

4 Inside a Hurricane  
*Gustavo da Silva  
Machado*

6 Facing Climate  
Breakdown  
*Judith Anderson*

9 The Queen is Dead,  
Long Live the King  
*Deborah L.S. Wright*

13 The subtle racism of  
white women in  
therapeutic spaces  
*Lucia Sarmiento-Verano*

## Unseen City: A Conversation with Ankhi Mukherjee

**Nini Fang**

**I**n *Unseen City: The Psychic Lives of the Urban Poor* (2022), Ankhi Mukherjee (AM) examines the connection between mental health and precarity using psychoanalysis and literary criticism, exploring collective identity and trauma at the intersections of race, globalisation, and migrancy. In this interview, she speaks with Nini Fang (NF) about her vision for a humanistic and imaginative approach to the psychic lives of the dispossessed, exploring how such an approach is necessary for working through the interlocking histories of oppression.

**“her vision for a humanistic and imaginative approach to the psychic lives of the dispossessed”**

**NF:** There’s so much insight in *Unseen City*! It prompts me to think further on how we might understand trauma and psychological suffering differently beyond the hegemonic Western lens. Could you share with me what inspired you to write it?

**AM:** Thank you, it means a lot. *Unseen City* is an interdisciplinary study of the relationship between global cities, poverty, and psychoanalysis across three continents. It examines literary and cultural representations of poverty in relation to each city’s psychoanalytic and psychiatric culture as shaped by state policies towards impoverished populations. Through clinical case studies developed in collaboration with community psychotherapy initiatives in six global cities, I look at the connections between identity formation, life, death, and also social death at the intersections of class, race, globalisation and migrancy. I wanted to present it as a humanistic understanding of the living, suffering and also surviving lives of the dispossessed, and to argue how that understanding is key to an adapted psychoanalysis for the poor.

My motivation to write *Unseen City* goes way back. My PhD explored the relationship between hysteria and Victorian melodrama. I was drawn to psychoanalysis because hysteria was being medicalised as a category at the same time psychoanalysis was being written. I was studying nautical melodramas, these silly little plays that were known for their exaggerated portrayal of emotion management or the lack of. So, I examined a kind of food chain or a relay of influence between literature and culture: Charles Dickens and George Eliot watched melodrama, and Freud read Dickens, and here we have a transmission of hysterical symptomatology through literature to culture, and it influenced the way in which psychoanalysis became a medical discipline at the turn of the century. I was very interested in psychoanalysis, to the extent that I thought I would become a psychoanalyst myself! But my interest waned because I found it too metropolitan, too status-laden, very trendy...

In researching my second book I came across the scholarship on the phenomenon of ‘Free Clinics’ (such as Elizabeth Anne Danto’s wonderful book *Freud’s Free Clinics*). At the 5th International Congress, Freud made a declaration that sparked a mental health cooperative movement. He stated that the poor should have the same access to mental health assistance as they do to lifesaving surgical aid, just two months prior to the Armistice. I call this a sort of ‘speech act’, because after this, between 1918 and 1938 you have this mushrooming of free clinics, from Zagreb to London. As Danto says, these are ‘free’ clinics literally and metaphorically: they freed people from destructive neuroses and they were, like the universities of Europe, free of charge. This book was an eye-opener for me. This generation of reformists and activist psychoanalysts wanted to claim the right to mental health as a human right. This really made me think. Through conversations with psychoanalysts, psychiatrists, and public sector mental hospitals, *Unseen City* evolved into an examination of cultural discourses around poverty, mental health and psychoanalytic mental

health paradigms, and I felt that the humanities should be allowed to play a role in this concerted cross-disciplinary effort toward the alleviation of poverty.

