclusively related to pathological conditions such as early sexual trauma, or whether the clinical presentation of sexual trauma is potentially indicative, albeit in a greatly exaggerated way, of a universal need to face the experience of alienness imprinted in the self. This distinction is discussed through a comparison between certain aspects of the views of Lacan and Laplanche. Through this final discussion, I address what I believe to be a specific psychic element that concerns the individual's way of dealing with having been marked and shaped by the other. In my view, this element is central to the subject's striving to experience him- or herself as creating and shaping their own life and selfhood, even if this sense is always limited by the imprint of the other.

**FROM THE DAWN OF METAPSYCHOLOGY TO THE
WIDENING OF THE LIBIDO CONCEPT:
THOUGHTS ABOUT ROBBING, TEARING, AND BINDING**

MICHAEL SIDI-LEVY

I attempt in this article to play with Freud's metatheory, challenging the encounter with what is usually called, at first by Freud himself, "the hex-witch of metapsychology" in psychoanalysis.

What is metapsychology about? I will show how the early foundations or categories of metapsychological thinking were conceptualized by Freud before he ever used the term metapsychology itself. Examining Freud's early writings, the reader is expected to overcome unavoidable cultural gaps and absorb basic concepts. Instead, I suggest, the goal could also be seen as a commitment to a process in which the reconstitution of early psychoanalytical discoveries becomes part of our professional unconscious. I would like to add that if metapsychology, whose roots are to be found in Freud's early writings, is the instrument by which psychoanalysis can interpret itself (Roussillon 1995, 1999), then the learning process will depend on our capacity to play with the text, to move between the contents of theory to the process-oriented or procedural dimension they contain.

I believe that the royal road to acquire knowledge about Freud's metatheory goes through the transformational tools of what he termed "dream-work," tracking unconscious aspects of the theory. As a demonstration, I will introduce one of the classical early texts of psychoanalysis. In part, I relate to ideas presented in the text, but then I pay close attention to the texture of the presentations.

On the basis of the importance of a dialogue established in the culture of the continual contemporary reading of Freud, I also maintain some measure of inter-textual associativity along my reading. In his early descriptions, Freud presents the mechanism of defense as a process in which a quantitative energetic element or excitation is "robbed" or "torn from" a mental representation and attached to the corporal sphere or to an alternative mental representation

(Freud, 1894). As a result of the disconnection in the representational network, Freud says, the “the weak idea will then have virtually no demands to make on the work of association” (*ibid*, p. 48). According to the displaceable path, the binding of the disconnected energy will produce a neurotic symptom or a hallucinatory confusion. This description brought to my attention the fact that this action of “robbing” can be found a few years later in Freud’s writings, evoking one of his childhood memories. Using the same German word *entreissen*—translated by Strachey as “snatching away,” Freud on the later occasion describes an external action: “The little girl has the best bunch; and, as though by mutual agreement, we—the two boys—fall on her and snatch away her flowers” (Freud 1899 p. 311). And in *The Interpretation of Dreams* (1900, p. 172), Freud relates a childhood memory in which we again hear of a “pulling to pieces”—type of action: “I had been five years old at the time and my sister not yet three; and the picture of the two of us blissfully pulling the book to pieces.” These variations of the robbing-snatching-pulling representation, as well as those of binding or attaching, are closely connected to the forces Freud will describe in the later drive theory. The death drive will be depicted as a force of unbinding, undoing connections, while Eros is described as establishing ever greater unities and preserving them. To my understanding, the phenomena of robbing and binding are also reflected in the evolution of the libido concept. At first, the sexual drive is presented as the adversary of the ego preservation drive, and then, in the last drive theory of 1920, the two drives merge together. Yet because of this merging, under the name of the life drives or love drives, one can now speak of a reformulation or a widening of the libido concept.

Following Rosenberg (1991) and his description of libidinal dialectics, or the inner economy of Eros, I propose re-reading Freud’s early theory in the light of the later one, conceiving the configuration of symptoms and psychical functions as a combined influence of Thanatos and Eros—robbing and binding. Moreover, the gathering of the *entreissen*-representations (robbing-snatching-pulling) from the early metapsychology to the later widening of the libido concept, permits an extended examination of what is known as the “weak representation” issue. I link this to the elaborations of Botella and Botella (2007) about the binding force as a survival drive to represent and to dream.

In conclusion, I propose that Freud’s grasp of the quantitative dimension of the psychical apparatus brings us, presciently, or at least ultimately, to the question of otherness. The sexual dimension might be conceived in this

context as a psychic excess which “drives” intrapsychic, relational, and social development.

CROSSING THRESHOLDS OF INTENSITY IN THE AREA OF CREATION

SHANI SAMAI-MOSKOVICH

This chapter employs Gilles Deleuze's (1921-1999) and Felix Guattari's (1930-1992) radical conceptualizations in order to expand our understanding of Michael Balint's (1896-1970) well-known concept of the "area of creation," somewhat less well-known than his concept of the "basic fault." According to Balint, in this area or mode of experience a gap opens up between therapist and patient. Usually interpreted as a resistance or an obstacle to analytic work, this gap can be understood as a crossing of thresholds of intensity, in Deleuze's and Guattari's terms. In this area, analyst and patient find themselves on different planes that establish different uses of language and experience, a state of affairs that may manifest itself in what the French authors call "becoming." I will offer an illustration of these processes, reading a clinical vignette published by Steiner that casts light on the patient's inner experience in the area of creation.

Balint argues that the area of creation involves no external object so that no object relations or transference occur in it, and this is why our psychoanalytic methods have little or no impact here. Here are his own words on the matter, from the Fifth Chapter of his work *The Basic Fault* (1968):

Whereas the area of the Oedipus conflict is characterized by the presence of at least two objects, apart from the subject, and the area of the basic fault by a very peculiar, exclusively two-person relationship, the third area is characterized by the fact that in it there is no external object present. The subject is on his own and his main concern is to produce something out of himself; this something to be produced may be an object, but is not necessarily so. I propose to call this the level or area of creation. The most often-discussed example is, of course, artistic creation, but other phenomena belong to the same group, among them mathematics and philosophy, gaining insight, understanding something or somebody; and last, but not least, two highly important

phenomena: the early phases of becoming—bodily or mentally—‘ill’ and spontaneous recovery from an ‘illness.’

Balint then laments:

Here we come up again with the difficulties created by our adult, conventional language. We know that there are no ‘objects’ in the area of creation, but we know also that for most—or some—of the time the subject is not entirely alone there. The trouble is that our language has no words to describe, or even to indicate, the ‘somethings’ that are there when the subject is not completely alone.

He admits that the realm is not yet well understood, and it might be that this realm is occupied by pre-objects. For example, silence is one occurrence indicating that the patient is “residing in” the area of creation. But because this area is so poorly understood, according to Balint, psychoanalysis tends to consider such silence as a symptom of resistance, while he offers the area of creation as another perspective of experiencing silence.

