

Other/Wise

The Online Journal of the International Forum for Psychoanalytic Education (IFPE)

“SKIN”, Issue 1, Winter 2017 Edition

2017 Editorial Staff

Other/Wise Executive & Managing Editor:
Farrell Silverberg

Other/Wise Editorial Team:
George Bermudez
Joyce Rosenberg

General Introduction to Other/Wise Winter 2017:

This much-awaited issue of Other/Wise concerns IFPE’s 2016, 27th Annual conference, on the topic of SKIN, that took place in Pasadena, California. Other/Wise presents an array of papers taking up multiple facets and meanings of SKIN. The conference touched upon how SKIN speaks for us, targets us, is the body’s canvas, shows the terrain of a life lived, represents the membrane between inner and outer, is our largest sex organ, is a stimulus for projection by others, and impacts race relations and our social fabric.

We received feedback that the presentations at IFPE’s SKIN conference were among the most memorable, personal, socially relevant, direct, and meaningful of our conferences. In this issue of Other/Wise, we are pleased to present a small sampling of the material from that conference.

This issue begins with an inspiring paper by one of IFPE’s 2016 Distinguished Educator Awardees, Bryan Nichols, entitled *Promoting Empowerment in the Face of Societal Inequities: What I learned as a Psychologist in the Hood*. Attendees commented on the social meaningfulness of his presentation beyond its clinical and psychological scope and including notes on racial elements of therapeutic dyads. This paper’s power takes hold in terms of its relevance to our society, courageously pointing us toward a progressive and enlightened society and toward solutions in light of our country’s divisive

racial history. Citing historical and psychological sources, Nichols weaves an informative understanding of “crimes against humanity” in our country, and the sequellae of slavery, that have led to the underlying guilt and anger in our societal subtext. Every reader of conscience will resonate with the sentiments in this unforgettable paper about the deeper meaning of “reparation.” In Nichols’ words:

“...I can only say with certainty that to more completely help our youth in seeking a fair chance at their ‘pursuit of happiness,’ something on a more ‘macro’ scale of intervention in the whole of our society is ...”

Next, we move to a very personal paper from Veronica Abney, *The Gift that Keeps on Giving: Skin*, addressing the intertwining issues of skin, race, awareness and self-image on many levels. While an allegory for those intertwined issues in all of us, Abney uses her very personal story of childhood experiences of growing up with eczema, and the “excoriating” effects of the burdens and psychodynamic implications of wearing not only this skin issue, but also the additional social effects of her skin tone within family and in relation to the country’s racial bias. To exemplify the personal and societal meaning of all of these nuances, Abney shares stories of her childhood as well as anecdotes of her practice of psychoanalysis that show how her childhood understanding that “skin hurts” for these and other reasons, but also shows us that in her important overview and analysis of the issues of skin, such hurts and shame. By example, Abney shows us that there can be personal transcendence and embracing of all the challenges that skin, race, and race relations in and out of the consulting room can imply. In Abney’s telling words:

“...Whether one is conscious of their skin color or not, skin color organizes how we see the other, despite the liberal myth of color blindness. Skin can be both a gift and a curse...”

In the next paper, *Tattoo as Personal Ritual*, River Malcolm uses the concept of skin as the body’s canvas to give us insight into the stories behind her two tattoos. Far from being impulsive whimsy, the reader will understand that her tattoos were intentional statements as she shows us that her use of herself as canvas was well considered, and rich with meaning. As Malcolm describes her process of deciding upon and obtaining the tattoos in her paper, she free associates to the complexities of her psyche and events in her life, and through this process, analyzes the meaning of a rite of passage as it applies to herself. She begins her paper, quite personally, by describing the tattoo that says, “Home is where the heart is open to the flow of life,” wrapped around her upper right arm. Her paper clearly invites the reader to

consider his or her own process as they take seemingly inconsequential, communicative, commemorative, or important steps in their lives -- steps that can sometimes serve the higher purposes of a rite of passage, times of honoring and even memorializing. Clearly, for Malcolm and many others who have chosen to use their own skin as canvas, a tattoo is not just a tattoo, and her paper teaches us a new respect for the importance of such skin borne statements. Malcolm reflects:

“... Skin is the actual edge where the beautiful ‘between,’ of which Martin Buber speaks in *I and Thou*, begins...”.

The skin, the organ that shields and protects the body, can have a great symbolism. So can something designed to take the place of the skin, like a Band-Aid®. This is addressed in the next paper *“Can I have a Band-Aid®?:” Two-dimensional sacred space: between second skin and transitional objects*. Author Orit Weksler considers the symbolism that a Band-Aid® has for a young autistic patient in this case study, and how it functions not only as protection, but also as a not-quite-transitional-object, something to be used in a repetitive action to help cope with separation and loss of an object. In the case of Weksler’s 5-year-old patient, separation and loss caused by his mother’s deep depression. Through the analysis of this case about the importance of Band-Aids® to one little boy, Weksler shares her unique understanding of actions that encapsulate a dilemma that cannot easily be symbolized, such as that of attachment and loss. Weksler writes:

“...Let us look again at Emile’s wrapping and unwrapping of the Band-Aid®...I think this is how we contain anxieties that are too big for us to symbolize... These kind of anxieties are suspended in repetitive action..”.

In the next article, the psychological meanings of SKIN, are explored as they apply to the interpersonal realm. Author Edie Boxer explores her long and troubled relationship with her, now deceased, brother in *Thin-Skinned and Thick-Skinned: The Story of a Relationship*. In this intimate, biographical and autobiographical case study, the author shows us two sides of a crumbling self—fragility and defensiveness—and with concomitant lashing-out and self-erosion. In her article, Boxer attempts to bring closure to an unresolved but seminal relationship in her life. It is a relationship that, as is often the case, didn’t end with the death of the other person. She bravely explores the meaning of the fact that there was no goodbye at that parting. In the end, Boxer makes it clear that the line between the thick-skinned and the thin-skinned in close relationships, is often blurred. As Boxer states, her goal is to:

"...speak to others who are also struggling with unresolved relationships... Maybe the only way to find some peace with this specific painful disconnection is to attempt to find a degree of meaning."

Offering an interspecies view of SKIN, Paul Zelevansky's creative and entertaining paper, *Monkey and Man*, and its videos give us much food for thought about skin, and, as per the animal world, fur. He explores how skin and/or fur can be inviting, comforting, transmit emotions, be warm, cold, and even be manipulative as well as other negative connotations. He shows us how much skin and fur can create the "tactile connection," that contributes to relationships – or not. The fur of a cat helps bring us closer to these complex beings, or the fantasized availability of sexualized skin may offer only a hollow connection. From the need to relate to other to the bio-dynamics of the "mammalian penis," Zelevansky's free floating paper about puppets, bodies and minds leaves its mark on the reader. He describes his paper as

"....an existential fable, which tracks the growing up and growing together of a monkey and a man... the stories explore adult concerns about learning, work, family, friendship, living and dying, the form and language is cast in a way that would be understandable to a child..."

In the title to his article, *Skin Deep: Our Self-Defeating Resistance To Empathizing With "Superficial" Evidence-Based Therapy Models*, M. Chet Mirman examines prejudice – the kind that mental health clinicians hold against other therapists whose practice model is different from theirs. Mirman recognizes that there is much discrimination among the varying modalities, that it is unfair and harmful – in much the same way that there is discrimination in so many societies based on different skin colors or ethnicities. He examines hostility towards psychoanalytic ideas by non-psychoanalysts, as well as hostility and condescension towards Cognitive Behavioral ideas by psychoanalytically-oriented therapists, and attempts to bridge the divide. In Mirman's words:

"Good psychoanalytic therapists (actually, good therapists of any orientation) don't insist that their patients enter their world.. Isn't it, then, ironic that we would expect students (and other therapists) to enthusiastically enter the world of analytic ideas when there are more accessible paradigms available?"

This issue ends with a revealing article by George Bermudez that looks at how unconscious factors (both individual and group unconscious) affect psychoanalytic institutes and the overall psychoanalytic community where affiliation can serve as a "second skin." In *Psychoanalytic Institutes as "Second Skin: Bullying and the Challenges of Belonging, Authority, and Uncertainty*, Bermudez discusses the absence of empathy that can occur in a groupthink, where protecting the skin of a collective can override the empathic function and disables the ability to know what it is like to live in someone else's skin, and increases the defensive membrane between group and individual. Bermudez challenges the ubiquitous notion that bullying resides in personal, micro-psychological sources, with the preferred solution being personal psychotherapy and looks at systemic etiologies and solutions. Incorporating Kohut's (1976) concept of a "group self" and citing an example of system-wide intervention in the manner of Weisbord and Janoff's "Future Search," Bermudez highlights the dynamics of psychoanalytic institute change and, on the other hand, of group stasis that resists development. In Bermudez's words:

"...This paper will propose that bullying can be viewed usefully as a reflection of a social unconscious, and illustrative of larger socio-cultural forces, as well as personal and interpersonal ("micro-psychological") processes..."

--Farrell Silverberg

“SKIN”, Issue 1, Winter 2017 Edition

Table of Contents

	Page
Promoting Empowerment in the Face of Societal Inequities: What I learned as a Psychologist in the Hood* ❖ Bryan K. Nichols, Ph.D.	7
The Gift that Keep's on Giving: <i>Skin</i> ❖ Veronica D. Abney, Ph.D.	27
Tattoo as Personal Ritual ❖ River Malcolm	37
“Can I have a Band-Aid®?:”Two-dimensional sacred space: between second skin and transitional objects ❖ Orit Weksler	49
Thin-Skinned and Thick-Skinned: The Story of a Relationship ❖ Edith (Edie) G. Boxer	62
Between Fur and Skin ❖ Paul Zelevansky	74
Skin Deep: Our Self-Defeating Resistance To Empathizing With “Superficial” Evidence-Based Therapy Models ❖ M. Chet Mirman, Ph.D.	103
Psychoanalytic Institutes as “Second Skin”: Bullying and the Challenges of Belonging, Authority, and Uncertainty ❖ George Bermudez, Ph.D., Psy.D.	115

Promoting Empowerment in the Face of Societal Inequities: What I learned as a Psychologist in the Hood*

Bryan K. Nichols, Ph.D.

I'm going to share with you some of my experiences as a psychologist working in community-based programming over the past 30 years. I consider it a bit of an Odyssey, as I travelled from Washington D.C. to Los Angeles, program to program, spreading the good word of what self-awareness, appropriate emotional expression, and determined persistence could do for African American and other youth of color living under adverse conditions in South Los Angeles. In the tradition of great mythologies, I'd like to report this as a "Hero's Journey." However, after many humbling sidetracks, I have no heroic finale to report. I can only say with certainty that to more completely help our youth in seeking a fair chance at their "pursuit of happiness," something on a more "macro" scale of intervention in the whole of our society is necessary before our more "micro" interventions can fully take hold.

I am a graduate of Howard University, a great Historically Black Institution in Washington D.C. established in the aftermath of slavery where tens of thousands of ex-slaves were educated. In my freshman orientation at Howard, I was told that for each of us fortunate enough to be there, there were 10 others who couldn't, and that we owed it to those other 10 to do something of importance with our education.

I carried that value to my next academic institution on the West Coast, UCLA, the school of Jackie Robinson. My dissertation was a study of the effects of leadership training on a group of largely African American youth in a South Los Angeles middle school (Nichols, 1985). To my surprise, being a "leader in the hood" wasn't all it was

“cracked up to be.” Contrary to my prediction, those leaders, as a whole, did not gain in a sense of control and power as result of being in a leadership class, especially after the principal told them they’d be better served focusing on their grades than bothering with affairs of running the school. Upon further examination, the leaders who did buy into our message that they had the knowledge and power to suggest meaningful school wide changes actually suffered drops in self-esteem. On the other hand, those who weren’t “drinking our cool aid,” as it were, protected their self-esteem by not believing that anybody cared what they had to say about the functioning of their school.

This was a great lesson speaking to my naiveté about helping African American youth achieve greater personal and collective outcomes through activities designed to enhance personal power, or in the words of Psychologist Albert Bandura, self-efficacy (1982). It was as though those kids who protected their self-esteem by not

** Paper presented at the 27th Annual Interdisciplinary Conference of the International Forum for Psychoanalytic Education - SKIN. October 28, 2016.*

believing that they had any real power were telling me, “ain’t nobody gonna listen to us, Doc”.

On the other hand, those youth who did “buy into the program”, internalized responsibility for failure in a way that foreshadowed later research by Claude Steele on a phenomenon he called “stereotype threat” (Steele & Aronson, 1995). Stereotype threat is a kind of performance anxiety that occurs when individuals believe they are in situations that could confirm a negative stereotype, such as African Americans taking standardized testing fearing the results could confirm the stereotype of intellectual inferiority. It would seem to leave our kids facing a bit of a psychological “Sophie’s Choice,” choosing either to seek success through conventional means and suffer much anxiety and possibly self-doubt, or reject that path altogether and risk a life of social and material marginalization.

But, I am a hard headed sort and I persevered with community oriented programming, learning and training in a culturally oriented parenting program entitled *Effective Black Parenting* (Alvy & Marigna, 1985) and a culturally oriented Anger Management Program entitled *Dealing with Anger* (Hammond & Yung, 1991). Later, I thought that God had fulfilled my dreams when a community based organization contracted with me to work in a gang prevention program entitled, *L.A. Bridges*, which, 11 years later, the city of Los Angeles morphed into a program called *Gang Reduction Youth Development* (GRYD).

Throughout the many years of my work in these programs, I have never stopped being amazed at the tremendous strength and resilience I’ve witnessed in youth and

families contending with overwhelming social and personal obstacles. I've seen parents transform their parenting styles to create firm and loving households that nurture secure and curious children. I've seen middle schoolers at risk for gang involvement transform into high achieving high schoolers and distinguished college graduates. And, I've seen ex-gang members pursue a path of redemption through service to their communities and commitment to their families.

And yet, I've also seen a stubborn inertia that seems to limit program achievement to barely significant outcomes. I recall the young man in our gang intervention program whose progress was so startling and surprising that we called him into our staff meeting to congratulate him, only to find a few weeks later that he was the star of the most recent L.A. helicopter filming of a police car chase following a bank robbery. I remember the case of the middle school boy who left my Anger Management class where I had just imparted the wisdom and justification for not attending and "egging-on" fights. Soon thereafter, he attended a fight, pushed off a school administrator who fell onto him while trying to stop the fight, and was subsequently unceremoniously transferred to another school for having "assaulted" the administrator. Finally, I remember and mourn the 5 clients of my gang intervention program who were the victims of murder, or, perhaps more profoundly, were the victims of a nihilistic system of presumed self-defense that ushered them toward the streets.

Research has identified positive findings. Effective Black Parenting did result in warmer, more affirmative and loving parenting practices (Myers et al., 1992) and the culturally adapted Dealing with Anger program resulted in fewer teens going through the correctional system (Yung & Hammond, 1995). Yet, implementation of these programs is not as widespread as I think it should, possibly because there is often resistance to programs attuned to one cultural group. The GRYD prevention program does appear to reduce the risk of gang involvement for young program participants (Cahill et al., 2015), and the GRYD prevention/intervention programs as a whole appear to have reduced gang violence in city “hot spots” in comparison to comparable areas in other parts of Los Angeles County, but only slightly, and not to a level that reaches statistical significance across the city.

It feels like we work so hard just to take an “inch of ground.” But, from my perspective, the struggles of our community programs aren’t just due to the intractability of the problems of the families and youth with whom we work. They are also due to the difficulty in establishing a well-oiled cohesive collaboration amongst the providers of those programs, the funders of those programs, and the evaluators of those programs.

For instance, with the *L.A. Bridges* program, contractors responsible for evaluation were de-funded after year one for reasons unknown to me. No proper evaluation was ever conducted. An audit was conducted by the city comptroller and it was very unfavorable to the program, paving the way for the program’s ultimate demise

some years later. I wonder how a program that costs the city over \$10 million per year could get sidetracked to the extent that a contracted evaluation could never occur. What forces were at play here?

In the subsequent version of L.A.'s approach to gangs, the GRYD program, the city was keen on not repeating the mistakes of *LA Bridges*, and showed an "iron will" toward having evaluation conducted. This remains an on-going process and the ultimate results are yet to be known, but early meetings involving the city, the evaluators, and the providers often broke down into camps of finger pointers, providers not trusting intentions of the researchers, and researchers not accommodating the concerns of providers, all now with about a \$20 million dollar program at stake.

Psychological Underpinnings

I have spent many years pondering the issues that seem to impede the magnitude of success that feels so attainable, yet remains frustratingly elusive. We have done good work, and many youth and families have benefitted, but in my view, not as many as could, or should. What psychological factors underlie the struggles for program success?

A few years ago, with these questions persistently dominant in my mind, I happened upon a path that shed light on what I intend to boldly claim is “The Solution” to what ails us in community programming. I attended a conference with my friend and colleague, Dr. Medria Connolly, where we were invited to participate in a process of encouraging more diversity in future conferences. As a part of this process, Dr. Connolly and Dr. Pat Ogden, the founder of Sensorimotor Psychotherapy (Ogden, 2015), made a presentation on the potential derailing influence of implicit racial bias in bi-racial therapeutic dyads (Ogden, P., & Connolly, M., 2016).

Though I had been generally aware of the growing literature on implicit bias, the process of developing this presentation sharpened my focus. This literature essentially states that even the most well-intentioned Caucasian American is vulnerable to having stored unconscious racial biases that can impact their perceptions and actions toward African Americans. This process can affect a wide range of circumstances, from individuals determining whether to shoot potential criminal suspects (Kahn, K. & McMahon, J., 2015) to teachers assessing the severity of preschooler’s behavior (Gilliam et al, 2016).

I reflected on the writings of Psychoanalyst Dr. Kimberly Leary (2000), who described how racial enactments, the unconscious replaying of the oppressor/oppressed dynamic, can cause the break down of therapeutic process where the therapist is white and client is black. I also became aware of writings of an African American Jungian, Dr. Sam Kimbles (2014). Dr. Kimbles says that there is such a thing as a “Cultural Unconscious” that contains unresolved cultural conflicts aggregated into “cultural complexes.” Those cultural complexes may

then give rise to what he calls “Phantom Narratives,” that disrupt the cultural discourse.

Could it be that implicit bias is contributing to racial enactments corrupted by phantom narratives that undermine effective collaboration amongst well-intentioned people trying to remediate problems in the hood?

The Psychological Case for Reparations

With these questions in mind, I also became aware of the writings of Ta-Nehisi Coates, whose popular book, “Between the World and Me” (2015), is a letter to his teenage son about the perils of being African American in contemporary America. I soon discovered that Coates had also written another quite compelling article in the Atlantic entitled, “The Case for Reparations” (2014). In that article, in great detail, he spells out the historical economic hardship suffered by African-Americans caused by explicit governmental policies over much of the 20th century. He notably identifies red-lining as a policy of restricting African American access to good and affordable real estate which has greatly contributed to the wealth disparity in which the median Caucasian American wealth is about 13 times the median wealth of African Americans (Pew, 2014). In response to these and other sources of economic

discrimination, Coates articulates the case for the American government to materially compensate the descendants of American slavery for the centuries of uncompensated work and stolen wealth. He notes that since 1989, Congressman John Conyers of Michigan has introduced legislation to study the possibility of reparations, but it has never gotten out committee for a full vote in the United States House of Representatives.

