

**Forces Of Destiny:
Psychoanalysis & The Human Idiom**
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Idiom – a peculiarity, a specific property, a unique feature.

The human idiom is that peculiarity of person(ality) that finds its own being through the particular selection and use of the object.

In this sense, to be and to appropriate are one.

2018 Preface

- *Winnicott gave us the concept of the 'true self' as the kernel of our being, invested with a positive ruthless demand to realize its potential through the 'use of the object'. This was an important step forward in the psychoanalysis of human character.*

We can conceptualize the 'true self' as our unique form-in-being, or 'idiom', that expresses itself through our effect upon the other.

Winnicott called this the 'maturational process', a forward moving momentum that is intrinsic to human formation. Winnicott emphasized the role of the 'good enough mother' as a 'facilitating environment' that is crucial in determining whether the infant's true self can realize its potential.

This raises a central theme – the distinction between *fate and destiny*. (Melville)

We all suffer fateful interventions in our life that may compel us to change course, but with luck we may also continue to develop intrinsic potentials that are realized through the use of objects.

We are all gifted with 'futures' – potentials of our true self – which we may or may not realize in the course of time.

- *The therapist's receptivity to the idiomatic form of the client can support the release of that person's true self to realize futures that have been unknown to them and have been unexperienced by them.*

This receptivity depends on the therapist's 'stewarding intelligence in sustaining the therapeutic process' on behalf of the client.

Good therapy can facilitate the liberation of the true self – through the receptivity to the 'use of the therapist' by the client, and through the expressive creativity of the free association process.

However disturbed or disturbing a client may be, it is crucial that the therapist celebrates the individual's true self, allowing the person's idiom to shape the sessions in order to express the logic of the self.

- *The processing of one's character involves a careful balance: facilitating the articulation of idiom while concentrating now and then on disturbing and self-defeating constellations of destructive self-organization.*

Introduction

Psychotherapeutic work is most intriguing.

- *A therapy process can provide a client with transference objects that seem to facilitate the person's spontaneous expression of 'unthought known' elements of his own character.*

The client can use certain different elements of our personality to exercise personality potentials of their own, which seems to establish a certain sense of themselves.

Alongside ordinary and essential therapeutic work, this just seems to happen, to be important, but it is not something to be processed. In this way, a client's use of us is natural and not any type of defensive maneuver, and not any kind of projective identification with us.

Bollas noticed that, with the birth of his son, he was who he was from the start. His son seemed to be in possession of his own personality from the very beginning, and his unique configuration in being (the idiom) has never really changed over time.

With his clients, Bollas noticed that one of his functions was to be of use for their 'idiom moves' – for private articulations of his personality potential – which could only be accomplished by eliciting different elements of his own personality.

Bollas noted that when his clients elicited his sense of humor, wanted him to do something in particular, wanting an affective response from him, in ways that just seemed natural to do. They were just living their lives.

This is a form of play in which the subject selects and uses objects in order to materialize elements latent to his or her personality. There is a natural urge to articulate the true self – a destiny drive – which is linked up to the forces of the true self to elaborate potential.

This kind of available therapist is someone who struggles to create meanings in the midst of substantial unthought knowns, sometimes successful and sometimes on the wrong track; who thinks about clinical life by the merciful lights of futures, and from points of perspective that allows for renewed thinking and self-correction.

CHAPTER 1 – A Theory For The True Self

The success of a therapy rests not simply on the transformation of unconscious conflicts into conscious awareness, but also on fundamentally new psychic experiences generated by the therapeutic container and process, particularly those sponsored by transference states.

True Self – Winnicott – the inherited potential that found its expression through spontaneous action. He conceptualized a feature of therapeutic relationship and life that had not been theorized before.

Psychic movement that takes place when the patient is free to use the therapist as an object through whom to articulate and elaborate his personality idiom. This usage is difficult to describe, and has been something that we have been unable to think about.

- *The true self as 'the inherited potential which is experiencing a continuity of being, and acquiring in its own way and at its own speed a personal psychic reality and a personal body scheme'.*
- *The spontaneous gesture is evidence of true self. The true self is aliveness itself.*

It is important to stress how this core self is the unique presence of being that each of us is; the idiom of our personality. We are singular complexities of human being.

- *The true self exists before object relating happens.*

It is only a potential, however, because it depends upon maternal care for its evolution.

One of the outcomes of a dialectic between the human idiom and human culture is psychic life.

The psyche is that part of us which represents through self and object representations the dialectics of true self negotiation with the actual world.

Conflict is essential to the usefulness of the psyche which depends, in part, on the healthy balance of forces between the true self and the actual world.

Psychic representation owes much to the freedom of expression guaranteed by the mother and father.

- *The idiom of the person is more a set of unique person possibilities specific to this individual and subject in its articulation to the nature of lived experience in the actual world. The life of the true self is to be found in the person's experiencing of the world.*

The Unthought Known

That inherited set of dispositions that constitutes the true self is a form of knowledge which has obviously not been thought, even though it is 'there' already at work in the life of the neonate – who brings this knowledge with him or her as he or she perceives, organizes, remembers and uses his object world.

