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FROM INTERSUBJECTIVITY TO ACTIVISM: A CASE FOR ENGAGED
PSYCHOANALYTIC AND PSYCHODYNAMIC PSYCHOLOGY

A Dissertation

Presented to the Faculty of
Antioch University New England

In partial fulfillment for the degree of

DOCTOR OF PSYCHOLOGY

by

Abigail Bliss

ORCID Scholar No. 0009-0004-0388-9447

August 2023

FROM INTERSUBJECTIVITY TO ACTIVISM: A CASE FOR ENGAGED
PSYCHOANALYTIC AND PSYCHODYNAMIC PSYCHOLOGY

This dissertation, by Abigail Bliss, has
been approved by the committee members signed below
who recommend that it be accepted by the faculty of
Antioch University New England
in partial fulfillment of requirements for the degree of

DOCTOR OF PSYCHOLOGY

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ABSTRACT

FROM INTERSUBJECTIVITY TO ACTIVISM: A CASE FOR ENGAGED PSYCHOANALYTIC AND PSYCHODYNAMIC PSYCHOLOGY

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This dissertation consists of a book proposal, including a completed introduction and first chapter, in addition to detailed chapter outlines summarizing the content for the actual book. After framing this project and exploring its inspiration, which includes Freud and his free clinics (Danto, 2005), the first chapter begins with explorations of multiple theories of intersubjectivity and the analytic third, considering how contemporary sociopolitical factors might affect the intersubjective experience. To this end, I demonstrate how race, politics, the COVID-19 pandemic, and the incorporation of telehealth practices affect the intersubjective experience in psychoanalytic/psychodynamic (PA/PD) psychotherapy. I then research and review PA/PD concepts applied to sociopolitical factors. Then, in service of this knowledge, I explore PA and PD activism, which dates back to Freud and continues to this day. These chapters lead toward consideration of the tasks and significance of PA and PD psychotherapy that ventures to consider factors beyond the intrapsychic, and ultimately builds toward an argument for engaged psychoanalytic activism. This dissertation is available in open access at AURA (<https://aura.antioch.edu>) and OhioLINK ETD Center (<https://etd.ohiolink.edu>).

Keywords: intersubjectivity, Jessica Benjamin, psychoanalytic psychology, psychodynamic psychology, social psychoanalysis, psychoanalytic activism, race, politics, COVID-19 pandemic, telehealth, Freud

Dedication

To Miles and Tom, who grew with me during my graduate program and this project.

Miles, thank you for our years of refreshing Saturday naps, which helped me to keep going.

Tom, thank you for keeping it all together at home, with tremendous steadfastness and humor.

And to you both, I am completely grateful for your support, hugs, flowers, love, patience, flexibility, and belief in me throughout all of these years. You deserve doctorates, too.

Acknowledgements

Many have supported me in this endeavor and deserve thanks. What began as a project about the analytic third and sociopolitical factors, culminated in self-discovery and a vision for my professional self. I am grateful for the support and guidance of my advisor, Dr. Marti Straus, and my committee, Dr. Ted Ellenhorn and Dr. Gina Pasquale, who gave me permission and confidence to find my way, be open to surprise, and go forth with an attitude of negative capability (Keats, 1818). Thank you for bestowing upon me the space, freedom, and trust necessary to play.

I also want to thank those who provided me some of the most basic and fundamental needs, without which I may not have made it, especially during the pandemic. To Hanna, Bop Bop and Pop, and Grinnan, thank you for your loving childcare, shelter, and office space.

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Preface: An Orientation to this Dissertation

Dissertation Format

Before delving into this dissertation, I would like to orient the reader. This dissertation consists of a book proposal, for which I used Routledge Focus' book proposal format as a template (Routledge Focus, 2023). Routledge Focus' (2023) guidelines require the proposal to include (a) statement of aims; (b) a detailed synopsis, including chapter summaries; (c) a description of the target market; (d) a review of the main competing titles; (e) format and timeline; and (f) any other relevant information, including sample chapters. I include each of these components within the greater context of this dissertation. Thus, the reader will see that there is a table of contents for the dissertation itself, and nestled within this, a table of contents for the book proposal, too.

Dissertation Terminology

The field of psychoanalytic (PA) and psychodynamic (PD) psychology is once again navigating its identity formation (Moussa, 2023). One such recent development occurred on the heels of the 2021 Psychoanalytic and Psychodynamic Practitioner's Survey. The results of this survey demonstrated that many PA and PD practitioners (of all levels) view additional psychoanalytic training as unfeasible, as it requires significant commitment of time and financial resources. Despite this, however, many respondents reflected they would be interested in pursuing a specialty in PA/PD psychology and/or a subspecialty in psychoanalysis (Moussa, 2023) if it were accessible. As a result of this survey, the American Psychological Association (APA), Council of Specialties (CoS), and Commission for Recognition of Specialties and Subs specialties in Professional Psychology (CRSSPP) endorsed approval of specialties in PA/PD psychology. This monumental decision will expand accessibility of PA/PD clinical work for practitioners and clients, alike. It also plays a crucial role in decreasing exclusionary practices

(Meisels & Lane, 1996; Moussa, 2023). This expansion is apt and timely, especially considering that most psychoanalysts practice psychodynamically with the majority of their patients, and practice psychoanalysis with just a few (who are often themselves candidates in psychoanalysis) (T. Ellenhorn, personal communication, July 5, 2023; Moussa, 2023). Thus, just as the field is broadening to include and recognize both psychoanalytic and psychodynamic practitioners, this dissertation will look beyond psychoanalytic (“PA”) to include psychodynamic (“PD”), too, which I will use interchangeably. In this vein, I also use “therapist” and “psychoanalytic practitioner” interchangeably, in addition to “client and patient.”

Book Proposal

From Intersubjectivity to Activism: A Case for Engaged Psychoanalytic and Psychodynamic Psychology

Statement of Aims

This book, *From Intersubjectivity to Activism: A Case for Engaged Psychoanalytic and Psychodynamic Psychology*, will serve as a primer for those beginning to consider the intersection of psychoanalytic and psychodynamic (PA and PD) psychology, sociopolitical factors, and PA/PD activism. This book begins with an exploration of intersubjectivity and continues to expand from dyadic dynamics to large-system sociopolitical factors, such as political and race issues, which rose to the country's surface as it collectively suffered the blow of the pandemic; all the while those in the field of PA/PD psychology scrambled to respond and adapt with telehealth and modified practices. In doing so, PA/PD practitioners proved that they, and the field overall, can rise to the occasion by demonstrating flexibility and responsiveness. This resilience and adaptability will continue to be tested, as the field of PA/PD psychotherapy struggles to maintain relevancy within a broader healthcare system that prefers symptom alleviation and briefer treatment. After exploring intersubjectivity, PA/PD concepts applied to sociopolitics, and the field's adaptations during the pandemic, this book concludes with a review of social psychoanalysis and psychoanalytic activism, which will hopefully inspire readers as they consider how they might contribute to the field's expansion of breadth and accessibility.

Detailed Synopsis

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Chapter Summaries

Introduction

This introduction provides context and explanation for the book, which marks the evolution of my interest in intersubjectivity and relational psychoanalytic theory, an exploration that led me to social psychoanalysis and psychoanalytic activism. Freud himself inspired such action, as he emphasized increasing access to psychoanalysis across socioeconomic divides in his 1919 “Budapest Address,” which I explore to provide historical context for what I hope will be emphasized as the field of PA and PD psychology continues to evolve.

Chapter One: Intersubjectivity and the Analytic Third: Beyond the Intrapsychic

Chapter One serves as an introductory survey to the theory of intersubjectivity with a focused review of Thomas Ogden and Jessica Benjamin's theories of intersubjectivity; less in-depth, I review other theorists' contributions, including D. W. Winnicott, and Christopher Bollas. An exploration of Thomas Ogden and his theory of the analytic third helps pave the way for considering how the events of the year 2020 acted as analytic thirds, ultimately impacting the intersubjective experience co-created and shared by patient and provider. Throughout this chapter, I also highlight Benjamin's theory of intersubjectivity, which is especially applicable to my project because of her focus on sociopolitical factors, morality, feminism, and other culturally relevant topics. As I explore Benjamin's work, I also discuss Winnicott and the related theory of infant studies, two oeuvres that greatly impacted her conceptualization of the co-created, bidirectional, relational, nature of psychoanalysis.

Chapter Two: Intersubjectivity Expanded: Psychoanalytic Ideas on a Societal Level

After surveying theories of intersubjectivity in the dyad, I describe some of the ways that psychoanalytic practitioners have applied psychoanalytic theories and concepts to societal-level dynamics. Here, I offer a review of how PA/PD practitioners have extended major concepts (including splitting, dissociation, borderline tendencies, psychosis, and rage and terror) from the individual's intrapsychic functioning to better understand dynamics of collective suffering.

Chapter Three: How Race, Politics, the COVID-19 Pandemic, and Telehealth Affect the Intersubjective Experience

The seismic events of 2020—a contentious presidential race, the murder of George Floyd and many others, and the COVID-19 pandemic—brought PA/PD practitioners and patients together in complex and novel ways. Notably, both parties were affected by similar sociopolitical

factors; many PA/PD practitioners described their experience of being affected by the “same pressing concerns” as those they were treating (Seligman, 2021, p. 120). Chapter Three explores how these events tested PA/PD clinical work in other ways, too. Most particularly, PA/PD practitioners had to pivot and quickly translate their nuanced strategies for sitting with patients to the coarser technological reality of telehealth. As unfortunate and distressing as this time was, PA/PD practitioners rose to the occasion as they demonstrated their capacity to modify, respond, and remain relevant, all while maintaining the frame as best as possible. As the field of PA/PD psychology struggles to maintain relevancy in a broader economic system that rewards cost and time-saving symptom alleviation over deep investigation, this period of demonstrated adaptability reminds us that responsiveness and flexibility is, indeed, possible—even within a paradigm steeped in revered traditions.

Chapter Four: Continuing and Expanding the Tradition of Engaged Psychoanalytic Practice

As readers move through this book, they may begin to wonder, just as I did, “and now what?!” It is my hope that this book offers more hope than despair; more innervation than stagnation. There are many examples of psychoanalytic activists who leveraged, or perhaps sublimated, their despair into action well before, during, and after the COVID-19 pandemic. Psychoanalytic activists played an integral role in witnessing and metabolizing decades of fascism in South America (Hollander, 2019). Italian psychoanalysts pivoted quickly during the pandemic to operate hotlines (Nicolò, 2021). In the United States, Unhoused patients are offered free psychoanalytic psychotherapy in roaming, makeshift, locations in Philadelphia (Luepnitz, 2015, 2020) and pregnant parents during the terrorist attacks of September 11, 2001, in New York City were offered psychoanalytic services by the Project for Mothers, Infants, and Young Children of September 11, 2001 (Beebe & Markese, 2011). There is a long history of

psychoanalytic practitioners responding to distressing sociopolitical events, which continues. Despite this, some within the field of PA/PD psychology believe there are “no psychoanalytic solutions to social problems,” and that psychoanalytic practitioners’ efforts are more effective when they respond as citizens, not psychoanalysts (Gendreau, 2020, p. 3). I explore all of this, and then close this chapter with a brief reflection on the necessary prerequisites for engaging in analytic activism, both on an intrapsychic level through deep intrapersonal inquiry, and on a systems-level, challenging Whiteness and decolonizing psychoanalytic training programs.

Chapter Five: Epilogue: Final Reflection

In this final reflection, I consider the origin of this project, what I have learned, and how I have been inspired to become an engaged psychoanalytic practitioner by sharing my knowledge and putting all that I have learned into practice. In true bookend fashion, I end this project just where I began: with Freud, who encouraged those in the field to “alter [our] methods in any way that can improve them” (Freud, 1919, p. 158).

Description of the Target Market

This book will be a readable, clear, and accessible primer for anyone interested in learning more about engaged psychoanalytic and psychodynamic work, theories of intersubjectivity, and/or PA/PD activism. Psychoanalytic/psychodynamic activism is a niche within the greater umbrella of the field of psychoanalytic and psychodynamic psychology. The book may attract an array of readers, spanning from those interested in social justice, to PA/PD practitioners in the field who are curious about the intersection of clinical work and activism.

There is discussion within the PA/PD community about how to incorporate analytic concepts into undergraduate psychology courses (Cohen, 2007). This book would be relevant for undergraduate and graduate level survey courses of PA/PD clinical work.

This book could also act as an entrée into PA/PD activism for early- and mid-career professionals exploring their role and involvement outside the therapy room. In addition, marketing to existing interest groups might be productive. For example, PsiAN (Psychotherapy Action Network), APA Division 39 (Society for Psychoanalysis and Psychoanalytic Psychotherapy), and APA Division 39 Section IX (Section for Social Responsibility) could all help to sell this book. Although I primarily discuss sociopolitical factors in the United States, I also include international examples of psychoanalytic activism. It is quite possible that there would be a market for this text in other PA/PD communities abroad.

Review of the Main Competing Titles

One of this book's strengths is that it acts as a thorough compilation of recent literature. In addition, I offer discussion that arises from the comparative analysis of this literature and culminates into an argument. I am aware of no other book that does this. There are, however, books and journal articles, many of which were a result of generative exploration during the COVID-19 pandemic, that deeply explore the following topics. Below is a sample of topics and works that informed my work:

- Social psychoanalysis: In *Toward a Social Psychoanalysis* (Layton, 2020), Layton describes the topic of social psychoanalysis as she explores psychoanalytic concepts on a societal level, such as dissociation, linking, division, and race, class, and privilege; she also introduces her own term, *normative unconscious processes* to operationalize how group norms can wound and oppress.
- Community psychoanalysis: The journal article, "Community Psychoanalysis: A Contribution to an Emerging Paradigm" (Bermudez, 2019) connects many of the topics I tackle in this book, including intersubjectivity, the third, and the application of

intrapsychic concepts to the larger systems. Here, Bermudez also operationalizes community psychoanalysis by offering multiple approaches to group models of psychoanalytic psychotherapy, which can be utilized in training institutes as students and candidates in psychoanalysis explore and challenge their Whiteness in hopes of decolonizing the practice.