I had never given much serious thought to reparations before reading Coates. Practically every Black person has heard talk of “40 acres and a mule.” Spike Lee even gave his production company that name. But only recently did I realize that it was Union General William Tecumseh Sherman in 1865 who issued a proclamation that freed slaves should be granted “40 tillable acres of land” confiscated from former rebel plantation owners. He proclaimed further that the government should loan those freed slaves a mule to plow that land. In a pattern of ambivalence that has marked much of American history, that order was rescinded by President Andrew Johnson just 9 months later, taking land back from the 40,000 former slaves who enjoyed one brief moment in the reparations sun.

Twenty-Five years later, there was a movement to grant pensions to ex-slaves (Farmer-Paellmann, 2003) that lasted into the early part of the 20th century. About 600,000 ex-slaves lobbied for this pension. However, the ex-slave pension movement, led by a single mother of 5, Callie House, was ultimately destroyed by government officials who prosecuted and convicted House “under the pretext of protecting the ex-slaves from the exploits of fraudulent organizers” (Farmer-Paellmann, 2003, p. 27).

In reviewing these and other cases, I've come to realize that there is a long and serious history of seeking some form of compensation for the descendants of American slavery. Coates' case for reparations, in particular, is a plea for a moral, political and economic solution to a history of injustice. But I'm a psychologist, and I couldn't help but think of what this could mean, psychologically speaking, to the many youth and families I've worked with over the years. What would it mean that institutions such as the American government, various states, some corporations, and even some universities, acknowledged the incredible harm done through the Crime against Humanity that was slavery, and then offered material compensation? What entrenched negative psychological states of African American individuals might get loosened by this macro level policy of reparations?

Early in the 20th century, W. E. B. Du Bois, in his landmark book "The Souls of Black Folk," highlighted the pain of ambivalence embedded in the experience of African American life that still resonates today:

"One ever feels his two-ness, –an American, a Negro, two souls, two thoughts, two unreconciled strivings; two warring ideals in one dark body, whose dogged strength alone keeps it from being torn asunder (Du Bois, 1903, p. 5)

More than 90 years later, in his book chapter entitled, "Nihilism in Black America," Cornell West stated:

"we must delve into the depths, namely the murky waters of despair and dread that now flood the streets of black America... to face up to the monumental eclipse of hope, the unprecedented collapse of meaning, the incredible disregard for human (especially black) life and property in much of black America..."(West, 1993, p.19).

Unreconciled ambivalence! The torturous meaninglessness of nihilism! These are the kinds of painful psychological states worthy of our attention, and candidates as targets of a profound, history altering socio-political intervention.

But there's more. Molefi Asante, African American Studies professor, has suggested that reparations would address the psychology of both African and Caucasian Americans by promoting, "psychological relief for both blacks and whites in terms of guilt and anger, and... national unity based on a stronger political will." (Asante, 2003, p.10).

Asante is saying nothing less than reparations could have healing power for the whole of our country! This belief is echoed in the writings of psychoanalyst and sociologist Jeffrey Prager, who stated that the challenge for countries who have

traumatic pasts is, “to gain closure over a past that bifurcates the nation and establishes (at least) two national histories - history as told by the victims and by the perpetrators...” (Prager, 2008, p.405).

In my journey through various highly ambitious efforts to improve the lives of African Americans, I believe I witnessed many of these psychological issues at play, especially in the multi-cultural interfaces involved in planning a large scale urban program. I recall one meeting in particular between city government officials, program researchers, and agency providers regarding the researchers’ wish to establish an experimental design in conducting the program’s evaluation. Such a design would have required random assignment to program and to a no treatment control. This was anathema to providers whose orientation is to help all they can and not subject the needy to a no treatment control for the sake of science. As we walked out of the meeting that day, I heard utterances of “Tuskegee,” a reference to a 40-year longitudinal research project conducted by the U.S. Public Health Service with African American men (Reverby, 2013). The men were studied to learn about the long-term effects of syphilis, requiring, by their scientific methodology, that the men receive no treatment for their disease, or even that they be made aware that treatment for syphilis was available.

What emotions underlie such references? Certainly we could probably dig and find Du Bois’ ambivalence, and West’s nihilism, but what stuck out to me was mistrust

and suspicion. And just beneath that mistrust and suspicion was fear, a terror of the repeat of exploitation that carries all the dynamics of post-traumatic stress.

And what would reparations do for that fear? That's a question I don't think I can adequately address without simultaneously referencing the "psychological relief for... whites" hypothesized by Asante.

My assumption is that those researchers were good people, and totally correct when they made the case for Randomly Controlled Treatments as the "Gold Standard" for program evaluations. But how could they have missed, or been indifferent to, the fears of a historically oppressed people on guard for exploitation. My conclusion is that it is denial born of the necessity to distance from the role of oppressor, exploiter, and perpetrator of a crime against humanity responsible for, amongst other things, the deaths of millions of Africans. I imagine a denial that says, 'these acts were in the past, and I cannot, and should not, be held accountable.'

But there are myriad contemporary voices describing the condition of, "white privilege" that benefits present day Caucasian Americans (e.g., Emba, 2016; McIntosh, 1990). Simultaneously we have increasing awareness as a society of ongoing bias that allows for unarmed African Americans to be killed by police at 5 times the rate of unarmed Caucasian Americans (Lowery, 2016), and for African Americans to be incarcerated at more than 6 times the rate of Caucasian Americans (Alexander, 2012). What forces underlie these unfortunate statistics?

My contention is that this denial is a powerful defense against shame, the shame of having benefitted from actions that contradict conscious values and intentions. My former classmate, and shame researcher, June Price Tangney (Tangney, 1990), tells us that whereas guilt is feeling bad about 'what I did,' shame is feeling bad about 'what I am.' I do believe that most of my psychoanalytic colleagues will agree that shame, next to terror, may be the most painful and disrupting emotion we experience. My claim here is that it is the defense against shame that creates a denial that protects an un-reflected-upon part of the psyche that is a storehouse for unconscious bias; and that part of the psyche "fights like crazy" not to be recognized.

If it can be said that slavery has damaged the meaning of skin for all Americans, then let reparations be the salve that heals our wounds. I propose reparations as an antidote for both the terror, protected by the suspicion of African Americans, and for the shame, protected by the denial of Caucasian Americans. It is the missing apology, and un-tendered compensation, that has stood waiting since the emancipation proclamation as the remaining unfinished business of resolving the crime of slavery. And to be clear, this is not White Americans apologizing and paying restitution to African Americans. It is institutions acknowledging misdeeds on behalf of all Americans. But, it does allow Caucasian Americans to once and for all say "I acknowledge and see you for all the pain my country has put you through," and for African Americans to say, most profoundly, "Thank you for seeing me."

If the impact of reparations could be as powerful as I believe, then my middle school leaders wouldn't have experienced that "Sophie's choice" I described, choosing between an anxiety ridden striving toward success on the one hand, and an ego saving yet life risking existence in the margins of society on the other. Reparations says, "you have possibilities young lady"! The world really can be yours with a little luck and lots of hard work. You don't have to worry about that steady headwind that used to blow against your ancestors because adults have finally gotten to the last step in resolving old hurts.

And what of the young man who couldn't bear the pressure of striving for success where it was unprecedented in his immediate world. Reparations allows me to say to him, "the world sees you now and acknowledges your pain. It is not a purposeless existence leading down a series of blind alleys. I can tell you without reservation that pursuing a better life is worth the risk". And he has the reasonable opportunity to believe me, buttressed by the fact that he and all his "boys" have received material compensation affirming that his humanity is recognized.

This journey toward the idea of reparations has been my personal odyssey, and as tends to happen on odysseys, I've been confronted with many humbling experiences. One such experience has been my realization that my assumption that America has never apologized for slavery was incorrect. I learned that in 2008 the US House of Representatives passed a resolution apologizing for slavery and racial segregation. In 2009, the US Senate passed *Senate Congressional Resolution 26 (111th): A concurrent resolution apologizing for the enslavement and racial segregation of*

African Americans. In this resolution, the Senate remarkably acknowledges the extended legacy of oppression in one section that reads:

*“Whereas the system of Jim Crow laws officially existed until the 1960’s - a century after the official end of slavery in the United States - until congress took action to end it, but (nevertheless) the vestiges of Jim Crow continue to this day;
Whereas African-Americans continue to suffer from the consequences of slavery and Jim Crow laws—long after both systems were formally abolished—through enormous damage and loss, both tangible and intangible, including the loss of human dignity and liberty;”*

At the end of this resolution are two disclaimers stating that nothing in the provision supports a claim against the United States or serves as a settlement of a claim.

I wondered where I was the days those resolutions got reported in the news. Why were they not events of such historical proportion that they didn’t get burned into the fabric of my memory? I think the reason for that is that the two resolutions never got reconciled into a joint resolution that could be sent to the President for signing, so we never got that super-hyped photo op of the president signing the apology. Nevertheless, it is a start. I look forward to the day of that presidential

signing, but not just of a resolution, but of a bill apologizing for slavery and authorizing the payment of reparations to the descendants of American slavery.

And as for that mandate given me by my predecessors at Howard University to live a life of service that honors those not so privileged as to gain a college education, I'd like to think I'm halfway home. Encouraging empowerment in the face of societal inequities remains a valuable and necessary enterprise. But it must be complemented by advocacy for a broader social policy intervention, reparations, that makes those inequities a little less daunting.

Bryan Nichols may be contacted at: Bnicholsphd@drnicholsandassociates.com

References

Alexander, M. (2011). *The new Jim Crow: Mass incarceration in the age of colorblindness*. New York: The New Press.

Alvy, K.T. & Marigna, M. (1985). *CICC's effective Black parenting program: Instructor's manual*. Studio City, CA: Center for the Improvement of Child Caring.

Asante, M. E. (2003). The African American warrant for reparations: The crime of European enslavement of Africans and its consequences. In R. A. Winbush (Ed.), *Should America pay reparations?: Slavery and the raging debate on reparations*. (pp. 3-13) New York: Amistad, an imprint of HarperCollins Publishers, Inc.

Bandura, A. (1982). Self-Efficacy mechanism in human agency. *American Psychologist*. 37, 122-147.

Cahill, M., Janetta, J., Tiry, E., Becker-Cohen, M., Paddock, E., Serrakos, M.,

- Park, L., and Hennigan, K. (2015). *Evaluation of the Los Angeles Gang Reduction and Youth Development Program: Year 4 Evaluation Report*. Urban Institute.
- Coates, T-N. (2015). *Between the world and me*. New York: Random House.
- Coates, T-N. (2014). The case for reparations. Retrieved from <http://theatlantic.com/magazine/archive/2014/06/the-case-reparations/361631/>
- Du Bois, W. E. B. (1903). *The souls of black folk*. Chicago, IL: A.C. McClung and Co.
- Emba, E. (2016). What is white privilege? Retrieved from http://www.washingtonpost.com/blogs/post-partisan/wp/2016/01/16/white-privilege-explained/?utm_term=.fd58f54c83e7
- Farmer-Paellmann, D. (2003). Excerpt from black exodus: The ex-slave pension movement reader. In R. A., Winbush, (Ed.), *Should America pay? Slavery and the raging debate of reparations*. (pp. 22-31) New York: Amistad, an imprint of HarperCollins Publishers, Inc.
- Gilliam, W., Maupin, A., Reyes, C., Accavitti, M., and Shic, F. (2016). *Do early educators' implicit biases regarding sex and race relate to behavior expectations and recommendations of preschool expulsions and suspensions? [A Research Study Brief]*. Yale University Child Study Center.
- Hammond, W.R. & Yung, B.R. (1991). *Dealing with anger: Givin' it, takin' it, workin' it out - A violence prevention program for African American youth [Video Program]*. Champaign, IL: Research Press.
- House Resolution 194 (110th). (2008). Apologizing for the enslavement and racial segregation of African Americans. Retrieved from <http://govtracks.us/congress/bills/110/hres194/text>
- Kahn, K. & McMahon, J. (2015). Shooting deaths of unarmed racial minorities: Understanding the role of racial stereotypes on decisions to shoot. *Translational Issues in Psychological Science*. 1, (4), 310-320. <http://dx.doi.org/10.1037/tps0000047>.
- Kimbles, S. (2014). *Phantom narratives: The unseen contributions of culture to psyche*. London: Rowman & Littlefield.
- Kochhar, R and Fry, R. (2014). Wealth inequality has widened along racial, ethnic lines since end of Great Recession. Retrieved from <http://pewresearch.org/>

- fact-tank/2014/12/12/racial-wealth-gaps-great-recession/
- Leary, K. (2000). Racial enactments in dynamic treatment. *Psychoanalytic Dialogues*, 10, [4], 639-653.
- Lowery, W. (2016). Aren't more white people than black people killed by police? Yes but no. Retrieved from http://washingtonpost.com/news/post-nation/wp/2016/07/11/arent-more-white-people-than-black-people-killed-by-police-yes-but-no/?utm_term=.0302c13694ec
- McIntosh, Peggy. (1990). White privilege: Unpacking the invisible knapsack. Retrieved from http://people.westminstercollege.edu/faculty/jsibbett/readings/White_Privilege.pdf
- Myers, H., Alvy, K., Arrington, A., Richardson, M., Marigna, M., Huff, R., Main, M., & Newcomb, M. (1992). The impact of a parent training program on inner-city African American families. *Journal of Community Psychology*, 20, 132-147
- Nichols, Bryan (1985). *Self-perceptions of control and esteem as related to participation in a leadership training program*. University of California at Los Angeles. Unpublished Dissertation.
- Ogden, P. & Fischer, J. (2015). *Sensorimotor psychotherapy: Interventions for trauma and attachment*. London: W.W. Norton and Company, Inc.
- Ogden, P., & Connolly, M. (2016). *The implicit influence of culture in psychotherapy: What the body knows, how the body speaks*. Presentation at UCLA's Annual Interpersonal Neurobiology Conference: The Cultural Lens in Psychotherapy: Identity, Empowerment, and Context.
- Prager, J. (2008). Healing from history: Psychoanalytic considerations on traumatic pasts and social repair. *European Journal of Social Theory*, 11, (3), 405-419.
- Reverby, S. (2013). *Examining Tuskegee: The infamous syphilis study and its legacy*. United States: The University of North Carolina Press.
- Senate Congressional Resolution 26 (111th). (2009). A concurrent resolution apologizing for the enslavement and racial segregation of African Americans. Retrieved from <http://govtrack.us/congress/bills/111/sconres26/text>
- Steele, C. & Aronson, J. (1995). Stereotype threat and the intellectual test performance of African Americans. *Journal of Personality and Social Psychology*, 69, [5], 797-811.

- Tangney, J. P. (1990). Assessing individual differences in proneness to shame and guilt: Development of the self-conscious affect and attribution inventory. *Journal of Personality and Social Psychology*, 59, 102-111.
- West, C. (1993). Nihilism in Black America. In C. West. *Race Matters (pp. 9-20)*. Boston: Beacon Press
- Yung, B. R. & Hammond, W.R. (1995). *Positive adolescent choices training: A model for violence prevention with African American youth [Program Guide]*. Champaign, Ill. Research Press.

The Gift that Keep's on Giving: *Skin*
By Veronica D. Abney, Ph.D.

Eczema is a [skin](#) condition caused by inflammation of the skin. Typically, [eczema causes](#) skin to become itchy, red, and dry -- even cracked and leathery. [Eczema](#) can appear on any part of the body (WebMD, 2016).

This paper will use autobiography and free association to examine *skin* in a highly personal fashion and, as well, in a political way with the hopes of stimulating a dialogue amongst participants.

I developed eczema as an infant. Many therapists and analysts have made interpretations about this condition. Excoriating oneself is probably the most popular genre of interpretation, and for me, the most shaming. The eczema is supposed to stem from unexpressed anger.

The current thinking is that [eczema](#) is caused by a combination of factors that include:

- *Genetics*
- *Abnormal function of the immune system*
- *Environment*
- *Activities that may cause skin to be more sensitive*
- *Defects in the skin barrier that allow moisture out and germs in (WebMD, 2016)*

Growing up I had many skin infections. Whenever I sat on furniture in someone else's home, I recall worrying about the dirt that might enter through the tiny scratches on the backs of my knees, or about the dead *skin* or blood that I might leave behind. To avoid either of these situations, I always sat on the edge of my seat with my dress between the seat and me.

I now know that what I knew instinctively then is true. My *skin* does **not** provide the full gift of protection from the outside that skin provides to others.

... *it's thought that defects in the skin barrier contribute to eczema. These defects can allow moisture out through the skin and let germs in.* (WebMD, 2016).

By the time I was 8 years old, the *skin* on my arms and legs was noticeably damaged; I had lost the first layer of *skin* during a bad infection; my *skin* was thick, dry, leathery and hyper-pigmented. I tried to hide my *skin* by wearing long pants during summer, knee socks, stockings and long sleeves. Eventually the other person would recoil, ask what happened to my *skin* or ask if I was burned.

The hyper-pigmentation made me appear darker in *skin* tone than I really was, and as a little *Colored* girl in 1960 that was **not** something I liked. I remember being 10 years old when I would lean on my mother's body and grab her honey-colored arms and whine, "I want *skin* like yours." She would say, "Oh stop, your *skin* is fine". We both knew that wasn't true. My mother's *skin* was unblemished, and her veins were visible through her *skin*. I admired my mother's *skin* because it was clear; she did not have eczema. I viewed my *skin* on my arms and legs as "black, thick and ugly". I know, now, that she was profoundly sad about my predicament, but this is how my mother dealt with my emotional distress—by avoiding validation of my feelings because it is too painful for her and me.

At this point in my life, *skin* meant several things. *Skin* was something I tried to hide. *Skin* brought unwanted attention and stares. *Skin* became a source of shame. *Skin* made others recoil. *Skin* hurt. *Skin* did not keep other people's filth out. My filth was unwittingly left behind in my dead *skin*. It was my fault my *skin* was ugly; I scratched it or sneaked some forbidden food.

All of the above occurred alongside my experience of going to white schools and living in white neighborhoods. My battle with eczema paralleled my experience of being in black *skin* in America as well as intersecting my contact with the white world where I felt more self-conscious and more different; I was black and my skin was ugly. For one or both of these reasons, I was the other. I was seen as untouchable and possibly contagious for both reasons. I was black-*skinned* in a school with primarily white-*skinned* kids, in a white-skinned country. I knew my *skin* was black and that sometimes I, or my family, were the only ones in a particular place covered in black *skin*. I was aware that sometimes we were not liked, had to go in the backdoor of Route 66 restaurants and were highly scrutinized.