A useful way of gaining further insight into the area of creation is through Deleuze’s and Guattari’s (in *Anti-Oedipus* [1972]) model of schizoanalysis, which employs psychoanalytic features as well as features stemming from a variety of other domains such as psychopathology and anthropology. As I see it, the useful interface between their schizoanalytic approach and Balint’s area of creation becomes apparent in Balint’s critique of psychoanalytic technique’s bias toward what he calls the “ocnophilic” type, who tends to cling and introject his objects. The “philobat” type, on the other hand, develops skills that will enable him to maintain himself alone with little help from his objects, and as such underlies the development of the area of creation—hence the split-off, alone, or “schizo” characteristics. Since language is crucial in psychoanalysis, Balint gave this aspect of technique special attention, claiming that their analysis always involves a risk of the analyst taking control of the patient’s language and experience.

There are two strata of language in this context: regular language in its signifying quality (meaning, interpretation) as well as psychoanalytic language, with its specific rules, jargon, theory, and so on. Under the conditions of general analytic discourse, these two strata subject the patient to certain tolerable language regimes, while in the area of creation, the patient has the opportunity to flee from these strata of language. The schizoanalytical perspective offers a productive way of looking at the nonsymbolic dimensions

of language, as these are the ones most likely to appear in the area of creation.

These nonsymbolic dimensions are the *intensive* use of language, in Deleuze-Guattarian phrasing. In the clinic, suddenly encountering this different kind of language might initially form a gap between analyst and patient. The experience of “resistance” might stem from the fact that the patient crossed thresholds of intensity without the analyst’s awareness, as a result of which analyst and patient would no longer experience themselves as being on the same plane. Following this, the gap between the planes is responsible for the different experiences between the two sides of the thresholds. However, instead of interpreting this kind of gap, we could think of it as a pathway, a tunnel, to entering the area of creation.

One sign of crossing thresholds of intensity might be the patient’s entering into an experience of *becoming-other*. Becoming involves a singular and immediate connection between two entities, a kind of symbiosis that produces metamorphosis that quickly adopts the quality of a constantly unfolding process. It is a movement between intensities, expressing itself in crossing thresholds of intensity, some of which are neither human nor symbolic.

Reading Steiner’s fascinating vignette, I offer an expansion of his interpretation of his patient’s silence by demonstrating the recognition and working with the concept of becoming. Steiner describes the patient’s retreating into a desert island, points out her love for deserts, and elaborates on a girl from the patient’s dream that had been cut through at the waist and had no lower half. My own reveries regarding this scenery led me to think of the patient’s experience of becoming-lizard, which offers a possibility of a different experience of coping and ease of movement. And whereas on the plane, or from the position of the therapist, the island is experienced as a psychic retreat constituting a defense that comes at the price of isolation and withdrawal, on the plane, or in the position of becoming, for the patient, the island and its desert-like character offer the natural environment for becoming-lizard, a real attempt at another type of life which draws its strange intensities from a world that is not necessarily human yet enables a creative and vital mental experience.

The fact that the patient enters an area of creation suggests an experience that creates something new and vital. In such areas, we, as therapists, must hone our attention to silence, sounds, voices, and experiences that are not necessarily known. This area offer us the opportunity to let ourselves be taken

along in the flow of intensity—threatening and unsettling though it may feel—heading for places hitherto unvisited on our therapeutic journey.

INTERIORITY AND INTERNALIZATION: SKETCHING A BASIC PROCESS

SHLOMIT COHEN

The COVID-19 crisis broke into our lives suddenly, exposing humankind, unprepared, to a new and great challenge, on every level of human existence and structure. Being vulnerable to infection and death by a silent, invisible, and non-understood life-threatening disease demanded of each individual in all societies to adjust quickly to a new, unknown, and hitherto unimagined reality.

The unexpected social and personal risks embedded in the most mundane and routine behaviors called for rethinking our personal and social habits in both the private and social sphere. The new situation in which we all found ourselves also affected our psychoanalytic and psychotherapeutic relationships by blurring the boundaries and the sense of risk between so-called external reality and internal experience within the analytic therapeutic relationship. In fact, the confusing awareness caused by the difficulty to decipher inner from the outer reality is not totally new and was already noted by Freud in his opus *The Interpretation of Dreams* (1900). Freud maintained (p. 543): “The unconscious is the true psychical reality; in its innermost nature it is as much unknown to us as the reality of the external world, and it is as incompletely presented by the data of consciousness as is the external world by the communications of our sense organs.”

Freud’s insight into the fact that “reality” cannot be conceived directly ignited his journey to unfold the psychic processes that transform sensual impressions into emotions and cognition (as in his discussions of memory and negation), but mostly in unearthing the unconscious mental processes that create inner reality. Hans Loewald (1906-1993) followed Freud in formulating the pathways of becoming a subjective being, by exploring the process of internalization that enables the creation of the self. Following Loewald (1988), I see internalization as a major process that transforms drives, emotions, bodily sensations and sensual impressions into a subjective sense of self. This major mental process is initiated and occurs in the context of object relation in

external reality. Loewald believed that this mental development establishes in the human being a sense of ownership of her inner life. In this paper I draw on Loewald's conception and intuition, and take it further.

Having an internal world is a complex and intriguing experience. Revealing the power of the unconscious led Freud to understand to what degree man, and certainly the ego, is not the master in its own home. Freud understood that, to some degree, our alien residence is somewhat consoled by creating our sense of interiority, though, at the same time, that interiority cannot be perfect. Freud attached the first mental experience to the act of nursing. The latter, together with his observation of the year-and-a-half boy playing his *fort-da!* game, laid the ground to explore internalization. I especially track the processes that create in the human being a living sense of interiority, the hallmark of the experience of internal reality. I sketch a developmental line of internalization from infancy to maturity on the road to creating the sense of interiority. Freud attached the first mental experience to the act of nursing. The latter, together with his observation of the year-and-a-half boy playing his *fort-da!* game, laid the ground to explore internalization.

The significance of the experience of interiority is revealed by the force of the determined actions to preserve and protect it against interference and intrusions. Thus, exploring internalization is essential to evaluate the motivating force to grow, and also to detect failures and distortions of this process that might cause psychic disturbance. My discussion concentrates on three dimensions in the process of internalization: (1) Movement is a psychosomatic action, which begins with the baby's first acts of suckling, and grows into random explorative movements. Along with pleasure, movement enables the experience of mastery, and is registered as such in memory. (2) Memory process refers to the dimension of time, since internalization is mental work that needs time to come to fruition and mature. Finally, (3) memory and remembering are active processes, beyond mere registration of episodes in objective reality. Memory traces are interwoven with passions, experiences with real objects and fragments of thought, creating meaning, narratives, and internalized objects.

In the past few decades, the significance of motility and movement has penetrated into several broader areas of theoretical and clinical ideas. Winnicott (1971) emphasized the importance of motility for the living experience that connects love with aggression in the evolution of the sense of being. Bion (1963) introduced the concept of transformation in forming thoughts, emotions, and meanings. Britton (1989) took Bion's ideas further, and expanded the

concept of psychic movement to include the movement between the Kleinian developmental psychic positions. Ogden (2019) expanded the perspective on mental movement and internal experience into a change of paradigm—from conceiving the mind in structural terms to perceiving it as a process, an ongoing experience of being alive in the present moment.

I suggest that the newborn baby challenges the adult with a well-recognized anxiety to meet the profound needs of the helpless human being. But together with this experience there exists fascination and anxiety in encountering the *enigmas* of a new living human being.