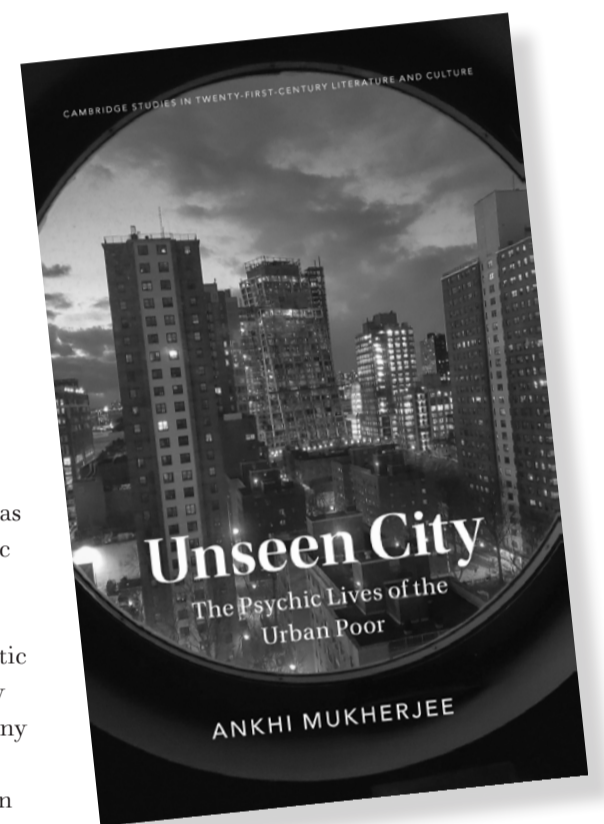
**NF:** It’s striking how your use of psychoanalysis in cultural analysis has led to your advocacy for a humanistic approach to providing therapy for those impacted by poverty. Perhaps those of us who rely on psychoanalytic theory all need to cultivate a healthy dose of ambivalence. There is an irony here in that it seems to be through challenging and questioning our own investment in psychoanalysis that we can tap into the critical potential of it.

As a fellow lover of novels, I felt you demonstrated the potential of psychoanalytic reading as a powerful social/political tool: it can unveil the problematic construction of psychological conditions, as you have shown in the case of hysteria. You worked with *The Memory of Love* by Aminatta Forna in your book, and your analysis of the novel exemplified how the complexity of psychological suffering and approaches to treatment cannot be fully addressed through conventional psychoanalytic theorising or ‘Western’ methods. Your psychosocial reading of the book brings to light its under-story of a transgenerational haunting, of violent, interlocking histories of colonial trauma. I appreciate how you show that the singular, sovereign subject doesn’t exist, but we are always already implicated in the collective history which precedes us.

**AM:** I initially planned to have separate critical and clinical chapters, but as you see in the book, they became fairly intertwined... I was struck by how the paradigms of trauma, which clinicians in the community were grappling with, had already been explored by literature. With the topic of trauma, I have to keep telling my undergraduates that when you’re talking about trauma resulting from World War One, use the term shell shock and don’t call it PTSD, which emerged from Vietnam War discourse. These are distinct phenomena. The

trauma experienced in trench warfare differs from the trauma that arises in the context of post-industrial-warfare and Cold War era conflict such as the Vietnam War. I discuss the limits of PTSD in my critical interpretation of this book called *Beautiful Thing*, written by an Indian journalist Sonia Faleiro, which chronicles the lives of bar dancers teetering on the brink of abusive forms of prostitution. Bar dancers are not prostitutes, they dance in bars and can operate as escorts, but they get dragged into the flesh trade eventually. In her research, Faleiro delves into the tangled lives of bar dancers, bar owners, sex workers, transgender and transvestite groups, gangsters, police. She observes that what the young bar dancers have is not straightforward PTSD. They’ve all had histories of sexual abuse which are perpetuated in the endemic violence of their work lives. The father of one of these characters tries to make pornographic movies with her, and when she refuses he sells her virginity to the local police. So, there is of course PTSD, but what Faleiro also asks is: where is the ‘post’ in PTSD for people who live in conditions of endemic violence?

She doesn’t mention this term, but this is what anti-apartheid mental health activists have called Continuous Traumatic Stress (CTS). Faleiro diagnoses the malady without delving into psychoanalytic discourse. When we are told that the bar dancers keep visualising



dead babies, we know that it is because they inhabit this hallucinatory reality where you may actually find discarded fetuses in the dumpsters (from the back-alley abortions they're forced to have). In other words, trauma is not universal. It is not a timeless entity. It is a historical construct. And PTSD itself is an outcome of Vietnam veteran pressure groups and anti-war psychiatrists. Aminatta Forna raises a similar point in *The Memory of Love and Happiness*. She offers a scathing critique of western concepts of trauma in the context of Sierra Leone after the civil war, arguing that these ideas have legacies of colonial neuro-anthropology. Do we have local models that match PTSD? Perhaps not in abundance. But what she's saying is that the Western intellectual or aid worker needs to declare self-interest. They need to say, "This diagnostic tool is a Eurocentric model". In *The Memory of Love*, you have this British psychologist, Adrian Lockhart, who comes to Sierra Leone, who comes to Freetown in 2001 during the civil war and precipitately interprets the scene. Forna bristles against that Western diagnosis that 99% of the population is suffering from PTSD. This is what the reports are saying. But then Attila Asare, who's a Ghanaian psychiatrist in the novel, has that famous line, "You call it a disorder, my friend. We call it life". So I'm saying these are forms of suffering, but these are also forms of resilience and rude survivalism associated with all kinds of traumatic events that the Western medical outlook does not do justice to in these situations of mental health outreach.