How much of this knowledge is ever to be employed and brought into the subject's being depends entirely on the nature of this child's experience of the mother and the father. IF the parents have a good intuitive sense of their infant, the he or she *will experience the object world as facilitating.*

When this happens, we have children who take joy in re-presenting themselves, celebrating the arts of transformative parenting and *know from the authority of inner experiencing that latent knowledge can be given its life.*

The Primary Repressed Unconscious

The true self is compatible with Freud's concept of primary repressed unconscious, these 'inherited mental formations' that 'constitute the nucleus of the unconscious'. This core may be the equivalent to the idiom of the true self.

The core of unconscious life is a dynamic form that seeks its being through experience.

The ego is concerned with the processing of life.

The energy of the instincts is intrinsic to and inseparable from the economics of ego life. But the drives are always organized by the ego.

The ego becomes an intermediary between the urges of the true self (to use objects in order to elaborate) and the counter-claims of the actual world.

A part of the ego processes the demands of environmental reality, and its structure changes according to the nature of the interaction with the object world.

When this dialectic is thought about, the thinking occurs in the psyche, where that which is thinkable from the true self experiencing is represented in the internal world.

Signs Of The True Self

How does the therapist identify the presence of the patient's true self?

The true self cannot be easily isolated as an object of study. As the true self is, however, only a potential, it comes into being only through experience.

It does not have an established meaning (unconscious or otherwise), as its significance is contingent on the quality of object experience.

In hindsight, it is possible – indeed, often quite meaningful – to indicate how a patient has used one to achieve a self-experience.

Examples

A client who makes an amusing comment. The therapist's receptivity to the amusement is essential to the client's use of the therapist at that moment. This is indicative of true self use of the therapist, where the client is using the therapist's sense of irony or sense of humor.

Or perhaps the therapist experiences instead a sense of awkwardness or irritation, which is evoked by the client's false self act, and this may be complementing the client's own discomfort.

Or perhaps a client becomes highly articulate, evoking the therapist's capacity to interpret unconscious communications. The therapist, then, is used for his ability to concentrate and bring his therapeutic intellect to bear on the task at hand.

- *True self use of a therapist is the force of idiom finding itself through the experiences of the object. The client's aim is to find experiences to establish the true self in one's life.*

The ego is the unconscious organizing process – the logic of operations in adult life that will inevitably be some kind of mix of true self and true self's negotiation with the world.

How does a therapist distinguish between a true self use of him from a paradigmatic, transference use? The clue is in the counter-transference. ([Elaborate on this more here.](#))

It is possible to say that much of what occurs in therapy has not been articulated or thought before, and therefore we need a space for the articulation of the unthought known in the therapeutic process.

It is difficult to see the journey taken by the true self in process work.

- *Yet there are many times when we sense we are being used to process an idiom move, and we know that some of what we are lucidly interpreting or reflecting back comes from that deep, silent, profoundly unconscious movement taken by the true self, and effected, with equal unconsciousness, on us as the therapist.*

One cannot analyze the evolution of the true self. But *we can facilitate it.*

We can experience its momentary use of our self. We can identify certain features. But we cannot see it all as one piece, in the way that we can 'see' what unconscious meaning there is that lies hidden in the narrative text.

The ordinary joy, found by linking a true self preconception with the object world, is a very special form of pleasure - a *jouissance* – a good definition of the ruthless pleasure of the human subject to find joy in the choice and use of the object.

Essential Aloneness

Shadowing all object relating is a fundamental and primary aloneness which is inevitable and unmovable. And this aloneness is the back ground of our being; solitude is the container of self. Essential aloneness is a positive term for Winnicott, an isolation that is supported by a human environment. We carry this aloneness with us throughout life.

This aloneness is a transitional state between un-aliveness and aliveness characterized by dependence and instinctual life. For Winnicott, 'the recognition of this inherent human experience of pre-dependent aloneness is of immense significance'.

In our true self we are essentially alone.

- *The absolute core of one's being is a wordless, imageless solitude. We cannot reach this true self through insight or introspection. Only by living from this authorizing idiom do we know something of that person sample that we are.*

In some respects, therapy is a place for the experiencing of essential aloneness. There is a *Waiting For Godot* silence to many hours.

This waiting-about mirrors that interval inside the self, as we rest between psychic registrations. There, in that solitary space, we repeatedly contact that essential aloneness that launches our idiom into its ephemeral being.

CHAPTER 2 – The Destiny Drive

The psychotherapeutic process contains within it two seemingly opposed elements:

- *A deconstructive procedure.*
- *An elaborative process.*

The therapist deconstructs the manifested content that the client brings forth to reveal the unconscious latent content underneath the surface.

In time, the client becomes accustomed to this deconstructive procedure – to the dismantling of his or her discourse – and also soon joins in with this process, all to give voice to the latent thoughts of the repressed unconscious.

It is through the process of free associations that the client can both elaborate and deconstruct, which offers a vast sea of underlying meanings, and this leaves traces in the sand, which begin to reveal the secrets of the other world.

Another elaborative feature in therapy is the client's transference.

Therapy As An Elaboration Of True Self

The client's unconscious use of the therapist in the transference is seemingly an elaborative rather than a deconstructive process, as the client cumulatively constructs their object world through the person of the therapist.