Thus, it is easier to think about the baby in terms of formed mental structures than in terms of an ongoing surprising process of transformation and becoming.

Finally, I present the clinical vignette of a patient who had to struggle against the power of the analyst and the psychoanalytic process due to his fear of otherwise losing himself in the process. Listening to those anxieties helped to enhance the analytic bond of the therapeutic couple. Here, too, the analyst struggles with the quandaries of finding the proper conditions for internalization, which will be largely challenged initially by the experience of internalization that the analysand brings to the sessions. Returning to the impact of COVID-19 on our work, the constraint of distancing due to the pandemic situation introduced another element in regulating the risk of closeness and the yearning for intimacy in the analytic relationship.

**MEMORIES OF MOTHERHOOD AND HOME:
LITERARY WANDERINGS IN EMPTY HOUSES AS MEANS OF
CONNECTING TO AN ABSENT MOTHER**

BASMAT KLEIN

In this article I will explore the connections between the physical space of the house—the domicile in which we are born, live and die—embodied childhood memories, and the maternal representation. I will discuss the emotional potential of this special piece of physical environment to facilitate experiences of holding and containment and assist in the internalization of benevolent objects. Based on two literary works dealing with wanderings in empty houses—*To the Lighthouse* (1927) by Virginia Woolf (1882-1941) and *Moominvalley in November* (1970) by Tove Jansson (1914-2001)—I will demonstrate how the act of writing about childhood spaces serves as a way for the artist-writer to process painfully complex relationships with their mothers and face the pain and loss of their demise.

I base my discussion on Thomas Ogden's (2000) concept of “the art of mourning” in order to suggest that a creative interaction with the domestic space may provide a distinct way to deal with grief. In addition, I use Andre Green's (1997, 1998) concept of “negative hallucination” in order to illustrate how the house, and images of the house, might become a space to process relationships with internal objects as well as serve as an emotional container in times of grief.

Naturally, the notions of motherhood and home are closely related (as Claire Winnicott entitled the posthumous collection of her husband's works *Home is Where We Start From* [1986]), and many of the primary holding experiences which are linked to the maternal function are echoed in the relations we have with the houses in which we grew up.

Early memories from the primary environment, as are well-depicted in the House-Tree-Person drawing task, are of course based largely on the contact with the mother and the primary caregivers, but alongside these there is always a house, in the sense of a concrete physical environment that surrounds, and ought to shelter the baby, but may not. Remembered childhood spaces

will therefore hold not only the memories of primary relationships, but also aesthetic impressions and sensual memories which are attached to the non-human objects which that space contains.

Focusing on the material aspects of the primary environment, I argue that the physical house can become a holding environment and that engaging with the memories of space might provide an opportunity for dealing with the feelings embodied in it. Moreover, in the process of mourning memories from childhood, such spaces have a special value. According to psychoanalyst Thomas Ogden, successful mourning often involves a demand we make on ourselves to perform an act of creation that can meet or be equal to that which has been lost. Ogden calls this “the art of mourning,” emphasizing that the creativity involved does not need to be an extraordinary work of art, and can be expressed in thought, memory, dream, or story.

I believe that this act of creativity can also be performed in relation to the actual domestic environment that encompasses an individual or to the memories of such environments, thereby allowing a space where one can perform the creative act, confront the loss, and come to terms with it.

Two examples of this process are presented. The first is that of Finnish author and painter Tove Jansson, who during the year following her mother’s death, retired to a small island and began to edit the final book in her “Moomin” series. In this book, Jansson meticulously portrays the house of the Moomins and its surroundings. The characters in her book experience loneliness and pain, their longing echoing those of Jansson herself. The second illustration of dealing with grief through an encounter with memories of space and home can be seen in Virginia Woolf’s novel *To the Lighthouse*. Contrary to Jansson, Woolf’s imaginary wanderings through her childhood surroundings take place many years after her mother’s actual demise. However, in her autobiography Woolf states that writing this book assisted her emotionally in dealing with her complex relationship with her mother. In their own idiosyncratic ways, both Jansson and Woolf describe a house interwoven with the image of their mothers. In the dual space that is simultaneously physical and metaphorical, the mourning process thus becomes possible.

THE PRESENCE OF A VIRTUAL SELFOBJECT: APPROACHING THE FUTURE IN TREATING EATING DISORDERS

INBAR SHARAV-IFERGAN

I begin my essay with a significant quotation: “When someone believes in me, I can start to believe in myself.” Working daily with patients who suffer from severe eating disorder patients, who starve themselves almost to death, oftentimes gives the impression of a deep injury in their will to exist. According to self-psychology, sound development depends upon a presence of a selfobject that enables the infant to rely on someone who is ready to act empathically from within the perspective of the child, while providing satisfactory mirroring and idealization (Kohut 1984). When a major failure in those conditions occurs, the individual learns to not believe that someone can be a selfobject for her, and thus turns to concrete sustenance (food) in order to regulate her emotional needs, though regarding such food ambivalently—and an eating disorder develops (Bachar 2002, Guist 1989).

In relation to development in early life, Kohut refers to a phase prior to the development of the nuclear self when the infant exists only as a potential concept in his mother’s mind: this concept has “its virtual beginning with the formation of specific hopes...and expectations concerning the future child in the mind of...the mother” (Kohut & Wolf 1978). Raanan Kulka (2005) has expanded Kohut’s conception and developed the concept of a “virtual self.” Of this notion, Kulka considers that “it is the primal selfobject relation that we can define as the potentiality of the infant’s existence, and the nuclear self is its derivative.” Kogan (2011) has recently suggested that there is no option for psychological birth without a potential “existing space” (or space for existence) within a significant other and has formulated a new primal selfobject function that is connected to virtual areas. According to Kohut (1977), the mother is experiencing the joy of promoting her child’s development with her own expectations. I utilize another concept generated by Kulka, the “preceding echo,” the echo that searches and establishes the other’s selfhood in a way that does not yet announce the existing being, but is the preceding reverberation of the other’s being, which is established by it.

In cases of severe anorexia, due to the mother's own difficult emotional states, we can often find within the patient an echo of a primal failure in the way in which the patient as a child was held in her mother's mind, even prenatally and during the first encounters with the mother in early life. It seems that the mother could not hold within herself her child's potential for "coming into being." This early failure sheds light on the etiology of this disorder, on the transference dynamics during treatment, and can also be a foundation for the conceptualization of the process of healing. A crucial factor to restart the development of the freedom to express the needs of the self lies in the transference, and in the therapist's ability, as a selfobject, to create within him- or herself the space for the "potential for existing" into which the patient's self can be re-created.

It is important to emphasize that the space-within-the-analyst of which I speak does not refer to a dimension of phantasy, and thus it is not the result of projection or projective identification. I have in mind a very real moment in which the therapist is the dwelling space for the one who does not yet exist, but is being created, in his presence. Healing in the sphere of existence rehabilitates the sensation of hope, and the unfolding of future. The metaphysical concepts of virtuality and the preceding echo are prospective concepts, and a future perspective is embedded within them in a way that serves as a substrate for its emergence.