At age 5, I came home from my first day in kindergarten, and I told my mother that there was another "colored" girl in my class but that she was moved into the afternoon session. I remember wishing this girl, Lynda, and I, were together in this sea of white-*skinned* children. We later became friends, but we were never again in the same class. The kindergarten teacher, Mrs. Stein, was in the habit of reading us *Little Black Sambo*. Since I was the same color as *Little Black Sambo*, I felt self-conscious, embarrassed and maybe even ashamed knowing the other children made a connection—a *skin* color connection between Little Black Sambo and me. I asked my father why, in the story, *Little Black Sambo* kept doing stupid things. My embarrassment sparked my father's shame and rage about not being able to protect me from this racist book for children. That was the beginning of the end for *Little Black Sambo* in the New York's Nassau County schools. Later that year, due to my father's efforts, the book was removed from the school system's list of approved texts.

My grandmother use to say about random women, "She's dark, but she's pretty." This drove my brown *skin* father insane. What was she saying about him? "He's dark, but he's handsome?" As an adult, after getting an extreme *sunblack* I placed my arm next to my father's, smiled and said, "Look, I'm almost as dark as you now." He gave me his bullshit laugh, and when not in my presence, he said to my mother, "Can you believe she said that?" That's when I first consciously realized he had issues about his *skin* color. I was not fully conscious about the issue of color in my family. Yes, I knew that my mother was fair like honey and my father was brown like milk chocolate. I assumed that my father was proud of his *skin*; he was the first black musician at NBC in New York (the result of a big battle directed by National Association for the Advancement of Colored People). Once, he wanted the family to move to West Africa. He also routinely kept my sister and me from watching blacks on television, if they played stereotyped characters. We could not watch the *Little Rascals*, *Beulah*, *Amos and Andy* or Steppin Fetchit and Shirley Temple movies if he was at home.

So when my mother revealed my father's horror to me, I was surprised. I did not know that my paternal grandmother would not allow my 22 year-old father to marry my older half sister's pregnant mother because she was "too dark" (and not well educated). My mother passed the brown paper bag test (meaning she was lighter than a brown paper bag) and was an RN; she was deemed suitable. The more I thought about it the more distressed I became. My mother inappropriately shared other evidence of my father's issue with *skin* color that left me feeling consciously unattractive in the eyes of my father. I say consciously because, on some level, I had to know this about my father.

Over the years, I learned how to tolerate daily microaggressions, usually with minimal distress, but when Barack Obama ran for President, my balance was tilted. This

paper is one of a few attempts to get my balance back. If we thought America's obsession with *skin* color had decreased, we were wrong. It is still here. I cannot watch the news without being reminded of it. I have again become hyper-aware of my *skin* color and it's meaning in my thoughts and fantasies and in my interactions with friends, colleagues and patients. The attacks by "the *deplorables*" on Obama's every decision, strength, birthplace and comments are endless.

There are those in this country that cannot tolerate the fact that black *skin* found its way into the White House through the front door. The Black comedian, Larry Wilmore, labeled the current election as "***The Unblackening of the Whitehouse***" because he understands that this upsurge of racist rhetoric has everything to do with us having an African-American President. The blatant racism that had quieted down has reared its ugly head once again. Tea Party Republicans and the now The Republican candidate for President, have again made it acceptable to insult an entire ethnic group or to disrespect a black man, even when he is the President of the United States. Law enforcement murders black men every day because they are black-*skinned*. *White-skinned* people echo "*Make America White*"--oops I mean--"*Great Again*". Trump was tolerated by America when he insulted Latinos, African-Americans and Muslims, but it wasn't until he went after white women that he was *unendorsed* by other Republicans.

Skin color is something about which I am conscious most of every day. It's exhausting to have to think so much about it. I think about it even when it's not really the topic of the conversation. "Oh yes, it was such a dark film." "Pure and white." "No, I only eat white meat." Sometimes I just look at someone with white *skin* and decide she is a racist. I might find myself just feeling hateful towards someone white for being white. I wish I did not feel this way, but it is my reaction to the hate that is directed toward me

and other black-*skinned* people. Sometimes when I am with white-*skinned* people I feel absolutely compelled to bring up my blackness. Is this my reaction to tension stemming from the unmentioned *skin* color difference? Is it my need to get ahead of the situation before the white person says something insulting? Maybe I just cannot forget that I have black *skin* when I am with someone with white *skin* whom I do not know well. I think it a test of the white-*skinned* person's tolerance for my authentic self. I am sure I have negatively influenced relationships because of my inability to stop talking about *skin*—my *skin*, black *skin*, white *skin*.

In the Consulting Room

My journey to become an analyst started with a search for a possible training analyst. There were no black-*skinned* analysts when I started my analytic training, so I hesitantly took the risk to see a white-*skinned* woman. This was an interesting experience for us both. Being a Jew born at the end of the holocaust, she did not consider herself white. Being Jewish myself, I had heard this before so even though she was a child of Germans and blond and blue-eyed, I took her at her word. It helped that she recognized that her white-*skin* gave her privileges that non-whites did not have. Intuitively I knew she had never treated a person with black *skin* and at moments this worried me.

The difference in our *skin* color was frequently highlighted for us. Sometimes it was my use of English, once it was a blind assumption made by her about the color of one of my friends, and many times it was my rants on *10 Reasons Why I Hate White People*. Despite our differences, I had an unbelievably excellent analysis, and this was because my analyst allowed me to be myself. Being myself included being someone with black *skin*. She felt no need to defend whites. This was a small part of why I loved her

so very much. She died last year, and there are few words to describe her absence in my life.

When white-*skinned* analysts refer me a white-*skinned* patient, I always fantasize about whether or not to mention my blackness to the patient. In my head I hear them say, "Oh, by the way, she's black. Is that a problem for you?" In recent years, as a result of the Internet, referrals know that I have black *skin* because they have gone online and seen my photo. In the past, it was obvious that a patient did not know that I was black. Like the time a parent of a hospitalized child left my outstretched hand empty and said, "You're Veronica Abney? I thought you were a nurse." Do you get that? It's okay for black-*skinned* people to portray nurses on TV or even become nurses; it's okay for us to be caretakers of white-*skinned* folks. Another time a new patient interrupted her dialogue with me and said, "I'm sorry; I just have to say, I can't believe that you're black!" In her world experts were not suppose to have black *skin*. Not surprisingly, this treatment ended prematurely.

I attempt to explore my patients' fantasies about my black *skin*, but some are afraid to go there. Most of my patients are liberal Democrats, which is probably why they are okay with being in treatment with me. When an analysand has been brave enough to open up, I am sometimes surprised at what I discover. One patient revealed that after their first session she told her partner, "S*** she's black; she's not going to feel sorry for me." What did this mean? The first comment was based on the patient's belief that I had a much harder life than theirs because I was black. The patient then realized the meaning of the thought and being the one with the education, I may have had a better life than theirs.

I should say that there have been many times when patients of color have said to me, "I'm so glad you're black". Two days ago a man who had gone through some changes to start treatment with me came for an initial consultation. He chose me because I have black *skin*. Oliver explained that his distress is related to the attacks on black-*skinned* men by law enforcement. Sometimes he is too frightened to leave the house. He may need food, but if his anxiety is too intense, he will go without. Oliver has numerous physical ailments. He loses his balance easily, and his movements are awkward. Oliver fears that he will attract police attention, be viewed as a threat and be shot. I was struck by how Oliver has been so profoundly affected. I have feared for the males in my family but only entertained a passing thought about what it is really like for them.

The task for me with Oliver will be to not just validate his experience and commiserate with him. I will need to help him understand what it is about his unique experience that makes it difficult for him to cope with his life as a black-*skinned* man in a racist America.

I have another patient right now who is voting for Trump despite being financially dependent on state and federal programs. No matter what Trump says, this person remains in his camp stating, "He's going to give us jobs". I have to confess that despite my efforts to interpret their position as related to their trauma, I have slipped out of that analytic space when asked questions like, "Don't you care about immigration?" At these moments, I need to be silent, but on a few occasions, I have tried to get them to see that their position is ridiculous based on their predicament of not even being able to afford to buy fresh vegetables. Fortunately, there is something

about this very hurt and cognitively impaired person that I like which prevents me from dismissing them as a redneck and assassinating them with my tongue.

When I last saw this patient, s/he said something that gave me hope regarding the power of my interpretations. S/he stated, "I wonder why I hate Hillary so much. Maybe it's because she's a woman like my mother."

Skin color organizes everyone's self-perception, worldview and political landscape. Whether one is conscious of their *skin* color or not, *skin* color organizes how we see the other, despite the liberal myth of color blindness. *Skin* can be both a gift and a curse. It is a safety barrier. It can give one the gift of privilege if those in power share one's *skin* color. It can segregate one, if one is a different color from those in power. My *skin* color has organized my worldview positively and negatively from the time I was at least four years old. With a bit of tongue in cheek, I can say, it is "the gift that keeps on giving". In the Western world, white *skin* offers one the gift of privilege, which up to now, keeps on giving. Black-*skinned* people receive the gift when they are routinely stopped by law enforcement and given unnecessary violations. White-*skinned* people receive their gift when stopped by law enforcement and told, "This is just a warning".

I was struck by the quotation on the program brochure from Audre Lorde's, poem *Hanging Fire*. "My *skin* has betrayed me," she writes. Although, Lorde was not talking about her color as some might assume, I did think about it in terms of my own experience. I have felt like my *skin* betrayed me because of my eczema but not because it is black. Whatever feelings I may have had about being black, I do not believe I would ever trade my *skin* in for another color or wish it away even though I feel powerless to change the hatred of black *skin* in this country.

Veronica Abney may be contacted at: vabney@pacbell.net

References

Lorde, A. (1997). Hanging Fire in *The Collected Poems of Audre Lorde*. New York: W. W. Norton and Company Inc.

WebMD (2016). Understanding eczema: The basics. <http://www.webmd.com/skin-problems-and-treatments/eczema/understanding-eczema-basics>.

Tattoo as Personal Ritual

by River Malcolm

Thank you, reader, for joining me in exploring *Tattoo As Personal Ritual*. In ways that I did not anticipate, preparing this paper, presenting it at the International Forum for Psychoanalytic Education's (IFPE) SKIN conference, and now offering it in written form to you, are all part of the ritual rite of passage that I associate with my tattoo.

To give you a little background – I was a latecomer to IFPE. After I retired as a therapist, Rachel Newcombe suggested that I might contribute to IFPE, and that the IFPE community might provide an intellectual and emotional home for me. I needed an outside commitment to help me to persist in a post-retirement creative writing project about the analysis I had undergone with the imaginal spirit of Sigmund Freud as my analyst. I presented twice at IFPE annual conferences with updates on that project, but could find no way to relate my work with this disembodied spirit analyst to the topic of SKIN. The topic fascinated me because SKIN is such a concrete and literal boundary between self and other, self and world, and self and unknown. Skin is the actual edge where the beautiful “between,” of which Martin Buber speaks in *Between Man and Man*, begins (Buber, M, 14.).

Thinking about SKIN, about my own skin in particular, and about how difficult it has been for me to be comfortable inside my own skin, led me to reflect on the tattoo that I had inked onto my skin in the late 1990s. That tattoo consists of the words “Home

is where the heart is open to the flow of life,” wrapped around my upper right arm. As I reflected, I became increasingly aware of how the tattoo had served as a personal rite of passage. When I composed my proposal, I impulsively wrote that IFPE’s SKIN conference had inspired me to get a second tattoo. I didn’t know then what my new tattoo would be, though I was considering a drawing I’d made to honor my sister Bonnie who is living with fourth stage lung cancer. The drawing, which shows Bonnie on a surfboard riding high on a wave, helped us to reconcile after decades of estrangement. I liked the idea of tattooing myself with an image that represented Bonnie’s vitality and courage. But when I tried to redraw and adapt the image to the shape of my arm, it lost all its magic.

In August 2016, I was finishing my four-year thru-hike of the Pacific Crest Trail (PCT) -- my other retirement project. I realized then that my second tattoo might be about the PCT, celebrating the completion of my hike. This would also connect it with my sister Bonnie because I had dedicated large sections of the hike to her, as a walking prayer for her healing. Therefore, the hike, too, had played a role in mending our relationship.

As I hiked my final section, I decided to use the PCT symbol for my second tattoo – the symbol that marks the trail, that had guided me for 2,650 miles, reassuring me that I was not lost, that I was on the trail that I loved and trusted. The PCT symbol consists of a tall fir tree and glacier-covered mountains, two well-loved aspects of the trail. I modified it by adding a river flowing down from the glaciers – both to represent my

name, and thus my own presence on the trail, and to relate the PCT symbol to the idea of the "flow of life" in my first tattoo.

When summer ended and I returned from my final section on the trail, my partner and I made our annual migration, from our home in Washington state to our home in Santa Barbara (where she continues to teach during the fall quarter). I contacted Pat Fish, the woman tattoo artist in Santa Barbara who had inscribed my first tattoo, and arranged for the second tattoo. It was important to me that the tattoo be healed by the time I met with the IFPE community.

Now I had only to write my paper. But alas – my efforts at writing were frustrating, unsatisfying, and haunted by critical voices. Every writing attempt seemed to charge off in a new and different direction, complicating my project rather than moving me forward. After years of imaginal analysis with Freud, I am happy to say that I was able to recognize this as a clear sign of unconscious resistance.

When I spoke of my resistance and self-sabotage with a longtime friend and writing buddy, she said, "What if the presentation were *about* the sabotage?" Her question sounded like a way out of my morass. What, I asked myself, might this sabotage have to do with the tattoos as ritual rites of passage? The word sabotage comes from the idea of kicking with shoes or boots – *sabots* – to injure or destroy. I picture self-sabotage as kicking myself, rather than standing up, as I did everyday on the trail, and using my feet to walk forward into the unknown.

My first tattoo – “Home is where the heart is open to the flow of life” -- expresses my wish, and my commitment, to practice opening my heart to the unknown, as I am doing now, in this paper.

I created that first tattoo at a time when I was struggling with travel phobia. My marriage was in crisis because of poor choices on my part that called for reparation. I realized that if my marriage was to thrive I had to learn how to join my partner in her passion for travel. I needed to learn, not only to *endure* travel, but to enjoy it.

I knew perfectly well that my aversion to travel began in early childhood when my family's move from Milwaukee to Southern California disrupted my sense of home. The disruption to my sense of home became even more acute when my mother moved out and left the family when I was eight. She then remarried and moved to Oklahoma when I was 11, after which I commuted each summer between San Diego and Oklahoma City, between two stepfamily homes and cultures. I felt unwelcome and unsafe in both of these environments. To me, travel had come to mean fear and pain.

I chose the name River in my mid-20s, hoping that it would help me to embrace change and stop clinging to an imagined, nostalgic, "before the divorce" paradise. I hoped it would help me to identify with the changes in life, and ride the flow, rather than struggle to find the constancy to which I so desperately tried to cling. I visualized a cartoon of a river trying to cling to its banks, and I was able to laugh at my own fears

and need for control (not unlike the image of a hiker using her feet to kick herself rather than moving on down the trail).

My first tattoo originated from a conversation with a friend about my difficulty with travel. I needed a good transitional object, I told her, like a child's teddy bear. I needed something to represent the secure feelings associated with mother and with home, something that I could carry with me into the unknown.

The trouble, I told my friend, is that I don't seem to be able to hold onto anything. I am constantly misplacing my purse, coat, gloves, hat, keys – anything that isn't permanently attached. I would lose any transitional object that wasn't permanently tattooed on my skin. That thought stopped me in my tracks. A tattoo would serve as a transitional object that I could never lose. What a concept!

At that time, in the late '90s, in my social circles, class, and age cohort, getting a tattoo was unusual. The process of designing it and telling people about it – family, friends, patients, colleagues, and even referral sources – became practice in walking through my fears of how others might respond. It focused my attention on that wished-for state of home as an open heart in the face of whatever might come.

Because of my love of language, I decided to make my first tattoo out of words. Recalling the framed embroidered linens I'd seen in so many "intact" homes that read "Home is where the heart is," I decided that my tattoo would say "Home is where the

heart is open to the flow of life.” Wherever I was, it would remind me, I would be at home if I could only open my heart.

I contacted a calligraphy artist, a woman whom I didn’t know, but who had designed the poster for a major poetry festival. She rendered my tattoo-to-be in beautiful fluid lettering. I searched the internet for a woman tattoo artist, found one in Santa Barbara, and asked my father, who lived in San Diego, to drive me up to Santa Barbara and be present as a witness to my tattoo ritual. Every step along the way involved engagement with others and with the unknown — providing an opportunity to practice the open-hearted state the tattoo was meant to invite into my life.

My second tattoo, which I shared with you earlier in this paper, is not so much a wished-for passage as the celebration of an accomplished one. This tattoo is a constant reminder of the fact, still astonishing to me, that I hiked the entire trail.

Writing this paper and sharing it with you, reader, deepens the meaning of this tattoo. With this writing, I am venturing into the mystery between your skin and my skin, and into the world of relationship and engagement. When I try to understand my self-sabotage, I identify at least two kinds of resistance: resistance to success (my writing might win me respect and appreciation), and resistance to service (my writing might be genuinely moving and valuable to you, the reader). My fear of success goes back to an early childhood concern about outshining my sisters, complicated in adult life by my worry about their well-being and superstitious guilt about the ways in which I see myself

as luckier than they. My resistance to being of service is rooted in my fear of being wanted. If I'm able to speak in a way that touches you, if we make real contact, then you might want more access to me, more connection, and it might be more than I'm able to welcome. I would become, in my eyes, the bad, abandoning, neglectful mother that I perceived my own mother to be. As much as I want to be wanted, I fear it even more.

As I work with these resistances, I think of the first tattoo, "Home is where the heart is open to the flow of life." The flow of life *will* sometimes include outshining those I love, as well as being outshone by them. In 2015, at the IFPE conference on Vulnerability and its Discontents, my friend Jerry Croghan, who introduced me at the 2016 SKIN conference, received a standing ovation after he presented his paper. I was filled with envy. The tattoo, and the growth it represents, guides me to simply accept such events and feelings as part of the flow of life, with an open heart — just as the imaginal Professor Freud helped me to accept unpleasant thoughts as part of the flow of my free associations. Yes, I'm afraid of being wanted and of disappointing, and of wanting, and of being disappointed. That, and refusing others, and being refused by them, is part of the flow of life, if I choose to engage with others.

Hiking the PCT taught me that when my passion is strong enough, and the trail beautiful and beckoning enough, I can risk even mortal dangers. How do I connect with a passion strong enough to risk the dangers of human engagement, such as those that I face in offering this paper for you to read: dangers like envying and being envied, wanting and being wanted? These dangers are more frightening for me than 50-mile

winds and slippery snow on the trail. Those were tangible potentially mortal dangers to my body. These are intangible potentially mortal dangers to my soul. How do I open my heart when the sense of danger makes me want to run away and hide from you, or scream and kick at myself, or at you?

I treasure the IFPE culture as one that brings out the best in human beings, at a time when so much in our national and global cultures is bringing out the worst. This paper and my tattoos have come to represent my wish to connect with you as reader, to open my heart to what happens between us and to nurture a passion for connection strong enough to walk through my fears.