- Analytic activism: *Psychoanalysis in the Barrios* (Gherovici & Christian, 2019) is a compilation of essays written by psychoanalysts in Latin American countries that have been under oppressive and fascist political regimes.
- Freud's free clinics: *Freud's Free Clinics: Psychoanalysis and Social Justice* (Danto, 2005) is a historical deep-dive into the network of free clinics that Freud and others, including Erik Erikson, Karen Horney, and Erich Fromm established in between the two world wars.
- History and future direction of psychoanalysis: *A People's History of Psychoanalysis: From Freud to Liberation Psychology* (Gaztambide, 2019) reviews the history of psychoanalysis and social justice movements, which, together, underpin liberation psychology.

Format and Timeline

This book will consist of about 30,000–40,000 words, which includes the introduction, epilogue, four main chapters, and references. This book's strength lies in its compilation and comparison; thus, about 80% of it will be drawn from previously published material, both historical and contemporary. Should this book proposal be accepted, the book would require about 18–24 months to write; this includes time for editing and revisions.

Introduction and Chapter One (samples)

Introduction

This project was fueled by unexpected inspiration, which grew and shapeshifted as my research unfolded. Initially inspired by Jessica Benjamin's work, I investigated how sociopolitical factors (e.g., race, politics, and the pandemic) affect the therapeutic relationship, and considered these factors as possible analytic thirds, or components that affect the co-created intersubjective space. Through my exploration, I questioned the psychoanalytic practitioner's role and who PA/PD psychotherapy is meant to serve. It was then that my research took on a new flavor as I read accounts of psychoanalytic activists in South America (Gherovici & Christian, 2019).

Simultaneously, I also discovered Freud's free clinics (Danto, 2005) and his 1919 Budapest Address, which espoused that the "poor man should have just as much right to assistance for his mind" (Freud, 1919, p. 192). As I stumbled across this, I became excited and inspired, both for my forming identity as a psychologist and this project. Almost exactly 100 years later, as I navigated the COVID-19 pandemic, I learned of Freud's similar experiences in the 1918 flu pandemic, yet prior to this, I had never considered Freud's sociopolitical context. Freud is better known for his theories, which I have come to realize may have been his wish. Some believe he "formulated a theory of the 'universal mind,' detached from cultural and social context, which allowed him to disavow the pain of his own racial trauma" (Stoute, 2021, p. 260). In addition to his oppressed and minoritized religious identity and surviving the 1918 flu pandemic, Freud also experienced many other adverse sociopolitical experiences, such as poverty and war, which affected him very directly, too (Danto, 2005; Kahr, 2021). Each of these

factors deepened my resonance with his experiences and sense of familiarity with Freud—100 years later, this time in our world feels similarly unstable and contentious.

Freud and his contemporaries contributed to a progressive period of time in between the two world wars, which included a widespread emphasis on robust mental health and social services in Europe, especially Austria and Germany (Danto, 2005). During this time, “psychoanalysis was a challenge to conventional political codes . . . and represented human liberation, social empowerment, and freedom from bourgeois convention” (Danto, 2005, p. 4). As an example of this, Freud’s 1919 Speech, “Lines of Advance in Psycho-Analysis” (AKA Budapest Address) emphasized that “The poor man should have just as much right to assistance for his mind” (Freud, 1919, p. 166). Freud’s close relationship with Ferenczi furthered this credo—Ferenczi believed that psychoanalysts were “forsaking” those who needed support the most (Danto, 2005; Gaztambide, 2012), and this resulted in the creation of psychoanalytic programs for public therapy in Vienna and Berlin.

As I share the inspiration I drew from Freud and others, it is my hope that this book will be a call to informed action; that PA and PD psychology becomes an avenue for social justice, as it has been in Latin America (Hollander, 2021). This is a pinnacle moment for PA/PD psychology in the U.S., one where the field’s relevancy is being tested. I dream the field will prove its flexibility while maintaining its frame, and I hope this book plays a small role in this.

Chapter One: Intersubjectivity and the Analytic Third: From One Person to Two

The field of PA/PD psychotherapy has evolved and transformed many times, from Freud’s theories, which are most known for his focus on the intrapsychic, to object relations, to self psychology, to its most current, “postmodern” iteration —relational psychoanalysis (e.g., Kuchuck, 2021; Shedler, 2006). While it is important to note that the field, itself, has long been

dynamic and responsive to a changing world, that detailed history is available elsewhere (e.g., Kuchuk, 2021). The “relational turn” in psychoanalytic psychology was a collective attempt (originating with the writing of Stephen Mitchell and Jay Greenberg and extended to others, including, for example, Philip Bromberg, Jessica Benjamin, and Lew Aron) to disrupt “the hierarchical, authoritarian North American, Caucasian-centric, heterosexist perspective on human development and functioning” in the world of psychoanalysis (Kuchuk, 2021, p. 1).

Jay Greenberg and Stephen Mitchell first established the term “relational” to emphasize the common threads among disparate schools of analytic thought—interpersonal psychology, object relations, self-psychology and intersubjectivity theory— incorporating the inter- and intra-personal worlds of patients while also considering social context (Kuchuk, 2021). Because relational psychoanalytic theory is a collection and conglomeration of an array of theorists’ theories, there is no one set way to work relationally. Despite this, relational psychoanalytic psychotherapy most commonly includes working within a bidirectional model of influence between the patient and therapist, where the therapist’s subjectivity is considered and the clinical work shifts dialectically between interpersonal and intrapersonal spheres (Kuchuk, 2021; Safran & Muran, 2000).

At its essence, this book is relational, as it examines the intra and interpersonal worlds of the therapist and patient, the experience they intersubjectively create together, and how their external, social contexts shape their personal and shared experiences. In particular, I focus on the impact of recent seismic socio-political-cultural events on clinical, intersubjective experience, for it is not commonly the case that the therapist so thoroughly shares a social context with their patients. However, the year of 2020 marked profound upheaval in many ways for all, as PA/PD practitioners and patients, alike, unexpectedly faced a pandemic, an acrimonious election, and

new levels of nation-wide fighting for racial justice, all while shifting to telehealth. This chapter and the next will explore the effects of each of these factors on the clinical and intersubjective experiences of psychoanalytic practitioners and their patients.

Current Understanding of the Analytic Third

Within PA/PD thought, there are disparate and elaborated variations and understandings of concepts, including the analytic third and intersubjectivity. Many theorists who contributed to the relational turn of psychoanalysis worked alongside with, in opposition to, as a result of and/or in conjunction with each other. Some of these theorists identified more with object relations and others aligned more with humanistic-interpersonal theories (Berman, 1997), resulting in a web of theories often utilizing different words for similar ideas. Thus, relational psychoanalysis represents less a novel “school” of thought and more a web of complimentary perspectives that contribute to the overall exploration of “relational thinking [that strives] to be a stimulating and questioning force” (Berman, 1997, p. 197).

The concept of intersubjectivity was initially conceptualized by Stolorow and Atwood (Atwood & Stolorow, 1984; Stolorow, 1988). Proponents of subjectivism, Stolorow and Atwood challenged the idea that the psychoanalytic practitioner holds an objective truth. To this end, they chose a more “experience-near”—in Kohut’s (2010) self psychology terminology—path where “what the analyst ‘knows’ in the psychoanalytic situation is no more ‘real’ than what the patient knows” (Stolorow, 1988, p. 332), which results in “an intersubjective process involving a dialogue between two personal universes” (Stolorow, 1988, p. 334).

In this project, I offer a general understanding of intersubjectivity and the Third through the exploration and brief comparison of its major theorists, including Thomas Ogden, whose work beginning in the 1980s was heavily informed by object relations (Berman, 1997), and

Jessica Benjamin, a feminist psychoanalyst who played a major role in the relational turn of psychoanalysis in the 1980s and 1990s (Benjamin, 2017; Berman, 1997). A little less in-depth, I will also explore the work of Christopher Bollas (1943–present), a pivotal psychoanalyst, who has extensively explored counter transference and disclosure (Aron, 2006).

I have chosen to focus on Jessica Benjamin and Thomas Ogden’s theories, as I have found they add nuance and demonstrate growth from Stolorow’s (1988) original theory. Benjamin’s (2018) theory of intersubjectivity includes a “reciprocal recognition of the other as growing naturally out of the experience of being recognized by the other” in a “pleasurable” way that is not a “chore” (p. 22). I find Ogden’s theory of the Third, which emphasizes reverie and projective identification, similarly compelling, but in a different way. Nuances of each theory are discussed in further detail below.

Thomas Ogden

Although many relational psychoanalytic practitioners pay great attention to the intersubjective experience between therapist and patient, Thomas Ogden (1946–present) is one of the first who brought the concept of the analytic third to life. Ogden introduces us to the concept of the Third in his book, *Subjects of Analysis* (1994), by inviting us to consider the reader and author’s intersubjectivity. As such, Ogden (1994) describes how, as the line that distinguishes the reader and the author fades and merges, “you must allow yourself to think my thoughts while I must allow myself to become your thoughts and in that moment neither of us will be able to lay claim to the thought as our own exclusive creation” (p. 1). Thus, he suggests that the interplay between the reader and the author creates an entirely new entity and once the reader sets eyes on the book, “a third subject is created in the experience of reading that is not reducible to either writer or reader” (Ogden, 1994, p. 2).

Just as Winnicott (1960) famously explained that “there is no such thing as an infant” (p. 235), Ogden believes it is impossible to have a patient or psychotherapist separate from the relationship (Ogden, 1994). This is not the full picture, however, as Winnicott (1960) also states that despite this merging, the infant and the mother are clearly two separate beings, with their unity existing “in tension ... in their separateness” (Ogden, 2004, p. 168). The therapeutic relationship mirrors this; thus, the aim of psychotherapy is not to discern who “owns” what, but to understand and describe the patient and therapist’s movement between individual subjectivity and intersubjectivity (Ogden, 2004).

Because of its intangible nature, the concept of the Third can often feel mysterious (Ogden, 1994). Perhaps this is due to its valuation of unconscious processes and its emphasis on the “extremely mundane background workings of [the therapist’s] mind” (Ogden, 2004, p. 12). Reveries, such as daydreaming and sensations within the body, are frequently subtle static that go unnoticed. Often considered “distracting,” once the therapist becomes aware of their narcissistic and self-absorbed states, these reveries can become valuable information, for nothing happens by chance in the therapy room (Ogden, 1994). Similar to the nature of dreams, reveries and physical states can provide rich and symbolic data that reflect the intersubjective experience between the psychotherapist and patient (Mitchell, 1988).

“The Purloined Letter”

The Purloined Letter, one of Ogden’s (1994) most famous examples of the Third, highlights the utility of accepting and inviting reveries into the therapeutic experience. A poetic and nuanced portrayal of the analytic third that unfolds over time, it is impossible to capture Ogden’s essay in its entirety, however, I will attempt to relay a sliver of its complexity here. In *The Purloined Letter*, Ogden (2004) explains how, during a session, his attention landed on the

envelope of a letter on which he had been making lists. This envelope had been lying on his table for some time; however, in this moment, it sparked a series of random, nearly imperceptible, and seemingly mundane thoughts that ranged from feeling rejected and distressed (upon considering how the letter seemed to have been sent as bulk mail, rather than an individual and personalized First-Class mail) to warm and connected (he later thought that it was sent from a close friend). He then remembered a childhood story, *Charlotte's Web* (White, 1952), that he used to read when he was lonely. A jolt jumped him from this thread of engrossed memory to worry that he would not have enough time to pick up his car from the mechanic. It is in this moment that he also felt frustration toward the mechanic, with whom he had a long-time relationship, for the mechanic did not offer to extend the shop's hours. Each of these fantasies were accompanied by physical sensations connected to many of the specific details in his reverie, including suffocation related to the exhaust fumes of a car and the hardness of the city's pavement (Ogden, 2004).

At this point, anxiety shook Ogden from his reverie as he grappled to understand his patient. To make sense of what he was hearing, Ogden drew on the unconscious images and elements of his reveries, including the car mechanic and the potentially impersonal letter, to lend words to the patient's experiences that involved feeling as though the analysis was mechanical and inhuman, respectively. In doing so, Ogden "spoke unconsciously *from* (not about) [his] unconscious experience of the analytic third (the unconscious intersubjectivity being created by Mr. L and me)" (Ogden, 1994, p. 181). Although I have only shared a partial and brief synopsis of Ogden's *The Purloined Letter*, the essay in its entirety is a complete and intricate demonstration of how the analytic third and the intersubjective experience can richly inform the psychotherapist's understanding of their patient.

Analytic Object and Analytic Event

Ogden's version of the analytic third emphasizes the therapist's unconscious. He explains that he sees the *analytic object* and *analytic event* as objects and events that "hold meaning in the context of the unconscious intersubjectivity" (Ogden, 2004, p. 180). In the above example, the letter and Ogden's car are both analytic objects at different times, as they each spur streams of reverie. It is noteworthy, too, that the same object can hold significance and contribute to unconscious intersubjectivity in different moments, as evidenced by Ogden's letter spurring feelings of loneliness at one point and social connection and hope in another.

Additionally, while not included in the depiction above, Ogden (1994) also describes his experience of hearing his telephone ring during the session. Even though this was a common occurrence, he felt it unique in that moment, for it prompted in him feelings of being known and understood. Acting as a reminder of connection, the analytic third, comprised of the analytic moment and analytic objects, helped Ogden understand his patient's experience.

Reverie and Projective Identification

For Ogden, reverie and projective identification are two components that intertwine and further contribute to the analytic third. Reveries are "forms of mental activity that often appear to be nothing more than narcissistic self-absorption, distractedness, compulsive rumination, and the like" (Ogden, 1994, p. 95). This may undersell the interpersonal elements of reverie, however. Evidenced in *The Purloined Letter* (1994), reveries in therapy are often unconsciously directed by the intersubjective experience and can, when understood in context, in fact, be informative and useful for the psychotherapist and the psychotherapy.