**NF:** "You call it disorder. We call it life." What a line! Your reading brought it to life while also situating it within a larger psychosocial critique of how our understanding of trauma can be pathologising and stigmatising for individuals. This reminds me of Winnicott, who once said, "the instincts can be as much external as can a clap of thunder or a hit" (Winnicott, 1960). Trauma is not a personal problem but rather a psychosocial phenomenon stemming from intricate cultural, historical, and political processes. Approaching trauma through this lens can

serve as an antidote to the pathological view of trauma that is often seen in neoliberal society. Your critique of PTSD carries an empathetic message that reassures individuals they are not isolated in their traumatic experiences. It nurtures a sense of community and solidarity.

**AM:** With relation to *Civilization and its Discontents*, this is an area where I find myself at odds with Freud's thinking about the 'primitive'. On the one hand, he suggests that the Oedipus complex is not a purely individual phenomenon, but rather inherited from the psychic life of the primitive human. In other words, he sees the process of civilisation as parallel to the phylogenetic coming of age and does not distinguish between European Oedipus and its 'primitive' counterpart - the non-European. However, there's also that persistent idea that barbarian is somebody stuck in childhood. There is an underlying belief that the barbarian lacks individuality and has an unquestioning belief in gods. This underpinning belief in Freud's thinking about the primitive is a theme that is present throughout his work. In *Unseen City*, I talk about the movie *Slumdog Millionaire*, which refers to slum children as 'dogs'. There is no equivalent of this in any Indian language. You can relate this to Freud's thinking in *Civilization and its Discontents*, this inchoate mass that stands for the primitive, like a mass of feral strays crowding the slums. Children, drug dealers, hustlers, warlords, cows, dogs - they're all fused in this mass. If you see the theme song in *Slumdog Millionaire*, that's what you see visualised: you see a child running, then the child becomes many other children, then the child becomes the hustle and bustle of the dhobi ghaat, or the communal laundry. The child becomes many children, other humans, slum animals, and then it becomes the rooftops, the corrugated rooftops of the slum, so that the individuality of the child in the slum itself is lost in its shambolic infrastructure. It just becomes this sort of assemblage of non-living, half-living, and inhuman entities. And the movie is about this child's escape from the slum and into becoming a citizen-subject, and it seems to say that in order for you to be a subject

- just as the child has had to outgrow primitivity to become civilized - the so-called 'slumdog' has to leave the slums behind, the slums which are also a place of rich interpersonal relationships. This is exactly the kind of phobic view of poverty I'm trying to combat at every stage.

**NF:** In your book, you discussed a fascinating concept called 'The Walking Cure', which refers to the idea of psychoanalysis on the move. Our discussion today has emphasised the importance of a community-centred approach to mental health care when psychoanalysis is taken outside the consulting room and into marginalised spaces. This is something that many of our readers in *New Associations* engage with in their professional lives. If you could convey one message to our readers, what would it be?

I have learned to connect better with these narratives from below, rather than with psychoanalysis from above

**AM:** Because I'm a literature person, let me end with this beautiful novel by Rawi Hage called *Cockroach*. It's about a protagonist who thinks he is half-cockroach, and he's scuttling around very wretched and very hungry in this icy city which we think is Montreal. We know that he's a migrant, we know that he's tried to commit suicide and he was sectioned and therefore the state has mandated that he visit a therapist every week. And the really interesting thing about the novel is how the psychoanalyst doesn't get it, the nightmarish reality of the protagonist's waking life, his memories, his fantasies. He's a thief and the people he mixes with who are also the sort of 'refuse' of society, if you will - the hustlers and the con artists. Unassimilable and misunderstood in the world above - and this reflects the topography of psychoanalysis - he finds his freedom underground, in the city's unconscious as it were. Metamorphosing as a cockroach, he delves into the sewage of the city. And this is an alternative history. The ugly cockroach, the wily cockroach, doesn't have the power to change the racist city, but he can scuttle underground. I interpret this as the turning of a very

pernicious stereotype of the migrant as a parasite - David Cameron in 2015 called migrants trying to reach Britain through Calais a "swarm" - and reclaiming this as the cockroach's preternatural ability to claim the underground. And it's these alternative articulations of psychic life that I think I have learned to read better - whether it's in literature or the case studies or the notes of the vulnerable experts acting as lay counsellors who bring their own life experiences to their work within communities. I have learned to connect better with these narratives from below, rather than with psychoanalysis from above.