Of course, transference uses of the therapist, like the free association to the dream content, are a deconstruction, a dismantling of the therapist's 'true' or manifested personality. Transferences have their own constructive logic.

As a transference figure, the therapist is to be used as an object, and the therapist's mental state is to become receptive, and not become analytic. The making of an interpretation can preoccupy a therapist for most of a session, interfering with a more receptive frame of mind.

- *Winnicott stated that the transference process should not be disrupted by the 'making of an interpretation'.*

The therapist's primary task, as per Winnicott, is to give the client time and space to establish and articulate their internal world, through the transference.

The deconstruction of the therapy material as an object is part of the search for meaning, and the elaboration of the self through the transference is part of the establishment of meaning.

The need to know and the force to become are not exclusive, but the latter element of the therapeutic process has received less attention than it deserves.

The True Self & The Use Of The Object

Winnicott understood the therapeutic situation to be a potential space.

The therapist needs to be attentive to the client's need to create their own transference object, which can then speak to the potential space by bringing to life elements of the mother, the father, the siblings, and parts of their own child self.

- *Bringing to life is an important feature of the nature of the transference.*

There is a difference between talking about the mother, father or child self, and *being* the mother, father or child self. Only by being someone or something is the client able to establish elements of the self in therapy.

Winnicott said that the infant's capacity to use an object followed on his ability to relate to the object. To some, this seems like a callous reversal of priorities.

- *How can using someone be maturationally more promising than relating to someone?*

Relating to the object refers to the depressive position, and the infant's anxiety about harming the object. In the depressive position, the infant realizes that his hate could harm the (internal) love object, and reparative work is then necessary.

The concept of the use of the object assumes that the child has a fairly secure sense of his love of the object so that hate is allowed without decomposing the ego or its objects.

This internal work allows for appreciative recognition that the actual object has survived its own destruction as an internal object. The survival of the actual object is both a relief and a new beginning. The child knows now that he can assume his love of the object in order to use it (in fantasy and in reality) without concern for its well-being.

Winnicott writes, 'the subject may now have started to live a life in the world of objects, and so the subject stands to gain immeasurably'.

- *To live a life, to come alive, a person must be able to use objects in a way that assumes such objects survive hate and do not require undue reparative work.*

Relationship as a defense against usage can be seen most clearly in the life of sexual couples. In lovemaking, foreplay begins as an act of relating. Lovers attend to mutually erotic interests. As the economic factor increases, this element of lovemaking will recede somewhat (though not disappear) as the lovers surrender to that ruthlessness inherent in erotic excitement.

This ruthlessness has something to do with a joint loss of consciousness, a thoughtlessness which is incremental to erotic intensity. It is a necessary ruthlessness as both lovers destroy the relationship in order to plunge into reciprocal orgasmic use.

The destruction of the relationship is itself pleasurable and the conversion of relating to using transforms ego libido into increased erotic drive. If a couple cannot assume this essential destructiveness, erotic intensity may not give in to mutual orgasm.

Instead, reparation may be the fundamental exchanged between such couples with partners entering into prolonged mother-child scenarios, of cuddling, holding, or soothing.

This may be because such persons have not been able to experience a good destruction of the object, and reparative work is activated during the arrival of instinctual urges. Instead lovers may masturbate each other, with one partner relating to the other's sexual needs and mothering them through it.

In some ways, the therapeutic relationship is akin to the above relation of lovers. Some clients are so frightened by their destructive fantasies, or, by the effect of such feelings, by a fear of being torn to pieces by the therapist, that they cannot bring themselves to use the therapist as an object.

This may show up ironically enough in the form of a continual self-analysis, with the client rigorously analyzing himself in the presence of the therapist whom he seeks, if anything, as a supervisor.

The Case of Jerome

He needed to preserve the therapist as an unreal object in order to protect himself from an imagined revenge on the therapist's part.

He was always tentative, anxious, intense, and somewhat irritable. He reported events in the same manner, listened carefully, did not reply, or agreed, and then would proceed to talk about something else.

He rarely forcefully disagreed with anyone. This left him in a very frustrated and highly mental world with aggression becoming omnipotent destructiveness. So when he could 'abuse' me in fantasy by making his therapist ridiculous in his mind, and could share it – and have the therapist enjoy it – *he could discover a pleasure in aggression.*

When the therapist could simply take pleasure in his client's imaginative inventions, he created a certain freedom for the client to play without such activity needing to be prematurely moved into the realm of interpretive reflection.

- This allowed the working through of the client's persecutory anxieties.

The therapist's ability to be imagined evoked a different unconscious aim in the client. He could forget how the therapist felt, he could abandon his worry about whether he was damaging his therapist, and he could forget being serious as a way of forestalling any imagined revenge on the part of the therapist. (Client DS)

The client has to be ruthless in his use of the therapist. He has to be beyond concern. Jerome was assisted by the therapist's slight celebration of his right to destroy him. He was enabled to destroy the therapist without inner persecutions because the therapist enjoyed it. As soon as Jerome understood this, he changed.