In one of his essays, Kukla (1998) refers to Kohut's comparison of the move from classical psychoanalysis to self-psychology to the move from Newtonian physics to quantum physics. Kukla claims that this great achievement essentially ensconces the wonderful sense that my very touching the other creates him, and not simply discovers what he is made of. Kohut himself had pointed (never directly) to the importance of attending to two aspects of the patient's transference, one which is related to reconstruction of the past, which he called "the trailing edge," and the other, which is concerned with the future, developmental perspective, which he called "the leading edge" (Miller 1985). Tolpin (2002) referred to Kohut's conceptualizations simply as the "growth edge," and emphasized its prospective approach, of looking for "health tendrils" and not just for pathology. Aron and Atlas (2015), writing about "memories from the future," stressed the expectation of being able to rebuild our future possibilities. The concept of "future vision," spoken of by Weisel-Barth and Eldridge (2019), also stresses the profound therapeutic importance of focusing on a future-creating vision. Overall, then, the conception of virtuality deepens our thinking about empathy as a life-founding element, for it emphasizes

someone's status as an existent by virtue of being in someone else's mind. The therapist experiences his expansion as a selfobject beyond any specific repetitive content. Thus, there is a move from mere content into a state where we reestablish some regions in which development had never begun.

I offer a detailed case study of Y., aged 19, who was involuntarily hospitalized with anorexia in a life-threatening condition, after many years of futile hospitalizations, and was diagnosed as having no hope for recovery. In therapy, the first initiation of psychic motility began with the emergence of the therapist's ability to make space within herself for the patient's existing potential, which later actualized as an independent existence-nucleus-of-being for the patient. At the end of treatment, the patient said, "When someone believes in me, I can start to believe in myself. Who would believe it?! The answer is: yes, you!! Maybe you truly see something in me that others had missed or failed to recognize through the thick dark curtain the disorder generated in my life."

WHAT IS TRAUMATIC ABOUT TRAUMA? ON CLINICAL WORK WITH TRAUMA USING POETRY

KATYA BLOCH-GEIGER

What makes trauma into what it is? Or, what is traumatic about trauma? This paper attempts to approach the subject through a different route: listening to trauma through poetry.

Trauma's excessiveness overwhelms the subject with stimuli, triggering various psychic defenses, including forms of dissociation. As there are no cognitive or linguistic categories available to readily conceptualize the trauma, we are unable to understand the trauma in real time, and sometimes not even long afterwards. This is why trauma is often identified by its elusive quality, by our inability to know it (Amir, 2008; Herman, 1992; La Capra, 2001; Laub 1992). Caruth (1996) defines the traumatic as the inscription of an Inconceivable, doubly missed encounter with death and with one's own survival: "It is the incomprehensible act of surviving—of waking into life—that repeats and bears witness to what remains ungrasped within the encounter with death." Caruth mentions the signature suddenness of the event, its unexpected quality, that make it impossible to register. This leaves the data in a raw and unknowable state, which is then experienced as persecutory and confounding. Winnicott (1974), similarly, thought of trauma as a buried breakdown that happened in the past but that had never been experienced representationally. In its attempt to survive, the psyche dissociates from the traumatic event, and avoids experiencing it, or, simply repeats the words devoid of any real psychic meaning. However, in so doing, the mind finds itself trapped in the inability to know the collapse that had occurred.

Although poetry and psychoanalysis are very different entities, on one hand, they both allow us to approach language the human experience of pain, which we also attempt to avoid, through language (Ogden, 1999; Roth, 2019). Some psychoanalysts believe that it is possible to listen to patients in a similar way to how one listens to poetry, namely as expressions of what cannot be said but is nevertheless articulated (Maddux, 2016; Ogden, 1999; Vivona, 2013). Dana Amir (2014), a poet and psychoanalyst, proposes that poetry operates

dialectically in its manner of capturing experience, because it has a capacity to know something about experience while releasing the theme or subject matter from that very knowledge. I will suggest that poetry, by knowing and not knowing trauma, can lead us to what escapes our formalizing abilities, thereby time and again emerging into consciousness and understanding, and receding.

Tal Nitzan's (2019) poem "Weakness" illustrates the experience of a kind of flaccidity or slackness felt with regard to self, other, or a situation. Nitzan's poem resonates the unbearable terror caused by catastrophe, along with the faint-hearted experience in any renewed encounter with it. Weakness invades body and mind, like a toxic sediment that cannot be filtered out. The poem reflects the distortion of reality's generally reliable dimensions of time and distance, and the erasing of prior achievements. I suggest that we view the poem as a manifestation of Ferenczi's (1933) concept, identification with the aggressor, an incorporation of the aggressor as well as his aggression towards the self. But "Weakness" is not only a description of an internalization of a toxic environment that attacks the victim from within, but also portrays a dead end solution since it forces the psyche to submit to weakness as a form of malignant despair. It paralyzes any will to escape by seizing the internal reality, installing its absolute, singular and hopeless meaning.

My encounter with Nitzan's poem helped me to capture the elusive mechanism of identification with the aggressor of a patient named Sophia. Sophia was subjected to physical violence and sexual abuse as a child and was brought up at the home of relatives. Over the years, Sophia's incorporated aggressors had grown into a solid structure that was hermetically isolating and poisoning her from within. A conversation about her violence against her beloved pets during her childhood activated the aggressor inside her, but also allowed us to deal with her feelings of guilt and self-loathing regarding the heart-rending meaning of the violence and lack of protection she had suffered all of her life. The poem enabled us to attend to what Ogden (1999) has called "the music of what happens," referring to situations in which an experience resonates through the patient's, or poet's, idiosyncratic language. Listening carefully to "Weakness" also revealed the music of repetition-compulsion and the self-state that was hoping not only to know the meaning of what had happened, but perhaps also for release from the grip of weakness.

A second poem by Nitzan (2019) recounts a journey to save a tender mind from a recurrent catastrophic event. The speaker in the poem seeks, over and over again, to reach the infant she once was, an invisible, almost inaudible

baby who survived severe, early abandonment. The speaker seems locked into an endless process of saving that baby, while she undertakes this Sisypic journey to her childhood home because she knows that only she can find her way to the injured part that stayed behind. In that sense, the speaker's journey is not only Sisypic, but Orphic as well, in the sense spoken of by Ferenczi (1932). For Ferenczi, Orpha denotes an inborn mechanism aimed to ensure that people survive catastrophe—the Orpha is a mytho-poetical name for an innate life-preserving force that provides protective mothering in its excessive absence at the age of tenderness (similar to Winnicott's ideas [1949] that the psyche has an innate ability which allows the mind to take upon itself the absent maternal functions). Paradoxically, in the attempt to prevent mental overthrow, Orpha entrenches dissociation from the traumatic contents, and thus prevents connection to the injured parts of the self (Ferenczi, 1985; Gurevitch, 2013, 2016).

A Winnicottian (1974) take on the ceaselessly repeated rescue mission would propose that the attempt to reconnect to the baby may reactivate an old mental breakdown in the present. Ogden (2014) reframes unexperienced breakdown as a failure of the dyadic relations between parent and child. He argues that alongside our need to dissociate from unexperienced collapse, we also harbor an equally strong need to experience these very same parts. In the course of therapeutic failures, the therapeutic relationship enables the unexperienced anguish to become accessible.