*Ankhi Mukherjee is Professor of English and World Literatures at the University of Oxford and a Fellow of Wadham College. Her recent books are Unseen City: The Psychic Lives of the Urban Poor (Cambridge UP, 2021), recipient of the Robert S. Liebert Award, and What Is a Classic? Postcolonial Rewriting and Invention of the Canon (Stanford UP, 2014), which won the British Academy Prize in English Literature. Mukherjee's other publications include Aesthetic Hysteria: The Great Neurosis in Victorian Melodrama and Contemporary Fiction, and the edited collections, A Concise Companion to Psychoanalysis, Literature, and Culture and After Lacan.*

*Nini Fang is a Lecturer in Counselling and Psychotherapy at the University of Edinburgh. She has published extensively in the field of psychosocial studies and recently won the Good Practice Research Award in the category of Positive Disruptor Award in recognition of her sustained achievements in innovating research practices that promote social justice and equality. She sits on the Executive Board for the Association for Psychosocial Studies and the Editorial Board for New Associations (British Psychoanalytic Council).*

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We welcome your ideas for articles, reviews and letters to the Editor. In particular we are looking for reviews of cultural events, books and films with psychoanalytic interest. If you would like to propose a topic for a longer article (up to 2,000 words), please contact Helen Morgan at helen.morgan@bpc.org.uk.

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## Editorial

# Voices from the Margins

## Helen Morgan

**I**n this edition, several of the articles refer to the agreement between Freud and the early pioneers of psychoanalysis at the 1918 Budapest international conference that the discipline needed to expand on three fronts: research, training and subsidised clinics. And to the fact that, owing to economic and political factors in the first part of the 20th Century, only the training option and a limited research endeavour based on the single case history resulted. Our failure to develop the subsidised clinic and hence the neglect of those who cannot afford what we have to offer is surely significant not only socially but also for the profession.

**“the neglect of those who cannot afford what we have to offer is surely significant not only socially but for the profession”**

The opening discussion between Nini Fang and Ankhi Mukherjee takes up the theme directly from a

global perspective. This is supported by the contributions from Manali Arora on the implications of the Indian caste system and from Gustavo Machado on analytic work in Brazil. Emma Hotopf and Maxine Dennis offer an example of a project in the UK attempting to address this problem and to ‘reach those from the local, ethnically diverse and disadvantaged communities that often do not make it to psychotherapy’.

**“current first-hand experience of the impact of social injustice and oppression on the individual and the family”**

For most of us who have chosen the path of private practice and may have left behind careers in the public sector long ago, there is a question of how we might read these reports from those in the psychoanalytic community who have remained working in public health settings, and so have current first-hand experience of the impact of social injustice and oppression

on the individual and the family. I suggest that such learning is rarely allowed to fully impact our clinical theories and we are the poorer for it. As Tolleson (2009) notes: ‘Working from the margins, these clinicians have contact with our culture’s hidden subjectivities... (which)...comprise hidden – subjugated – knowledges that remain, sadly, outside our formidable intelligence as a profession. (pp. 201-202).

Existing as it does outside of the usual confines of the academic journals, one of the aims of *New Associations* is to offer a site where some of those ‘hidden subjectivities’ may be heard. I suggest that this should not be a one-way process whereby psychoanalytic thinking is ‘applied’ to a more public setting, but that there is a general recognition of how much we can learn from those whose voice is rarely heard, and that we take the opportunities offered from writers working at the margins so their research might affect such a ‘formidable intelligence’. I hope that, in a small way, this edition of *New Associations* offers just such an opportunity.

**Editorial Board matters:**

Sadly Gabrielle Brown is stepping down from the editorial board after many years’ service due to pressures of

work. She was a very able sub-editor for the ‘On the Ground’ section of the magazine and has been a thoughtful and creative member of the Board. She will be sorely missed. As will Harriet Gaze, who joined the Board more recently and who has had to step away from this role due to work and personal pressures. Her general contributions were much valued alongside her specific attention to disability matters. We wish them both well and hope they will continue to be involved as contributors.

Niamh Downes has just joined as the new Communications Manager at the BPC – a role previously held by Richard English. Previously, Niamh has worked in more marketing-leaning roles in the creative sector such as Trinity Laban Conservatoire of Music and Dance and Rosetta Arts. She writes that she is delighted to be joining *New Associations* as Co-Editor, especially as her first professional role was in humanities academic publishing back in 2018.