This type of therapeutic experience, in and of itself, would be insufficient to effect a lasting psychological change. This would need to be reflected upon further together, once the client was ready to do so. But he no longer felt deprived by the therapist's insight, but enhanced by it.

On The Differentiation of Fate & Destiny

Destiny does not ever involve a capricious or destructive act on the part of the gods. The course of destiny can be altered, but this is usually through the epic hero's interpretation of his destiny.

On the other hand fate, or the fates, do intervene quite often, and it is possible to speak of capricious fates.

Destiny is a more positive concept depicting that course that is a potential in one's life. *One can fulfill one's destiny if one is fortunate, if one is determined, and if one is aggressive enough.*

Fate is usually announced from an oracle, or the words of a person, a prophetic declaration.

Destiny has to do with 'fastening down, securing, or making firm, like having a destination. It is linked to action rather than words, emphasizing the idea of an unalterable course of events.

If fate emerges from the word of the gods, then destiny is a preordained path that a person can fulfill.

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A person who is psychologically ill, and who comes to therapy because of neurotic symptoms, or characterological issues, or psychotic ideas and pains, can be described as a fated person.

But along with a fate that a person brings to therapy is also a destiny, which can only be a potential whose actualization depends less on the sleuth-like unraveling of the symptomatology or the dream, and more on the movement into the future through the use of the object, a development that psychotherapists term the 'transference'.

We can use the idea of fate to describe the sense a person may have, determined by a life history, that his true self has not been met and facilitated into lived experience. A person who feels fated is already someone who has not experienced reality as conducive to the fulfillment of his inner idiom.

Such a person, frustrated at the very core of his being and relating, will project into his internal objects split-off aspects of this true self, thus giving to internal objects a certain further power to fate his life.

This split-off aspects of the self are preserved as hallucinations. Fate is the return of these hallucinations.

We can use the notion of destiny to address the evolution of the true self. The idiom seeks to articulate itself through the 'enchainments' of experience.

Idiom & Destiny

A mother can either be fundamentally a fateful presence or an object through whom the child establishes and articulates aspects of his destiny.

The maternal provision of an illusion of creativity, which sponsors an experience but not a sense of omnipotence, marries up with the destiny drive, which we can think of as an internal sense of personal evolution through space and time.

A sense of destiny, then, would be a feeling that the person is fulfilling some of the terms of his inner idiom through familial, social, cultural and intellectual objects.

The true self can evolve through maternal adaptation and responds to the quality of care the child receives from the mother and the father, as well as from the school and the peer world.

- *Does the object world provide the right conditions for the child to evolve his idiom, to establish his personality in such a way as to feel both personally real and alive, and to articulate the many elements of his true self?*

Destiny

The psychic projections of our idiom means that we are ever so slightly led forward by our projections, that we have a sense of direction built into our existence.

If all goes well, a child will develop passionate interests in objects, many of which project the child into the future. The destiny drive makes use of unconscious projections of idiom potential into objects which are organized by the child and set up for true self experiencing.

One of the tasks of psychotherapy is to enable the client to come into contact with his destiny, which means the progressive articulation of his true self through many objects.

- *By introducing the element of play in the therapeutic process, the therapist signifies availability as an object for a particular use, in order to facilitate the client's elaboration of a part of himself he has yet to experience.*

The therapist destroys that client's manifest scripts in order to reveal unconscious meanings, and the client destroys the therapist through that particular object usage called 'transference'.

Each transference use of the therapist is in some respects a destruction of the therapist's true personality, and this ruthless employment of the therapist is essential to the client's articulation of his early environment, representations of his psychic life, or elaboration of his true self through experience.

For a good destruction of the therapist to take place, one that is not constituted out of the death instinct, but is part of the life instinct, the therapist must indicate to the client, at the right moment, that he is ready for destruction.

The 'okay to be destroyed' therapist has a different function – indeed is a different object – from that therapist who deconstructs the client's psychic material.

The technical aspect of when the therapist should function differently in order to provide a different object for the client is obviously a crucial issue, and one that makes therapeutic work challenging and creative.

The therapist provides the client with his silence, his absence of socialization, his evenly hovering attention. This provision elicits a certain kind of self-state in the client, one that is conducive to therapy.

Changing one's use to the client is not an applied act – the therapist has no choice but to do so.

The Case Of Jill

Jill had been in therapy for two years. When she felt slighted by men, she would turn cold towards them. The therapist knew that it would be his fate to be the object of such coldness, and sure enough it happened.

The cold moods increased in both frequency and duration. Each session the therapist would take this up as an expression of her cold fury that he was such a disappointing therapist, because he would not be with her all the time. She was going to eject him (just as she felt cast off) to make him suffer.

Abandonment by her mother was an important theme in her life. They worked with one essential interpretation: *that she felt rejected and in turn aimed to give him the cold shoulder.*

Then one day, after ten minutes of killing silence, he said, "You know, you are a monster." He said it quietly and matter of factly. She said, "Why did you say that?" He replied, "Because you *are* a monster." She lapsed back into her silence.

He said, "I suppose that you are now going to be silent for the remaining time?" She was silent. "Well of course you intend to; I can see that." Then he went on, "But you are being monstrous, and this is inhuman behavior on your part".