When a different perspective on some of her recollections emerged in therapy, Sophia went through nights of confused states between dream and wakefulness and felt deeply unprotected. Profound despair surfaced in our conversations, and it was accompanied by withdrawal. The sound of a baby crying somewhere outside of my clinic during one of our sessions triggered associations with the poem about the transparent baby. Reading it together allowed us to experience the enactment of the psychic and dyadic breakdown that was frozen until that moment and discuss its meaning together.

Final conclusions are made about poetry's ability to transform trauma into a continuity of experience, recognition, and connectedness.

**WORKING THROUGH OF TRAUMATIC LOSS:
FROM THE DEATH DRIVE'S LIBERATING SUBJUGATION
TO THE LIFE DRIVE'S DEMANDING LIBERTY**

MERAVID ROTH

This paper explores the movement from psychic rupture to reparation in cases of a traumatic loss. I suggest that a dialectic interaction takes place during this process: the internal rupture harms the capacity of seeing the other, and the lack of solidarity with the other(s) disarms the capacity of repairing the internal rupture.

The early dyad between an infant and his parent introduces both sides into a fundamental human covenant promising protection—both physical and emotional—to the helpless and dependent individual. Traumatic circumstances, external or internal, will rupture this sense of secureness within human solidarity, injuring the subject's faith in life. In other words, the death drive (Freud, 1920) will become more dominant, both due to its excess resulting from the trauma, as well as a mode of defense against the pain that comes from living (Segal, 1993; Roth, 2020). In order to regain and repair the psychic achievement of solidarity, one needs to mourn our existential conditions, which include vulnerability, finitude, and pain, and also human flaws, mistakes, and unfortunate harm. So long as one refuses the true nature of our existence, an inevitable rejection of the other will ensure. An individual might project all that is bad onto and into the other, in the unconscious wish to defend oneself from what has been experienced as internal ‘bad’ and murderous forces.

The most malignant phenomena related to this refusal to accept our human fate, particularly in cases of traumatic loss under an unexpected and uncontrollable reality, is what I call in this paper a “Mephistophelic solidarity,” named after Mephistopheles, the seducing Satan. This kind of solidarity offers an illusory, tempting mode of one-ness, that can be directed against the self in a melancholic (Freud, 1917) and moral-masochistic (Freud, 1924) manner, or towards the other, or even a group, with orgiastic murderous enthusiasm (Freud, 1921).

A clinical case and a poetic work will illustrate different paths from rupture

to reparation, that pass via the reparation of the ethical capacity to truly see the other.

Using a case of psychoanalytic psychotherapy with a bereaved couple who had lost their son, I demonstrate how injured the sense of solidarity has become, both within the self and towards the other, and how crucial it was to work it through in order to return to life. The couple's young 3 year-old son had drowned in a small swimming pool while on vacation with friends. The parents were certain that he was together with them and all of the others inside the house, but did not realize that at some point he had gone out of the house, finding his death in the pool. I worked with bereaved parents for many years. Each and every parent who has lost a child has said to me at some point, "It is against nature." And in each instance I say to them, "No, in nature there are also nature's disasters." And when they say "No, it is our mistake!" I usually say: "Well, our mistakes as human beings are also a part of nature." To the willingness to surrender to this true fact of life (entering the depressive position [Klein, 1940]) I offer the name "the acceptance of reality" (Roth, 2020) in order to be able to begin and mourn over this unbearable loss.

I magnify the manner in which the father became deeply engaged in a malignant (Rosenfeld, 1971) and even cruel (Brennan, 1985) solidarity with his death-object (Durban, 2017). It was evident that his suffering, his constant rage and his refusal to enjoy even the slightest moments of connection to life, emblemized an unconscious idealized loyalty towards the dead son (Riviere, 1936), combined masochistically with severe self-punishment (Freud, 1917), leaving all signs of life and love buried under hate (Klein, 1936, p. 83). The Mephistophelic solidarity with death, characterized by constant rage, suffering and nightmares, gave way to his guilt and pain through the moralistic illusion of being rightly tormented (Freud, 1924). His internal belief was that any continuation with life would signify that he had *accepted* what had happened, thereby betraying his dead son. Moreover, his total absorption in the death drive's forces offered him a false control over something he could really not control, while letting go of the effort to take control over what he could control, and even repair and create. This subjugation to the death drive liberated him from becoming more awake psychically, which would demand from him to begin his path in life and carry forward with his life obligations as a husband, a father to his living daughter and more, despite the dark light of the catastrophe that took place in their life.

I believe that my essay shows how this kind of investment in death compels the psychotherapist to boldly interpret such unconscious dynamics, and also

to stress the fact that choosing the dead son and holding on to him in this Mephistophelic solidarity actually means neglecting the living, including his wife, his other child, and, perhaps foremost, the ‘guilty’ individual himself. My interpretations derive from a deep faith in a hidden life drive and a buried love that need to be pulled into the light where they can signify the horizon of a possible future. It is only through recognizing that the conditions about which the parent feels guilty were actually out of his or her hands, that one might begin his or her way back from the dead to the living. In the transference relationship, this might involve the acceptance of the therapist’s existential vulnerability, enabling the patient to regain the notion of universality, solidarity, and connectedness in our shared existential reality.

In Paul Celan’s poem “In memoriam Paul Eluard” (1955[2013], p. 39), one poet (Celan) accuses another poet, the Surrealist Paul Eluard, of taking an unethical stand during the war. This poem deals with an exceptional case in which Paul Eluard, who was greatly admired by Celan, was asked to defend their third poet friend in the face of political persecution and save him, but Paul Eluard refuses to interfere, and the third poet is murdered. Celan wrote: “Lay that word on the dead man’s eyelids / which he refused to him / who addressed him as thou.” Celan’s words point to the willingness and duty to see the other, so that human solidarity can take place and to testify to that fact, based on the Buber’s idea that the other must be recognized as “thou.” Celan’s work also illuminates the way that the reader of poetry gains an opportunity to mourn and repair his own painful and sometimes traumatic losses, both inevitable losses but also those that were caused by the other.

Finally, I refer to the stormy state of political affairs in Israel at this time (when this essay was written, Israel was contending with major changes in her judicial system, which has since been eclipsed by the horrific events of October 7th, 2023 and the war that ensued), a country whose foundations are based on traumatic losses that have never ceased. I suggest that the most crucial challenge we face is to avoid a common collapse into the demonization of the other. The psychoanalytic term offered in this paper, “Mephistophelic solidarity,” is offered in the hope of explaining the worst manifestations of groups joining in a hypnotic murderous joy (Freud, 1921), projecting all bad, and immolating entire villages that have been demonized.

STATIONS ALONG THE VIA DOLOROSA TOWARD THE ILLUSION OF A GOOD-ENOUGH ENDING

ALINA SCHELLEKES

I attempt in the present essay to focus upon the prevailing aspiration to reach a “good-enough ending” in psychoanalysis/psychotherapy, a concept that is partly realistic and partly illusional. I first relate to some of the obstacles that interfere with achieving this much yearned-for goal, leading to endings that are far from the illusion of a good enough termination. There are many more not-good-enough endings to treatment than commonly reported. My limited purpose in this essay is to dwell on the characteristics, obstacles, blockages, dreads within the analysand, within the analyst, and in the intervening space, that lead to endings which are far from good enough, according to any criteria we might choose.