The concept of projective identification encompasses many different varieties of interpersonal relating including caregiver-child communication, empathic sharing, and the

“occupation of the personality of another person” (Ogden, 1994, p. 98). An important component of the analytic third, projective identification can shift with reverie, each at times receding or advancing to the fore of the intersubjective experience. This movement is dialectical, for the Third (consisting of reverie and projective identification) ebbs and flows as a result of the patient and therapist shifting between subjective (intrapersonal) and intersubjective (interpersonal) experience (Ogden, 1994).

Projective identification involves the displacement of oneself onto another, as “one consciously subjugates oneself in order to free oneself from oneself” (Ogden, 1994, p. 103). This “evacuation” (Ogden, 1994, p. 99) of a personal component occurs either as an act of giving the quality to the other for safekeeping, or, conversely, as a self-preserving and protective act because the quality is expunged and put onto the other, rather than kept in oneself (Ogden, 1994). Thus, projective identification is a process that blurs separateness, as the giver disavows a part of their self while the recipient takes on this part or quality of the giver. This sharing or “blurring” of separateness temporarily halts the movement between subjectivity and intersubjectivity, as both parties merge, relinquishing their uniqueness, resulting in what Ogden refers to as the *subjugating analytic third*—an entirely new “intersubjective entity” (Ogden, 1994, p. 101).

While this experience of subjugation may sound less than ideal, or even “deadening” (Ogden, 1994, p. 102), within it lies a potential for generativity beyond what each individual is capable of, thus “each person is being negated by the other while being newly created” (Ogden, 1994, p. 102). Harkening back to Winnicott’s (1986) movement between the caregiver and child (when at times they are one and at times they are separate), Ogden (1994) posits that the new intersubjective entity is a product of a similar tension, as each party is both giving, receiving, and

experiencing themselves in new ways as a result. As generative as this process can be, however, if both subjectivities remain intertwined and subjugated, the therapeutic process will halt—stuck in an impasse and neither the therapist or patient will be able to disembed from the other.

Thus, the process of disembedding is as crucial as the projective identification, for successful therapy occurs when the subjugating third “unlocks,” releasing and reappropriating the individual subjectivities to their rightful person (who are each now changed by the experience). A crucial component of this reappropriation can only occur when one is “recognized by another who is recognized as a separate (and independent) person” (Ogden, 1994, p. 104), which is also similar to the concept of mentalization, the process of “having one’s mind in mind” (Fonagy et al., 2019). Herein lies the curative factor for child and patient, alike: being seen by a separate entity, thus allowing the child “to be” (Winnicott, 1986, p. 238) and the patient to “become increasingly (self-reflectively) human” (Ogden, 1994, p. 104).

Critique of Ogden

Ogden’s theory of the Third is one that demonstrates how awareness of the therapist’s intrapsychic activity—for Ogden, this includes reveries, cognitions, physical sensations, and even countertransference (Busch, 2019)—can inform the intersubjective experience between the therapist and patient. Despite Ogden’s apparent warmth and caring for his patients, his version of the Third excludes his patients in many ways, as the reflection on the intersubjective experience is seldom offered to the patient after an internal, solo, reflection. Thus, Ogden is aligned with the bi-directional component of relational psychoanalysis, as he includes and values the patient’s experience; however, he could include the patient’s experience even more. For example, a proponent of intentional verbal exchange, Benjamin (2017) suggests that when Ogden refrains from explicitly sharing his experience with his patients, he avoids “acknowledging the two-way

dynamic to the patient” (p. 57)—this critique highlights differences between herself and Ogden: they diverge mainly in the method and degree to which they each explicitly co-create meaning and experience with their patients.

Dr. Fred Busch, a curious and incisive psychoanalyst and ego psychologist agrees with this critique and ventures to extend it. In fact, Busch (2019) contends that Ogden’s unilateral and unshared reveries may actually impede his capacity to deeply listen to, and “dream with” his patients, “derailing” the clinical encounter with “saturated” interpretations that “tend to close off thinking” (p. 49). Additionally, Busch contends that when Ogden categorizes all of his thoughts and experiences of countertransference as reverie that is projected or “evacuated” into him, he avoids attributing, or tracing, his reverie back to his own dynamics, thus neglecting “his contribution to countertransference feelings or thoughts” (Busch, 2019, p. 36). Further, Busch sharply challenged Ogden’s assertion that psychoanalysis and reverie are entirely co-constructed, emphasizing that the psychoanalyst “forgoes responsibility for his own thoughts when the psychoanalyst believes every thought or feeling he has is a reverie” (Busch, 2019, p. 82). Thus, Busch (2019) emphasized the importance of the “self-analytic process,” as “self-reflection is the analyst’s one bulwark against self-deception” (p. 82). In sum, Busch ventured to compare the concept of reverie across a range of psychoanalytic orientations and adroitly brought the conversation back to the inclusive middle, reminding us that therapists have their own dynamics, which contribute to the clinical experience, and that self-reflection is absolutely essential for psychoanalytic practitioners to understand their contributions to the clinical experience.

Jessica Benjamin

Infant Studies: The Foundation and Context of Benjamin's Work

A contemporary of Ogden's and present-day relational psychoanalyst, Jessica Benjamin's ideas are deeply informed by Winnicott's work (Altmeyer, 2013; Aron, 2006) and other caregiver-infant studies, which she then translates to the therapist-patient relationship and beyond, as Benjamin views intersubjectivity as a topic that transcends "the disciplinary boundaries" (Benjamin, 2017, p. 1). Because Benjamin has been greatly influenced by caregiver-infant studies, her theory of intersubjectivity is based on many elements discovered by caregiver-infant research, including, for example, bi-directionality, differentiation, repair, and rhythmicity. To contextualize and introduce Benjamin's theories of intersubjectivity, these concepts will be reviewed here.

The Applicability of Infant Studies: Relational Schemas and Metaphor

Although there are obvious differences between an infant-caregiver relationship and patient-therapist relationships, infant studies enrich our understanding of the therapist-patient relationship (Beebe et al., 2000; Beebe et al., 2003; Beebe & Lachman, 2020; Lachmann & Beebe, 1996). Eminent infant researcher, Daniel Stern, emphasized the importance of micro-analysis in infant-caregiver research by asserting that it is the similar experiencing and analysis of moment-to-moment process that uncovers the "original mind" and the "foundation of experience" (Beebe, 2017, p. 228) that spurs psychotherapeutic change, often by way of metaphor (Lachmann & Beebe, 1996). Moreover, the caregiver-infant dyad develops attachment patterns that inform future relationships (Beebe et al., 2000), specifically by creating the template, relational schemas, and self-other understandings that set the frame for our relational

expectations throughout our lives (Beebe & Lachmann, 2020; Lachmann & Beebe, 1996; Safran & Muran, 2000).

Intersubjectivity in Infancy: Applicable Concepts for Adult Dyads, Too

Bi-directionality and Differentiation

Beginning in the earliest days of infancy, humans demonstrate the capacity to affect others—a process that flows bi-directionally (Beebe, 2017; Beebe et al., 2003; Benjamin, 2017). Through the microanalysis of moment-to-moment exchanges between caregivers and infants, Daniel Stern, psychiatrist, and other prominent infant studies psychologists and psychiatrists (e.g., Louis Sander and Beatrice Beebe), isolated components of the “interactive flow” and “rhythms” created by the dyad (Beebe, 2017). Dyadic synchrony and dyadic coordination, Stern elaborated, function more as a “waltz” than a “tennis match” (Beebe, 2017), in that both parties move with precision within a shared flow, rather than in a stimulus-response pattern (Beebe, 2017). “Moving synchronously, or in temporal coordination” demonstrates the parties are “participating in an aspect of the other’s experience” (Stern, 2004, p. 81). Expectancies, built upon recognition and accommodation, create a two-party “predictive system with each other” (Beebe, 2017, p. 237), where each dyad member “‘feels into’ what the partner feels” (Beebe, 2017, p. 239), resulting in *changing with the other* (Beebe et al., 2003; Stern, 1985).

It is not just the presence of bi-directionality, however, that marks a functional and secure dyad. Over-attentiveness, which often manifests as “helicoptering” and the micromanagement of interactions, can result in a fixed relationship that lacks an element of spontaneity and play (Beebe et al., 2000). As such, a dyad that falls in the *midrange* is most optimal, for a securely-attached dyad is created when bidirectional, mutual, regulation is combined with the differentiating factor of self-regulation, resulting in a dyad characterized by a “warm and

attractive” quality (Beebe et al., 2000, p. 116). In a Winnicottian sense, this feeling of being well-aligned and securely attached “holds” the dyad (Greenberg & Mitchell, 1983; Winnicott, 1960); however, ultimately, the harmonious alignment and secure attachment become much more than a container, for the dance of attunement becomes a Third entity in of itself (Benjamin, 2017; Sander, 2002).

Misattunement and Repair

Beebe and colleagues (2003) emphasize the importance of mismatching and misattunement in infancy, as “differences are an intrinsic aspect of the structure of intersubjectivity in infancy” (p. 821). Aligned with infant researcher Edward Tronick (1989), Beebe and colleagues (2003) argue that interactive repair is more integral to development than matching, for they found that the capacity for a caregiver-infant dyad to *rematch* quickly (e.g., within two seconds) predicts secure attachment even more than the dyad’s original capacity for *matching* and attunement. Thus, the implications of repair extend far beyond the moment, for the process of repair demonstrates to the child that despite rupture, relatedness remains intact, is negotiable and reparable, and continues to be navigable—a process that, over time and repetition, forms healthy relational schemas and self-other representations (Safran & Muran, 2000).

Demonstrations of Power

In Caregiver-Infant Dyads. A repeated lack of matching between the caregiver and infant results in systemic misattunements, a marked lack of intersubjectivity, and disturbed moments of infant self-regulation, all of which are often referred to as *disjunction* (Beebe et al., 2003). These patterns, which are explored below, are important to note, as they result in the interruption of the child’s capacity to self-soothe, diminish the child’s agency, and illuminate how an adult’s (misused) power can affect the child. These patterns are also significant because

they inform the role that power plays in Benjamin's (2017) theory of intersubjectivity (and its inverse, complementarity), which she applies to every kind of relationship, including two-person dyads, small groups, and cultures.

Mother chase and infant dodge, oral teasing, and a failure to mentalize (Fonagy et al., 2019) are all ways that a caregiver can interrupt (or cease) intersubjectivity with their infant by disrupting their capacity to self-regulate (Beebe et al., 2003; Beebe & Markese, 2011). Although coined "Mother chase and infant dodge," the term applies to any primary caregiver who moves their face in close to their infant, which results in the infant pulling their head back, prompting the caregiver to move their face even closer to the infants'. In these instances, even though the infant moves their head away from the caregiver in an attempt to down-regulate, the caregiver increases arousal (Beebe et al., 2003)—a misattunement that results in the child's loss of a moment to self-regulate.

Oral teasing is another such moment of caregiver "disturbance of infant self-regulation" (Beebe et al., 2003, p. 822) and occurs when the infant has become accustomed to self-regulating by sucking on the caregiver's finger, rather than their own finger. In these instances, often the caregiver will remove their own finger, which results in the infant fussing, prompting the caregiver to offer their finger once again. This cycle repeats over and over and results in the disrupted capacity for the infant to self-soothe "in a way that unwittingly disturbs the infant's agency" (Beebe et al., 2003, p. 822).

Failure to mentalize is similarly disjunctive, yet more extreme, in that the caregiver fails to register or explore what could be wrong with their distressed child (Beebe et al., 2003). In the face of prolonged periods of the infant's expressed distress, the caregiver "acts as though the infant is 'fine,' almost as if the caregiver were with a different infant than the one in front of her"

(Beebe et al., 2003, p. 823) by continuing a rapid pace of expressions and touching even as the infant's negative reactions escalate. Ultimately these moments, when the caregiver fails to understand, or mentalize, their child's feelings, may even result in the child going limp in an extreme attempt to self-regulate, almost as though they wish to disappear or "play dead" (Beebe et al., 2003).

Into Adulthood. Intersubjectivity and demonstrations of power in adult relationships are linked to interactions in infancy, for as Bucci (2011) and Beebe and colleagues (2003) remind us, "linguistic forms of intersubjectivity have their foundation in prelinguistic forms" (Beebe et al., p. 812). Vocal rhythm coordination—the study of timing and rhythmic qualities that are fundamental components of communication and behavior (Beebe et al., 2000)—is a great example of this, for it begins in infancy and persists throughout life. Specifically, pause analysis (a branch of vocal rhythm coordination) has demonstrated that listeners perceive others who demonstrate a short switching pause to be rude; conversely, those who engage in a longer switching pause are often seen as "out of it" (Beebe et al., 2000, p. 101; Beebe et al., 2003). Research has also found that silence patterns of those in speaker or listener roles are dissimilar, for the person who "holds the floor" has a higher probability of ending joint silence and may have different average pause durations (Jaffe & Feldstein, 1970). In the therapy room, research has demonstrated that therapists' extended periods of silence, or failure to engage in vocal rhythmicity, can affect "emotional climate and potentially the unconscious fantasies," while also "disturb[ing] the relatedness of the dyad" (Beebe et al., 2000, p. 116). Therapists are also more likely to have longer silences and interrupt less when patients implement less narrative imagery (Beebe et al., 2003; Langs & Badalamenti, 1990). Although these clinical examples in adulthood may seem less egregious than the disjunction that can occur in caregiver-infant dyads, infant

studies highlight how the misuse of power, even when unintended, can result in the diminishment of agency and erosion of recognition and acknowledgement—two of Benjamin’s fundamental concepts for her theory of intersubjectivity and the third.

Benjamin’s Theory of the Third: Variants and Essential Factors

Benjamin captures numerous nuances and textures of the analytic third by creating variants, all of which stem from her core concept of the *shared third*. For the purposes of this book, I will focus primarily on the essential factors that underpin Benjamin’s thinking. My aim is to provide a foundational understanding of those concepts that are most applicable to the subsequent exploration of how the issues of race, politics, telehealth, and the pandemic may have impacted the experience of intersubjectivity in the year of 2020.