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## International

# Inside a Hurricane: Decolonising Psychoanalytic Practices from a Brazilian Perspective

Gustavo Machado

**A**t the beginning of my training as a psychologist and psychoanalyst, I produced the following dream: inside an enormous hurricane, I was struggling to survive amongst the debris that spun with me (books, chairs, pieces of wood). My identity card was spinning around and I was trying to save it but I failed. It had been lost in the wind. At the time, I interpreted this dream as being about what of my identity I would have to give up on to be the subject “supposed-to-know”. In order to achieve this ‘transformation’, to be a good psychoanalyst, I needed to lose something of myself. But why? Like many Brazilian psychoanalysts, I was the first person in my family to lie on a couch. Psychoanalysis seemed distant, something almost untouchable but strong as a hurricane: I felt its power and effects but couldn’t shape it as a part of my life.

## “I work listening to those socially projected into oblivion”

This feeling of detachment may have different origins, including the dynamics of resistance itself. Still, something from the culture and the social bond must be considered, bringing a political bias to psychoanalytic listening. In Brazil, we learn in school that our country was ‘saved’ by the colonisers, who, full of heroic courage, brought ‘knowledge’ and ‘development’ to a supposedly wild land. In our history books, we used to have an image of a white male coloniser from a country in the Global North instead of an indigenous person. This salvationist and violent narrative was historically perpetuated for over five hundred years, placing the protagonism of our own history in other characters.

Closely related to this, Fanon indicates that one of the perverse effects of colonisation is the psychic marks perpetuated transgenerationally as ghosts, maintaining a powerful line that separates ‘us’ and ‘them’, indicating possible and impossible subjective places in the coloniser/colonised binomial. Growing up as a queer person in the Brazilian working-class, psychoanalysis was not a possibility. In that context, psychic suffering was never an issue to

be worked on. It was an indicator of weakness, maladjustment, or sin. In Brazil, as in other countries, colonisation used religious strategies and promoted a psychic dynamic based on the supposed necessity of suffering to obtain a worthy future. Especially for racialised people, the reality is framed by a perspective that doesn’t fit them. Thus, not only were the forests annihilated, but a collective imaginary was destroyed for the sake of the colonial project based on racist principles.

We naturalised the suffering of a specific population: those appointed to serve; to that end, only the body matters. This naturalisation became stronger with the recent unfolding of neoliberalism and its intersection with the psychoanalytic clinic (Safatle, 2020). To be heard became a right of those who could pay for it, confirming the criticism that psychoanalysis had distanced itself from the political proposal that Freud argued in his Budapest speech in favour of the broad scope of psychoanalytic listening. Following Freud’s suggestion and facing the Brazilian reality in my analysis, I have worked in free clinics in critical social conditions: in the care of prisoners, refugees or with people in precarious positions due to the dynamics of oppression. Taking Lélia Gonzalez’s perspective, I work listening to those socially projected into oblivion.

Psychoanalysis has historically been positioned in normative discourses to establish itself as a theory and technique in the scientific field. Starting with our role, we build a ‘necessary’ distance from patients, undeniably distancing us from ourselves. This was undoubtedly transmitted to me in my training, even unconsciously, in the name of the ‘supposed-to-know’ position. When I began to work clinically, I wondered: *what if the patients discovered, or realised, that I am gay? What are the effects of that on the transference?* In his emblematic 2019 speech in front of the École de la Cause Freudienne, Preciado warns about the



risks of neutralising our own experience as analysts.

For him, we historically locate difference only in the history and the body of the people we listen to, placing ourselves on a fragile pedestal supported by the regimes of truth imposed by knowledge, which are also sustained by colonial practices, as Fanon suggests. As a result, we always name something in the other, never in ourselves, transforming our own analysis into a formative place that is immaculate and distant from the experimentation of our subjectivity. According to him, we need an epistemological turn to reconfigure our questions, accepting a political and implicated character to our practice and body. This has been my formative standard.

We are used to hearing, analysing and feeling the effects of transference. This clinical event summons us to occupy places that re-edit relationships already experienced by patients. Immersed in such intense situations, we are also asked to deal with our own affect in the face of these roles, which we call countertransference. Above all, our function is to manage this ‘confusion of roles clinically’, also dealing with our phantoms of rejection, insecurity, or solitude. In other words, clinically, we are beings of a thousand faces without wearing them. Working in free clinics, I realised that I was a faceless being. Without the symbolic reference

of the position of care promoted by psychoanalysis, the supposed knowledge so desired distanced me even more from a possible bond.

Constantly, they start the session by asking: *what can I talk about here? What do you want me to say?* Without a ready-made symbolic representative of psychoanalysis or the image of a psychoanalyst, the transference relationship is permeated, if not by the institution’s surveillance discourse, then at least by colonisation’s psychic effects. In these contexts of unequal power relations, listening never seems possible because there is no room for the ‘subject of desire’. How to build a potential ground for transference in such situations?