Please allow me to share a little more about my process getting the two tattoos. When I was planning the first tattoo, it was very important to me that it would be painful. I felt that the voluntary facing of pain in the presence of witnesses would help me to see myself, and be seen by others, as strong enough to become the person I wanted to be: a person who could find a sense of home in embracing life as it is, moving forward into the unknown, instead of a person clinging, in fear and anger, to an imagined lost home. When I read about tribal rites of passage, I was struck how essential to such rites were the ordeals involving pain and difficulty. My first tattoo turned out to be practically painless, and I was disappointed. I felt that the lack of pain diminished its effectiveness.

When I came for the second tattoo, I had already paid my dues by the pain and danger I faced on the trail. I had learned how happy I could be on the trail, how the

beauty of the trail was, to me, well worth the risks. I didn't, therefore, need the second tattoo to be painful.

During the second tattoo, I talked with the tattoo artist about the surprising lack of pain, and she attributed it to my being "one tough chicken." She also remarked that she was probably gentler than other tattoo artists, because she got her start in embroidery and most tattoo artists got their start in motorcycle mechanics. Just then, though, as we spoke, the tattoo process became intensely painful.

I breathed into the pain and I found myself silently saying "yes I will yes I will yes." I was echoing a passage from James Joyce's *Ulysses* that I've loved ever since I first read it as a teenager. I was saying yes to the pain, yes, if this is the price of admission to the beauty and joy and meaning in this world, yes, I accept the pain, yes I will suffer it, and yes, for the sake of the love and the beauty, yes.

And yes to speaking with other IFPE participants, when I presented this paper, and in speaking with you through this written paper. In presenting this paper to you, I am taking one more step in the rite of passage of this tattoo. I am saying yes to the risks and dangers of social pain – yes, to envying and being envied, yes to rejecting and being rejected. For the beauty of the trail, yes.

When I look at this second tattoo, and touch it, I find that the trail marker is here, right on my own skin. The tattoo is a constant reminder that I am on the trail. I am on the

trail, even when things seem terribly wrong, when I'm suffering, when I feel out of control, and when I'm confused. Of course, yes, I'm on the trail with you here as you read this paper. I *am* the trail, this tattoo reminds me. And you sitting there inside your own separate skin reading this paper, *you* are the trail.

The passage that both these tattoos have helped me to make is the plain and simple – the precarious – passage from childhood into truly mature adulthood, as well as into truly mature old age. This passage is difficult to make in a modern rapidly changing society, where there are no role models or maps for the unknowns each generation and each individual must face.

It's easy to regress into a childhood stance from which I need and expect others to be the grown-up, and to protect me from the dangers of life. I want to say yes to life, and to others – to those who were present at the IFPE conference, and to you reading this paper – in spite of the very real dangers inherent in relationships. My hope is not to be overtaken by my own fear and aggression, which are naturally triggered by the dangers of relationship, but to move forward toward loving engagement. To do so is a lifelong challenge, and requires all the help I can get. That help can come from art, traditional spiritual practices and communities, psychoanalytical ideas and practices, and from creative symbolic rites of passage such as tattoos. I welcome all that can help me meet the great and beautiful continuing challenge of learning to be comfortable in my own skin, in the world outside my own skin, and with you reading this paper.

I would like to conclude by sharing a poem by William Stafford (1998):

A Ritual to Read to Each Other

If you don't know the kind of person I am
and I don't know the kind of person you are
a pattern that others made may prevail in the world
and following the wrong god home we may miss our star.

For there is many a small betrayal in the mind,
a shrug that lets the fragile sequence break
sending with shouts the horrible errors of childhood
storming out to play through the broken dyke.

And as elephants parade holding each elephant's tail,
but if one wanders the circus won't find the park,
I call it cruel and maybe the root of all cruelty
to know what occurs but not recognize the fact.

And so I appeal to a voice, to something shadowy,
a remote important region in all who talk:
though we could fool each other, we should consider--
lest the parade of our mutual life get lost in the dark.

For it is important that awake people be awake,
or a breaking line may discourage them back to sleep;
the signals we give - yes or no, or maybe--
should be clear: the darkness around us is deep.

River Malcolm may be contacted at: rivermary@centurylink.net

References

Buber, M. (1975). *Between Man and Man*. New York: Macmillan.

Stafford, W. (1998), *The Way It Is: New and Selected Poems*. Minneapolis, MN:
Graywolf Press.

“Can I have a Band-Aid®?:”

Two-dimensional sacred space: between second skin and transitional objects

Orit Weksler

Emile, a boy of 5, constantly asks for Band-Aid®s, whether he has a wound or not. He wraps and unwraps the adhesive bandage around his finger in a compulsive, repetitive fashion. What is at the root of this behavior? Can an understanding of it be useful in treatment?

I would like to use Emile’s case as an example and an illustration of my thinking around behaviors that occupy a space that is not autistic, but not quite transitional. It is a rather two-dimensional space that nonetheless has an important part in our world and our culture. In addition to two-dimensional, this space is also non-symbolic, often nonverbal, and is used idiosyncratically and relationally to tackle anxieties that are too great to deal with. An observer -- a third -- can make meaning out of this repetitive, non-symbolized action, after the fact, elaborating and connecting it into culture.

Case Material: Emile, age 5

Emile was 5 years old when we first met. A bright-eyed, very slim boy. His parents came to the United States from Russia three years before he was born. His father, Oleg, worked as a professional while Luba, his mother, a college-educated woman in her early thirties with a passion for photography, had not been working or studying since their arrival here. Soon after Emile’s birth, his mother’s parents and siblings visited. An argument had erupted, but not a huge

one. Much to Luba's surprise, her parents packed their bags and announced their immediate departure. No amount of tears and regrets would change the decision.

Luba's siblings, unwilling to facilitate a reconciliation, soon followed their parents. Oleg, preoccupied with work, wasn't able to console Luba and she fell into a deep depression. "Emile and I were alone," she told me. "We were each other's life lines." They spent many hours on the rocking chair, listening to music and feeding. When Emile was 7 months old he had a cold and had a hard time breastfeeding. After that he refused the breast all together. He also refused to stay in her arms on the rocking chair -- he wiggled away from her arms and started crawling.

Emile has been on the move ever since, always jumping, running, and climbing. When around his mother, Emile would attack her constantly, pushing her with all his might, shoving his chin into her, jumping onto her back when she leaned forward, tipping her over, and making her fall. Outside, he sometimes would run without warning, oblivious to danger. At two, he had the beginnings of a bilingual vocabulary, but did not put together sentences. Additionally, his eye contact was poor.

Emile was diagnosed with autism spectrum disorder when he was two and a half, only a month before his sister Tanya was born. He started Applied Behavior Analysis (ABA) therapy¹, and his mother joined several support groups for parents of kids with special needs. Luba and her family resumed their relationship but the incident was never discussed.

¹ **Applied Behavior Analysis** is, according to the Center for Autism: "The process of systematically applying interventions based upon the principles of learning theory to improve socially significant behaviors" (<http://www.centerforautism.com/aba-therapy.aspx>). ABA therapy is offered in California to children diagnosed with autism spectrum disorders. It is often conducted in homes by therapists paid minimum wages who have gone through scant training. Therapy, often referred to as "training," consist of sessions in which a child is trained to complete tasks, relying heavily on a reward system. Attention to the child's spontaneous gestures as attempts to communicate can be totally missed when using this goal-oriented system.

Luba felt that Emile and his sister were draining all of her energy. Despite the fact they were in school and preschool, respectively, every morning, she felt that she had no time for herself and was constantly exhausted.

Emile had a Band-Aid® obsession. He would ask for a Band-Aid® for each microscopic cut on his skin that he imagined. He would ask again and again. When he received a Band-Aid® he would play with it continually, dressing and redressing his wound. This of course was considered disruptive behavior at school. His school team came up with the idea to write a “social book” about the Band-Aid®. The book showed Emile asking for a Band-Aid®, being refused by the teacher, and then sitting quietly in his place without making a fuss. “No blood, no Band-Aid®” was the mantra. He brought this book in to show me recounting that story in the mechanical voice that he used for ABA-related “conversations”: If I get hurt, I look to see if there’s any blood. No blood, no Band-Aid®! Everything is OK! I’ll sit quietly! I won’t ask for a Band-Aid®!”

Band-Aid®s in Cultural Context

Toddlers love to cover themselves in paint or Nutella (or poop!). Three-year-olds put stickers on themselves and Band-Aid®s which can become part of the skin but then can peel off, leaving a clear sensation of tenderness on the detached surface. When there is an area of sunburn or a scab, a child may become curious about the layers of the skin, their function and thickness. Will it hurt to peel them? What is underneath? Is the dead skin representative of me or not me? This can be seen as a kind of precursor to any question about mortality, which usually tends to emerge around age 4.

We can see this as an example for a two-dimensional realm explored and opened before a three-dimensional one can be imagined. Winnicott (1967) talks about the emergence of a three-dimensional space, a “potential space” where imagination, thought, an observing self, are developed (p.369). Think of a child who has had the experience of having her finger dipped in peanut butter, stung by a mosquito, burned by hot tea, or had a Band-Aid® peeled off, a sticker stuck and removed, in the context of a “holding environment.” For this child, those sensations provide a sense of the limits and boundaries of the body as well as an idea of what’s inside and outside of it. Now, in a holding environment, those ideas can also be explored in words and in play with another person.

A three- or four-year-old child might point to a spot on her skin -- a real scrape, a line drawn with a marker or an imaginary wound -- and ask for a Band-Aid®. The parent, teacher, peer or sibling participating in this new play space would oblige while offering kisses, best wishes and perhaps a Band-Aid®, real or pretend. This is play, filled with a new array of projections, feelings and ideas. Now, the Band-Aid® is no longer another kind of sticker; it now appears on the scene playing the role of itself.

The Band-Aid® in this pretend play scene that I just described, is not itself a transitional object. The “play Band-Aid®” has the same function that a real Band-Aid® would in a real-life situation (when there is an actual wound), just as a character in a play would sit in a chair in the same way an actor might sit when not acting in a play. In normal development, once there exists a three-dimensional space, that is, when the Band-Aid® loses its magical adhesive quality, so it is then that the normally developed child is no longer fascinated with it. The Band-Aid® is then

abandoned and used as a prop in play, playing itself. Other things can be used as transitional objects and in this role can become play-Band-Aid®s, such as a blanket wrapped around a wounded doll's head.

In a world of three-dimensionality, Band-Aid®s enter the culture as a metaphor for a desired quick fix -- "putting a Band-Aid®" on something is often used as a way to imply that a method was used to cover up a deep problem rather than taking care of it. The common advertising of "skin-colored" Band-Aid®s over the years has raised the issue of the kind of skin-color which is considered normal or desired. Most "skin-colored" Band-Aid®s are white or pink, not brown or black as many people's skin actually is. A "skin-colored" band aid on black skin looks different, and actually articulates the wound underneath while on fair-colored skin the wound is disguised under the Band-Aid®. So Band-Aid®s are used in this context to show another way in which our culture articulates Caucasians as the norm and marginalizes non-Caucasians.

The two-dimensional Field of Sacred magic -- between autistic and transitional objects: theory

Winnicott, in his paper "The Location of Cultural Experience," (1967)² discusses use of objects and symbols via a developmental lens. For a baby to be able to have an image of the mother, she must be experienced as somewhat separate. If the mother, according to Winnicott, has an (good enough) ability to both empathically know the infant's needs, and become curious

about his spontaneous gestures when he starts expressing them, it allows for the emergence of an ongoing dialectic between merger and separation, very early in the baby's life.

This can go wrong in two ways: if the mother might stay too merged with the baby, not allowing enough space for him to imagine her, or if she leaves him alone for too long, giving the baby a feeling that he's falling into space. "Trauma implies that the baby has experienced a break in life's continuity, so that primitive defenses now become organized to defend against a repetition of "unthinkable anxiety." (Winnicott, 1967, p. 369)

However, babies don't die of unthinkable anxiety, instead, they live with it. Emile, my 5-year-old patient, may have been merged with his mother in a way that did not always meet his needs. He may have had to comply with his mother's needs when she was too depressed to leave her rocking chair. At 7 months, when he started to crawl, he may well have experienced a kind of "unthinkable anxiety" -- his new ability left him all alone as his mother did not have the capacity to respond to his spontaneous gestures, nor was she able to respond to his calls when he needed her holding. Yet Emile still developed³ -- how did he compensate for these deficits? How did he go on being without a sense of a holding environment?

There were things Emile was not capable of doing, things other 5-year-olds do. He did not have a sense of "being alone in the presence of an other." If he did something by himself, he was all alone. Asking for help or looking for reassurance did not occur to him. Nor was he capable, at age 5, of any kind of pretend play. The three-dimensional world of imagination and illusion was closed off to him. Once when we were sitting quietly in my office, we could hear

³ Rene Spitz (1887-1974) studied total deprivation, which he termed hospitalism, in children in a foundling home. He found that the developmental imbalance caused by the unfavorable environmental conditions during the children's first year produces irreparable psychosomatic damage to normal infants. Spitz's film *Psychogenic Disease in Infancy* (1952) shows the effects of emotional and maternal deprivation on [attachment](#). The film was the cause of major changes in childcare sections of institutes.

Tanya, Emile's sister, playing with her doll in the waiting room. "Who is she talking to?" Emile asked. The idea of playing out loud was foreign to him.

Francis Tustin, in her well-known paper "Autistic Objects" (1980)⁴ describes children who carry around objects, usually firm ones, that appear to be important for them. They are distressed when the objects are taken away and seem to feel comforted when they have them. However, those objects are very different from the "transitional objects" described by Winnicott. They do not carry the mystery of the created and found; they are not sacred in the way that transitional objects are sacred.

From a realistic point of view, Tustin (1980) says, they were used in a way which was useless and meaningless. From the child's point of view, it became obvious that they were absolutely essential. "They have a bizarre and ritualistic quality and the child has a rigidly intense preoccupation with them, which is not a feature of fantasy play. (p. 27)

Esther Bick⁵ (1968) defines the skin as a container, holding together parts of the personality that are experienced at first passively. Bick writes that a "Disturbance in the primal skin function" can lead to a development of a second skin formation through which dependence on the object is replaced by a pseudo-independence" (p. 484). Bick, rather than deeming the behaviors, similar to those described by Tustin, as "meaningless" and "bizarre," suggests instead that they show a use of a mental function, perhaps a talent, which is usually used in a different way.

Imre Hermann was a Hungarian psychoanalyst born in 1889, a student of Freud and Ferenczi. In his 1934 paper,⁶ he discusses “the significant role that the wish to cling to mother's body plays in the mental organization of the human being” (p. 5)

Hermann's paper includes a discussion of the erotic function of the hand, clinging behaviors in primates and an investigation of the role of hair and fur in perversions. Geyskens (Geyskens, 2003, p. 1521)..⁷ describes Hermann's analysis of “attachment pathologies,” such as depression, nymphomania and toxicomania and suggests a primal phantasy of the “forced break of the mother–infant relation” . Hermann described three positions towards this fantasy: clinging, going-in-search-of and the urge to separate. In this way, Hermann's model allows for a dimensional perspective of these attachment pathologies Rather than thinking about them in a linear, developmental way (one leads to another, one is more desirable than another), Hermann's positions describe pathology as a quantitative disharmony.

The primal fantasy of the forced break of the mother-infant relation includes the desire to cling to the mother. Frustration of this desire results in grief and longing, as well as in mastery. A disharmonious result of this frustration will be separation -- a reaction-formation to clinging, a tearing away or what Bick might have called pseudo-independence or the second skin. Another aspect of this forced break is the search for the mother. This search may become elaborated and generalized as curiosity and a pleasure of discovery, which Winnicott might have considered as a “cultural experience.” In a less harmonious situation the going-in-search will manifest itself as constant wandering, a restlessness, and an ongoing sense of anxiety around belonging.

6 Q., 45:5-36.

Let us look again at Emile's wrapping and unwrapping of the Band-Aid® through the lens of the primary dilemma that Hermann put forth: the forced break of the mother-infant relation. Emile's frustrated need to cling takes on the shape of a forced premature separation, a repetitive tearing away that can be seen in his compulsive need for repeating this action with the Band-Aid® as well as in running away. His constant attacks on his mother -- a tormented search for her as an object and an environment. The deprivation Emile experiences is too great. It impedes his ability to pursue his curiosity and the pleasure of learning and playing.

When Winnicott wrote about the cultural experience he described a linear, developmental path to achieving it. That path inevitably travels through the land of three-dimensional transitional objects.

“If the baby is not given this chance then there is no area in which the baby may have play, or may have cultural experience; then there is no link with the cultural inheritance, and there will be no contribution to the cultural pool (1967, p. 371).⁸

I would like to suggest that there is another distinct space that is not meaningless, in the way Tustin describes autistic objects, but is also not three-dimensional in the way Winnicott describes transitional objects. It is, however sacred in a similar way, I think, to what Winnicott might say, and it seems indeed part of potential space. Hermann's dimensional model provides me with an idea: Perhaps cultural experience can stem from two-dimensional, repetitive phenomena as well as from three-dimensional elaborated, symbolic phenomena.

Let me try to describe these other distinct phenomena and locate them: These are phenomena which are not meaningless, but their meaning is unknown, as they are two-dimensional. They are spontaneous gestures without an observer. They obtain a created and found quality, but tend to be repetitive, unchanging and compulsive in their nature. The person feels compelled to do them rather than being interested, curious or joyful about it. There is a quality of timelessness -- as if the action is a place-holder, suspending time itself.

Here are a few examples:

- The child had a wooden reel with a piece of string tied round it. It never occurred to him to pull it along the floor behind him, for instance, and play at its being a carriage. What he did was to hold the reel by the string and very skillfully throw it over the edge of his curtained cot, so that it disappeared into it, at the same time uttering his expressive “o-o-o-o.” He then pulled the reel out of the cot again by the string and hailed its reappearance with a joyful “da” (there). This, then, was the complete game -- disappearance and return (Freud, 1920 p. 15).⁹

I am having a conversation with my friend. She tells me about her children; they are all doing well and are in good health. When she says this, we are both compelled to look for the nearest wooden piece of furniture. We knock three times.

I have a mild cold. I stand in line at the store. I sneeze. “Bless you!” says the man standing behind me.

A child wraps and unwraps a Band-Aid® around his finger.

A person clears his throat twice before speaking ...

I would like to suggest that all those behaviors belong to the same realm – a magical, two-dimensional sacred space that is not symbolized and yet not meaningless.

When experienced in the cultural realm, these behaviors are not disputed. . We knock on wood because we knock on wood. We say bless you because that's just what we do -- the ritual is always the same, no further meaning is expected or possible. It is a two-dimensional exchange yet it does have a place and a cultural meaning.