An Absence of the Third: Doer and Done-To Complementarity

Before elucidating Benjamin’s perspective(s) of the Third, it will be helpful to discuss what occurs when the Third is missing. When there is no shared Third, *complementary twoness* occurs, creating a *doer/done to dynamic*. Aron (2006) uses the metaphor of a seesaw to capture Benjamin’s concept of complementarity, as a seesaw is rigid, fixed, and locked by a fulcrum into weight distribution and positions of power that can switch polarities but never disperse or shapeshift. Additionally, although split, the two riders share symmetry, “mirror[ing] each other inversely ... inhabit[ing] reversible perspectives” (Aron, 2006, p. 355). Complementary, doer/done to dynamics are experiences in all types of relationships (clinical and non-clinical) that often result in an impasse and a feeling of unresolved and rejected conflict (Benjamin, 2017). These are dangerous moments, as “each feels unable to gain the other’s recognition, and each feels in the other’s power” (Benjamin, 2017, p. 25). In such occurrences, a co-created reality

feels unattainable and each party feels barricaded from the other and “done to,” which results in growing antagonism and a fixed pattern of “see-sawing” back and forth.

The Shared Third: Recognition, Rhythmicity, Repair, and Acknowledgement

Understanding what the third is not will help us now shift to conceptualizing what it is. Benjamin (2017) refers to the Third in many ways, including as a vantage point, a position, and a co-created shared space. She (2006, 2017) describes the idea that two points make a line, and three points create space within it, full of the co-creation, exploration, and bi-directional influence inherent in an intersubjective relationship. Recognition and rhythmicity are two components of healthy, co-created, intersubjective experiences, as are acknowledgement and repair.

Recognition

A fundamental element of a shared reality, “Recognition [is] the building block of relationships” (Benjamin, 2017, p. 2) of any kind. Recognition continuously occurs and we often notice it only when it evades us, leaving us to feel misunderstood or passed over. The therapist and caregiver, alike, “take the lead” by recognizing the patient/child, however co-creation will only occur if the patient/child becomes involved, recognizing the caregiver or therapist as a subject (Safran & Muran, 2000) with whom there can be “reciprocal responsiveness and understanding” (Benjamin, 2017, p. 3). Recognition facilitates doing something “with me,” in an organic, dynamic, and collaborative dance (also understood as the shared third), rather than “to me,” as in a doer/done to relationship (Benjamin, 2017). As Benjamin (2017) emphasizes, “liberation comes not only through being recognized but also doing the recognizing” (p. 13); it is just this bi-directional knowing of the other that creates the shared third.

Rhythmicity

Rhythmicity is the product of sharing and recognition. The *rhythmic third*, derived from infant studies researcher, Louis Sander's (2002) concept of rhythmicity, captures the shared experience where both parties are attuned to a "mutually created set of expectations" (Benjamin, 2017, p. 30). As Aron (2006) describes it, "Each member is not only accommodating the other, but is also accommodating the co-created rhythm that the couple or group has already established" (p. 356).

Acknowledgement and Repair

Perfect attunement cannot occur all the time and should not. Benjamin (2017) describes the process of true intersubjectivity as one that relies on the continuous movement between connection and disconnection, differentiation, and recognition. When a failure in attunement does occur, as it will naturally, *acknowledgement* of the misunderstanding often positions the dyad for repair and restoration. In these moments, the misattunement ends, mending begins, and the afflicted party(ies) feel as though they and their pain have been received and held. On a more global level, acknowledgement is also often the first step in repairing injustices to and restoring lawfulness (a concept later discussed) for a population (Benjamin, 2017; Herman, 2023).

The Differentiated Third and Asymmetry

Benjamin (2017) reminds us that multiple realities and positions can and must be experienced and held in tension simultaneously. For instance, the shared Third experience cannot exist without the acknowledgement of each party's bound, differentiated, intrapsychic worlds (Benjamin, 2017). Just as the therapist continuously navigates both participation and observation (Conci, 2013; Mitchell, 1988), recognition and the experience of intersubjectivity is contingent

on the continuous shifting between, and simultaneous holding of, both the co-created (intersubjective) and individual (intrapersonal) experience.

In Benjamin's view, asymmetry is a crucial component of the differentiated third. In a similar vein, Winnicott maintained that even though the baby and mother are one unit, asymmetry will always exist, for if there was none, the mother would eat her baby when hungry, just as the baby turns to their mother for nourishment (Benjamin, 2006, 2017). Thus, the caregiver maintains at least some intersubjectivity, so they can "suspend [their] own need in favor of the child's immediate need" (Benjamin, 2017, p. 27), resulting in the caregiver's capacity to hold the child's pain while also embodying the knowledge that the moment is temporary and will pass. The therapist's aim is similarly dualistic, for they aim to be mutual and bi-directional while asymmetrical and holding a position of power (Benjamin, 2017).

The Moral Third and Lawfulness

The moral third is meant to restore lawfulness by acknowledging "injuries and trauma that challenge principles of fairness, and respect for human dignity" (Benjamin, 2017, p. 51). In addition to this more global ethos, recognizing *violations of expectancy*, however small, also help to recover and restore lawfulness for the child and patient, alike, who similarly have a strong trust in a sense of what is right (Benjamin, 2017, 2021). A therapist's presence and actions, even when messy and hooked in a reenactment, are "right" when their feelings (e.g., shame, inadequacy, and fear) are "owned" and acknowledged. When psychologists become misattuned and subsumed in processes of introjection and projective identification, they must resist disassociation by surrendering to the moment and making their way out "lawfully," which, in-line with the moral third, is guided by compassion, honesty, vulnerability (within the moment

and to that fact that they may emerge affected and changed), and acknowledgement (Benjamin, 2017).

On a Cultural Level: The Social Third

Benjamin (2017) refers to the *social third* as the respectfulness and sense of justness in the relationship that occurs once the moral third restores justice. But what occurs when there is no justice restored? On the societal level, we also have ruptures in understanding and attunement, often without the possibility for repair. We endure disconnection without the willingness or capacity to navigate our way back to connection. What happens when we are unwilling to consider, participate in, or surrender to others' experience, remaining staid in our own perspective, surrounded by others with whom we only share sameness? On the cultural level, this lack of intersubjectivity and curiosity results in a sense of lawlessness and disrespect that ripples through our society, pushing the social third further and further out of reach (Benjamin, 2017).

As an example, Benjamin posits that even before the events of 2020, Donald Trump displayed just this disregard on a collective level by perpetuating an "us versus them" stance where there can be only one winner, and you will either "kill or be killed" (Benjamin, 2017, p. 7). Here, arguably, an entire country became submerged and subjugated, unable to disentangle enough to become curious about the other "side's" stance. In such a moment, there is little chance of recognition, repair, and ultimately the restoration of respect and lawfulness, all of which are essential components of the social third. Benjamin (2017) posits that if the moral and social third continue to be disregarded, the world will remain broken. In an impasse like this, acknowledgment, the first step in repair, can never occur and the "other" will continue to be dehumanized.

Critique of Benjamin

Benjamin offers a broader view of the Third and her expanded version affords still more room to grow. Benjamin extends intersubjectivity to include systems-level dynamics and injustices, such as sexism; however, as Altmeyer (2013) argues, she fails to include the objective reality that houses the intersubjectivity. As an example, Benjamin considers the doer/done to dynamics inherent in the Israeli/Palestinian context, arguing for and helping to implement increased recognition and acknowledgement of Palestinians' suffering. However, as Altmeyer (2013) writes, for this struggle to transcend doer/done to, complementary dynamics, both sides would have to "accept facts and mutually recognize realities" (p. 68). Thus, as Altmeyer (2013) argues, the ideal configuration of the analytic third would extend beyond subjectivity and intersubjectivity to include objectivity, for we do not interact "in an empty space but in a material and social reality" (p. 67).

The philosophical concept of *recognition* dates back to Hegel's oppressed-oppressor model, where each needs the other to exist and be recognized (Benjamin, 2017; Oliver, 2001; Safran & Muran, 2000). Many theorists and philosophers, including Benjamin, base their theories on this tenet; however, it is often rejected, as well. For example, in her book *Witnessing: Beyond Recognition*, Kelly Oliver (2001) argues that recognition of the oppressed is simply not enough. As such, recognition is a concept created by the dominant group, or the colonizers, and "if the enslaved are freed and given the rights of citizenship, insofar as they are not allowed to create their own values, they remain oppressed" (Oliver, 2001, p. 29). Thus, citing social activist and author bell hooks (2014), Oliver (2001) insists that rather than seeking recognition from others, the oppressed must be supported to make their own meaning and recognize themselves.

Other Theories of the Third

I chose to explore Benjamin and Ogden because they represent two distinct variations of the Third. It is important to note that although they use “the third” to capture their concepts, their concepts were born from different frameworks, Benjamin as a philosopher and on social theory and Ogden as a fiction and non-fiction writer. In addition to this fundamental difference in position, Benjamin views the Third as a co-creation, while Ogden’s conceptualization is more unilateral, remaining within the therapist. Even though Benjamin and Ogden are considered by many to be major contributors to the theory of intersubjectivity, they actually two theorists within a large group of other theorists who explore the implications of intersubjectivity and the Third for analytic theory and intervention.

The Third: Intrapsychic, yet Disclosed

Within the past thirty years, Irwin Hoffman, Sheldon Bach, and James McLaughlin and Christopher Bollas (all psychoanalysts) melded intrapsychic and shared perspectives of the Third (Aron, 2006). Although Ogden’s conceptualization also considered the Third as a product of the psychoanalytic practitioner’s mind in relation to their patient, Bollas and colleagues are even more specific, as their conceptualization of the Third emphasizes the sharing, or exposition, of the internal process (Aron, 2006). This kind of disclosure is meant to share the therapist’s thought process when making an interpretation, especially when the therapist is deciding among multiple possibilities. Transparency of this *dialectic of difference* (Aron, 2006; Gerhardt & Sweetnam, 2001) is meant to, ideally, encourage the patient to “accept and articulate conflict on his or her own” (Aron, 2006, p. 361). As shared as this experience is, however, it is not truly co-created, as the origins of the disclosure come from within the intrapsychic space of the therapist. Moreover, as Benjamin demonstrates and emphasizes, intersubjectivity is not just a

created experience between therapist and patient; intersubjectivity is a concept that includes even more global implications by extending to larger, socio-political and cultural scales. Thus, it is important to note that although Bollas and colleagues' view of the Third includes more than just the intrapsychic world of the therapist, their concept is largely dyadic and does not readily extend to larger systems.

An Integrated Understanding of the Third

The concept of the Third carries many meanings. It can be as private as a reverie and as shared as a co-creation. The Third can be intra or inter psychic, disclosed or self-contained, co-created or unilaterally constructed, a point of reference, or a holding entity. Benjamin views the Third as a position, an umbrella, a creation, and a stance, whereas Ogden's conceptualization is more of a unilateral experience of the therapist in session. Ogden's version of the Third "refers to observing capacities and the analyst's relation to his own theory or thinking" (Benjamin, 2017, p. 32), rather than Benjamin's perspective that highlights co-creation within the intersubjective experience. Benjamin's work further considers power dynamics and the need for out-loud communication, while Ogden, Bollas, and colleagues maintain that mere thoughts will be expressed to the patient "slightly and with nuance" (Aron, 2006, p. 360).

Benjamin continuously describes the difficulties, challenges, and darkness of an adversarial complementary stance, and at the same time, I find an intangible quality of optimism and warmth inherent in her work. Benjamin's language is imbued with naturally uplifting ideas of the Third as a force for connecting through recognizing and co-creating, while, reveries aside, Ogden's version of the Third seems oriented toward the downward, drowning, process of subsuming subjugation.

Although the differences in conceptualization are noteworthy, there is a certain circularity in how theories fit together, pick up where one leaves off, and enrich one another. For instance, Ogden emphasizes his version of the Third, not because reverie is a fun exercise, but because it enhances the relationship by strengthening his recognition of the patient. And, regarding recognition, it is almost as though Benjamin resumed right where Ogden ended, for recognition seems to be Ogden's end goal, while it is a fundamental building block of relationship for Benjamin.

Although it is helpful to consider these theories critically, the exercise of analyzing these perspectives is not to decide which is "right," but rather to inform a more holistic view of the Third. Understanding the general form and function of the Third will allow us to expand and apply it to a multitude of contexts and relationships, including the COVID-19 pandemic, differences in experience of race and politics, and the impact of teletherapy on a psychoanalytically-oriented treatment. Thus, at the sake of oversimplifying deep nuances and thoughtful theory, for this project, my working definition of the Third includes that it:

- Is intersubjective in nature.
- Is a co-creation (that either begins in an individual's mind and then is shared or is improvised in the moment).
- Is informed by infant-caregiver dynamics (Benjamin, 2017).
- Is influenced by, and can create, power dynamics (Benjamin, 2017).
- Represents a continuous dialectic that oscillates between intrapsychic to interpersonal, differentiated to recognized (Benjamin, 2017; Ogden, 1994).

- Is a triangle, as opposed to a straight line, which allows for reconfiguration and shape-shifting of tension, rather than re-distribution (as is the case in complementary relationships; Aron, 2006).
- Is contingent on recognition and acknowledgement (Benjamin, 2017).
- Has clinical utility (Benjamin, 2017; Ogden, 1994).

Once grounded in an understanding of intersubjectivity and the Third, it can be expanded and applied to understanding the functioning of systems larger than just the dyad. The next chapter helps us consider how we may apply psychoanalytic concepts to sociopolitical factors.

Detailed Chapter Outlines

Introduction

(See sample chapter)

Chapter One: Intersubjectivity and the Analytic Third: From One Person to Two

(See sample chapter)

Chapter Two: Intersubjectivity Expanded: Psychoanalytic Concepts on a Societal Level

Although the concept of intersubjectivity applies to intrapersonal and dyadic dynamics, the concept extends even further, as it “transcends the disciplinary boundaries” (Benjamin, 2017, p. 1). Thus, we can consider how intersubjectivity occurs in many disciplines, systems, and contexts, and we can apply it to every level of system. Jessica Benjamin is not the only psychoanalytic thinker to extend psychoanalytic concepts to larger systems-level thinking—Christopher Bollas, Lynne Layton, and many others have done this, too. Although their work began prior to the COVID-19 pandemic, many of their theories became more applicable and poignant during the pandemic, as the topics of race and politics further divided the United States. This was, and continues to be, a time that highlights how the concepts of dissociation, splitting,

terror, and trauma can help us better understand how groups and systems function. In this chapter, I review how these psychoanalytic concepts are applied to sociopolitical factors to help the reader become more fluid when applying concepts that were first created with the dyad in mind to a larger, societal, scale.