Asking myself this question, in analysis, I revisited my dream about the hurricane. Firstly, why a hurricane and not a ‘Pororoca’? We don’t have hurricanes in Brazil – even *my* confusion was symbolised by a Global North perspective, probably from films I watched. Secondly, I did not find the identity card because it was already *in* me. Butler presents a reading of transference as a fruitful scenario for recognising histories consigned to oblivion or the violence of exclusion. The challenge lies precisely in reconfiguring the way we listen. Instead of losing something of myself, I should confirm and believe in who I am, someone beyond the ‘subject supposed-to-know’ who is marked by my history. I realised that, in these contexts, the position of knowledge I occupy is not empty of me; quite the contrary.

In this sense, I think with the Brazilian Guarani psychologist Geni Núñez that to decolonise our practices within psychoanalysis, it is also necessary to reforge our imaginary to be in a new ecology of care, understanding listening as a public right. For that, rather than reproducing norms, we can’t be afraid of words such as racism, homophobia, transphobia, or others that highlight the psychic effects of exclusion, because our reforestation is composed of words, building a new grammar.

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1 A ‘pororoca’ is a natural phenomenon known as a tidal bore, characterized by a powerful wave that travels upstream against the river’s flow. The term ‘pororoca’ comes from an indigenous Tupi-Guarani language and means ‘big noise’ or ‘great roar’, describing the loud sound produced by the wave as it crashes against the river banks and obstacles in its path.

## International

# From the Shadows of Disavowal: Psychic Terrain of Caste in India

Manali Arora

**A**s I began writing about the intersections of psychoanalysis with issues of caste – a deeply rooted, pervasive social issue walled off from the discourse on psychoanalytic practice in India, I experienced a block. From the cracks of the unconscious, I was gripped from the inside out by the question: Why did I choose to write on caste? To assuage the guilt of growing up with the ‘luxuries’ of the caste privileges I was born to? Or to deny my complicity in a now institutionalised casteism in the country?

Mired in an introspective morass, I was reminded of a brief but woeful exchange that tossed the caste realities of unwarranted privilege and shame disrobed. In my oblivion and ignorance, I denied the caste oppression and expressed to a friend from the Dalit community – an oppressed caste in India – how I do not even know what caste I belong to. Her response to my nescience, ‘If you do not know your caste, you can be certain that you are an “upper” caste,’ lay bare the stifling realities of caste as the scourge of the Indian unconscious.

Caste in India is a form of social stratification and a means through which occupations are determined, social hierarchies concretised, and exclusions justified through the logic of purity-pollution and congenital transmission. In modern India, it is not an unquestioned legacy but a mode of oppression that obstructs one’s capacity to be. While

Dalit history is fettered with violence and atrocities of oppression, caste for most ‘upper’ castes continues to remain a tenebrous spiral of nothing – a violent negation in the crucible of privilege and power.

The rootedness of the caste system is what distinguishes the psychoanalytic understanding and therapeutic work in the country just as it eludes it. Not only has therapeutic work become a luxury reserved for the rich, it is also often oblivious to the layered realities of Indian life. The elephant in the room of such realities is caste – an enduring curse of the Indian mind. Both therapist and the patient avoid sinking into its muddy depths in fear it will pollute them by making grim social realities real and alive.

This silencing and its exclusionary effects echo the absence from the psychoanalytic discourse of attempts to understand how caste positionings and realities can structure the psyche and conscious-unconscious dynamics. The lower castes are seen as primal beings and the right to higher-order thinking is reserved for the upper castes. Overlooking these evocative yet shunned consequential social imaginaries causes a refusal to recognise the actuality of a traumatic perception, or in classical terms, creates a split (Ryan, 2010).

Following Dalal’s (2002) theory of race – that highlighting race is itself racist – implies that racist enactments in the clinic cannot be avoided. Likewise, it can

be said that the caste processes are already enacted when we recognise the caste differences in the therapy room, similar to when we deny them. Therefore, to practice psychoanalysis in India is first to recognise that neutrality will not be the only junction where we meet our patients. Only when psychic responses to such social realities are not shoved into the frame of individualised lack can moments of mutual recognition be found in the service of true discovery of the self.

With the help of the vignette below, I draw on my work to emphasise how there is a palpable dynamic between psychic realities and caste identity that is as much about the makings of caste as it is about its consequences.