I think this is how we contain anxieties that are too big for us to symbolize. These anxieties are not symbolized, but neither are they evacuated or projected. These kind of anxieties are suspended in repetitive action. This is where much of religion resides, if we think about it . For some artists the creative process is experienced as a two-dimensional action. They are compelled to create and find themselves repeating themes, desperate for an audience who will define and contain their art. The meaning of their actions is unknown to this kind of artist, as was the case with Freud's baby grandchild, and likely also to the person performing a social ritual until the appearance of an audience, an observer -- a third.

Here we can refer to quantum mechanics as a metaphor for the role of the therapist in a situation where two-dimensional actions occur. Young's (1802) famous double-slit experiment has shown that photons travel as waves and create an interference pattern until observed. Once an observer appears, be it a human or a machine, the interference pattern disappears and the photons act as particles. For the purpose of our metaphor: The two-dimensional action (wrapping and unwrapping a Band-Aid®) is like the photon wave, meaningless it travels in every possible direction repeating and interfering with itself. Until along comes the observer: a therapist, parent, an observing ego or a more mature version of self. When this observer looks at the action, meaning occurs in a kind of *Nachträglichkeit*, *après-coup*, or belated understanding, which changes the nature of the action but not the action itself.

Drumming and a kiss

I was able to think about Emile's use of Band-Aid®s as an action that carried a meaning - an action which repeated a dilemma of clinging and tearing. The action itself never took place in my office. When Emile asked me for a Band-Aid®, I told him I don't have any, which was true. I was, nonetheless, an observer and by means of observing the two-dimensional action it has settled on a meaning. Now there was room for another dimension. One day Emile started drumming on the little table while eating his snack. The plastic plate shook violently and fell off the table followed by all the utensils. I quickly cleared the yogurt cup, tea and water cups as his drumming became stronger. "Too loud?" he said, hesitantly, "No, I said, I like your music." I drummed too, matching his rhythm and sound. After a long time our play was finished. Emile stopped drumming, got up, came up to me and gave me kiss. That acknowledgment of the presence of the third, as therapist, was the beginning of another level of play.

Orit Weksler may be contacted at: oweksler@gmail.com

Bibliography

Bick, E. (1968). The Experience of the Skin in Early Object-Relations. *Int. J. Psycho-Anal.*, 49:484-486.

Freud, S. (1920). Beyond the Pleasure Principle. The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XVIII (1920-1922): P 1-64

Geyskens, T. (2003). Imre Hermann's Freudian theory of attachment. *Int. J. Psycho-Anal.*, 84:1517-1529.

Hermann, I. (1976). Clinging—going-In-Search—A Contrasting Pair of Instincts and their Relation to Sadism and Masochism. *Psychoanal Q.*, 45:5-36.

Spitz Rene (1952) [*Psychogenic Disease in Infancy*](#) (film)

Tustin, F. (1980). Autistic Objects. *Int. R. Psycho-Anal.*, 7:27-39.

Winnicott, D.W. (1967). The Location of Cultural Experience. *Int. J. Psycho-Anal.*, 48:368-372.

Young, PUT QUANTUM MECHANICS REFERENCE HERE THANKS

[Young, T.](#) (1802). "The Bakerian Lecture: On the Theory of Light and Colours". *Philosophical Transactions of the Royal Society of London*. **92**: 12–48.

Thin-Skinned and Thick-Skinned: The Story of a Relationship

Edith (Edie) G. Boxer

“Death ends a life, but it does not end a relationship, which struggles on in the survivor’s mind toward some resolution which it may never find.”

-- Anderson, “I Never Sang for My Father (1968)

“Don’t tell Mom!”

“OK, but get off me. You hit my eye!”

“I didn’t hurt you! I only sorta fell on you, and my elbow only touched your eye for a second.”

“You fell on top of me. Mom told you not to bother me. I was just lying here on my bed reading.”

“Uh-oh, it looks like the skin under your eye is turning colors. You look funny. Your eye looks pink too. “You’re not going to tell Mom, are you?”

“No, but she’s going to know as soon as she comes home from the store. Is it getting worse?”

“I think so. I’ll be right back.”

“Where you going?”

“To get a steak from the freezer. Maybe the cold will keep your skin from turning more colors.”

“Hurry! Mom is going to kill us for fooling around. Actually, she is going to kill YOU!”

My brother, Meyer, was about ten years old, and I was about seven or eight when he panicked about almost giving me a purplish-black eye. I don’t remember if my skin actually turned colors or if my mother found out and “killed him” for not listening to her directive, “Don’t bother your sister!”

This kind of command was not unusual and the harshness of it trickled down from my brother to me. I imagine he told himself: 'I was here first. This is what I learned and - I am in charge of you.'

Here are some of the unspoken house rules from my childhood, sprinkled with what I envision he believed and then demonstrated, thinking only about his perspective:

- 1) Mom is the only one who gets to yell. I am the oldest and the son and anything Mom gets to do I get to do- especially if she is not around.
- 2) Mom is the only one who gets to tell us what to do. But I get to tell you what to do.
- 3) I know it is ok to hit you because Mom hits you.
- 4) I am not supposed to ask any questions or disagree with our parents. Children are to be seen and not heard, but I am going to take over the family business and my day will come when I'm the one to be heard.
- 5) I am not supposed to tell Mom that I don't want to go shopping with her. Mom embarrasses me in public all the time and when she does, I will take it all out on you.
- 6) I eat first, you get what's left.
7. As your older brother, I am entitled to make fun of you and tease you as I see fit.

I recognize that what I am describing is not uncommon, at least when I was growing up in the forties and fifties. This was the traditional family where the oldest son – the chosen one — ruled.

This familial understanding is in part about power and, perhaps, it was my undying wish for his attention and love that kept me in this intimate, skin-to-skin relationship well beyond the time when another, less familiar connection would have been severed. I hope to tell the story that

explores the impact of early relationships that may never find a resolution. I invite you to bear witness to my experience of this significant connection in the hope that you, or someone you know personally or professionally, will be understood and not feel alone.

I thought of him affectionately as my “brubby” when I was a little girl even though he bossed me around. I couldn’t think to defend my position or identify how I felt when he tormented me. Not until I was an adult could I disagree over how he interpreted any rule. All of his life, he generally spoke over anything I could say or do to contest his authority.

It has now been over twenty years since his early death at the age of fifty-four from a massive heart attack. I don’t think of my brother, my only sibling often; but when I do, I can locate a place deep inside my body that holds the melancholy knowledge of his actual death, the understanding that he was unable to reciprocate my affection, and, at times, memories of the torment I often felt as a result of his behavior toward me.

He came into our family about two years before me, but after the newborn death of our parents’ first child, our older brother. I don’t know how much time passed between these two events, the birth of one boy and then another; but my brother seemed to resent me, I imagine, from the time I was born. He was my “brubby,” but to my parents he was their second-born and I the third. I suspect that my mother, who had lost her first-born, needed both of us to be perfect to demonstrate her flawlessness. She also needed to control both of us so she wouldn’t have to endure any further loss. His life was one characterized by intense conflict between his raging mother and himself. He disobeyed, fought with, and disappointed her until the day she died. As I have said earlier in this paper, I can only conjecture about how Mike (as he liked to be called) felt about himself, but I certainly observed my mother's control of him when we were children. Scenes come to mind when she made him wear knickers: pants for boys that ended just below

the knees, designating his younger age. He was also overweight as a young boy and was forced to shop in the "Husky" section of department stores with my mother. I remember her pulling school-age peers off our neighborhood street to, then, insist that my brother hit the boy who had hit and /or bullied him on their way home from school.

Perhaps one of the more difficult times was during adolescence when my mother discovered that Mike found a book on sex in the attic. She was enraged at his act of unearthing this, clearly embarrassing (to her), volume, and then subsequently locked him out of the house when he came home late. He slept in the car overnight and so it went. My brother continued to stumble: he was expected to take over the family business after completing college. Instead, he quit school after one quarter and tried the business for a short time before getting married at age 21 and fathering two sons while in his mid-twenties. Tragically, Mike and his wife's first son died at birth, but I never knew how he felt about his loss or lived through this tragedy. He experienced various business failures (some under questionable circumstances), his first heart attack at age 30, and a failed marriage in his early forties. However, I also remember socializing in a group of young couples, including Mike and my sister-in-law, spending a great deal of telephone time discussing our common enemy, our mother, and being available to him and his family at the time of his first heart attack.

And me... I observed my mother and brother fighting, particularly as he reached adolescence. I attempted to be the peacemaker, which always failed. My next strategy: I withdrew trying to develop a thick outer skin and hiding from both of them as best I could, vowing "to get out of here someday." When my brother was well into his teens, he didn't pay any positive attention to me. Although, I remember one incident during my early adolescence, that struck me as questionably positive at best. I came home late one winter evening from a

movie. Evidently, my mother was furious (frightened) with my late arrival, and my brother told me I was in trouble. I don't know if he was warning/protecting me or if he was gleeful at the knowledge my mother was about to attack. That last option was certainly more in accord with his interpretations of the rules. I think the idea he wanted me to get into trouble is what hurt me so much — my inner thin skin apparent to him as he attempted to humiliate me time and time again.

So, while my father kept a distant presence, my brother and I had a series of complicated experiences with each other and with our mother, sometimes in the background, creating an environment of hostility and trauma. Years later during an analytic session, my analyst suggested that my brother probably hated me from birth. Indeed I imagine that he and my mother, alone as a dyad until I was born, formed a relationship that could be characterized as one where “the initial dyadic relationship with the mother is not sufficiently secure before the sense of the ‘third party’ arrives on the scene” (Britton, 2004, p.49). The British psychoanalyst, Ron Britton, tells us that this results in a “hyper-subjectivity” that keeps the person (my brother in this scenario) from “mentally accepting this triangle...” (p. 51). This is the complex narrative that I confronted when I was born. I came to know and love my brother as my “brubby,” because that was how it was. But my warm feelings were not to last. Perhaps as I grew up, my voice and accomplishments became more of a challenge for him, our lives took on a new trajectory: his life became as unknown to me during this time as mine was to him, and yet at the time, I didn't really think a great deal about the increasing space between us. Anyway, there was not much I could do to narrow the growing psychological and physical gap. We were not confidants, collaborators or co-conspirators. If there was love between us, it was mostly unnoticeable.

Thinking about my brother and our relationship, I return to Britton, who writes: “What I have found in my work is that inside every thick-skinned patient is a thin-skinned patient trying

not to get out, and in every thin-skinned patient is a thick-skinned patient who is usually giving himself a hard time..." (p. 50). I can use Britton's thoughts as a way to know that Mike was highly vulnerable to his failures and developed his thick skin to survive, rarely displaying his weaknesses. Yet, I remember feeling startled when I called to tell him that our father had died and he said to me in a quiet, plaintive voice that a child might demonstrate, "Now, why did he go and do that?" At another time, probably the last time I ever spoke to him, he told me during a long distance phone call, that he thought about our father every single day of his life. At that point, Dad was dead twenty plus years. I, on the other hand, was more openly exposed, but tried not to be with Mike, or anyone who reminded me of him, lest I become traumatized again. With Mike and people like him, including my mother, I attempted to maintain a thick skin to avoid appearing an easy target. And yet, many times, I felt victimized.

My way, as an adult and an analyst, is to explore autobiographical material with literary and theoretical perspectives within a context of feelings that still surface from time to time. Now, from that perspective, I am left with several ideas that help me find a way forward when my intellectualizing quickly turns emotional as our relationship difficulties come to mind. Hopefully, as I have said, some of these will speak to others who are also struggling with unresolved relationships. In this presentation, the relationship is a brother-sister one, but the ubiquity of disconnected attachments demonstrates that we often face disappointment, loss and abandonment. Maybe the only way to find some peace with this specific painful disconnection is to attempt to find a degree of meaning.

How to consider my brother's life, then, which developed a downward path toward his early death? He was unable to face the "injury and disturbance" inevitable in life, forming a thick, abrasive skin to conceal his wounded internal self. We were children; yet now, I can look

back and know that I certainly had no capacity to think about his aggressive actions and what they may have meant. As a child, I didn't have a great capacity for self-reflection. Minimally, I attempted to verbally react to his hostility and grew to be disappointed in my sibling. I didn't understand that his vulnerability resided just below his arrogance, his ever-developing desire to perpetrate his sense of self-importance over me. Often angry with him, I was only silenced by my fear for his health as he had several more heart attacks, bypass procedures, and other cardiac interventions. Eventually, his constantly reappearing stabs at humiliating me led to a resurfacing of my anger. He continued to demonstrate a stance of demeaning, dismissive hostilities up to the time I got a phone call telling me that Mike had died of a massive heart attack at age 54. Yet, what I could not really know at the time was that he lived a shame-filled life.

Andrew Morrison talks about the "language of shame" (Morrison, 2008, p 67), where shame means worthless, flawed, incompetent, defective, weak, failed and as smallness, insignificant, trivial, and different. He says shame comes from the distance between the ideal (wished-for) and the actual (experienced selves). Most importantly for the purposes of this paper "Shame is frequently 'defended' against by familiar manifestations of rage, withdrawal, grandiosity, or depression depending on its level of unbearability" (p. 79). My brother exhibited many of these characteristics. To him, others were the problem, had a problem, or were to be ignored. His poor health, failed love relationships, and increasingly desperate financial status had to contribute to his diminishment and failure to come to terms with his life. But, by that time in our relationship, I had minimal contact with him. I can only surmise what his life was like in the last years.

This sad description of my brother's life has often reminded me of Arthur Miller's character Willy Loman, in the playwright's award-winning, memorable play, "*Death of a*

Salesman” (Miller, 1949/1977). Like Willy, my brother's life largely represented "the daily universal drama of a life imperfectly lived... A life of fragility and shame" (Wellek, 1993, p. 213). Although Mike did not commit suicide as Willy did, I wonder how much "...his mercurial nature, his temper, his massive dreams and little cruelties" coupled with his heart condition and "human experience of fragility and shame" contributed to his death (Wellek, p. 213). Also a failed salesman, involved with different partners and in various, solitary business ventures, he, like Willy, never achieved personal or professional success.

I don't want to diagnose my brother by using the DSM; but from my observations and direct experiences with him in our adult lives, I can describe him just as Wellek does so well regarding Willy Loman. My brother, too, was someone who barely managed "the enduring pain of those depleted souls who suffer the empty depression of unmirrored ambitions and unrealized ideals." Using the theory of Heinz Kohut, the psychology of the self, in Wellek's article, Willy is termed the Tragic Man. So, too, was my brother. That is, "...the despair, the *guiltless* despair, I stress, of those who in late middle age discover that the basic patterns of their self, their ambitions and ideals, have not been realized" (1977, p.241). My brother did not have a solid sense of himself, which contributed, to his lack of a "comfortable balance with (his) ambitions, ideals, and skills" (Wellek, p. 215). I propose that two factors kept the balance from developing: his innate constitution and the misfortune of not having appropriate, influential caretakers. I don't believe my mother or my father had the capacity to nurture him so he could go beyond their ambitions and expectations for him so as to better define himself. Instead, Mike was the replacement child who had to assuage their grief and fulfill their hopes. All three were disappointed with each other.

Kohut writes, “the developing self organizes around mirroring and idealizing functions of caretakers which must be internalized and structuralized into self functions” (Wellek, 1993, pps. 216-217) to establish what Kohut calls a cohesive self. The term implies a solid orientation in time and space, appropriate reality testing and good self-observation. The basically cohesive self requires “lifelong reinforcement by empathic contact with significant and valued others who are available for response, recognition and repair...a prime motive in life is the wish to preserve and enhance wholeness of the self. If that self is fragile, and cohesion unreliable, shifts in self-esteem and mood cause difficulty.” Thus, Kohut’s term Tragic Man (1977) is used to define someone with a tenuous self-esteem.

Willy Loman had his characteristic behavior and my brother had his: taunting, teasing, mocking, shaming, demeaning, and dismissing. I don’t really know what response he got from others; but I certainly learned to defend myself, withdrawing in both anger and sadness, certain that he did not even know (or did he?) his impact on me.

Many questions came to mind as I was writing this paper. What did my brother think about himself and the role my parents played individually in his fragility? Certainly I know he demonstrated little empathy for others. Kohut tells us that “when the self is in danger, when it is basically fragile, there is no capacity for empathy. The first order of business is to shore up the crumbling self, however possible” (Wellek, p. 218). Like Willy, who had to figure out a method to take care of his own overwhelming needs, my brother (whose health and financial state increasingly deteriorated) needed to do the same. Those days were filled with rage, impatience, insults, and atrocious behavior, especially toward our mother. It is painful even now to describe his desperate conduct. In fact, I received a phone call from a credit card company asking about charges on my recently deceased mother’s card. Clearly, Mike’s financial and physical instability

were overwhelming. By that time, because I wasn't sure where he was living, I looked for him while I was driving, shopping, socializing. My analyst at the time told me to act as though he were dead. But, I knew he wasn't. All I knew was that he seemed to have vanished. After a few months of no communication, Mike contacted me with a few letters and one phone call informing me that he had moved to another state. I also discovered in a conversation with a paternal aunt, that he lived the rest of his life, dying about 18 months after my mother, in what I would term shameful secrecy.

I recently began to wonder if Mike were living now, how would I relate to him? How would we relate to each other? I can't imagine his not being the Tragic Man with all of the attendant characteristics. I do know I understand him better from a psychological, theoretical perspective. According to Eigen (2004, p. 7), Bion believed there is "emotional nourishment that comes with seeking the truth about ourselves, albeit use of truth in a compassionate or hateful way makes all the difference." Yet, I am left with realizing that in our lives together, I, for the most part, only experienced, without understanding, hurt and angry feelings. Now that I have discerned a great deal more about him, I suspect he would not be much different. I don't think he had the capacity or the solid foundation necessary to help him traverse life's turbulences without his continuing to feel depleted, vulnerable, and shameful — exhibiting the same failed behaviors of grandiosity, rage, and antagonism. Our skins were not able to touch in any positive, loving, or meaningful way. We couldn't ever heal our wounds. I feel sad for him and for myself.

As an epilogue, I will add that several hours after having completed this paper, I remembered a conversation in the book *A Shining Affliction: A Story of Harm and Healing in*

Psychotherapy by Annie G. Rogers (1995). The author and her current analyst are discussing the way Dr. Roger's prior therapist, Melanie, left her patient. It is the words uttered by the current analyst that comfort me as I think about the last time Mike and I talked, not having seen each other for well over a year. "Melanie is really blind to you. She left you without ever recognizing you. That's not a goodbye, Annie; it's just leaving" (p.273). I know this and I am saddened once again.

Edith (Edie) G. Boxer may be contacted at: edieboxer@earthlink.net

References

- Anderson, R. (1968). *I never sang for my father*. New York: Dramatists Play Service Inc. (original work published, 1968).
- Britton, R. (2004). Subjectivity, objectivity, and triangular space. *The Psychoanalytic Quarterly*, 73), 47-61..
- Eigen, M. (2004). *The sensitive self*. Middletown, CT: Wesleyan University Press.
- Morrison, A.P. (2008). The analyst's shame. *Contemporary Psychoanalysis*. 44(1), 65-82.
- Rogers, A.G. (1995). *A shining affliction*. New York: Penguin Books.
- Wellek, J. S. (1993). Kohut's tragic man: An example From "Death of a Salesman." *Clinical Social Work Journal*, 21(1), 213-225.