I first report a therapy that had two stages with a patient whose particular way of ending the therapy raised many questions related to discrepancies between psychotherapist’s and patient’s expectations from therapy. The short description of this intricate case serves as a backdrop or black cloth upon which my critical reflections on endings, which are far from good-enough, are screened.

The first “station” along the painful path of analytic work (hence, the title of this essay) that I reflect upon is the failure to distinguish between “real” versus “similar to.” That is to say, when there is an impairment of the ability to perceive the therapy/analysis as a transitional medium, neither mere reality nor pure play or phantasy, the ability to distinguish between the analyst as a parent-like figure versus a literal, concrete parent becomes impaired as well. The same impairment is experienced when the capacity for symbolism is lost partially or totally, leading to great difficulties in the capacity to bear the erotic aspects of the transference. These difficulties in distinguishing between what is “real” versus what is “similar to” has great relevance for the quality of therapy endings.

The second station relates to the many situations where there is searing

psychic pain that is greater than the mind's ability to contain, whether due to severe holes in early development foundations or to elements of later severe trauma. In such situations when the psyche feels overwhelmed by excessive stimuli that surpass its containment capacities, we will witness the patient's psyche increasingly attacking itself, straining to sever the cord of all relationships and empty itself to the extent of self-annihilation. Despite the self-emptying efforts, these extreme psychic situations might result in states of intolerable excess which can lead to "toxemia of therapy", a term of my choice. Extreme discrepancies between analyst and patient may occur due to differences in the capacity to bear vitality and progression. Such discrepancies as well pose heavy challenges to the probability of achieving a good enough ending.

The third station described, connected to the former but in a reversed way, relates to states of patients' emotional excess which at times results in flooding and invasive presence within the analyst's own mind. When the analyst's own internal bad objects, which never completely fade away despite vast clinical and analytical experience, are awakened with disproportional effect, they may lead to difficulties in providing the kind of mental dialysis that many patients need via the analyst's mind and its capacity to absorb and filter the patient's psychic material. Such toxemia of therapy on the analyst's part may lead to premature and malignant endings.

The fourth station relates to the analyst's confusion or blindness about the patient's level of psychic organization, meaning that the level of the former's interventions, manner of listening, and quality of interpretations might fail to correspond to the latter's level of development, leading to endings that disregard either the higher level or the lower level of the patient. In this context, "bone-building interpretations" are discussed as a way to work with the primitive level of organization.

The fifth and last station I discuss bears upon states of extreme nostalgia which have led to gross idealizations of past times. These idealizations may become fixed to such an extent that the nostalgia becomes a quiet but terrorizing presence leaving the person unable to live his present life and its vicissitudes when these do not confirm to the narrative of the nostalgia. In this context, nostalgia is viewed as a subtype of melancholia albeit without the characteristically powerful melancholic affect. Such states have deep implications for the individual's ability to move freely and meaningfully along

the axis of time, to live life in its fullness, and, consequently, to have important and major implications for analysis and the quality of its termination.

PSYCHOANALYSIS AND GENDER TROUBLES

EFFI ZIV

Throughout history and up until this day, the LGBTQ community has tended to resist and express deep mistrust in the motives and legitimacy of the dominant psychoanalytic discourses to explore transsexual and queer subjectivity. From a queer perspective, psychotherapy in general, and psychoanalysis in particular, are often suspected of covert and overt transphobia as well as of exercising regulative mechanisms on gendered and sexual bodies that do not confirm to gender as a binary structure.

The paradoxical aspect of this dilemma is that psychoanalysis has always maintained a dialogue with queer content, and has also been responsible for breaching new grounds in contemporary queer thought, beginning with Freud (1905), Karen Horney (1932), Joan Riviere (1929), and Joyce McDougall (2020/1995), all the way to contemporary feminist, queer, and relational psychoanalysis. Nevertheless, the deep dissatisfaction often expressed by the LGBTQ community toward the therapeutic field does not subside, and to my understanding requires a pause, attention, and further reflection.

This is the starting point of my essay in which I explore the possibility that the theoretical and linguistic structures of psychoanalytic language may unconsciously reproduce structural and covert transphobia. I do so mostly by emphasizing how the binary differentiation of gender structures is inherent to psychoanalysis and its keystone: the Oedipal model of family relationships and individual psychosexual development.

In the first part of the essay, I sketch queer currents always buzzing in the psychoanalytic field, that have gradually become amplified thanks to the many years of intersections between psychoanalysis, feminist, queer, and post-structuralist theory. In other words, I wish to trace the queerization of “cisgender” in psychoanalysis.¹ I refer to analysts who ground their complex

1 Ed. Note: Cisgender is a term used to describe a person whose gender identity corresponds to their sex assigned at birth. The word cisgender is thus the antonym of transgender. The prefix “cis,” from the Latin, means “on this side,” as opposed to “trans,” meaning “the other side”—MHS.

theories on the assertion of gender as a traumatic structure (Butler, 1995; Stoller, 1968; Fast, 1984; Goldner, 1991; Brothers, 2008). According to these thinkers, normative gender identity develops as a divided and dissociative identity structure, during which the subject is forced to split from parts of itself, projecting them upon a complementary other. Femininity is developed as non-masculine while masculinity is developed as non-feminine. In the words of Muriel Dimen (1986, p. 8): “One becomes gendered not by learning a one-dimensional message that [one is] *either* male *or* female; rather, one absorb[s] the contrast between male and female.”

As clinicians, we rarely consider cisgender masculinity and femininity as identity categories worthy of investigation and suspicion. We often find it hard to assist our patients with identifying poor life experiences and suffering as results of constant internalization of rigid gender structures because we ourselves are immersed in a dichotomous cultural gender binary, which appears to be normal even though it is not at all. It is critical for us to expand the limits of our language regarding gender and challenge the theoretical mirror room we are absorbed in, if only because failure to do so makes it extremely difficult to identify human suffering that is produced in that very room. This conceptualization is crucial for those who do not comply with gender imperatives, though our gaze should expand to also focus on normative gender identities as well.

How much do cisgender men and women suffer from their gender? To what extent are their lives-experiences restricted and narrowed by rigid gender structures? Do we at all allow ourselves to play and celebrate the gender scale potentially lying within us? Answering such questions will necessarily involve the deconstruction of the inherent transphobia of our language and ourselves.

In the second part of this essay, I propose a conceptualization of a post-Oedipal stage, as a reparative alternative, aiming to preserve the classic tradition while updating the developmental narrative in a way that more accurately reflects social shifts and currents. The original Oedipal model has undergone numerous constructions, deconstructions, expansions, and contradictions throughout the years. Though I believe that a reparative Oedipal model can preserve the radical queer potential inherent to psychoanalysis, it should also embody a way to fundamentally update it. The revised post-Oedipal position or stage that I outline (based on the work of Davies, 2003; Cooper, 2003; Bassin, 1996; Benjamin, 1995) will hopefully provide a de-pathologizing framework through which gender can be thought of as existing on a continuum in and

between ourselves. This will expose a truly post-patriarchal horizon, a route beyond the gender imprisonment of human subjectivity into a limited binary; that is, beyond gender as “trouble.”