I. From one mind to a society: theories of intertwined relationships

- A. Lynne Layton (2020), a psychoanalyst and psychologist, is a proponent of her theory of *social psychoanalysis*, which attempts to “deconstruct the notion of the field’s separation of the psychic and social (p. xi).
- B. Hopper (1996, 2003) feels similarly. When he attempted to solve “which came first,” the mind or society, Hopper (2003) highlighted the indelible role of society on our minds: “Psychic facts are preceded by both social and organismic facts” (p. 21). He continued by noting: “Although social facts are completely intertwined with psychic facts, we need to examine the relationships among these realms or levels or components of human reality, and not mix them together” (Hopper, 2003, p. 21).
- C. Christopher Bollas (2018) utilized a metaphor of the mind as a democracy: “the concept of democracy was as applicable to our internal world as it was to conflicts amongst groups and nations” (p. 87). We have internal processes that are stabilizing and democratic and also “totalitarian, oligarchic, and monarchical tendencies” (Bollas, 2018, p. 89).
- D. Bollas’ (2021) quote, “An unregulated country is the wish of the unregulated self,” helps us consider parallels between intrapsychic factors and societal factors.

II. Splitting on a societal level

- A. Bollas (2018) cited the Vietnam War era as a time of “fissure in American identity that has never been healed” (p. 37). “The nation would be forever divided between those who believed in the war and those who refused to take part” (Bollas, 2018, p. 37).
- B. Bollas described further divide in the U.S.: “The split between the ideal America and the paranoid America, between a country of promise and a country of profound prejudice” (Bollas, 2018, p. 34; Bollas, 2021).
- C. Layton (2020) described that “culturally sanctioned recognition” (p. xxxii) can take the form of social approval and love, which can create conditions for exclusion and oppression, two splitting functions. This dictates norms and who should be accepted, which exacerbates society-level splitting and propels dissociation since the “human needs, capacities, and longing” do not disappear, but rather are split away from. This form of “culturally sanctioned recognition” is quite different from Benjamin’s concept of recognition; in Benjamin’s conceptualization, nothing is pre-ordained or sanctioned and the power of true recognition lies in authentically viewing the other as they are, differentiated and different, not as they “should be” to fit into a norm.
- D. Society-level splitting occurs because of *normative unconscious processes* (Layton, 2020), which are unequal power arrangements and dominant ideologies that split and differentially value straight from gay, rich from poor, masculine from feminine, white from black and brown” (Layton, 2020, p. xxxii). Normative unconscious processes are implemented and relied upon and propel racism and oppression, which widens societal splits and divides.

- E. In the pandemic, most were able to continue some level of their daily functioning by “splitting off and denying the possibility of illness and death” (Nicolò, 2021, p. 4), thus creating entire populations of people dissociated from a shared reality.

III. “Borderline Culture”

A. Layton

1. “There’s something borderline about American culture” (Layton, 2020, p. 6).
2. In the U.S., it is one extreme or the other.
3. “A false sense of being free masks a violent suppression of freedom”
(Layton, 2020, p. 7).

B. Bollas

1. Bollas (2018) described that in an individual, a borderline personality lacks a “connection between thought and feeling” (p. 32) and swings back and forth between positive and negative feelings for the same object.
2. On a society-level, the U.S. did this after the Vietnam War when it “idealized itself as the liberator of the free world whilst at the same time sustaining its war machine for the series of conflicts to follow” (Bollas, 2018, p. 33). Just as the borderline individual remains unsettled and involved in continuous conflict, the U.S. does this as well, by considering itself a peaceful country while continuously preparing for and engaging in war.

IV. Psychosis and psychotic group processes

- A. In individuals, psychotic process is a result of different parts of the mind that are conflicting. On a group level, complexity is not tolerated and the people who could mediate differences are expelled (Bollas, 2021, p. 7).

- B. Members can remain calm when their groups' ideology contains psychotic group think; this helps to explain how groups function when based on extreme ideology (Bollas, 2021).

V. Trauma: Widespread effects on a shared, large-scale

- A. Trauma represents a closing up of the mind's capacity for symbolization" (Rocha Barros & Rocha Barros, 2021, p. 78). This is yet another way that imagination and free association are compromised; on a large level, this can shut down a society, leaving little room for play, ingenuity, and a sense of freedom.
- B. "A trauma can become a whole system, a whole way of being and functioning" (Rocha Barros & Rocha Barros, 2021, p. 79).
- C. Vamik Volkan, MD, psychoanalyst, and Emeritus President of the International Dialogue Initiative, which facilitates unofficial inter-group conversations: "When there is a new shared trauma, old shared traumas, especially those at the hand of the Other are recalled" (Volkan, 2021).
- D. Adrienne Harris, a psychoanalyst and psychologist who writes about the intersection of psychoanalysis and sociopolitical factors, reflected on the shared traumas of PA/PD practitioner and patient during the COVID-19 pandemic, specifically, the "evolving social crises around case, race and racism ...[which] must have impact on the functioning of the frame in treatment situations" (Harris, 2021).
- E. COVID-19 as a trauma that has affected many individuals: "perhaps the pandemic might help psychoanalysis to rethink certain aspects of its conceptual toolkit" (Rocha Barros & Rocha Barros, 2021, p. 78).

Chapter Three: How Race, Politics, the COVID-19 Pandemic, and Telehealth Affect the Intersubjective Experience

The events of 2020—an especially contentious presidential race including a neofascist candidate, the murder of George Floyd, and the COVID-19 pandemic—brought psychoanalytic (PA) and psychodynamic (PD) practitioners and patients together in a shared experience of deeply disturbing sociopolitical factors. These events tested PA and PD practitioners in other ways, too, as they had to pivot and adapt to telehealth quickly. As unfortunate and distressing as this time was, these practitioners met the challenge of responding to this unexpected time, modifying their practices, and remaining relevant, all while maintaining their PA/PD frame as best as possible (as will be demonstrated in this chapter). As the PA/PD field struggles to maintain relevancy in a broader system that privileges symptom alleviation and brief treatment, psychoanalytic practitioners adapted during the COVID-19, demonstrating that responsiveness and flexibility is, indeed, possible in the field.

The COVID-19 Pandemic

Introduction

On the heels of the end of the first World War, in 1917, Freud reflected he had “worked hard, [was] worn out, and [was] beginning to find the world repulsively disgusting” (Freud, 1917, p. 249, as cited in Kahr 2021, p. 49). As downtrodden as Freud felt in that moment, he had no sense of what was to come just one year later—the “Spanish Flu” (also more correctly known as “The 1918 flu pandemic”). The 1918 flu pandemic heavily impacted Freud in many ways. He lost patients, experienced food rationing, and ultimately lost his beloved pregnant daughter, Sophie (Kahr, 2021).

Many of Freud's letters around this time have been recorded. In 1920, after Sophie's death, Freud wrote to Oskar Pfister: "The undisguised brutality of our time is weighing heavily on us"; "I work as much as I can, and am thankful for the diversion;" "The loss of a child seems to be a serious narcissistic injury; what is known as mourning will probably follow later." One month later, Freud wrote to Ferenczi, "Deep down I sense a bitter, irreparable narcissistic injury. My wife and Annerl are profoundly affected in a more human way" (Kahr, 2021, p. 64). Freud's intense awareness of death prompted him to consider the inverse of the pleasure principle—the death drive, destruction, and aggression—in "Beyond the Pleasure Principle" (Kahr, 2021).

This history sets the scene for our current COVID-19 pandemic, which is eerily similar to that of Freud's time. In each, the unexpected occurred as a tragically high death toll accumulated. Lawfulness and the moral Third—in Benjamin's (2021) sense—dissolved for even the most privileged (though to a lesser extent) while trust and safety on a broad, societal level faded. Just as Freud was impacted in the 1918 flu pandemic, many psychoanalytic practitioners, along with their patients, experienced the negative effects of the COVID-19 pandemic. In this chapter, I explore how the COVID-19 pandemic affected psychoanalytic practitioners, their patients, and the co-created intersubjective experience.

I. Effects of the pandemic

A. Terror, danger, and vulnerability

1. COVID-19 has become a "manifest representation" and a magnetic pull on [patients'] diffuse terrors" (Rocha Barros & Rocha Barros, 2021, p. 72).
2. The pandemic has also "imposed on the mind a continuous sense of danger and vulnerability" (Rocha Barros & Rocha Barros, 2021, p. 66).

B. Patient and practitioner's shared and similar experience. Accounts of this are too many to name. Below is a sample.

1. The PA/PD dyad is no longer quarantined from the outside world (Bland et al., 2021).
2. What is happening to us is happening to our patients, we are "caught in the traumatic real, what is happening to our patients is happening to us in real time" (Bland et al., 2021, p. 264).
3. Weird and unfamiliar time, where both the PA/PD practitioner and the patient are experiencing the previously unexperienced (Bland et al., 2021; Gentile, 2020).
4. "Shared affect and common threat" (Chervet, 2021, p. 48).
5. Leveraging the shared experience: Short term therapy was offered by a group of Italian psychoanalysts who found that therapy was successful because they were "sharing a problem because of the pandemic" (Nicolò, 2021, p. 6).

C. Intrapyschic effects of the pandemic

1. Capacity for reverie was inhibited by a "constant barrage of bad news" (de Staal, 2021, p. 121).
2. Fear of death, terror (Rocha Barros & Rocha Barros, 2021).

D. Effects on Intersubjectivity

1. Sessions were "transformed into mundane conversations" (Chervet, 2021, p. 41).
2. "Concreteness and symbolic impoverishment." Therapy was "reduced to a roll call of complaints" (Rocha Barros & Rocha Barros, 2021, p. 68).

II. Psychoanalytic practitioners' role as witnesses

A. Examples and description

1. Gerson (2009) described witnessing as one who can “exist between the scream and the silence” (p. 1342) and “cares to listen ... contain ... and imagine the unbearable,” a process that holds patients and their experiences while inviting the integration of parts otherwise dissociated (Bromberg, 2014). This active and attuned witnessing constitutes a “live third” for Gerson, as opposed to a “dead third,” when there is no external presence, or subjectivity, to contain and make meaning of the trauma.
2. Latin American psychoanalytic activists recalled how they witnessed sociopolitical atrocities in the 70s. As they lived through authoritarian regimes themselves, they continued to meet with their patients and collected multitudes of accounts that were subsequently presented to the United Nations in a world-wide plea for help (Hollander, 2019).

B. In the pandemic

1. Seligman (2021) reflected that at times during the pandemic, the most he could do was witness his patients’ struggles, which affected him differently because he was experiencing them, too. In these moments when he responded more from a place of identification, he felt more like a “fellow traveler,” which his patients reported helped them feel “heard and relieved” (Seligman, 2021, p. 121).

III. Hope and new possibility

- A. “Rebirth born of breakdown” (Gentile, 2020, p. 657). New instabilities mark the opening of ourselves ... and their potential for cataclysmic transformation” (Gentile, 2020, p. 663).
- B. What could come from this time of “breakdown?”
 1. Community psychoanalysis (Gentile, 2020, p. 3).

2. Social psychoanalysis (Layton, 2020).
3. “The social vocation of psychoanalysis” (Nicolò, 2021, p. 209).

IV. Conclusion: How to restore lawfulness and the moral third (Benjamin, 2021) during and after the pandemic?

- A. Although we may feel we are facing the same circumstances as our patients (Seligman, 2021), we must remember that our privileges and subjectivities may still be different (Benjamin, 2021).
- B. We create a “live third” (Gerson, 2009) when we witness and actively aid in integration and meaning making.
- C. How can psychoanalytic practitioners in the United States play a role in collective healing as they witness individual accounts?
 1. Psychoanalytic practitioners everywhere could take inspiration from a group of 350 Italian psychoanalysts who offered short-term (one to four sessions) psychotherapy at the beginning of the pandemic, in addition to creating an emergency helpline (Nicolò, 2021). They cited that their shared experience with their patients, many of whom they would not have ever met with a psychoanalyst in any other situation, were effective. This group of Italian psychoanalysts suggested that serving a “panorama of people” may be “a new frontier of psychoanalytic work, work on the periphery, on the margins of classical technique” (Nicolò, 2021, p. 213).
 2. Psychoanalytic practitioners can leverage their power to propel collective witnessing, reparation, and acknowledgement.

Race

In the summer of 2020, the murder of George Floyd, and many other race-based homicides, sparked nation-wide protests against police brutality, oppression, racism, and state-sanctioned racial violence in the U.S. The pandemic had already highlighted systemic oppression and inequities in the country; efforts of public reckoning racial injustice intensified the already heightened atmosphere. Dr. Thema Bryant-Davis, 2023 APA president and Black psychologist, reminded us that “justice is therapeutic” (2021), an adage that falls in line with Benjamin’s (2017) concepts of the moral and social Third. Beverly Stoute’s (2021) exploration of “Black rage,” aligns with this as well, as she posits that Black rage is an adaptive response to the moral injury of racial trauma. Thus, this chapter explores how race and racism, in all its forms, affect the intersubjective psychoanalytic experience.

I. The mechanics of racism (in psychoanalytic terms)

A. Lynne Layton, Layton (2020): champion of *social psychoanalysis*, which attempts to “challenge and deconstruct the notion of the field’s separation of the psychic and the social” (p. xI), created the following terms and concepts to understand racism.

- a. *Normative unconscious processes*: “the lived effects on the identity formation of unequal power arrangements and dominant ideologies that split and differentially value straight from gay, rich from poor, masculine from feminine, white from black and brown” (Layton, 2020, p. xxxii).
- b. *Culturally sanctioned recognition*, a different type of recognition from Benjamin’s. Culturally sanctioned recognition takes the form of social approval, love, and conditions for social belonging. Culturally sanctioned recognition grants recognition to “proper performances of identity” (Layton, 2020, p. xxxiii), which

include those who “fit,” and exclude those who do not fulfill conditions for “belonging.”