BETWEEN FUR AND SKIN

**Never assume
another driver
will share space
with you.**

<https://vimeo.com/211377649>

Skin functions like a traffic light, toggling between denial and access.

Red to green. Sensing and signaling. Skin is a barrier, but also a membrane that both absorbs and transmits. So, whether we feel comfortable, or trapped, in our own skins, or develop a thicker skin for protection, the touch for which we can reach, to which we can pay attention, and remember is key to a sense of sustained and meaningful connection. That said, look both ways before you cross.

MONKEY & MAN



MONKEY & MAN is an existential fable that I wrote in 1992, which tracks the growing up and growing together of a monkey and a man who meet through the Great Lottery, and end up sharing a comfortable house with a white picket fence in the Old Neighborhood (Zelevansky, 1992). While the stories explore adult concerns about learning, work, family, friendship, living and dying, the form and language is cast in a way that would be understandable to a child. My younger daughter was 9 years old at the time that I was writing the book, and I read her all the stories to make sure that the words would

remain simple and accessible.

Each story is punctuated by the Monkey, Man or some other character -- animate or inanimate -- posing the question: "**What is the point of this?**" Meeting increasingly complicated obstacles to getting through the day and beyond, they inevitably learn something new, before moving on to the next set of problems and circumstances. Monkey & Man are routinely surprised by these gaps in knowledge, but they come to understand that while exercising control over life is temporary, fragile, and difficult, it offers great rewards. In this way, Monkey & Man develop some skills and resilience, if not thicker skins.



(Monkey & Man in New York City, 1992)

<https://vimeo.com/211378777>

After the book was published, I did many readings, and also more elaborate performances in which I played the Man and a red-orange monkey puppet with Velcro arms and legs played the Monkey. We acted out the stories in silence but were accompanied by a narrative sound track made up of dialogue, music, and sound effects.

As skin is a site and a sign of vulnerability in people, fur represents protection and warmth in animals. The sensation of skin on fur experienced by pets and their caretakers suggests an accommodation between these poles of sanctuary and risk, as a fur-lined jacket embodies a possibly perverse sacrifice of one species (and one skin) to another. Yet life for Monkey & Man is a little less daunting, even symbiotic, as they proceed through the stories on fairly equal footing, a bit like a cross-species Odd Couple.

I recently made a video of one of the early stories in which Monkey & Man are on screen before the Mac computer video camera.



(Monkey & Man in Pittsburgh, 2016)

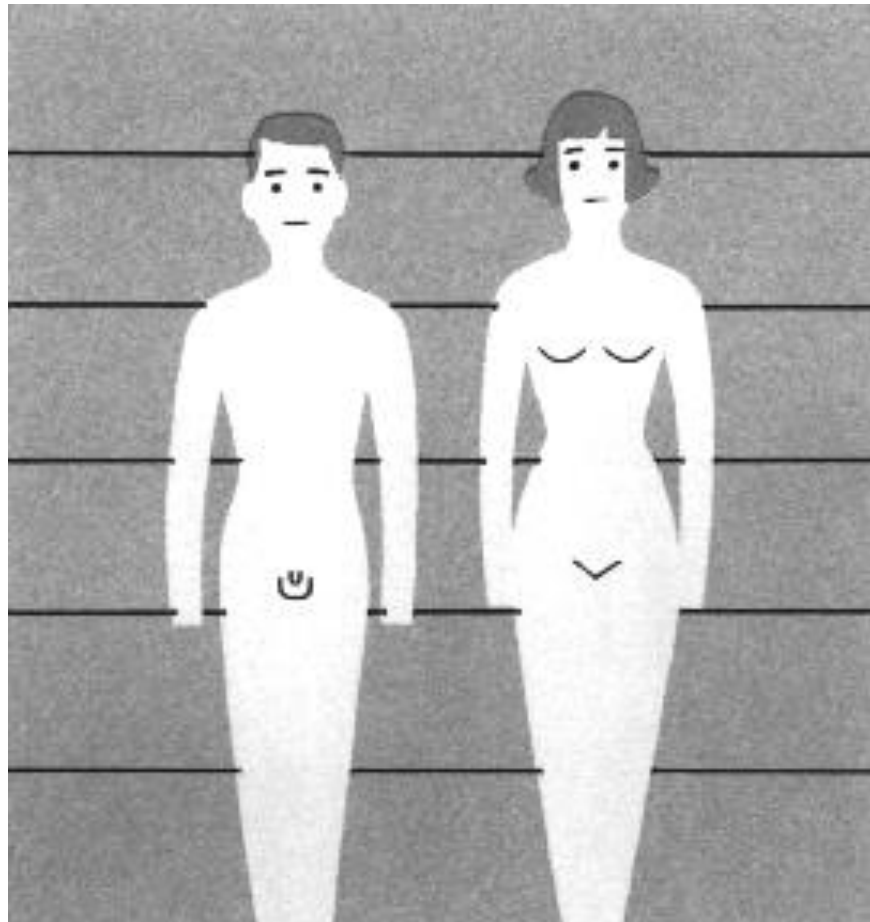
<https://vimeo.com/211379411>

If you compare what I look like now to the earlier photo from 1992, things have clearly changed. Salt and pepper beard, bags around the eyes, wire rim glasses. The Monkey for his part looks essentially the same although, literally, more worn around the edges. In the video, the Monkey has his arms wrapped around my neck, which is necessary to my being able to manipulate him, but more importantly

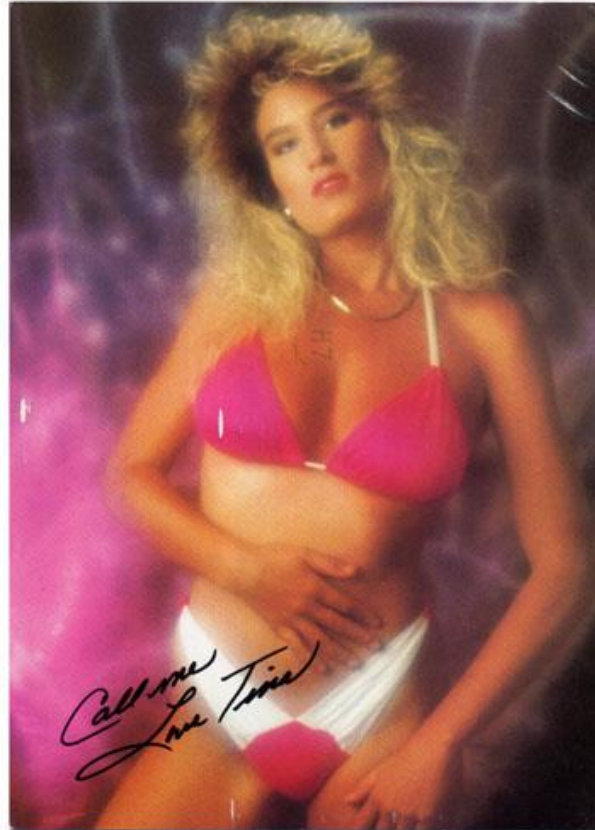
creates an immediate tactile connection. This is actually quite concrete, as I felt the comfort and weight of the fake fur and an emotional closeness to the puppet that has been part of my work for so many years.

BODY AND MIND:

[IMAGINE THE SOUNDS OF HEAVY BREATHING]



In this instructional illustration from a 1950s Red Cross pamphlet on reproduction, the boy and girl are defined by their nakedness and the space between their bodies. They are each measurably growing -- the horizontal lines tell us that -- but their nakedness and schematically sketched in genitals add a frisson of sexual tension, even if their faces do not. We may assume that the two-dimensional boy and the girl share a common biological destiny. But in this moment they may only be thinking of their individual circumstances, and not preparing for what comes next for their bodies and minds.



Hi, My name is Tina. I am a Las Vegas Showgirl. When I'm not working, my friends and I love to talk and make new phone friends from around the country. Will you be my phone friend? Call us just once and we will always be there for you. Love, Tina.

Several years ago when I lived in Los Angeles, "Tina" appeared on a phone sex postcard, its arrival no less provocative for its being unanticipated junk mail. Pictured with bleached blonde feathered hair and a dreamy, distant look on her face, she is caressing her body and thinking of "you." The purring insincerity of her print voice rendered in faux handwriting, makes the request for intimate conversation even more provocative. Amazingly, this appeal for phone friends is described as something other than work, but it is even harder to imagine anyone believing that Tina and the other showgirls will "always be there." Since the graphic and narrative target of this proposal is the red diamond on Tina's bikini bottom -- or more

precisely what the shape marks and conceals -- this coy little girl passivity may invite aggression, possession, and frustration.

The arrow of desire is guided by the magnetic focus on Tina's crotch, apparently validated by her handwritten signature. In whatever form a \$5-a-minute dialogue with a fantasy date takes place in the caller's head, it still serves as a form of practice for varieties of predatory behavior that take place outside in the real world of consequences, where Las Vegas showgirls and even phone-sex callers have jobs, and friends can be relied upon to appear in person with their own reciprocal desires and needs.



Fig. 1. Close-up of the mammalian penis.

“A worm has some things going for it.

For instance, it can't fall down.”

(Milton Berle)

As this joke by Milton Berle suggests, the body of a worm has limits, but they can be useful, while our human limits may get in the way: we are certain to fall down at some point. According to Kier (2012), the body of a hermaphroditic worm is a hydro skeleton, and hydroskeletons consist of “fluid-filled cavities,” surrounded by muscles (p. 1249). The coordination of fluid and muscles enables movement, shape-changing, and flexibility. According to another reference (Kelly, 2002) this structure is the “functional morphology” for the “mammalian penis” (p. 216) -- a biological association that creates a flutter in my stomach.

WHAT DO CATS THINK OF US?



This video still of our cat Pom, suggests his attentiveness to my presence, but beyond that what can be read in his eyes? He is looking at me (and the camera) and, by extension, the Audience, but what does he see? Is this recognition, an engagement with memory and interpretation, or just a response to something going on: entertainment in the world, no different than watching a squirrel in the tree outside the window? I would like to believe that Pom “cares” that

it is me, and that we have a relationship of sorts where skin meets fur: I scratch between his ears, he sleeps on my legs for warmth, I chase him around a chair – just to annoy him. When we travel, a pet sitter comes to take care of him, so, does this exchange of need really matter as long as food and water appear on schedule? Is it a case of out-of-sight-out-of-mind as is sometimes the case with people?

Pom and his sister, Flora, were rescue cats that we adopted from a shelter in Los Angeles. They were named after two of Babar the elephant's children; thus we doubled down on sentimental associations, as the Babar books were beloved when our children were small. Pom and Flora routinely drop their half-chewed cat toys (stuffed mice, tigers, bears) on our bed after letting out piercing cries, which we assume re-enact now domesticated hunting rituals. While the cat's toys could also be described as cute and furry, we feel no sympathy for their dismemberment, and accept our cats hunting as gratitude for feeding and housing them. This deepens the sense of obligation to their care. We are loved!

But whether they are seen as stuffed animals with a heartbeat, or domesticated jungle beasts, the cats, who live with us, die. The two who preceded Pom and Flora, Pippi and Olive, both died in my presence. Pippi who had a serious bladder problem was “put to sleep” in a veterinarian’s office. Whatever a cat is to us, to feel the life flow out of its body is existentially chilling. Olive, after months of illness from diabetes during which I gave her daily insulin shots, finally stopped eating and ceased caring for herself. She was so weak that one night, that I placed her inside a favored cat tunnel and figured if she didn’t go on her own, I would put her down the next day. I found her in the morning stiff and cold in the tunnel.

On the scale of human tragedy, the loss of a pet does not rank that high for me -- they are after all highly pampered guests who pay their way with acts of affection and idiosyncrasy, and have a lot of time to sleep off their labors -- but they become part of our everyday lives and history, and so, an intimate piece of our past leaves when they leave.

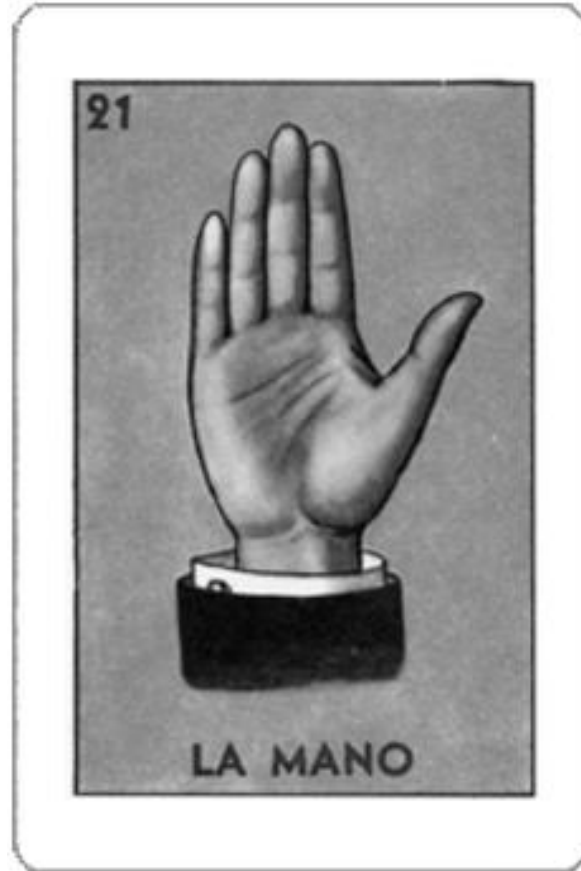
TWO SIDES:

This is the hand I have been dealt.

This is the hand I choose to play.

Slap me five! Give me some skin!

What do we owe the card? Small enough to be held in one hand, carried in a pocket or wallet, or sent through the mails, cards are engineered for endurance, flexibility, and portability. Inheriting the wear, tear and traditions of their use, cards are also cultural fragments designed for many hands. Cards (playing cards, photo IDs, ATM cards and so on) can be both coercive and participatory, initiating social negotiation by acknowledging established rules, declaring and signaling intentions, while masking strategies and perceptions:



The hand, like the card, has two sides: the front, identified with the gesture of the open palm, mimes (in Western usage) a reaching out in friendship, generosity, or need. The open hand also signals a pause, a full stop, or in the case of the “La Mano” Loteria card, a possible threat. In contrast, the back of the hand is aligned with dismissal and rejection, if not physical assault. Yet, the card is also a handshake of sorts: a servant of the hand, both a souvenir and a

promise of future exchange, which does not seem to require the
cleansing services of Purell.

PUT IT ON THE PAPER:

Hold the paper up to the light
(some rays pass right through)
Expose yourself out there for a minute
(some rays pass right through)
Take a little rest when the rays pass through
Take a little time off when the rays pass through
Go ahead and mess it up...Go ahead and tie it up
In a long distance telephone call...
Hold on to that paper
Hold on to that paper
Hold on because it's been taken care of
Hold on to that paper
See if you can fit it on the paper
See if you can get it on the paper...

The song "Paper" from the album *Fear of Music* (1979) reflects on the
material properties of paper -- its translucency, fragility, tangible
support as documentation and legal proof -- as a way to
metaphorically speak of the risks and benefits of relationships, art-

making, and life in general. The song also associates the qualities of paper with that of skin: “Expose yourself ... some rays pass right through.” Paper poses a challenge offered to writers, artists, and listeners of the song: “See if you can fit on the paper. See if you can get it on the paper.”

Q-TIPS:

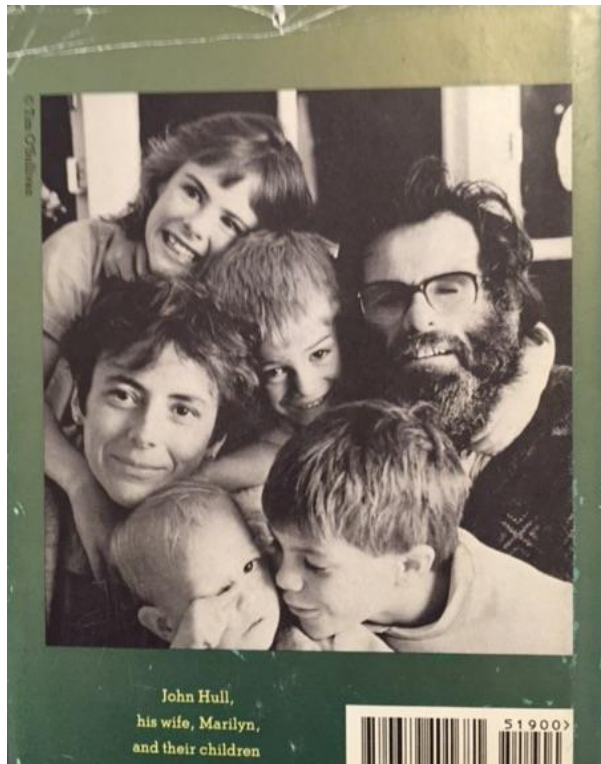
**If you don't tell your own story,
someone will do it for you,
and they may be wrong.
(The Monkey)**

Late in *Monkey & Man*, the Monkey, who has been slowly accumulating index cards of facts and descriptions for the story of his life, begins to make drawings for what will eventually be “The Book.” I decided to produce illustrations that were simple, strong and sufficiently direct to mirror the Monkey’s attitude and unpracticed skills, so I made them using Q-Tip cotton swabs and india ink. As the cotton of the Q-Tip absorbs the ink and deposits its “stain” on and into

the paper. The resistance of the surface, or lack of it, impacts on the qualities of line and shape. The give-and-take between tool and surface is guided by the fingers and the wrist, but there is also the transgressive pleasure of the Q-tip itself: a hygienic tool that I stick it in my ear after I shower. The swab can also be used to gather skin cells for a DNA test.



JOHN HULL "TOUCHING THE ROCK"

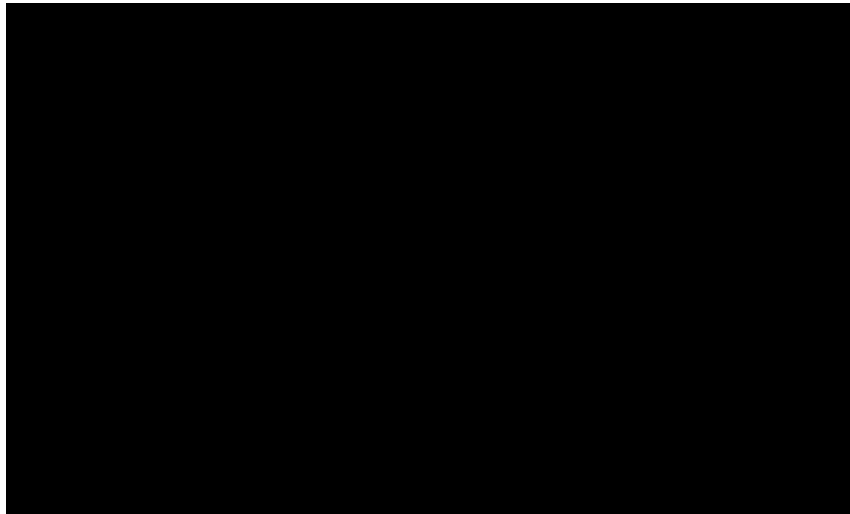


(*Touching the Rock*, Pantheon Books, 1992)

Touching the Rock (Hull, 1992) is a pristinely-written diaristic account of John M. Hull's descent into blindness. A professor of religion at Birmingham University in Great Britain, and a father of four young children, he describes in almost dispassionate terms the disintegration and erasure of a lifetime of habits, practices, and expectations after losing his sight completely at 48 years of age. This monumental challenge to his belief in his abilities as a scholar,

husband, father, his sense of himself as a man, and his faith in a god-centered universe cause Hull to attempt to deconstruct and reassemble the lost facts of his sighted life, in order to live fully within the conditions of blindness.