DARK PRECISION: IS THERE A NEGATIVE FOR ‘CONCERN’?

ORNA WASSERMANN

The essay deals with situations in which a person shows the ability to be receptive and to accurately connect emotionally to the other, yet uses this ability in order to damage the depth of the other’s soul. The result is not an injury that is the product of anger or hurt, but rather a pattern of interaction that represents a specific kind of mental structure. That is, instead of the capacity for concern and compassion, one discerns the operation of a dark infernal precision. From the point of view that refers to empathy as including, by its very essence, the element of benevolence, I will focus on what I perceive as a malfunction or disruption of the ability to empathize. Instead of acting as a self-object, the person characterized by the syndrome I describe acts as a self-annihilating-object. This is a distortion, a negation, of empathy. I explore this matter from the perspective of personal, clinical, and theoretical encounters.

My current thoughts have evolved during personal encounters accompanying my brother’s terminal illness that have proven fruitful for thinking about theoretical as well as clinical dilemmas. My brother resides in Germany and, quite naturally, confronting the topic of death in Germany raises complex associations as well as an opportunity to rethink human nature and its relation to evil, both benign and malignant. The phenomena I am referring to are encounters in which a person has an uncanny tendency to hurt the other in extremely vulnerable personal areas. I named this phenomenon “dark precision” or “negative empathy.”

My theoretical lines of thought relate to Kohut’s theorization of empathy as the basic human curative element through the function of the self-object. Nevertheless, Kohut contemplated the possibility of empathy as an ability that can be used for beneficial, as well as for malignant intentions. In his last lecture, Kohut illustrated this point with a controversial note about the Nazi’s use of sirens on their air bombers, indicating their ability to emphasize with the kind of panic that would arise in their victims while hearing the infernal noise from heaven. Kohut added complexity to this statement by reaffirming

that empathy is *essentially* benevolent, compared to an environment altogether lacking in empathy, since the mere presence of empathy confirms the humanity of the other.

This essay deals with areas where there are remnants of empathy. I, too, view empathy as beneficial in essence, a basic human synchronizing tendency, a rhythm that enables one to feel and merge with the other, however paradoxically, as another. Janine Chasseguet-Smirgel (1928-2006) supposed that many developmental disorders can be traced to the impossibility of renouncing the primary wish for fusion, a longing that may be accompanied by terrifying fears of becoming engulfed in the mother and losing one's individuality. She ventured to analyze the German culture as featuring a longing for united merger without the complementary preparedness for recognizing otherness. This results in a regressive solution of becoming one with the imago of the anal mother to join her in the fight against the rest of the world, equated with dirt which then has to be annihilated and denied.

My understanding is that the developmental task is not to resist the tendency for merger, but rather to embrace it and recognize its inherent capacity for consolidating the other's, as well as one's own subjectivity. Dark precision marks a deep, basic or temporary, fault in this process, an incapacity for actualizing a basic drive, and a dissociation from it.

This fault drives the person to merge with the other—the first tendency of empathy—yet luring the victim to feel understood and connected. At this point, instead of confirming the other's needs and subjectivity, the person becomes a self-annihilating-object by hurting the other's essence. Sandor Ferenczi's (1873-1933) concept of identification with the aggressor is useful for understanding the close connectivity which enables a deep surge into the soul of the other, while annihilating his very essence.

While beginning this essay with personal encounters in Germany, I then turn to contemplate present issues in society and in the analytic clinic. I offer the example of a patient who “succeeded” in bringing her therapist a gift containing three precise misfitures, unknown to her, as well as a slip of tongue of a therapist in a touchy moment.

The implications for therapy are to realize that buried within certain instances of aggravating and caustic negativity lie seeds or remnants of empathy which have to be recognized and cherished. The task of the analytic psychotherapist is to recognize the fault, and at the same time to identify the hidden nucleus of empathy which has gone astray. In agreement with Anne Alvarez and Yoram Hazan, the identification of the fault is essential for

appreciating the depth of the fault, and building mental resistance against its evilness. The recognition of the nucleus of empathy is crucial for the possibility of cure.

As a final note, it is important to consider that there may exist a grade of evilness that is beyond hope, overcoming the remnants of empathy. I am imagining a realm where remains of humanness and connection to humanity are totally lost—beyond what is generally depicted in sadism or the wish to hurt. Heartless erasure of all that is human in the victim, and therefore in the perpetuator as well. Whether one relies upon Winnicott's notion of the use of the object, or on Levinas who defines murder as the unwillingness to see the other's face and soul, we come to the point where our own humanness relies on our commitment to the other. Since dark precision annihilates the humanness in the victim, it also annihilates some of the humanness of the aggressor, since the very base of humanness lies in our willingness to acknowledge and honor the other in his individuality.

OTHER, OTHERNESS AND RESPONSIBILITY: A FREUDIAN PERSPECTIVE

NOGA BADANES

In 1914, Freud wrote (pp. 47-48):

Here we may even venture to touch on the question of what makes it necessary at all for our mental life to pass beyond the limits of narcissism and to attach the libido to objects. The answer which would follow from our line of thought would once more be that this necessity arises when the cathectis of the ego with libido exceeds a certain amount. A strong egoism is a protection against falling ill, but in the last resort we must begin to love in order not to fall ill, and we are bound to fall ill if, in consequence of frustration, we are unable to love.

The current essay focuses on the development of internal and external otherness and its negation within the subject, the Freudian infant. For this purpose, I present my interpretation of the Cassius myth (Symington, 1993, pp. 43-45) as an example of a kind of mental disturbance that has led to negation of otherness and to rejection of the other, thus driving Cassius to his death. Cassius was driven to seek answers to mysteries presented by his body and mind: Who am I? Who are you, this other whom I seek in order to live? Where did I come from? And to where am I going? What is that force that is shaking me from inside, pushing me to seek an “other,” and a connection with this other, recognition by this other? What is that strange force inside me that strives for reconciliation, annihilation and negation?

I describe the journey of Cassius who is tormented by conflict between his instincts, Eros and Thanatos. These instincts behaved in a dialectic manner of recognition and negation; that is, they led to the establishment of his ego through simultaneous recognition and negation of otherness. This journey passed through a crossroads between three pathways, which I described in detail:

1. The origin of the mind in one’s own body and/or sexuality, which pushed Cassius to dwell in his body.

2. Psychosexual development that has led to turning to an other, the narcissistic object.

3. The death instinct, pushing towards a relationship with a passionate otherness that aroused emotional pain and has led to a desire to get rid of the pain through the death instinct.

Cassius's journey could have ended with the development of responsibility, a moment one's mind remembers, in which one recognizes otherness while at the same time rejecting it, and so forth; by needing the other desperately but being unable to tolerate any definition, giving, expectation or demand coming from him, from the external world; through an endless dialectical modality that allows taking responsibility, sometimes in retrospect, despite the inherent resistance to anything that is not one's own. Cassius did not succeed in this endeavor, choosing instead "the third of the Fates, the silent goddess of death, to take him into her arms" (Freud, 1913, p. 101). In other words, Cassius chose the resolution of the comforting narcissistic, autoerotic, and illusive envelope in which he could imagine any object, fulfill any illusion, without facing the demands that set boundaries and require responsibility. Cassius chose psychological death.