She then burst into tears. "I can't help it. There is nothing I can do about it. That's all." He said, "You certainly can help it." She replied back, "Well, I'm not." A longer silence ensued.

The next session: "How dare you call me a monster?" He said, "I am not sorry that I said you were a monster, because you are being one, but I do regret that it had to be said to you in that way."

Again she became furious. Then he said, "Do you have any idea what it's like to sit with you day in and day out, with you an absolute ice maiden of rage? Do you? Well, let me tell you. It's dreadful. We have looked at why you do this, but I think understanding is not what you want. You insist that I suffer. Well, I tell you that it's monstrous, and you had better do something about it if you ever expect to rid yourself of your terrible moods."

- *The therapist had decided to combat his client's use (abuse) of him in the transference rather than simply interpret it.*

To his surprise, and relief, Jill said, "Well I have been very cruel to you, I know, but you have hurt me." She was referring to his failure to provide her with actual love.

The therapist continued to combat her hostile silences, and Jill become counter-combative in more specific ways, and started to engage with him.

- *The therapist supported her right to quarrel with him, and in his view these experiences in therapy were important to her accomplishment of new self-experiences. By quarreling with him she engaged in reciprocal aggression with an object, an experience previously unknown to her.*

This illustrates another way in which the therapist's status as an object (in this case, a combative one) enabled Jill to move into new self-experience through the course of such use.

- *Jill's experience of her primary objects, through which she could not elaborate her true self, biased her to deaden herself and others, thus identifying with her fate and imposing it in the therapy upon her therapist.*

It was the therapist's bad luck that his interpretations had no mutative effect. To some extent, saying 'you are a monster' broke the customs of the therapy and emerged from another part of him, perhaps expressing the need of his true self to destroy a pathological object relation, and in order to find and use those therapeutic objects that form his professional identity.

This destruction of an imposed fate enables the client to rediscover her true self within the psychotherapeutic context. If the client can employ the therapist to multiple effect then the therapy is destiny.

Futures

- *A person who is fated, who is fundamentally interred in an internal world of self and object representations that endlessly repeat the same scenarios, has very little sense of a future that is at all different from the internal environment they carry around with them.*

The sense of fate is a feeling of despair to influence the course of one's life. A sense of destiny, however, is a different state, when the person feels they are moving in a personality progression that gives them a sense of steering their course.

Any person who is partly living from the true self will project idiom possibilities into the future.

People who have a sense of destiny also invest psychologically in the future.

This involves a certain necessary ruthlessness and creative destructiveness, of the past and the present, in order to seek conditions necessary for futures.

A person who feels fated may imagine futures that carry the weight of despair. A fated person only projects the 'oracular', a voice that echoes from the past, and which oppresses the self.

The loss of futures for a child is a very particular kind of loss. Each child unconsciously invests in the parent as a future object, and has an unconscious sense of the potential uses of the object throughout development, a use that is inextricably linked to the elaboration of the true self.

What is the grief that occurs when a child or adolescent loses futures? It is a mourning for what could have been and now will not be. The acute anguish, if not rage, of such a person is extraordinary – and understandable.

The Case of Nancy

Nancy seemed determined to put her therapist in a situation where it would appear that I had failed her. She also had a remarkable knack of making extraordinarily arbitrary and silly statements which sealed actions. "We are going to the opera!"

This sudden oracular voice could and would announce sudden action that would alter the course of life at any moment. Everything was topsy-turvy.

Once Nancy calmed, underneath this was her grasping that wishing could be an internally fruitful thing to do. She had never known what she had wanted to do.

- *Nancy's seeming spontaneity always occurred in relation to, and at the immediate cost of, the other, for whom her apparent destiny was the other's fate.*

Nancy demonstrated the experience of her parents, who followed their destinies at the cumulative expense of their children. The other then had to carry the burden of the self's action.

If there was a ruthlessness essential to object selection and use, such an element should obviously not become a rationale for thoughtless and egocentric action at the dynamic cost to the other. A dynamic cost is an act committed by the subject that is intrinsically destructive to the other and recurs, if not behaviorally, then intrapsychically.

Yet we often act out of self-interest, in a form of ruthlessness that we feel to be essential to the evolution of our idiom. And to varied extents, this will affect the other.

Of course, we are always involved in necessary compromises between our inner drive to articulate our idiom through experiences of objects, and the contexts in which we live.

We project our idiom into imaginary objects which then partly serve as precursors of more direct lived experience. There is an imaginative forerunner of true self action.

Freud said, “By picturing our wishes as fulfilled, dreams are after all leading into the future”.

- *The dream constitutes a fictional forerunner of reality, in which the idiom of the self is played.*

Dream thoughts, therefore, are a form of ‘early playing about’ with reality before the imaginary becomes the actual.

The dream creates futures that are articulations of the individual’s unique person. It does not simply generate futures, it is vital to the subject’s formation of the future. It is where some futures are hatched.

The dream is the origin of vision, the place where the subject plays with objects, moving through potential patterns, setting up fields of imagined persons, places, selves and events – to be there as potential actuals for future use.

A *déjà vu*, the sense of having lived precisely this event before, may be an existential signature of the recurring resonance between the dream and the future, as some of our action experiences will have been dreamt before.