The blind person experiences the impact of the wind upon his body and the sound of it in the trees. He knows perfectly well where it is coming from: It is coming from that direction; he is facing into it. The wind is coming from the direction I am facing when I face into it (108).



To be blind is not the flip side of some perceptual equation in which one sense is neatly compensated for by the enhancement of another. Hull's gaps in perception, whether producing temporary

flashes of inspiration, or trap doors into despair, are the product of an essential negotiation between body and space.

When a sighted person is lost, what matters to him or her is not where he is, but where he is going ... It is his direction he has lost, rather than his position. The blind person lost has neither direction nor position. He needs position in order to discover direction. This is such a profound lostness that most sighted people find it difficult to imagine (145).

In the world in which most of us live, a world made for those with sight, blindness is a severe trial that requires profound realignments of expectations and skills, private and public. Apart from his wrenching evocations of personal alienation and dislocation, Hull's filling in of what is missing in the darkness casts a dazzlingly clear light on the broad authority of sight, in particular the degree to which the eyes confirm and explain most encounters and exchanges with the environment and other people.

For the blind person, the house is only there because of past experience. Space is reduced to one's own body, and the position of the body is known not by what objects have been passed but by how long it has been in motion, Position is thus measured by time (94).



<https://vimeo.com/55967303>

**“If it is fated, it comes by itself
into the house”**

As this Yiddish proverb suggests, our lack of control over what is meant to be will become apparent whether we open the door to it, or not. Every day we engage dynamically contingent perspectives: inside to outside, real time, digital time, in person, on-line, and so on. Engaged one by one, these points of view are familiar and relatively easy to incorporate into the catalog of everyday circumstance. But either way, shifting perspectives means that someone, or something, is left behind. The view from where you sit is inevitably partial. Yet along comes the smart phone, a prosthesis that extends our voices, images, and identities and promises to leave nothing out of reach.

THE CELL PHONE SCREEN IS A SECOND SKIN



The touch screen functions like a second skin through which we intercept, access, and process experience. Some screens detect touch by measuring vibrations or changes in light. The iPhone screen is “capacitive,” which means that contact changes the electrical charge. So the screen then literally adapts to the physics of touch -- swiping, tapping, pressing, typing -- and like human skin “protects us from invaders” with the aid of passcodes and finger print sensors.

Every morning I unplug my iPhone from its charger and bring it back to life. I hold it in my left hand, and with my right index finger swipe left to unlock, punch in my passcode, and begin to check messages. Unless I am expecting or hoping for a particular message, this is just a ritual through which I begin the day. Welcome back!

The screen is not alive in a biological sense. Yet I touch it perhaps hundreds of times a day, depositing the grease from my fingers as I act out my intentions. Because I expect the rapid and consistent arrival and departure of messages day in and day out, I must in a sense believe the phone is very much alive and under my control. I also know that it is useful to forget that it will eventually fail, and make demands that I trade up to a more powerful version. Fortunately, Apple has this covered.



MONKEY & MAN LEAVE THEIR MARK:

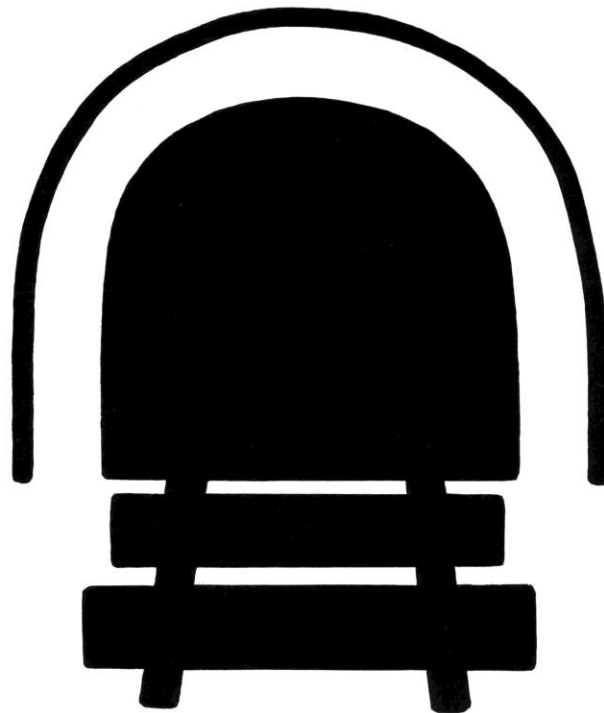
ONE DAY, Monkey & Man stepped off the sidewalk into some wet cement. They were visiting the City for the first time in quite a while and were busy noticing the changes all around them when they suddenly found themselves stuck in the pavement up to their ankles. Shocking as this was, Monkey & Man were even more surprised when, after a kind Citizen finally helped them

back on the sidewalk, they realized that part of them was still in the cement. The man's sensible size 8 brown loafers refused to be moved from the big step they had taken, and for their part, the Monkey's size 8 footprints were beginning to harden.

When the Monkey stands briefly in the cement, he begins to realize that time, like the clock above the door of the Bank, is not automatically following him around. In fact, it may leave him behind. He thinks about what it would mean for his footprints to remain visible in the pavement, but also starts to wonder whether anyone would care either way, particularly in the future when he was no longer alive. Whether produced by fur or brown loafer, footprints are transient, fragile signs of life. Someone was once there. Where are they now?

On the train trip back home, when Monkey & Man arrive at their station, the Announcer says: “Neighborhood Station. Take all personal belongings with you when you leave the train.”

Red light, green light, keep in touch.



<https://vimeo.com/211712818>

Paul Zelevansky may be contacted at: pzelevansky@comcast.net

Kelly, D.A. (2002). The Functional Morphology of Penile Erection: Tissue Designs for Increasing and Maintaining Stiffness. *Integrative and Comparative Biology*, Volume 42, Issue 2, Pages 216–221, <https://doi.org/10.1093/icb/42.2.216>

Kier, W.M. (2012). The diversity of hydrostatic skeletons. *The Journal of Experimental Biology*, Volume 215, 1247-1257. <https://doi.org/10.1242/jeb/056549>

Hull, J. (1992). *Touching the Rock*. New York: Pantheon Books.

Zelevansky, P. (1992). *Monkey & Man*. New York: Old Neighborhood Press.

Skin Deep: Our Self-Defeating Resistance To Empathizing With “Superficial”
Evidence-Based Therapy Models

M. Chet Mirman, Ph.D.

Abstract

In recent decades, the clamor for evidence-based techniques has been pushing aside the values of self-awareness and relational wisdom among psychotherapists. Larger cultural forces have contributed to this trend, but this paper will explore the role played by our lack of empathy for, and our own collective narcissistic dismissal of, the “superficial” other.

The Problem

Depth therapists of various stripes have watched with dismay as much of the therapy world has “evolved” toward a scientific philosophy in which subjectivity, self-awareness, empathy, attachment, and relational wisdom have lost their value. This is due, in part (although not entirely), to the belief that the assumptions and methods of the sciences are equally applicable to all other disciplines – including all areas of psychology and of mental health. Many therapists insist that psychology is a

science, and that what we do should be based on that science. Essentially, they are claiming that therapy is a kind of technology. The unacknowledged Holy Grail has been the development of a diagnostic system through which every psychotherapy patient can be placed in a single diagnostic category, with each diagnosis having a specific evidence-based, manualized treatment for it. For Diagnosis A you would have Treatment X, for Diagnosis B you would have Treatment Y, and for Diagnosis C you would have Treatment Z. Now, it is true that manualized treatments can sometimes be helpful for alleviating the symptoms of some narrowly defined problems (e.g., systematic desensitization for some kinds of phobias). However, in 33 years as a practicing psychologist, I have never had a symptom walk into my office – only complicated human beings who are struggling in their lives. Many do indeed have an identifiable symptom or set of symptoms. And while many present with a specific problem that they want addressed, as the therapy unfolds, the narrative they have created to understand their suffering inevitably evolves as well.

Jacob Bronowski (2002), a cell biologist at the Salk Institute of Biology, talked about human beings as being both a self and a machine. He argued that these are two qualitatively different kinds of knowledge: Knowledge of the machine is physical science, while knowledge of the self can be found in literature. Many of our colleagues have made the mistake of trying to make psychology, and all of mental health for that matter, about the machine.

We *are* machines, and more of more of what has seemed impenetrable to science has been steadily falling under science's purview anyway. But therapy is supposed to be about re-humanizing people who have in some way, in some area or areas of their lives, been de-humanized. That, in my eyes, should always govern the therapy process even if it's true that we are also machines. Yes, let's do basic research in psychology. Yes, let's study clinical syndromes. And yes, let's do outcome studies. But these should inform -- not control -- what we do as clinicians.

As a result of the pursuit of the Holy Grail of fixing the machine, psychoanalytic thinking has become marginalized, despite Freud's attempt to develop a psychology that he thought would one day, when the science of the brain caught up, be reducible to Newtonian concepts. His model of the psyche was, after all, essentially that of a complicated hydraulic system that was clearly developed with a nod to Darwinian evolutionary principles. Nevertheless, unlike the condescending dismissal of humanistic and existential points of view, psychoanalytic ideas have come to be treated with open hostility.

Hostility towards psychoanalytic ideas was illustrated in stark relief by the following example: I was, for a while, a member of an Evolutionary Psychology listserv. A wide variety of topics of relevance to evolutionary psychology were regularly presented, discussed and debated – but always in a respectful spirit of openness to ideas that were new or different, even if there was disagreement. This came to a screeching halt when one day a participant made reference to a psychoanalytic

concept. The response to this reference was shocking to me. It was not one of respectful disagreement – it was a venomous attack. I might have just dismissed this as the ranting of an outlier participant, however, it was followed by a chorus of similar attacks. I could practically see the spit flying from their mouths as I read their responses. “This is really weird,” I thought. I had always known that Freud’s statement that *disagreement with a psychoanalytic concept could be an expression of defensive denial that effectively validated that concept*, but I was – naively, in retrospect -- surprised to see this kind of angry defensiveness in a professional discussion.

I’ve agonized as I’ve watched superficial, often dehumanizing ways of thinking about human beings – especially so called evidence-based approaches (generally code for cognitive behavioral therapy) -- take over not only mental health care, but also wide swaths of the larger culture. This can be seen in:

- 1) **the corporate world** (with its emphasis on productivity and efficiency);
- 2) **medicine** (with its interest in stress reduction, brain chemistry, and the dysfunctional thoughts that are thought to underlie depression and anxiety. Whereas I used to receive referrals from physicians to treat a patient with anxiety or depression, those are now referrals specifically for CBT with patients with anxiety or depression); and,
- 3) **insurance companies** (an understandable development as CBT’s commitment to brief therapies appeals to bottom line concerns, but I was really taken aback some

years ago when I found myself accused of malpractice by an insurance company gatekeeper for not using CBT with a depressed patient I was working with).

I have been alarmed to both hear about and personally witness clinical supervisors who claimed that therapy that doesn't use manualized CBT protocols is outdated and clinically unsound. Perhaps most disturbingly, I have watched it take over our training programs – including the graduate program in clinical psychology from which I recently retired. This last trend is, I suspect, a result of the changing orientations of faculty bodies brought on by the lack of psychoanalytic education of the new guard, pressures from the American Psychological Association, and not least of all, lack of interest by the students in more complicated orientations. In the free market of a graduate training program – particularly in the for-profit schools that see students as paying customers and therefore a market that needs to be accommodated -- this is a problem for those of us who believe that young, inexperienced students might not always be the best judges of clinical wisdom, of who has it, and of how to attain it.

The Source of the Problem

Writers such as Nancy McWilliams (2005) and others have pointed out the roles played in contributing to this disturbing trend by:

- 1) the popular hunger for simple, easily understood, quick fixes;
- 2) by academic pressure from research institutions; and,
- 3) by economic pressures from insurance companies.

However compelling and disturbing these stories may be, I would like to suggest here that some of the fault can be placed on the doorstep of psychoanalytic therapists and theorists who have been building taller in-house silos but fewer bridges to the rest of the world.

Granted, some of the difficulties we face in trying to reach others are intrinsic to the process of learning to think psychoanalytically. First of all, psychoanalytic ideas are complex and therefore more difficult to learn and understand than some other theories – particularly when compared to CBT, which happens to be relatively easy to learn and thus something that can be taught quickly, is much more intuitively obvious to a beginning therapist, as well as to the general public. Secondly, the learning process involves more than simply learning some new ideas – it’s a different way of thinking, and, some might argue, a different way of living. That makes it a tough sell in a world that seems to have less patience, a shorter and shorter attention span, and increasingly superficial attitudes and values (as exemplified by the obsession with Paris Hilton, the Kardashians, and Beverly Hills Housewives -- and remember, therapists are part of this same culture). This makes it all the more important that we reach out to others to try to help foster in them what McWilliams (2005) described as a kind of “alternative sensibility to the radically individualistic, consumeristic, technocratic mass culture we inhabit” (p. 139).

To be blunt, we have done a terrible job of reaching out to people who are not already in the fold. The International Forum for Psychoanalytic Education (IFPE) is a

notable exception to the propensity in psychoanalytic circles to communicating in ways that seem designed to ensure that only members of the club can understand what other members are saying to each other. Good psychoanalytic therapists (actually, good therapists of any orientation) don't insist that their patients enter their world. In fact, we understand that we need to be empathic and enter the inner worlds of our patients. Isn't it, then, ironic that we would expect students (and other therapists) to enthusiastically enter the world of analytic ideas when there are more accessible paradigms available?

This expectation of others to enter our worldview strikes me as reminiscent of former Vice-President Dick Cheney's claim that the Iraqis would greet American soldiers as liberators. He simply assumed that they would, of course, want to be like us – because who wouldn't? And, of course, they would be eager to become a liberal Western-style democracy just like us. Instead of this solipsistic process, we instead need to reach out to others by being respectful and empathic, and by taking their ideas and values seriously. Let's learn more about the machine, and show respect for those who appear to be focused largely on this. This will require facing our own resistance to doing so. I'd like to briefly explore that resistance, including the role played by our own collective narcissistic dismissal of the superficial other.

The Nature of the Problem

So why are psychoanalysts, especially the more orthodox among us, so resistant to reaching out to those whom they view as theoretically “superficial”, and whom many psychoanalysts assume have no depth or simply don’t get it?

Let’s face it – psychoanalysts can be, as a group, snobby and elitist. My own snobby bias about this would say that it’s because collectively we’re a more broadly educated group. Those other practitioners may be scientists, but we psychoanalysts have liberal arts educations and therefore have more wisdom. Our conferences and journals incorporate existential ideas, integrate psychoanalytic thinking with Eastern philosophies, explore personality and developmental issues, and generally seem to be more intellectually ambitious. This is evidenced by the application of psychoanalytic ideas to the arts, literature, larger cultural trends and world affairs – not something that one sees occurring very often from the camp with a CBT perspective. Many of the psychodynamically-oriented therapists I know thumb their noses at CBT ideas, creating an “us vs. them” mentality that puts us above them, and encourages us to view the supposedly simpler-minded CBT practitioners as the lesser “others.” We should be careful about this and we should learn from Donald Trump and from our understanding of hate groups about the pitfalls of “otherizing” different groups. It seems so obvious when we look at him, but psychoanalysts do it too -- maybe not as egregiously and perhaps not with the same harmful consequences to those out-groups, but we really do it too. Yes, we’ve had to work

hard to become members of the club, and yes, we too are just regular human beings who are subject to the same forces as everyone else. Like everyone else we want the gate low when we're trying to get in, but then we want to raise it up once we're inside. Under the wrong-minded assumption that because I've worked so hard to get in; I wouldn't want to cheapen the value of membership by making it easy for the outsiders to get in after me. It's really a lot like fraternity hazing. I've heard many a talk that could have been just as insightful with less jargon and more language intended to communicate rather than obscuring the messages with psychoanalytic jargon designed to keep the outsiders outside.

As long as we continue to "other-ize" non-psychodynamically-oriented therapists and dismiss what they know as lacking in depth and therefore of no clinical or theoretical value, we will have no interest in what they might have to offer, no motivation to "go to them" by validating their point of view, or appreciating what they do have to offer, and then helping to put their thinking into a larger paradigm that includes their point of view. Essentially, I see CBT as a tool that can be part of a larger tool bag that a therapist could have and from which we can draw. What CBT therapists have to offer is the idea that how people think affects how they feel, and therefore, how they behave. Who can disagree with that so why would we want to denigrate something that's so obviously true?

An example of how the two worlds might be integrated can be illustrated in the following: Consider a borderline patient who is struggling with primitive

abandonment fears. A CBT therapist might try to simply “convince” the patient that her fears are irrational and misguided (or to use the CBT term, “dysfunctional”), than try to help replace that irrational thought with a more functional, or “correct” thought. Personally, I have never seen that work but of course, I do not operate treatment that way. But what if, instead, the patient could be helped to see that much of her pain, her despair, her destructive behavior, her turmoil, her addictions, etc., were essentially ways to try to manage an intolerable state? That state is what an analyst might call a state of objectlessness, but what might be labeled for the patient as a terrifying feeling of disconnection. If the patient can be helped to see the powerful impact on her life of her primitive fear, along with the accompanying primal convictions about her core sense of shame, worthlessness and unlovability, and the many desperate things that she does to protect herself from that fear – particularly when she is in a state of need – she may become more curious about, and more open to, trying to transform the intolerable into a tolerable, albeit painful, state. Much like Freud’s notion about converting neurotic misery into common unhappiness, such apparently minor ambitions can lead to profound life changes.

This sort of conceptualization, simply stated, is not only relatively easy for a reasonably self-aware patient to comprehend, but it is also within reach for a non-psychoanalytic therapist who, upon hearing, could choose to reframe the problem as essentially systematic desensitization (or maybe a not-so-systematic desensitization) that targets abandonment and disconnection as the phobia to master. Such a conversation with a more behavioral or CBT therapist builds a

bridge by affirming the value of their point of view, rather than making them feel inferior for not understanding the analytic approach, a phenomenon that frequently leads to the ego-protecting dismissal of the whole psychoanalytic way of thinking. I have frequently seen such a process occurring with young, graduate students learning to become therapists.