- i. Recognition on a societal level can dictate norms and who should be accepted, exacerbating splitting and propelling dissociation (Layton, 2020).
- ii. Layton (2020) states, “what gets split off in normative unconscious processes are human needs, capacities, and longing, [which] do not disappear” (p. xxxiii). This is recognition with a filter, not truly seeing the individual for who they are, but rather placing people into groups based on level of belongingness.
- c. *Delinking*: an unconscious pull to dissociate individuals from their social context (Layton, 2020, p. 35). An example of this is the capitalism of the mid-1900s that encourages “extreme individualism and denies connections of all kinds” (Layton, 2020, p. 35).

B. Blechner’s (2020) views on categorizing

1. Blechner (2020) wondered whether racism could be rooted in the human pattern of categorizing people into groups with a hierarchical view that assumes superiority of some groups over others. Thus, he described the “drive to valorize the self and subjugate others is a ubiquitous human tendency” (p. 246), while noting that subjugated groups often subjugate others, too.

C. Pratyusha Tummala-Narra (2020), an Indian American immigrant psychoanalyst and psychologist, has extensively explored xenophobia and “the fear of immigrants.”

1. “Dissociative defenses maintain emotional distance and identification with groups perceived to be threatening” (Tummala-Narra, 2020, p. 50).
2. “Fantasies of immigrants and immigration contain both a wish for postracial inclusiveness and a longing for White power” (Tummala-Narra, 2020, p. 52).
3. Othering grants the individual permission to oppress.

II. Racism in the field of psychoanalysis: Woven into its fabric

- A. Blechner (2020), psychoanalyst and psychologist, calls for greater examination of how racism may be “perhaps unconsciously imprinted on its theories and practices” (p. 252). Blechner (2020) cited examples of “unabashed racism” in psychoanalytic literature, theory, diagnosis, and practice (p. 250; e.g., Black Americans diagnosed with schizophrenia three times as often as White Americans).

III. Recommendations for remediating racism in the PA/PD community

1. Dialogue and challenge beliefs to enact change on a systems-level
2. Actively and intentionally reconcile unconscious beliefs and stated policies (Blechner, 2020; Chan, 2020); develop sensitivity to, and awareness of, cultural differences and biases (Yi, 2014).
3. Layton (2020) offered one practical way to deconstruct racism by encouraging “re-linking” of the social and the psychic by articulating our normative unconscious processes and “account for the way that dominant ideologies express themselves” (p. 32). This will facilitate a clinical dialogue that “resists conformity” and “creates subjects who are able to link their experience to their social world and enact a mutuality not just in the private but in the public sphere” (p. 32).
4. Maintain an open mind, which is essential for true dialogue and curiosity

- a. Yuen Chan (2020), a bi-racial social worker and candidate in psychoanalysis, offered a strong caution against a “moral split between racist or woke” (p. 316).
 - b. Chan (2020) reflected that she believes and “idealizes” free speech and “privileges freedom of thought” (p. 18), noting the emphasis in psychoanalysis to “hold tension between understanding commonality and difference, between merger and separation, between individuation and attachment” (p. 25).
 - c. However, she (2020) experienced “aggressively deployed diversity initiatives intended to increase openness and inclusiveness ... as antithetical to the crucial value of critical listening ... which can unwittingly reaffirm a racist narrative and further entrench the division between races” (p. 305).
 - d. Chan (2020) continued: “The censorship of ideas is exactly the kind of resistance that woefully inhibits our freedom to think” (p. 319) as she described how a “totalitarian regime, albeit one paradoxically born out of the ideals of tolerance and inclusion” (p. 320) could occur when dissenting views and critical thought are not tolerated at the highest academic level.
5. Administrative changes
- a. Diversifying the field: Action taken and action needed
 - i. The 2023 Holmes Commission on Racial Equality in American Psychoanalysis was a study created to determine the extent of systemic racism in the practices of psychoanalytic institutions. Among many compelling results, this study highlighted the need for those in power in institutes to become more comfortable and adroit when noticing and addressing practices of racism and White supremacy. The Commission

also found that candidates of psychoanalysis and psychoanalysts of color do not feel their psychoanalytic institutes are “proactive enough in addressing issues of race” (Holmes et al., 2023, p. 9).

- ii. The 2021 Psychoanalytic and Psychodynamic Practitioner’s Survey also demonstrated the need for greater accessibility within the field (Moussa, 2023). The PA and PD specialty and subspecialties that were created as a result of this survey should be one step in opening up the field for PA/PD practitioners who might not otherwise have the resources to attend a psychoanalytic institute (Moussa, 2023).
- c. Institutes must recognize that their “theory has, by default, been about analyzing Whites. That means we have been teaching candidates how to analyze Whites” (Rosenberg, 2022, p. 37).
- d. Encourage higher numbers of people of color to be psychoanalytically trained, offer financial aid when needed, and ensure promotions for people of color to leadership roles (Blechner, 2020).
- e. This recommendation is not as simple as it sounds, however—as Rosenberg (2022) reminds us: “growing numbers of analysts and analytic candidates of color do not guarantee inclusiveness” (p. 35).
- f. Actively encourage greater proportion of articles and books written by people of color and create more conferences that consider race and racism (Blechner, 2020).

- g. Psychoanalytic institutes “need to look at how to make our curricula, reading lists, classroom experiences, and continuing education and scientific programs more inclusive (Rosenberg, 2022, p. 37).
 - h. Disrupt status quo: During the second “Black Psychoanalyst Speak” conference in 2013, Jama Adams, a Black psychoanalyst noted that psychoanalytic institutes must train psychoanalytic practitioners who will “challenge the status quo..and be disruptive” rather than recruit Black psychoanalytic candidates who “don’t rock the boat” (del Valle Schorske, 2014, p. 49).
2. Increase recognition vis- à-vis dialogue and true listening: “Radical openness rather than didactic ‘difference training” (Blechner, 2020; Hart, 2020).
 3. Gaztambide (2012) emphasized the power of recognition and true dialogue. He described that psychologists must work with an *ethic of flexibility*, which is inspired by Freud and Ferenczi’s demonstrated “responsiveness” (p. 161) in offering “flexible” therapy that is suitable and adapted for various populations and conditions. To do this, psychoanalytic practitioners are encouraged to heed Freud’s (1919) guidance by “alloying” (Freud, 1919) psychoanalytic-oriented clinical work with psychoeducation, short-term dynamic work, and connection to supportive community resources. Gaztambide (2012) emphasized how crucial it is for the psychoanalytic practitioner to analyze their own power, positionality, and biases as they engage in providing services with an adaptive, *ethic of flexibility*.
 4. Change in ethos on a system-level
 - a. Risk disorientation for a new, better, ultimate outcome: Kimberlyn Leary (2012), a psychoanalyst and person of color, reminded us that those in the field must

undergo a “true reckoning ... [that may] leave us feeling a bit unfamiliar to ourselves,” since “substantive change always requires us to renegotiate our loyalties, to re-find ourselves” (p. 290). In this way, Leary (2012) views reckoning racial issues as an *adaptive challenge*: when there is a dissonance between “bold aspiration and challenging realities” (p. 284). In these moments of misalignment between goals and the current moment, individuals have to alter their “priorities, beliefs, habits, and loyalties” (Leary, 2012, p. 284) in order to adapt, or reconcile the dissonance.

- b. “If there is any point that Black Lives Matter insists upon, it is this: We cannot return to a harmony that never was, to the fantasy of a cohesive, unified society” (Gentile, 2020, p. 13).
- c. Diminish silence: Psychoanalytic practitioners must remember that “the most common racial enactment has been our relative silence about racial issues” (Leary, 2000, p. 647), thus these topics must not be avoided, however sensitive they may be.
- d. Diversify the field: Salvo Crane, a liberation psychologist who is psychoanalytically informed, attempted to “locate [herself] in the analytic literature” (Salvo Crane, 2020, p. 1127), as a multiracial Asian American “mixt” female who represents the intersection of many identities. As she struggled to identify with others in the field, she emphasized de-centering Whiteness in psychoanalysis and decentering “psychoanalysis to make way for reality” (Salvo Crane, 2020, p. 128).
- e. Reconceive psychoanalytic institutes

- i. Jill Gentile (2020) recommends that primarily White psychoanalytic institutes “reckon with anti-blackness.”

We must enable a radically inclusive and egalitarian public sphere, which means further reckonings with privilege and loss, and the redistribution of protection, precarity, and possibility. And with our *anti-blackness*. We can foster the emergence of immanent third spaces and thereby of desire, in all its errancy, queerness, and incoherent contradiction. (p. 661)

- ii. Alternatively, more psychoanalytic training institutes consisting only of psychoanalysts and candidates of color could become established. In a Division 39 Section 9 listserve post, a psychoanalyst of color described the offerings of the newly created Asian-American Center for Psychoanalysis:

It is so important to have a ‘BIPOC only space for twinship, connection and community outside of the white gaze. When we enter a field like ours, it feels lonely and isolating when we are ‘the only one’ who is not white or does not identify as white. (Echegoyén, personal communication, May 18, 2023)

- f. Some psychoanalytic practitioners of color choose to only supervise and teach to clinicians of color—an experience described as “profound, liberating, and community building” (Echegoyén, personal communication, May 18, 2023).
- g. Reorganize the idea of resistance: Salvo Crane (2020), highlighted a major distinction between liberation psychology and psychoanalysis’ conceptualizations of resistance: from a psychoanalytic perspective, resistance is pathological,

however, from a liberatory psychology stance, resistance is “life-affirming and necessary to survive” (p. 131).

V. Clinical Implications

A. For inter-race dyads

1. Psychoanalytic practitioner’s ambivalence: Tummala-Narra (2020), an Indian-American psychoanalyst described sitting with her ambivalence as she worked with a patient who had survived an abusive childhood and wished to “secure power [by] projecting internalized aggression toward immigrants and people of color” (p. 57).
2. Speak the unsaid: Kimberlyn Leary depicted her experience with a White patient, who, through a variety of enactments, came to engage in “forbidden talk” with Leary about their differences in race and Leary’s personal life as it pertained to race. This process allowed Leary’s patient to be more open about other topics that had previously been “forbidden” for her. (Leary, 1997).

B. Differences within same-race dyads

1. Caste: Tummala-Narra (2020) demonstrated working across the differences between those from the same culture. She wrote of an Indian client who often explored the caste system in sessions, which Tummala-Narra “has gradually come to despise” (p. 58). Tummala-Narra (2020) felt “uncomfortable” (p. 58) with these conversations and decided to initiate exploration of how it felt to talk about caste, which prompted a fruitful conversation about how the patient imagined Tummala-Narra’s views on caste, self-disclosure of caste background, and how it is to have a therapist of a lower caste.

2. Kimberlyn Leary (2000) considered how skin tone can represent difference and spur transference/countertransference. Leary, a Black woman with lighter skin navigated these dynamics, which manifested as a variety of enactments with a patient who, in many ways, expressed curiosity and mistrust in Leary when they wondered, if Leary was “really black” (2000, p. 645).

C. Toward repair and reconciliation

1. Authentic engagement with realities of those who are marginalized and oppressed offers “movement toward social justice in our profession. (Tummala-Narra, 2020, p. 740).
2. Psychotherapy can be a “potential space in which such repair can progress” provided that it occurs within a greater context of national and global reconciled injustice (Tummala-Narra, 2020).

VI. Conclusion: This section emphasized the idea of *recognition*, which was used in Benjamin’s sense, as well as Layton’s. Layton’s version of the term recognition focused more on how it can create in-groups, whereas for Benjamin, it is a tool to break barriers, rather than fortify them. Dialogue and maintaining an open mind were also strong, recurring themes, which writers emphasized could break down barriers and facilitate recognition (in Benjamin’s sense). There is no system that is without racism, including the field of PA/PD psychology. If psychoanalytic practitioners want to prove the flexibility and relevance of their work, they must acknowledge, in Benjamin’s (2017) terms its racist foundations and facilitate access and participation for people of color in the field, thus restoring lawfulness and a moral third (Benjamin, 2017).

Politics

During contentious, or even dangerous and neofascist, political times, many questions arise around psychoanalytic practitioners' silence and neutrality—when does *not* disclosing political stance and leanings become harmful for clients? To what extent should a social justice perspective guide psychoanalytic practitioners' clinical work? How might the intersubjective experience shift as both therapist and patient navigate divisive and unsafe political climates, including, for example, the fallout from Donald Trump's 2020 failed re-election bid, extreme polarization of political parties, the overturning of *Roe v. Wade*, and anti-trans legislation. In this section, I explore how political issues affect the intersubjective experience by examining topics such as non-disclosure and the decision to discuss political topics.

- I. Psychoanalytic/psychodynamic seclusion: Is it even possible, especially in tumultuous political times?
 - A. Sameness and asymmetry in the dyad
 1. Seligman (2021) wondered if maintaining asymmetry should even be the goal when collective socio-political suffering arises, noting that asymmetry can be “less desirable” when psychoanalytic practitioner and patient experience similar “pressing concerns” (p. 120).
 2. Philipson (2018) noted a marked shift from their own asymmetrical psychoanalytic relationships toward a more symmetrical, participant-participant configuration since Trump's election.
 3. Seligman (2021) expressed feeling “compelled to speak as a fellow citizen,” which has prompted him to respond more as a “comrade or fellow traveler.” In these instances, his patients noted they “feel relieved to be heard” (p. 121).

B. Politics in PA/PD treatment

1. Politics can create in/out groups. In a discussion with psychoanalysts Neil Altman, Jessica Benjamin, Paul Wachtel, and Theodore Jacobs, Benjamin described how politics can become a metaphor for the “personal issue of being an outsider” (Altman et al., 2004, p. 33), especially when patients and psychoanalytic practitioners are aligned in their political views. In these moments, the practitioner becomes someone who holds a similar perspective as the patient in a context where the majority of others have a different perspective; thus, the psychoanalytic practitioner and patient become outsiders together.
2. Include exploration of political themes. Although Seligman (2021) is “reluctant to misuse [his] analyst role to pursue a partisan agenda,” he believes it would be helpful to understand political emotions, which “have their own roots, their own history, their own power” (p. 122).
3. On countertransference: Seligman (2021) noted multiple times that he brought his own political views into the room with patients with whom he did not agree. Seligman reflected that in these moments of “political countertransference,” he feels “more uncertain, powerless, irritated, and even scared” (p. 121).
4. Political issues can emerge unintentionally. Even when we try to seclude our political leanings, they emerge. Kimberlyn Leary (2012), a Black psychoanalyst, wrote of meeting with an African American client the day after Barack Obama was elected. The “shared sense of jubilation ... was clearly an enactment and revealed a good deal about my own politics and my own racial identifications.” Leary’s (2012) client

looked to her posture and microexpressions, in hopes of understanding whether “Obama’s victory might have changed everything” for her (p. 289).