During the initial (online) sessions with one of my patients, Dev, I often found myself looking at my small image at the side of the screen and thinking, ‘Why do I look bad today? What am I even wearing? Maybe next time, I can try adjusting the lighting better.’ In those moments, an interruptive awareness of my patient’s gaze would bring me back to the room, a gaze I could feel piercing through a ‘third’ between us, a third I could not make sense of.

Dev is in his early thirties and grew up in a Dalit community in Kerala, India. From the murky fields of his village, he found himself in the high-rise buildings of Muscat. Caste identity, in an alien country, began to interweave with that of race. When Dev returned to India a few years later, the ambivalences of caste identity accompanied the new ambivalence of the identities of race.

He sought therapy for feeling flooded – for feeling too much, yet nothing. He would express, vent; however, by the end of the session, he felt empty, uninhabited, and drained, as if he had given something to me I did not to how to receive, as if his words were lost in the

third between us and never reached me. The spaces between ambivalences seemed unbridgeable, a vacuum, an absolute emptiness.

A symptom is a substitute for something so displaced and distorted that it is not gratifying but manifests like a compulsion (Freud, 1894). A compulsive skincare routine was perhaps Dev’s way of (un) seeing the empty spaces, the disavowed parts of the self, to not plunge into the quagmire of dirt associated with caste identity. Dev was conscious of his need to have a strict skincare routine but was unconscious of the split upon which this need rested. I too plunged into the split when I saw myself in ways he has seen himself being seen by the other – a face that looks bad with clothes tattered. In those moments of being hyperaware of my appearance the third became bridgeable, permeable – the third that I realised was our caste identities.

As the vacuum imbued that no longer was I, an upper caste female therapist, limited to being the ‘seer’, and Dev only the ‘seen’ – those primal emotions of envy and anger supposedly only associated with ‘primal’ beings, those that Dev had to shun as disavowed parts of his caste identity, began to find expressions. It has been almost a year since our work together. Now, when I look at my image at the side of the screen, I find myself thinking, ‘My skin looks gentle today.’

*Manali Arora is a Psychodynamic Psychotherapist and researcher in India.*

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## Climate Crisis

# Facing Climate Breakdown – Psychotherapists in Action or in Waiting

Judith Anderson

**D**istinctive from the frequently debated scientific or activist perspectives on climate change, the Climate Psychology Alliance (CPA) is interested in both the depth and the diversity of individual and collective emotional and psychological responses to the climate crisis: from societal avoidance and disavowal, the deep and troubling psychological effects that lead to despair, overwhelm, numbing and anger, through to the sense of connection, solace and community experienced by people with shared concerns coming together to address them.

An organisation growing over 12 years to more than 500 members across the globe, CPA has different strands to its work – researching and publishing, developing methods of support through pro-bono sessions and climate cafés, providing CPD for psychological professionals, developing projects to support young people, and offering talks and consultation for organisations and businesses. In addition, there is support for members.

## “There are many ways that climate change impacts on individuals and communities”

There are many ways that climate change impacts on individuals and communities. With recent heat waves and worsening floods, most of us in Northern Europe have experienced this ourselves. We know people in other countries impacted by events made worse or more frequent by climate change – wildfires, floods, heat domes.

Despite this, we struggle to hold in mind Pakistan in autumn 2022 when 33 million people were impacted by floods with one-third of the country underwater, or the 4 years of drought in the Horn of Africa leaving 22 million at risk of starvation (worsened by conflict and the war in Ukraine). The situation, which Timothy Morton describes as a ‘hyper-object’, gives the psychotherapeutic community much to process and ponder.

## Psychological Impacts

Little known by therapists is the

dangerous effect of rising temperatures on mental health. We have animal bodies and heat beyond that to which we are acclimatised has an impact, with increasing suicide, violence and psychiatric admissions, especially amongst the most vulnerable through dementia, psychosis and drug abuse.

There are the more ‘traumatic’ psychological impacts of single or repeated climate events, for example repeated droughts causing financial hardship and loss of livelihoods to farmers.

Researchers predict that, of the many global health effects, the main issue in Northern European countries will be the psychological and mental health impact of adverse weather and storms, causing flooding and consequent disruption. Those caught up in the 2007 UK floods showed increased depression and anxiety, with the most vulnerable affected more (e.g. existing psychological problems, poverty, co-morbid physical disabilities).

The longer-term consequences of weather-related hazards can be especially perilous – food shortages, homelessness and displacement, damage to public infrastructure, power and connectivity, loss of agricultural land, and sacred places. These impair social cohesion, undermining crucial supports for psychological wellbeing.