This incompleteness that we must all endure is a special sense of loss, as each of us is only ever a part subject, an incomplete sample of our potential. But we are mercifully free of the ideal of completion.

A mid-life crisis is when we have an inkling of how we shall not be destined after all *to fulfill our urge to be fully present in our own existence.*

The Fashioning Of A Lifetime

- *Do my life choices provide me with textures of self-experience that release me to articulate some idiom movement on my part?*

We choose our objects because we seek the experience potential of the choice. We need the object to release our self into expression. Now and then we will be quite transformed by the uncanny wedding of our idiom and an object, meeting up at just the right time.

When we have lived all there is of our lifetime, our families and friends will at some point look through and sort out what we call ‘personal effects’. What an interesting way to describe what we leave behind. Effects. Articles of use? What I have caused to come into my existence as expressions of the very particular life I have lived?

The fashioning of a life is the work of a destiny drive, as our urge to elaborate this idiom partly results in our creation of personal effects....to establish a cultural life from the idiom of the true self.

CHAPTER 3 – Off The Wall

Many of Winnicott's colleagues have said that to read him is like being with him. He is there in his prose. It was the same with Bion.

When we speak to the other about our self, we stand at some slight remove from this self that we are, and we address this object that is our self.

Finding a way to be a subject, in oral or written discourse, means finding a way to express one's inner status in the moment.

- *The successful establishment of the therapist as a subject in the therapy process depends on the integrity of the therapist's relation to his or her own subjectivity. This evolution of the self-analytic moment, into prose or interpretive work with clients, is a discipline that is achieved only by rigorous work.*

This compatibility of idioms (person and narrative) authorizes the value of the self-analytic element and differentiates it from a seduction.

There must be integrity to the self-analytic process for it to be of use to us, either as clients or as therapists reading someone's writings.

- *As a client narrates their life, how does the therapist imagine the client as a participant in their own history?*

If a client tells us about visiting a friend, of how this friend is critical of the client about something, and how the client responded to this criticism – do we simply identify with the client, experiencing the friend as critical? Do we identify with the friend and agree with his criticism of the client?

Do we accept the narrative at least as a process if not the content, reasonably at peace with simply listening? Or does the objection occur to us, stopping us from simply listening, moving us to an interrogative position, or into an affective response to the narrative?

Off The Wall

What are the origins of an interpretation? Much of our work explores issues that are not immediately clear.

I must begin with a question. I ask myself, "Where were you?" No answer springs to mind.

The therapeutic space is somewhere between physical and psychic reality. The room changes each day. How do I say what the act of therapy is? It boggles the mind.

I would gaze at the wall, often invited by the figurations of light, or I would look into it as a material eternity, with different clients over different periods of time. I felt confident that my interpretations were 'off the wall'.

Where was I during those hundreds of hours listening to the client talking to me or undergoing a particular articulation as the transference object? We must ask – *who is speaking to whom, about what, and why at that particular moment?*

- *I can recall that extraordinary experience of not knowing what therapy was, and yet I was being the therapist. I developed an increasing respect for this position and over time regarded it as an important, indeed essential, feature of being a therapist.*

Does it mean being someone who does not know his own being? To some extent I think it does. Bion spoke of that mental frame of mind that is the therapist's responsibility to be without memory or desire. This absence of knowing is perhaps true of that psychic state accomplished by evenly hovering attentiveness.

If we are evenly hovering many hours a day over thousands of hours in a therapeutic lifetime, it's fair to say that our sense of our being as a therapist will be rather odd.

The Sources of Interpretation

Where did they come from? I think I never knew. I do not mean that I never knew what I thought. I knew what I thought, but I did not know why I had that particular idea at that moment.

This 'not knowing' is essential to therapeutic practice, which leads us to wonder if our interpretations came from that life the client creates for us. We are used as a function of an element of the psyche.

Our interpretations are inseparable from the client's use of us in the transference. There is no such thing as interpretive neutrality.

- *Our interpretations come from our understanding of the meaning implicit in the client's discourse.*

Many interpretations with certain clients originate from our soma, our body's intelligence. Therapists are mediums for the psychosomatic processing of the client's psyche-soma.

Interpretation involves the therapist in a transformation of the client's use of the therapist as medium, a countertransference into meaning and language.

- *Winnicott claims that he often made interpretations to inform his clients of the limits of his knowledge. But we also make interpretations to hear the voice of reason amidst a most confusing situation.*

Much of the work in a therapeutic process takes place entirely *within* the therapist as he or she processes his or her own inner turmoil, or useless ignorance, or ineffective remove, etc, in order to address the client.

Sometimes a client will need a long, benign, undirected thoughtfulness on our part. They will need us to find and use those internal resources within ourselves, before they can actually make use of us

Knowing & Not Knowing

How is the therapist's 'not knowing' any different from any other person's not knowing in the client's life?