Another problem is the cumbersome, off-putting language we use (e.g., paranoid schizoid and depressive positions, where the depressive position is actually the healthy alternative; objects vs. others or people, explicit oedipal references – something that truly scares “nonbelievers” away -- rather than discussions of sexual wishes as derivatives, and oedipal struggles are being triadic vs. dyadic internal relational matrices, etc.).

Certainly, with patients (especially relatively new patients) I am very cognizant of how my words will be interpreted. I try to use language that will lead my patients toward an understanding of what I mean, but which won't automatically trigger defensiveness. Unless the patient seems open to such language I am inclined to refer to unconscious processes as tacit ones, and Oedipal vs. pre-Oedipal struggles as triadic vs. dyadic relationships. This is no less true when I am communicating with other therapists or therapists-in-training. Isn't the whole point to promote understanding by being understood? Isn't that more important than demonstrating how deep and insightful we are, or protecting the exclusiveness of our club by making it difficult for non-sophisticates to be a part of the club?

I want to conclude by pointing out the following: CBT therapists are actually in the ascendance while we are moving in the other direction. In fact, they are already in, and we are already on the outside. Among psychotherapists they are clearly gaining in power and acceptance in the mental health system. So isn't it counterproductive (and ironic) to be treating them like the outsiders?

M. Chet Mirman may be contacted at: MCMIR@aol.com

References

Bronowski, J. (2002). *The Identity of Man*. Amherst, NY: Prometheus Books.

McWilliams, N. (2005). Preserving Our Humanity as Therapists. *Psychotherapy Theory Research & Practice*, 42(2),139-151.

Psychoanalytic Institutes as “Second Skin”: Bullying and the Challenges of Belonging, Authority, and Uncertainty

George Bermudez, Ph.D., Psy.D.

“Neither the life of an individual nor the history of a society can be understood without understanding both.”

C. Wright Mills

“An analyst or therapist who is unaware of the effect of social facts and social forces cannot be sensitive to the unconscious recreation of them within the therapeutic situation.”

– Earl Hopper (1996) from *The Social Unconscious in Clinical Work*

Abstract:

This paper will propose that bullying can be viewed usefully as a reflection of a social unconscious, and illustrative of larger socio-cultural forces, as well as personal and interpersonal (“micro-psychological”) processes. Informed by this paradigm of systemic embeddedness, the organizational and authority structures of psychoanalytic institutes may often be understood as also mirroring these larger cultural patterns. Within a larger sociological frame that views American culture as saturated with sociopathy and bullying (Derber, 2013; Derber & Magrass, 2016), this paper will selectively review some of the literature examining the problematic use of authority in psychoanalytic training institutes. This literature includes Eisold (1994) on the roots of the anxieties that generate intolerance of diversity in psychoanalytic institutes; Kernberg (1996) on the paradoxical prescriptions for inhibiting creativity in psychoanalytic training; Kirsner (2000) on the

defensive institutional search for security and certainty in the face of the “uncertainty and ambiguity,” which ironically defines the psychoanalytic enterprise. This paper also suggests that concepts such as Kohut’s “group self;” Volkan’s “second skin;” and the emerging paradigm of “community psychoanalysis” (Twemlow & Parens, 2006) may help illuminate these dynamics as well as facilitate productive institutional change.

The dominant narrative in our society defines bullying as residing in personal, micro-psychological sources, with the preferred solution being personal psychotherapy. I believe that it is this micro-psychopathological attitude blinds us to a *socio-pathological* perspective, distracting us from the larger cultural sources that engender bullying. This was brought to my attention by Dr. Herbert Weiner (2016), who eloquently articulated that “bullying must be understood and resolved in communal terms. We can perceive bullying as a personal problem to be solved by the victim, using his or her own resources. But, when it happens so frequently and to so many people, it is clearly a social problem like domestic violence, sexual harassment and child abuse.” I’ve come to believe that bullying is embedded in a *cultural sociopathy*—a social unconscious that has become normative.

According to Derber & Magrass (2016), it was the famous 20th century sociologist, C. Wright Mills who pointed this out many years ago in his books “The Sociological Imagination” (1958) and “Character and Social Structure” (1964). “Americans are taught to believe that our personal problems are separate from our public institutions in the

economy, political system and international relations” (Derber & Magrass, 2016, p.8). Mills further argues that “personal problems are rooted in societal values... it is impossible to separate private troubles and public (and political) issues... any attempt to do so would lead to... myths and illusions... cultivated ignorance” (Derber & Magrass, p. 8). Inspired by Mills’ conception of the “sociological imagination,” Derber & Magrass challenge the isolated, intrapsychic, and reductionistic mental model of classical psychoanalysis, and articulate a philosophy and sociology of mind that is aligned with contemporary psychoanalytic perspectives (intersubjective systems theory, relational field phenomena, and psychoanalytic complex theory).

This socio-psychological sensibility resonates deeply with my emerging commitment to a “community psychoanalysis.” I have written elsewhere that our contemporary global context requires “an expansive, socially responsive shift in theory and therapeutic practice” which requires “a reconceptualization of the self and psyche, a new bio-psycho-social conception, co-developed in alliance with other disciplines and epistemologies...” (Bermudez & Kramer, 2016, p. GEORGE PLEASE PUT PAGE NUMBER). In their book, “Bully Nation,” the two distinguished contemporary sociologists, Derber & Magrass (2016) persuasively argue: “...the psychological way of framing the bullying conversation serves the power and profit interests of dominant institutions” (p.9). They go on to detail how American society and its institutions have been historically and contemporaneously deeply saturated by sociopathy and bullying. They describe how political, economic, and military elites utilize bullying to maintain power and status—and how the United States has acted as an international bully!

After providing a definition of bullying, Derber & Magrass conclude that at the heart of bullying is power inequality. Bullying is defined as including threats, harassment, intimidation, attacks, and exclusion from a group, with the core goals being domination, control, generating fear or harm, and establishing a sense of superiority in the bully and inferiority in the victim. Any social system that has power inequality generates “potential or latent bullying,” by individuals or institutions. According to Derber & Magrass, “Potential or latent bullying, always present in relations of unequal power, leads to actual bullying only under certain conditions, mainly when the degree of inequality, political norms, social mores, and psychological dispositions encourages it” (2016, p. 22).

Although I am in full agreement with this definition and analysis, I would add that that a fifth factor or contingency that facilitates bullying is any significant disruption or threat to the social order, or to strongly held beliefs and values of a community. (The significance of the last factor will be obvious when I discuss the bullying via the shunning of Dr. Arnold Richards by the New York Psychoanalytic Institute, when the hegemony of the medical profession over psychoanalysis was challenged by psychologists.)

Social structures or cultures that set up enduring patterns of inequality amplify what Dr. Dacher Keltner, social-experimental psychologist and leading expert on power dynamics, calls the “power paradox” (2016). According to Keltner, who has spent a long career studying power, the first casualty of unchecked power is empathy: “When we experience absolute power –unchecked by the collective processes through which groups afford

power to individuals—our attention shifts to our own interests and desires, thus diminishing our capacity for empathy—understanding what others feel and think. Consequently, when empathy wanes, so does our capacity for moral sentiments that depend on empathy—namely concern for others (compassion), reverence for what others give (gratitude), and inspiration experienced in appreciating others’ goodness” (p. 101). Furthermore, Keltner has experimental evidence demonstrating that “power leads to self-serving impulsivity... incivility and disrespect... [and] to narratives of exceptionalism” (p.101). Keltner’s illuminating discoveries concerning power, in my view, are a strong argument for expanding the training curriculum for psychoanalytic candidates to include knowledge and skills in the understanding and responsible management of social power, especially its impact on those lower in the social hierarchy, whether institute culture or wider social context.

Dr. Edgar Levinson, is a seminal theoretician in the interpersonal-relational psychoanalytic tradition, who long ago posited a universal embeddedness in and enactment of unconscious systemic dynamics (“The Fallacy of Understanding,” 1975; “The Ambiguity of Change,” 1983). Inspired by Levinson’s ideas, I propose that psychoanalytic institutes are embedded in and enact the larger cultural and social structural forces that Derber (2013) and Derber & Magrass (2016) have outlined. Another inspirational and illuminating concept is the idea of the “social unconscious.” Originally introduced by Erich Fromm, and first applied by Karen Horney, the social unconscious has more recently been defined by Dr. Earl Hopper, the British Group Analyst, as follows:

“The effects of social facts and forces are more likely to be unconscious than conscious. The concept of the social unconscious refers to the existence and constraints of social, cultural, and communication arrangements of which people are unaware, in so far as these arrangements are not perceived (not ‘known’), and if perceived, not acknowledged (‘denied’), and if acknowledged, not taken as problematic (‘given’), and if taken as problematic, not considered with an optimal degree of detachment and objectivity” (1996, p. 9). (In a related vein, I am proposing in a soon to be published paper that recent neuroscience findings provide support for the concept of the social unconscious, and that both clinical work and research demonstrate that the social unconscious is characterized by implicit cultural organizing principles, for example social stereotypes regarding social positions and identities [Bermudez, in press].)

Turning our focus more directly onto psychoanalytic institutes and training, Kirsner (2009) avers in his study of psychoanalytic institutes (“Unfree Associations: Inside Psychoanalytic Institutes”) that one of the fundamental sources of conflict, which leads to schisms and misuse of authority and power, is theoretical “imperialism” at the heart of the psychoanalytic movement. Similarly, Eisold (1994) also suggests that the anxiety generated by the conflict between the need to commit to the theoretical certainty of a “school” and the need to be receptive to the enigmatic unconscious leads to a regressive intolerance of pluralism and to isolation. Moreover, Eisold argues, psychoanalytic institute cultures have an ambivalent attitude toward the external world of reality, needing the buffer of impermeable boundaries as a protection for the private exploration of “psychic reality”—a “second skin” using Volkan’s (2003) metaphor for the socio-

psychological envelope that contains group identity. He diagnoses these systemic reactions as regressive social system defenses against persecutory and depressive anxieties (Jacques, 1955). Kernberg (1986; 1994), in a related perspective, views the lack of genuine “interdisciplinary scientific inquiry” and the resulting “intellectual isolation” as destructive to psychoanalytic creativity. Dr. Arnold Richards’ narrative (2016) reflects his experiences of what he calls “passive aggressive bullying” at the New York Psychoanalytic Institute—because he supported the acceptance of non-physicians for psychoanalytic training. The bullying noted by Richards seems to suggest a confluence of several factors: economic competition; theoretical imperialism regarding the biological hegemony of psychoanalytic ego psychology; and the threat of interdisciplinary (“out-group”) contamination by psychologists and other mental health professionals. Richards (2016) writes of his long, painful struggle:

“ This is very difficult for me to write. It concerns a more than fifty-year saga. In 1995 I was invited to give the A.A. Brill Memorial lecture... The title was ‘A.A. Brill and the Politics of Exclusion.’ I spoke about how the shadow of the founder (A.A. Brill) falls over an organization... and faulted NYPSI for what I called the politics of exclusion, in this case excluding non-medical psychoanalysts.

I think that changed how I was viewed by the members of NYPSI, especially those in charge and including many of my colleagues and friends. The medical identity was a very important part of the identity of the Society and Institute.

I am not sure bullying is the right term to describe how I am treated at my institute. A better term would be ‘persona non grata,’ which is what I have become in my

own institute. Since the 90s I have not been asked to teach, supervise, or analyze...”
(Richards, 2016).

Before Dr. Richards experienced this institutional shunning, he had been a respected and distinguished member and highly regarded psychoanalyst, teacher, and editor of the *Journal of the American Psychoanalytic Association*.

Eisold (1994), Kernberg (1986; 1994), and Kirsner (2009) locate the central source of the problem in the power and secrecy surrounding the idealized senior training analyst. All three agree that the training analyst should have no formal or informal role in the assessment of candidate progression. They suggest that institutes should borrow best practices from university contexts: empowerment of faculty; open, transparent decision-making and promotion protocols; and genuine scientific inquiry and critique.

However, more profoundly, Eisold and Kernberg both regard the private, dyadic exploration of the unconscious as a process that unleashes powerful intrapsychic and intersubjective dynamics which closed off, rigidly-defended institute cultures cannot “contain” (in the Bion’s [1961] sense of metabolization, with reflective capacity). This can lead to processes of enactment, splitting, projection, and envy, etc. Kernberg terms this the “radioactive fallout” (2016, p. 48) from exploration of the unconscious without the requisite “containing” institutional structure. Eisold (1994) recommends that psychoanalysts should be explicitly trained for leadership/executive roles, and that

systems psychodynamics theory and practice should be taught, applied, and used for consultation.

Both Eisold's and Kohut's recommendations are consonant with my emerging conceptualizations and practice. I've been proactively engaged in an evolving experiment in systems psychodynamics theory and practice at my institute, with both didactic and experiential components. Facilitating several large group discussions, applying systems-focused approaches, which I fold into the emergent paradigm of "community psychoanalysis" ("Social Dreaming" [Lawrence, 2003]; "Open Space"[Owen, 1997]), I've uncovered, with community collaboration, many of the institutional symptoms outlined by Eisold (1994), Kernberg (1986; 1994; 2016), and Kirsner (2009):

- a sense of institute fragmentation or lack of cohesion, accompanied by a collective yearning for a renewed sense of community;
- "bullying," linked to a lack of theoretical pluralism and the absence of a reflective and responsible use of authority, and this was ranked the number one concern at an Institute retreat;
- isolation from external "social reality" or interdisciplinary discourse;
- the need for more transparency;
- an expressed desire to have a reflective community conversation on "what is psychoanalysis?"

Despite these conclusions of the large discussion groups, I experienced very strong resistance when I proposed making the Institute's "second skin" (Volkan, 2003) optimally permeable by inviting to our strategic planning retreat carefully vetted participants from our external ecosystem—participants who might bring expertise, information, resources, and future partnerships (university programs in mental health; community agencies; our own advanced psychotherapy program students; analysts from other institutes, etc.). I was told that we were not prepared to air our "dirty laundry;" I was asked rhetorically, why would they care about our institute?; and I was reminded that *other* institutes are so competitive. I continued to gently remind my colleagues that it is an established principle in open systems theory that all systems are maintained and grow by obtaining resources (energy and information) from their ecology—hence the need for a permeable boundary!

The second resistance I encountered was suggestive of a system-wide defense of internal avoidance, hence perpetuating the experienced lack of cohesion, and thus fueling the conscious yearning for renewal of a sense of a cohesive, vitalized community. Kohut's (1976) concept of a "group self" seemed useful: the institute's "group self" could be diagnosed as lacking vitality (depressed) and cohesion. I continued to make the case that a system ("group self") can only know itself when the "whole elephant is in the room" (Coburn, 2014). I posited that, therefore, we needed to organize a strategic planning meeting that integrated all sectors of the institute and facilitated prolonged reflection on its organizing principles (the past), current internal and contextual reality (the present), and a vision and strategic action plan (the future). I recommended a large systems

intervention approach called “Future Search” (Weisbord & Janoff, 1995), which was developed out of an integration of open systems principles and Bion’s (1961) *group-as-a-whole* theory and basic assumptions. Two attempts to promote and organize such a large planning meeting were made but neither was successful, as they were derailed by a lack of the requisite level of participation; the lack of Board members’ support, understanding, or commitment; and, an institute crisis requiring that resources and attention be directed elsewhere.

The sad irony is that the institute’s crisis involved a threat to its existence because of the lack of a required *external* accreditation. Among the institute’s core organizing principles/values were its fiercely defended independence, its proud “unaffiliated” status, and its exceptionalism, rooted in its progressive and democratic ethos. It was these very principles that seemed to have generated an impermeable, protective “second skin” (that I had challenged with my proposal), and which now placed the institute in jeopardy!

George Bermudez may be contacted at: Gbermudez@antioch.edu

REFERENCES:

Bermudez, G. (in press). The social dreaming matrix as a container for the processing of implicit racial bias and collective racial trauma. *International Journal of Group Psychotherapy*.

Bermudez, G. (2015). The creation of a self-object “communal home” for collective trauma: applications of social dreaming and Kohut’s group self in academic, psychoanalytic, and community contexts. *Group*, 39, 107-131.

Bermudez, G. & Kramer, C. (2016). The vulnerable self and the vulnerable community: A challenge/problem for psychoanalysis? *Other/Wise: The Online Journal of the International Forum for Psychoanalytic Education-IFPE*, 2.

Bion, W. R. (1961). *Experiences in groups and other papers*. London: Tavistock.

Coburn, W. (2014). *Psychoanalytic complexity*. London & New York: Routledge.

Derber, C. (2013). *Sociopathic society*. Boulder, CO: Paradigm Publishers.

Derber, C. & Magrass, Y. R. (2016). *Bully nation*. Lawrence, Kansas: University Press of Kansas.

Eisold, K. (1994). The intolerance of diversity in psychoanalytic institutes. *International Journal of Psycho-Analysis*, 75, 785-800.

Hopper, E. (1996). The social unconscious in clinical work. *Group*, 20, 7-43.

Keltner, D. (2016). *The power paradox*. New York: Penguin Press.

Kernberg, O. (1986). Institutional problems of psychoanalytic education. *Journal of the American Psychoanalytic Association*, 34, 799-834.

Kernberg, O. (1996). Thirty methods to destroy the creativity of psychoanalytic candidates. *International Journal of Psycho-Analysis*, 77, 1031-1040.

Kernberg, O.F. (2016). Psychoanalytic education at the crossroads: Reformation, change and the future of psychoanalytic training. London and New York: Routledge.

Kirsner, D. (2009). *Unfree associations: Inside psychoanalytic institutes*. New York: Jason Aronson.

Kohut, H. (1976). Creativeness, charisma, group psychology. In J.E. Gedo & G.H. Pollock (Eds.). *Freud: The fusion of science and humanism*. New York: International Universities Press.

Lawrence, W. (2003.). *Experiences in social dreaming*. London: Karnac.

Levenson, E. (1975). *The fallacy of understanding*. New York: Basic Books.

Levenson, E. (1983). *The ambiguity of change*. New York: Basic Books.

Mills, C.W. (1958), *The sociological imagination*. Oxford: Oxford University Press.

Mills, C.W. & Gerth, H. (1964). *Character and social structure*. Boston: Mariner.

Owen, H. (1997). *Open space technology: A users guide*. San Francisco: Berrett-Koehler.

Richards, A. (2016). *Bullying in an analytic institute*. Unpublished manuscript presented at the International Forum for Psychoanalytic Education (IFPE) Conference (November 2016): Pasadena, CA.

Twemlow, S. W. & Parens, H. (2006). Might Freud's legacy lie beyond the couch? *Psychoanalytic Psychology*, 23, 430-451.

Volkan, V.D. (2003). Transgenerational transmission and chosen traumas: An aspect of large-group identity. *Group Analysis*, 34, 79-97.

Weiner, H. (2016). *Bullying: Personal or social problem*. Unpublished manuscript presented at the International Forum for Psychoanalytic Education (IFPE) Conference (November 2016): Pasadena, CA.

Weisbord, M.R. & Janoff, S. (1995). *Future search*. San Francisco: Berrett-Koehler.