OTHER, OTHERNESS AND RESPONSIBILITY: A KLEINIAN PERSPECTIVE

EHUD WOLPE

My commentary discusses the issue of “the other, otherness, and responsibility” as these expressed, to the author’s understanding, in Kleinian theory. In my view, Melanie Klein (1882-1960) served as a model of taking responsibility, both for choices she made in her personal life as well as for the findings she encountered in her psychoanalytic practice and in her theoretical formulations. She paid a heavy price for her choices, facing near exclusion from the then psychoanalytic society, before becoming the first woman psychoanalyst to be named as the founder of a school of thought.

Klein formulated a comprehensive theory that takes into account both the inner world of instincts and phantasies and the outside reality of objects with subjective personhood, alongside a complex relationship between the baby and its actual and its internal mother, between the mother and her real and her fantasized baby. Her perspective also took into account the relationship between the generations. Klein realized how confusing those boundaries can be, and therefore, how important it is for one to know where the sense of self begins and where one ends in relation to oneself, to the outside world, and to others. In this way, a person is better able to take responsibility for himself and for his relations with his objects, both internal and external.

In formulating her concept of internal objects, Klein created the landscape of an inner, unconscious, fantasized world that influences the development of self-identity and of the relations with the real outside world. I offer an overview of the formation of early psychic life and the relations with one’s primary objects according to Klein, as these are characterized by the baby having an ego that seeks object relations and has an initial capability of orientation toward, and of using those abilities to seek and create early relations.

I cite the work of the late Irma Brenman Pick (1934-2023), amongst others, in relation to the role of the psychoanalyst when it comes to taking responsibility for the parts of his own psyche and being able to be “soaked”

in the patient's mental materials, while at the same time be able to maintain his or her ability to think and to interpret autonomously.

It is my view that we bear a heavy responsibility as psychoanalysts to know ourselves as an 'other' and to be familiar with our own limitations in relation to others. The individuals who turn to us are quite often possessed of great personal difficulties related to this very subject—the confusion of boundaries between themselves and others and between themselves and a confused external reality. I personally and clinically find that the Kleinian concepts of 'different types of splits,' of 'projection' and 'internalization,' 'projective identification,' 'part objects,' and that of the 'transference to the total situation,' as well as the Kleinian conception of countertransference, offer great help in exploring the inner world of our patients, children and adults alike.

OTHER, OTHERNESS AND RESPONSIBILITY: A WINNICOTTIAN PERSPECTIVE

OSNAT EREL

Martin Buber held that “Through the Thou a person becomes I” (1964). In essence, Winnicottian theory is a developmental theory that focuses on the process by which the self or “I” develops via the acknowledgement and the recognition of the other or “Thou.” More specifically, entwined within Donald Winnicott’s (1896-1971) description of a four-stage developmental and maturational process, there is revealed a complex, bi-directional, and interdependent relationship between the self’s recognition of the other and the emotional development of the self. The current paper elaborates upon these four stages and their far-reaching psychological significance. These four stages include: (a) The stage of unity—when the self and the other are unified and undifferentiated; (b) The transitional stage—when physical differentiation of self and other begins and the “other” is perceived and treated as a transitional object; (c) The stage of subjective otherness—when the other is a substrate of projections originating from within the self’s internal and subjective world; and (d) The stage of objective otherness—the other is now viewed “objectively” in the sense that the self has acquired the capability to view the other not only from within his subjective projections. Observation of the other that is free of projections goes hand in hand with liberation of the self from the projections of the other into oneself. This fourth developmental stage is the most difficult stage to achieve, is not always reached, and even when reached, forever remains elusive.

OTHER, OTHERNESS AND RESPONSIBILITY: A BIONIAN PERSPECTIVE

GILA LANDAU

For me, Wilfred Bion (1897-1979), is the prime exemplar of an individual, personally and professionally, daring to be “other” and different, daring to think “wild thoughts”, observe things from different vertices, to search hard for mental truths, for both patient and analyst, daring to be surprised, time and time again. According to Bion, truth is vital to the mind, and the influence of its absence is identical to the influence of physical starvation on the body. Meeting with the other and otherness is essentially a meeting with limitations and enigmas, with the absence of knowledge inherent in human experience. Often, this triggers immense frustration and pain, unbearable and difficult to contain. At the same time, it is a meeting with the other, otherness and responsibility within us, with tragic separation, which often storms and disturbs our mind as we approach its primitive areas, beckoning us to remain blind and stay in darkness. In my work, I observe the analyst, the “other,” as an external object, which requires the function of thinking, providing links with the mind, and thus his or her responsibility is to establish and maintain this function of thinking within the patient’s mind. Attacks on the mind, both from inside and outside, generate split, thrown (ejected), and emptied particles of raw and undigested feelings. In this domain, it is the analyst’s responsibility to allow entrance and contain these particles within him—or herself. By accepting the patient’s projective identification, analysts allow patients to inquire more deeply their feelings via a personality strong enough to contain them, and to transform these feelings into a meaningful emotional experience.

According to Bion, mental growth depends on this “other” and the other’s function of thinking. Bion always discussed the patient’s relationship with this function, composed of factors which hold the potential for an encounter with the “other” and their otherness, united in two models of functioning: viewing the mind either as a digestive or a synaptic model. The former functions as a digestive and thinking container, and the latter allows for the transfer of

mental signals much like the transfer of electric signals between nerve cells. Both models allow for movement and linkages between mental states and integrate them with other components of the personality.

These different functions of thinking which generate links in the mind are often attacked. In this essay, I suggest that the psychoanalyst's challenge and responsibility is expressed by the way in which he or she copes with threats against the proper functioning of either or both of these two states. In turn, the patient internalizes the way the analyst copes, and this influences his ways of communication, within his mind and with the surrounding environment.

**OTHER, OTHERNESS AND RESPONSIBILITY:
A KOHUTIAN PERSPECTIVE**

ESTI DINUR

Kohutian otherness is an otherness which is not experienced as difference. Instead, such otherness is experienced as if it were essentially ourselves, and therefore it is totally redefined as a selfobject. Otherness aspires to selfobject experience as a result of two directions of motion relating to the other: the other coming toward us in such a way that he can sense and see us closely, and also as coming from the inside whereby the other can identify our changing developmental needs (mirroring). We turn toward the other through idealizing the idealized figure (idealization). This is a motion that recreates and holds within it different, maturing qualities of the original oneness of the beginning of life. As such, it is critical to our existence and growth throughout life. In the absence of motion from the other toward us, or in the absence of an other who is a constructive source for our motion toward him, the experience of motionless otherness will distance us from ourselves and create experiences of internal and external estrangement, further damaging the establishment of a self with a sense of continuity and cohesion, a self which can actualize and feel joy in his or her life. It is the responsibility of psychotherapy, which may well pass through a repetition of this absence, to strive to restore the creating and enlivening motion.