- *This type of therapeutic 'not knowing' is an accomplishment. It can take years of experience as a therapist to value this frame of mind and to know it for what it is – a necessary condition for the creation of a potential space, an inner therapeutic screen that we sustain, and which registers the client's idiom.*
- *The force of the true self, and the scripts of self and other, can only be established through the 'not knowing' of the therapist.*
- *Interpretation does not emerge simply from the client or from the therapist. It is a dialectic of two unconscious systems, exchanging with each other.*

Those clients who have truly changed very deeply are the ones who have 'grasped' the therapeutic sensibility. They find a freedom that emerges with a particular kind of 'not knowing' that is essential to progressive registrations of the self, and incremental intimacy with the other. It amounts to a kind of pleasure.

It is a pleasure in the formation of potential space, as from this discipline – essential to the life of the subject – the person can entertain ideas and feelings that arrive with the integrity of conviction.

Of course, there is a dynamic tension between the therapist's urge to know and the essentials of not knowing.

- *Not knowing implies a healthy acknowledgement and respect for the presence of unconscious forces.*
- *It is quite right that the therapist, in working with a particular interpretation with a client, will have to do so repeatedly, with variation, many times. It is important to 'hold one's ground'.*

Every therapist who comes to know their client through a coherent therapeutic understanding must also be able to 'unknow' the client.

This unknowing process, perhaps akin to the concept of unbinding, is essential to any further generative knowing, and to any further symbolically complex binding.

- *Unknowing is essential to the creation and (internal) maintenance of the interior analytic screen.*

That which has been known after a while must be assumed to be still available to both client and therapist as they rid themselves of such organization of the unconscious in order to receive new unconscious communications, made possible through unknowing.

This establishes something of an essential dialectic between knowing (organizing, seeing, cohering) and unknowing (loosening, not perceiving). *Knowing and not knowing are indispensable to each other.*

The Dialectics Of Difference

- *At any one moment, regardless of how certain we feel, of how passionately we hold a view, or of how correct we indeed are, such certainty is the function of our knowing – but the equally significant function of ‘not knowing’ must also be represented.*

How do we bring the receptive capability of unknowing, which maintains the therapeutic screen, into the interpretive situation?

This can be accomplished only if the therapist takes himself as a subject in the therapeutic field. However valuable our conclusions we come to, that are processed into interpretive content, this is less meaningful than the processes which lead up to such an interpretation.

Whenever a client needs to know how we have arrived at our comments, we should be able to say how we have composed our particular interpretation.

We need to be able to trace our footsteps back to through our thinking process. This is one of the important features in both authorizing and limiting the function of our subjective interpretation.

It is also important to be able to differ with ourselves as the therapist. We should be able to criticize ourselves on behalf of our client.

- *When we differ with ourselves, we destroy a previously established point of knowing. We can then create its opposite, a space that now contains not knowing, but recognizes the presence of an ‘unthought knowledge’ that may find its way to knowing.*

It is important to actively support our client’s right to disagree with us. *“So you disagree.”*

By endeavoring to introduce the factor of difference, we slowly establish the dialectics of difference. We want to be free to differ with our clients, and we want them to be free to differ with us.

This can be established early on in the therapeutic process, and it can be established in a series of steps:

1. The therapist establishes a relation to his own subjectivity. He becomes a subject in the therapeutic field and thinks about what he has said (his associations) in a manner that is similar to the way he considers the client’s associations.
2. The therapist recognizes each moment that the client disagrees with him and very carefully articulates the client’s corrections. *“But something about what I have just said is not quite right.”*
3. The therapist disagrees with the client. To establish this as a non-traumatic and essential factor in the therapy, the therapist needs to state it simply, in a relatively inconsequential moment, and as early as possible within the therapy. *“I have a different way of looking at what you have said, from your own understanding of it.”*

By establishing difference as an important part of the therapeutic sensibility, we will be more able to be openly confronting of an individual than might otherwise be the case.

- *Establishing a 'dialectics of difference' with a client, particularly those who are very disturbed, is crucial to the successful management of the client's regressive use of the therapist in the transference.*

This allows the therapist to be a subjective object with a working 'not me' element that allows for the intersubjective processing of conflict. Therefore, when a client needs to be ill or disturbed in our presence, we can both sustain this client's need, and maintain our function as an interpreting therapist.

- *Disagreement with a client, undramatically delivered yet processing appropriate affects, may be crucial to the working through of a transference psychosis.*

The dialectics of difference is in part an unbinding process that checks the binding work of interpretation, and lessens the likelihood that interpretation itself could become a resistance to the free association process.

Free association is somewhere between knowing and not knowing, binding and unbinding.

- *Perhaps the inspired thought, the deep reflection, the de-repression of a memory, emerges from an optimal state of tension between the binding and unbinding process.*

This can be thought about as a tension between the conservative and the transformational processes, between the part of us that stores the experiences of life (in an unchanged state) and the part of us that transforms our experiences through symbolic representations.

The Therapist's Use of Free Associations

When the therapist takes himself as an object of reflective consideration and therapy, he shares the client's privileged position. This is not an indulgent and gratuitous sharing, but a discipline: a placing of one's self in a situation allowing for a rigorous examination of the material.

- *The therapist's associations are musings. "It occurs to me that..."*

We proceed from there with what we have to say, we need further elaboration to take place, and we look for the client's assistance with this.

The client is free to discard associations that he or she thinks are on the wrong track, and to select the ones with which he or she agrees, or those that speak to him or her, and to choose meanings from our musings.