II. Conclusion

A. Neutrality and disclosure may affect the intersubjective experience: perhaps, even in the most stable sociopolitical circumstances, true neutrality is impossible, as our offices, speech and ways of being instantaneously disclose many of our identities and stances (Leary, 2012).

B. PA/PD practitioners’ roles may shapeshift, from neutral to activist.

1. PA/PD practitioner’s role

a. We can no longer parse the intra and interpsychic, and excluding politics from the therapy frame is an enactment of politics in of itself (Layton, 2020, p 269).

b. In addition to supporting our patients, our activism may also help us metabolize and engage in the unrest and injustices that surround us (Hollander, 2019).

c. The extent to which this stance is assumed will be up to the individual therapist. And, the degree to which we overtly support our clients and share our stories may be different in different political times.

d. Precautions

- i. In a bid for self-care, especially, when the “violence of the world enters the clinic,” Adrienne Harris (2021) reminds us of the importance of being attentive to the “pull for extreme service” (p. 10), for it can be easy for therapists to put themselves second or wish to provide a “cure all.”
- ii. Harris’ (2021) question, “when can we attend to our own internal terrors?” (p. 16) is apt as practitioners attend to their own internal terrors in a multitude of

ways, including through personal activism and advocacy, while offering treatment to others.

Telehealth

What is a screen? Prior to the pandemic, screens were most often associated with scrolling on smartphones, word-processing, watching television and movies, and playing games. However, now, with an increase in telehealth, patients and psychoanalytic practitioners alike, have become actors on the stages of screens (Frisch, 2021; Harris, 2021). It is not just the increasing amount of therapy hours provided over telehealth, but how telehealth has affecting the functioning of the dyad that has become “intersubjectively exhausting” (M. Straus, personal communication, May 28, 2023). If we consider that the frame of the screen has become a third (in Ogden’s sense), how are clinical work and the intersubjective experience affected (Essig & Russell, 2021; de Staal, 2021)? And, what does it mean for our minds if we consider the frame “as a metaphor for the psychic setting,” (p. xx) as de Staal and Levine (2021) suggest?

The COVID-19 pandemic ushered in an abrupt switch to telehealth for therapists. Todd Essig, renowned psychologist, researcher of “screen relations,” and proponent of in-person, “embodied” therapy, reminded us that the switch to telehealth was out of our control: “we had no choice” (Essig & Russell, 2021, p. 161). We did not have time to “mourn the lost choreography of in-person work” (Essig & Russell, 2021, p. 161) and continue still to conduct teletherapy. Many questions remain: Does the screen inhibit or free? Is it better than nothing or simply better? Answers to these questions, and more, are complex and seldom attain expert consensus.

I. Essentials of telepresence per Todd Essig (Essig & Russell, 2021)

- A. Timing: just as infant studies have demonstrated, timing is essential to connecting. In fact, it is even more crucial than an abundance of content from the other (Essig & Russell, 2021).
- B. “A waltz between two fundamentally incompatible positions,” true telepresence requires the “balancing of an internal paradox” of the intention to “fully commit to the illusion of non-mediation” while being “thoroughly immersed” in the technology (Essig & Russell, 2021, p. 165).
- C. Telepresence is delicate and precarious. Many factors can threaten it, such as glitches, freezes, vocal delays, pixilation, dropped connections, interruptions, distractions, and a lack of privacy.

II. Factors and considerations of telehealth

A. Frame

- 1. Unsatisfied with his patients’ capacity to set their frame (e.g., by changing locations in their house, attending session in their pajamas, and often arriving to video session late), Serge Frisch (2021), a psychoanalyst from Luxembourg, switched from meeting over screens to the telephone, which he noted, all of his clients preferred.
- 2. Antonino Ferro’s (2021) patients, on the other hand, had no problem adapting to online therapy and arranged a couch at home that replicated the office setting.
- 3. Essig and colleagues (2020) created guidelines for patients to follow, which help set the frame. These include ensuring privacy, arriving on time and dressing similarly to in-person session, turning off other notifications from electronics, etc.

B. Increased freedom and play, or more anxiety?

1. Ferro (2021) described an increased capacity in himself to be with and better tolerate what Keats referred to as negative capability, or, “being in uncertainties, mysteries, doubts, without any irritable reaching after fact and reason” (Keats, 1818, p. 277, as cited in Ferro, 2021). In his own physical, and feeling less “burdened” (p. 100) by institutions, Ferro unexpectedly found a greater capacity for playfulness and freedom.
2. Many others, however, cited an increase in anxiety when therapy shifted to online.
 - a. Anxiety about losing connection over the internet (Bland et al., 2021).
 - b. Pauses in therapy no longer reflective, but moments for worry about lost internet connection (Bland et al., 2021).
 - c. Unlike Ferro, who experienced greater sense of freedom and play, for many others, working remotely invited a more concrete intersubjective experience, as transitional space for reverie vanished (Weinstein, 2021, as cited in Trub & Magaldi, 2022).

C. Gaze

1. Hart reminded us that Lacan thought “both the gaze and the voice should be considered erogenous and ... invocatory” (Lacan, 1977, p. 107 as cited in Hart, 2021); each may be “lost or impaired by the coding and decoding through microphones and computers” (p. 108), which smooths our appearance and voice so we do not look or sound exactly as we are.
2. Lissa Weinstein (2021) noted that she feels rude if she looks away when in a video session, and that this makes it harder to “hear her own thoughts” and access internal experiences that allow her to connect with her patient’s affective experience (p. 111).

D. The intersubjective experience in telehealth

1. Shared trauma increased presence, at times, and was crippling at other times (Bland et al., 2021; Nicolò, 2021).
2. Meeting over telehealth challenged empathic attunement (Bland et al., 2021).
3. Videoconferencing may cloud mirror neurons, which may affect empathy and make it harder to have empathic reactions (Brooks, 2022).

E. Embodiment, presence, and illusion

1. “Intersubjective experiences and empathic engagement become more difficult with the absence of intercorporeality” (Essig & Russell, 2021, p. 169). This reminds us that intersubjectivity may be richest when all parties are fully embodied. Hart (2021) agreed with this: “It does seem clear that for at least some analytic dyads, even though theirs is “a talking cure,” physically being together matters quite a lot” (p. 106).
2. Todd Essig (2015) challenges the idea that screen relations are disembodied, however, as they have their “own unique embodiment” and are “differently embodied” (p. 684).
3. David Lichtenstein (2021) noted that silence, in-person, is a crucial component of transference, however, when therapy is remote, it becomes much less clear and leaves the therapist and/or patient wondering if the other is “there.” Silence becomes an “artifact of the medium” (p. 107).
4. The “illusion of non-mediation” is necessary for true telepresence (Essig & Russell, 2021). This illusion occurs when the presence of the technology fades and focus is only on relational dynamics.

5. When remote, presence is an illusion (Hart, 2021), as both parties become “pixelated ... fragmented from our embodied selves into inanimate particles of light, conjoining in cyberspace (p. 105). When Hart (2021) responded to this momentary clarity, he felt disoriented; in a sense he experienced what he would refer to as “de-interpersonalization” (p. 105).

F. Intimacy: seeing patients in their “natural setting” (Wolson, 2021).

1. Odd new degrees of intimacy (seeing private space of practitioner and/or patient. There is the potential and the experience of alienation AND intimacy” (Harris, 2021, p. 370).
2. Essig and Russell (2021) posited that witnessing patients’ personal lives in new ways (e.g., being exposed to their kids, pets, and the patient’s home) may obscure patients’ “defenses and make it more difficult to access information about private (internal) spaces patients do not want us to see” (p. 168).

III. The telehealth debate

A. Drawbacks

1. Tardiness: more patients arriving late for sessions (de Staal, 2021; Frisch, 2021)
2. Memory changes
 - a. Essig and Russell (2021) drew on research that spatial locomotion and “mental travel of memory (past, present, and the capacity to imagine the future) [are supported by] the same neural systems” (p. 172). Thus, therapists and clients, alike, struggle to consolidate memory when they transition from one session to another without getting up from their desk, or when they no longer have a commute to and from the therapy office, respectively.

- b. 2D is less vivid than 3D, thus 2D is harder to remember (Essig & Russell, 2021)
- 3. Zoom fatigue (Essig & Russell, 2021)
 - a. Telepresence requires more concentration and attenuation to subtleties, which are exhausting.
 - b. Studies (from general psychology) have also shown that large heads can set off a fight/flight response.
 - c. In a meeting with many people, our attention is so distributed, it is as though we are multitasking, which research has demonstrated is not effective. On a screen with many windows that may be open and messages pinging in, it is often difficult for therapists and patients alike not to get distracted during a therapy session.

B. Benefits

- 1. Accessibility
 - a. Accessibility increased dramatically, which made therapy available to many people for whom therapy previously was not an option.
 - b. For many psychoanalytic practitioners in Europe, when borders closed (e.g., Luxembourg and Belgium) due to the pandemic, they were not able to enter the country where their analysis was; however, remote therapy allowed treatment to continue, not just in Europe (Frisch, 2021), but all over the world (Lichenstein, 2021).
- 2. Efficiency: Patients and therapists gained hours to their week since they did not commute (Essig & Russell, 2021; Ferro, 2021).

3. Improvement and modernization: In reference to many practices of psychoanalysis, which have “ossified” (Ferro, 2021, p. 101), Ferro (2021) emphasized the role that telehealth has played in evolving the field: “Thanks to this storm that has struck our world, we have now caught up to the modern world” (p. 102).

C. A Balanced approach

1. Screen relations *are* different; however, they are based on embodied, present, relationships—Essig (2015) reminded us that “being bodies together is still bedrock,” and “the new is built from the old,” with “these new, mediated experiences of self and others” (p. 682).
2. Essig (2015) reminds us to maintain a balanced perspective, cautioning us not to over or undervalue screen relations, since “something is gained and something is lost” (p. 689) with screen relations.
 - a. Simulation avoidance: “An immediate critical rejection of technologically-mediated relationship experience ... [because it is] ‘just not the same’” (p. 687).
 - b. Simulation entrapment: “forgetting that the simulation is not the actuality it is replicating and extending” (Essig, 2015, p. 689).

IV. Conclusion

- A. Trub and Magaldi (2022) suggest that there have been “insufficient opportunities to really think about the nuanced implications of technology in the consulting psychoanalytic room” (p. 257). How will this reflection occur? Just with time? Perhaps once we have moved further out of the pandemic, practitioners in the field will have more space an opportunity to execute a systemic review and reflection.

- B. Intersubjectivity is affected by telehealth, especially during the COVID-19 pandemic, when therapists relied heavily—or even exclusively—on telehealth.
- C. During this period, psychoanalytic practitioners were “both disaster victim and mental health responder (Essig & Russell, 2021, p. 157). As such, the pandemic has highlighted the need for intentional and consistent self-care (Essig & Russell, 2021), especially since studies have demonstrated the veracity of “Zoom fatigue,” which results from more intense, singular focus on a screen, with gazes (seemingly) locked, and closer attention required to determine and interpret nonverbal communication (Essig & Russell, 2021).
- D. After the pandemic: Looking toward the future
 1. Even before the pandemic, Essig and Russell (2017) warned of falling into the trap of telehealth shifting from “‘better than nothing’ to routinely good enough” (p. 131). This holds true more than ever now, after the pandemic, as so many providers have become used to providing telehealth services and some patients have come to prefer it.
 2. Embracing “a psychoanalysis that appreciates—celebrates even—differences between screen relations and being bodies together” (Essig & Russell, 2017, p. 132) will keep us from complacently favoring screen relations because they are “good enough.”
 3. In a 2023 interview (over Zoom) with PsiAN (Psychotherapy Action Network), Todd Essig considered the future of psychotherapy should it become increasingly automated. To this end, Essig warned viewers to stay aware and not “sleepwalk toward a future of artificial intimacy,” by expecting so little from each other that a machine can give us intimacy and closeness (Reynolds, 2023). Should this become

the reality, our capacity for recognition and a shared third (Benjamin, 2017) could very become jeopardized.

Chapter Four: Continuing and Expanding the Tradition of Engaged Psychoanalytic and Psychodynamic Practice

Recent current events demonstrate the need for PA and PD practitioners to adjust, update, and maintain relevancy while also maintaining fidelity to its theoretical frame. In addition to the topics covered so far (race, politics, the COVID-19 pandemic, and telehealth), many other sociopolitical issues may affect the intersubjective clinical experience and invite further psychoanalytic engagement.

I. For example, PA/PD practitioners are also proving responsive to:

1. Climate change

- a. In her book, *Environmental Melancholia*, Renee Lertzman (2015) described how deeply conflicted states between intolerable anxiety and “warded off wishes for agency and reparation” (Haseley, 2019, p. 109) create apathy. Lertzman (2015) also wondered if patients view climate change as an issue not meant for psychotherapy.
- b. Additionally, disavowal, negation, and/or denial contribute to apathy, feelings of helplessness, and “warded off wishes for agency and reparation” (Haseley, 2019, p. 109).
- c. Harold Searles, psychiatrist and psychoanalyst, wrote about this, too. In his 1972 article, he explored how unconscious processes, such as apathy, phallic and Oedipal processes affect humans’ relationship to the environment. In this article, Searles also highlighted the importance of the psychoanalytic practitioner’s role in

“provid[ing] our fellow men with some enlightenment in this common struggle” (p. 361)” since psychoanalytic practitioners’ knowledge of unconscious processes can “powerfully influence” (p. 361) humans’ behavior.