All clients need to destroy the therapist's associations in order to create out of such ideas a compatible set of views which feels about right to him or her. The client develops a sense of trust in the process of thinking, and uses this eventually to his or her own advantage.

This process is less relevant with the neurotic client, than to the schizoid, borderline and narcissistic client – the individual who either cannot speak, or who is so suspicious that he does not.

By providing associations to the client's being or material, by musing on his or her presence, by remembering previous sessions, by posing certain questions, and seeking particular clarifications, we transform facts, or 'thing presentations', into psychic elements.

Un-reflected upon elements are 'undigested facts'.

The therapeutic process is a procedure for the making psychic, which involves transforming facts into reflected objects, into mental objects that in turn line up with other mental objects, to become part of an intersecting chains of signification that enriches a person's symbolic life, that can enhance a person's mental processing of the facts of their existence.

- *How do we make our associations available to the client without constituting an intrusion or subtle takeover of the client's psychic life?*

The therapist reporting their thoughts and associations must be momentary, set against the background of the client's discourse, and the silence that creates the therapeutic screen. A continuous, incessant flow of thoughts and associations would not be appropriate.

The clinician must choose the right moment, select from and speak associations in such a way as to create a set of mental objects that can be reflected upon by the client.

It is important for the therapist to stop, in order to create a boundary around the association being made. In this way, it is left as an object to be considered by the client, to be returned to after a period of hesitation, for potential usage.

The process of rendering something psychic – that is, processable – constitutes a valid communication of what we can term the 'therapeutic sensibility'. This sensibility is characterized by a paradox in our lives – that we are both subject and object.

We provide the associations and then we reflect upon them therapeutically. *To be our own enigma is vital to our creativity.* To be unknown to ourselves is not necessarily a lacking.

- *We need unconsciousness in order to make a creative use of consciousness.*

The therapist's tasks and functions:

- *Make associations to facts.*
- *Transforms facts of life into psychic material.*
- *Links past psychic material to the present.*
- *Supports the rightful function of unconscious work.*

We are also to comment on a client's presence and manner of being in a session. *"You seem perplexed", "You seem tired", "You look happy",* are remarks to be made to sponsor reflection.

Sometimes the client will seek to analyze us, perhaps in an triumphantly paranoid way, and if so, we can listen careful to their angry comments and agree with them where appropriate, thus validating their estranged right to disagree, and to have their own views.

The Rights Of Idiom

Psychotherapists make interpretations, they invent meaning, but they do not discover the meaning conveyed by the client.

By establishing difference (with self and with the client) as a crucial factor in therapeutic work, the therapist enables themselves to introduce a differentiated intellectual affectivity in the sessions.

Sometimes we have no choice but to be bewildering. (The role of the maverick.)

A person who is abnormally normal, who aims to de-subjectify the self in order to become a thing-object – needs to experience the pleasures of entertaining the subjective, which then has to come from the therapist.

We all know cases where the therapist comes up against a client who, for one reason or another, is bereft of signs of life, and the therapist's speech and affect are the life of the hour. Being strange to such a person, through one's comments, evokes their interest and brings to the therapeutic situation a certain imaginative freedom.

- *Some clients need us to establish the right of idiom, which we then represent to them, not only through the content of our remarks, but through our relation to subjectivity itself.*

A sense of judgment and tact is essential here. We may find that we will be more mentally concentrated and thoughtful when representing the subjective (of content or personal idiom) than when we work in more traditional ways.

Our commitment to our own discipline, to our own manner of practice, is conveyed to the client, and, as long as we are mindfully observing the client's response to our presence, and correct ourselves when we are wrong, we minimize any misuse of this approach.

In a way, the therapist's associations may be the 'missing link' in a client's chain of associations, which is consistent with one view of projective identification – that the therapist carries split off ideas projected onto him by the client.

The therapist should be an imaginative partner to the client, who will appreciate the therapist's effort of intelligence as the work of an independent mind involved in the complex interrelating that is the therapeutic process.

By establishing a working dialectic with the client, one which cultivates rhetorical positions that affirm the difference between any two human subjectivities, the therapist sustains the intermediate nature interpretation, as it can only be a comment 'placed' between therapist and client.

- *The ultimate source of any interpretation must always be uncertain to us, as any interpretation is always only partly true.*

By associating to a client's comments, we aim to reveal more of the nature of those processes with ourselves that eventually go into the making of an interpretation.

- *We want our clients to participate in the evolution of our own thinking on the way to knowing.*

Vital to this endeavor is the establishment of the right to disagree, so that neither client nor therapist is foreclosed by a policy of adaptation.

Our clients sense the particular ways we as their therapist organize their material. By establishing ourselves as a subject in the therapeutic field, we as therapists can give a more honest and fruitful place to the subjective origins of personality, unconscious organization, and therapeutic practice.

By establishing more openly how we think about what we do, a client is free to *think me* as an object. As we self-correct, as the client corrects us, as we challenge the client, as they challenge us – we can find a more trustworthy therapeutic mutuality in our sessions.

This is a form of play that can take place in the therapeutic situation. We can be free to work with way if we can be comfortable with it, and if we believe in it.