2. Houselessness

- a. Deborah Ann Luepnitz, a psychoanalyst and psychologist in Philadelphia, PA, began a program for the homeless in Philadelphia called Insight for All (IFA). Her work, inspired by Freud’s free clinics (Danto, 2005; Freud, 1919), and Winnicott (e.g., holding environment, transitional objects, fear of breakdown), provides psychoanalysis by meeting patients on the street, in homeless shelters, and in floating offices that move around the city (Luepnitz, 2015, 2020).

II. Although these examples may seem radical, sociopolitical responsiveness and engagement began with Freud and have persisted. Since the beginning, psychoanalytic practitioners have functioned as “social critics” (Altman et al., 2004, p. 35), and this continues today.

III. Psychoanalytic Activism in Latin America under oppressive political regimes

A. Brazil

1. Upon Bolsonaro’s election in Brazil, psychoanalysts extended their services to those most oppressed by Bolsonaro’s “ignorant, racist, misogynist, and bellicose far right” (p. 118) political regime (de Staal, 2021).
2. These psychoanalysts modified the frame and “redesigned the setting” (p. 118) by offering walk-in consultations in informal, makeshift spaces that were free of charge.

B. Argentina: An exemplar of psychoanalytic activism (Hollander, 2019)

1. Psychoanalytic practitioners’ neutrality and non-disclosure became impractical and non-viable while living under an authoritarian regime and in a state of terror.

2. Political Context

- a. In the 1970s, an atmosphere of unpredictability and danger in Argentina prevailed as a total of 30,000 people (apolitical and “subversives,” which included psychologists) were randomly kidnapped, tortured, and ultimately, “disappeared” by armed forces and paramilitary organizations.
- b. This resulted in a culture of isolation, fear, paranoia, hypervigilance, inexpressiveness, inhibition, and self-censorship, which was present everywhere, including the therapy room.
- c. Defenses protected many and dissociation abounded as activists disavowed their political beliefs and identities. Identifying with the aggressor provided rationale (“they must have done something”) when neighbors and loved ones disappeared. “Healthy” mourning was impossible, resulting in “frozen grief” (Hollander, 2019, p. 40), and fantasies helped survivors imagine the disappeareds’ stories, which often resulted in obsessive rumination and anxiety. Free association “became untenable” (Hollander, 2019, p. 42).

3. Psychoanalytic activism in Argentina

- a. The military cited Freud as one of Argentina’s three enemies, which resulted in the torture and disappearance of many psychoanalysts during the military coup d’état (also known as the Argentine Revolution) from 1966-1973 in Argentina. (Hollander, 2019).
- b. Those who remained experienced a compromised and diminished capacity to listen and be present with their patients, as they would often associate to “their

own concerns, conflicts, and fears produced by the same conditions” (Hollander, 2019, p. 42).

- c. A sub-group of psychoanalysts broke from the International Psychoanalytic Association (IPA) to develop a “psychoanalytic praxis they considered to be more responsive to the psychosocial realities of Argentina” (Hollander, 2019, p. 41). This resulted in a group of dissident psychoanalysts who considered and addressed the “dialectical relationship between social and psychic reality” (Hollander, 2019, p. 42).
4. “Ethical non-neutrality”
- a. Psychoanalytic practitioners’ disclosure with patients of their opposition to military rule. Many patients could not participate in therapy without this. For others, this disclosure was fundamental to the working alliance and even therapeutic in and of itself.
 - i. Collaboration with human rights activists who were working with underserved communities, many of which were the communities of those who disappeared.
 - ii. Offered group therapy in oppressed communities that focused on frozen grief.
5. Activism was beneficial for patients and psychoanalytic practitioners alike.
- a. For many of the psychoanalytic practitioners whose own family members disappeared, assuming a psychoanalytic activist role allowed them to continue supporting others while recognizing their own grief and circumstances. Had they worked in a way that was split-off from their own experiences, they would not

have been able to be as authentic, present, or supportive as possible. Although working in an engaged and activist way was incredibly dangerous, these psychoanalytic activists were living in accordance to their commitment to human rights and their opposition to the military state, and thus, in accordance with their ego ideal (Hollander, 2019). They found strength in solidarity and were fueled by their active stance, which froze so many in fear.

6. Activism was beneficial for society as a whole, too: Global witnessing
 - a. Impunity caused a lack of witnessing on a social level, so psychoanalysts played a crucial role in individuals' metabolizing of these human rights atrocities, as psychoanalysts witnessed and validated that the experience was real (Hollander, 2019). This was similar to Benjamin's concept of acknowledgement and how it can be a reparative act (Benjamin, 2021).
 - b. Psychoanalytic activists realized that they were collecting and witnessing multitudes of stories, so psychoanalysts mobilized to apprise the world of the regime's atrocities by sending testimonials to international human rights organizations and to the United Nations.
 - c. The benefit of this political act was twofold, as it exposed the dictatorship and was therapeutic, too (Hollander, 2019).

IV. An alternative, non-relational perspective

- A. In a letter to the San Francisco Center for Psychoanalysis (Gendrault, 2020), Lacanian psychoanalyst, Philippe Gendrault, offers a compelling alternate view.
- B. Here, he cautioned psychoanalytic practitioners that there are "no psychoanalytic solutions to social problems" (Gendrault, 2020, p. 3); psychoanalytic psychotherapy is

only meant to function on an individual level, and the only world that can be changed with psychoanalytic psychotherapy is the patient's.

- C. Gendrault (2020) emphasized the harrowing and dangerous nature of the historical moment that we are experiencing in *Real time* (p. 2), and he did not espouse taking a passive stance. However, he noted that in these moments, sociopolitical discourse requires the citizen's voice, not the psychoanalytic practitioner's. Thus, he exhorted psychoanalytic practitioners to "wake up" and use their voice just as a plumber would, regardless of vocation.
- D. In doing so, he encouraged psychoanalytic practitioners to relinquish their compulsion to refer to Freud and "fall off the wagon of psychologization of social life and its consequent depolitization" (p. 4).
- E. Benefits and significance of Gendrault's letter (2020).
 - 1. It takes a clear stance on the role of the psychoanalytic practitioner; even if one does not agree with him, his strong opinion on the role of the psychoanalytic practitioner may prompt others to consider their role.
 - 2. Despite Gendrault's stance of maintaining a separation between PA/PD psychology and sociopolitical contexts, he emphasized the pressing nature of the time as an emergency. In doing so, he recognized that the role of the psychoanalytic practitioner has shifted during the pandemic: "The virus has reduced us to the mere status of citizens ... and like the architect, the postman, and all the other people, we will do the best we can, applying our craft to the best of our abilities under the circumstances" (p. 3).

3. Thus, even when Gendrault is proposing a separation between the personal and professional, he concedes that the psychoanalytic practitioner can be affected by the “emergency” of the time.

V. If practitioners choose to proceed guided by social justice principles, as Freud encouraged, what might make this difficult?

A. For White people, the concept of reparations can work in many ways.

1. The idea that repair could reverse racism’s “depth of harm” appeals to White liberals, in particular, as a “fantasy of erasure of debt” (Caflisch, 2022, p. 136).
2. But, when the idea of reparation does not come to fruition, White guilt can become overwhelming, resulting in “breakdowns of thinking, self-reflection, and dialogue, which can make change even harder to envision and practice” (Caflisch, 2022, p. 136).

B. Although guilt can be an “appropriate response” (Caflisch, 2022, p. 139), White guilt can be an impediment to working in ways guided by social justice.

1. White guilt can be performative and excessive.
2. White guilt can center the wrong experience, but bringing focus to the White experience rather than the experience of who is oppressed.
3. Depressive guilt (in the Kleinian sense) can lead White people toward further accountability, and even a sense of hope, as White people begin to shift from a paranoid-schizoid position (Klein, 1975) of complementarity (Benjamin, 2017) to a more centered and empowered position.

C. Conversations about race can be precarious and often result in a breakdown of communication.

1. Leary (2000): “social conversations about race are extremely fragile and easily subject to collapse” (p. 642).
2. Caflisch (2022) “[White peoples’] capacities for self-reflection become fractured” and speech “stops making sense” due to the tension between “preserving an idealized self-image while recognizing traces, in ourselves, of its opposite, and we [White people] become deeply confused about who is causing harm to whom” (p. 148).

VI. Looking Toward the Future

A. Many believe that psychoanalytic practitioners are activists (Fogarty, 2022; Nguyen, 2012), in that all psychoanalytic practitioners’ work, which centers meaning making, “is essentially beneficial and restorative to the social fabric” (Gerson, 2009). Others are adamant that keeping up with the international psychoanalytic world by engaging in sociopolitical discourse is paramount (Altman et al., 2004).

B. But, what does it take to be explicitly engaged in psychoanalytic activism? Before engaging in psychoanalytic activism, we must undergo deep, authentic, ever-expanding must occur inquiry, both on the individual and collective level.

1. Individual Inquiry

a. Examine and dissect privileges, including race

i. The weight of the world can be hard to metabolize, especially for the privileged who can turn away when they choose (Gonzalez, 2022; Moss & Zeavin, 2022).

ii. White practitioners must challenge internalized ideas of White Exceptionalism and consider their pain and guilt as typical and commonplace. Otherwise, White exceptionalism can diminish White psychoanalytic practitioners’

efforts to surmount their complicity. Jane Caflisch (2022) expanded this further as she emphasized the importance of unglorified, “ordinary” (p. 152) pain and guilt when attempting impactful action.

2. Change on a collective, educational level: In addition to the work that individual PA and PD practitioners may undergo, education and training must change, too.
 - a. Psychoanalytic and psychodynamic communities must engage in broader dialogue “without insisting that the conversation fit our psychoanalytic defaults,” allowing new information to penetrate the field” (Leary as quoted in Shubert, 2021).
 - b. Be a “part of a meaningful movement in a community—go to local meetings, put in the time and talk to people—that’s the way to build trust” (Leary as quoted in Shubert, 2021).
 - c. “Psychoanalytic Institutes can create liaison committees to different communities” to become in conversation with different local communities. This helps attract a more diverse set of candidates, in addition to listening to, and learning from, new perspectives. In addition, liaising with local public health initiatives can connect candidates with a community case (many institutes have begun encouraging candidates to have their third case be one from a community setting; Leary as quoted in Shubert, 2021).

Epilogue: Final Reflection

In her interview with Justin Shubert (2021), Kimberlyn Leary, a Black psychoanalyst, emphasized to the psychoanalytic community the importance of better understanding systems. She and Shubert believe that “psychoanalysts have the ability to affect larger systems” (Shubert, 2021, p. 16) even though so much of psychoanalytic clinical work and theory has, thus far, focused on individuals. I agree with Kimberlyn and Justin. In fact, it was my eye and penchant for systems that brought me to this project in the first place.

As I began to offer psychotherapy as a practicum student in 2020, I could not help but wonder, “what is going on here?!” There was no chance that the sociopolitical factors of that year did not affect the intersubjectivity my clients and I co-created. Although we were meeting over Zoom, my clients and I were living in the same sociopolitical context. Age, race, and other demographic factors impacted the varying degrees to which my clients and I were affected by the murder of George Floyd or the seriousness of the pandemic; however, trust in our safety, our health, and the capacity for those meant to protect us became shaky, at best, which in turn, affected our intersubjective experience.

As I emerged from this first year of training, the pandemic’s severity eased while I also grew a bit more secure in my forming identity as a psychologist and therapist. This book proposal/dissertation played a large role in my development, as it gave me a place to be curious about and explore my unfolding clinical work—in fact, this project acted in many ways as a Third, creating a triangle and a point of exploration and play, spurred by the intersubjective experience between my clients and me. When I would wonder “what is going on here?!” I knew that I had a place, in addition to supervision, that would hold my questions and exploration.

This project has been a steadfast repository for my ideas and curiosities. A reliable and “easeful Third,” of sorts, this project accompanied me as I navigated my training and

development; however, as I look toward this next, post-doctoral, chapter of training, this project has taken on a new flavor. Now that my curiosities are satisfied (at least for now), I can act on them. A penchant for psychoanalytic concepts drew me to investigate sociopolitical factors and the intersubjective experience, and in doing so, I became very aware of the work psychoanalytic practitioners have already begun and have ahead. Through this research, I grew heartened to find a strong current of fellow practitioners who envision yet another iteration of the field of PA/PD psychology, one that includes systems-level thinking, social justice, equity, and accessibility.

In many ways, I hope that my psychoanalytic training follows a trajectory similar to this project: as I gain more knowledge, I will leverage it and put it into action. Kimberlyn Leary spoke of practicing in a way that does not “insist on fitting into psychoanalytic defaults” (Shubert, 2021). As I continue to engage in conversations with non-psychoanalytic factions, I hope to translate my psychoanalytic knowledge in a way that is helpful and accessible (possibly even quite literally by reinvigorating my Spanish fluency). And, within the psychoanalytic system, I hope to leverage the knowledge I have gained in this project to help institutions update and grow—I have already offered suggestions to a local branch of a training institute and plan to offer my engagement and consultation as they strive to update their teachings, accessibility, and equity.

It is hard to know what sociopolitical needs our society will have in four years when my psychoanalytic training concludes, however, this project has inspired me to identify and meet those demands, whatever they may turn out to be. Even within the next four years, I would like to find ways to address community needs; in particular, I am especially inspired by Deborah Ann Luepnitz’s work with those who are houseless and would like to become involved with a local community organization that supports unsheltered and vulnerable people.

Freud argued for the “need to reduce inequality through universal access to services” as he “invoked a series of modernist beliefs in the achievable progress, secular society, and the social responsibility of psychoanalysis” (Danto, 2005, p. 17). Inspired by Freud, I seek to advance the system in this direction; however, I do not imagine that advocating for such a reconceptualization of psychoanalytic institutes will be easy, especially as a trainee/psychoanalytic candidate/early career professional who holds less power in a staid system. I take heart, however, that I will be joining a field that consists of psychoanalytic practitioners who are actually quite radical, however reserved they may be. Holding the tension between tradition and transformation, reverence and innovation is no small feat, but I remain inspired by Freud’s missive to be “just as ready now as we were earlier to admit the imperfections of our understanding, to learn new things and to alter our methods in any way that can improve them” (Freud, 1919, p. 158).

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