Psychotherapists are not immune. In the aftermath of Hurricane Katrina, many therapists left New Orleans never to return. Those who did resumed practicing in adversity, their own homes damaged. One wrote of a change of frame as they lived through the mopping up exercise. The rarity and unpredictability of tradespeople meant that it was commonplace for both client and therapist to have phones switched on and to end a session if the plumber called.

Then there are the emotional states under the heading ‘eco-distress’, in response to current and future changes; the grief, sadness, guilt, anger, solastalgia, anxiety, frustration felt by anyone involved in the reality of climate change – such as scientists, teachers, civil servants in the environment and scientific sectors, those working for NGOs either directly concerned with the environment or those who see their decades-long wider efforts in development reversed, and activists. We



might surmise that those not consciously aware of the perilous situation may also ‘know’ and feel the many and varied emotional tides.

Especially, we hold in mind youth, facing the science, envisioning a bleak, stolen future, the ‘grown-ups’ not acting commensurate with the evidence, and, worse, finding their responses ignored or belittled (Hickman et al).

## “we hold in mind youth, facing the science, envisioning a bleak, stolen future”

Psychotherapists’ work can contribute as we become trainee navigators in these psychological tides. What do those in the climate field ‘carry’ on behalf of others? How does the trauma of this show up in our defences? How can we disentangle our personal complexes from understandable reactions? How can we, individually and collectively, face difficult truths so that we are enabled and empowered to move from emotional paralysis to attuned action? Sally Weintrobe’s critique of the ‘culture of un-care’ nourishes our understanding, as does the work of eco-psychologists such as Jungian Mary-Jayne Rust.

Reflecting on being both anxious and fearless as a therapist, I think we need both – to be fearless in the ongoing task of being with our own kaleidoscope of ‘eco distress’, in speaking to this in our clients. We are fearless when we move beyond the paralysis that anxiety can cause, or when we are not afraid to

move beyond traditional therapeutic spaces to make informed contributions to systemic change that might, just, create a meaningful and more sustainable future. Rosemary Randall’s *Carbon Conversations* was pioneering, bringing psychodynamic understanding to the task, and she has a new project *Living with the Climate Crisis*.

## “Alongside action we offer a deep capacity to be ‘in waiting’”

There is also tension between action and waiting which we know well. Involved with CPA since its founding, and now chairing its Board, often seems an active, vigorous task serving as a distraction from what psychotherapists bring to the globally unjust crises of climate breakdown, environmental degradation and biodiversity loss. Alongside action we offer a deep capacity to be ‘in waiting’, not avoidant waiting, not waiting for someone else’s action, not waiting because therapists are ‘above’ acting, but waiting to listen, to hold spaces where defences can be understood and softened, to follow the wisdom ‘it’s an emergency, slow down!’

*Judith Anderson is a Jungian Analytical Psychotherapist with a background in psychiatry. She has a longstanding interest in the intersection of psychotherapy with societal issues and has been particularly focussed on the climate crisis for over 15 years. She is currently Chair of Climate Psychology Alliance.*

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## Climate Crisis

# Reflections on a Series of Workshops Linking Winnicott and the Climate Crisis

**Chris Brogan**

**D**. W. Winnicott applied many of his psychoanalytic ideas beyond the clinical field, for example to democracy and the atom bomb. What might he have made of the Climate Crisis? From this question, the idea emerged of holding online workshops around some of Winnicott's key papers, enabling contributions from countries outside the UK. A brief summary of the paper given at the beginning of each workshop formed a base for far-reaching discussions. Nine evening workshops, free of charge, were scheduled over a year. The Squiggle Foundation generously supported this venture with Adrian Sutton, the Director, and Trustees Mike Tait and Craig Fees, facilitating the workshops.

## “The Climate Crisis is the biggest existential threat of all time”

The Climate Crisis is the biggest existential threat of all time. It brings to the foreground the more undesirable elements of being human: greed, consumerism, exceptionalism, apparent unconcern, huge inequalities and injustices. We have to question our values and our participation in so-called neoliberal capitalist societies. The very meaning of life and what makes life worth living is at stake. Winnicott allows a way into thinking about disturbing primitive mental states which does not pathologise the individual. Healing is facilitated by the ordinary, reliable presence of another who is not doing anything clever. The overall tendency to integrate developmentally, and a belief in the innate potential of every individual,

encourages hope for humanity. This article gives some examples of how the group used Winnicottian ideas.

One theme that emerged was the sense of personal responsibility arising from concern for each other and the planet in the face of impending catastrophe. An example was given of leading a group of reluctant adolescents into the mountains. Initially they cursed the weather, the terrain and the leaders. However, the sense of achievement and camaraderie in helping each other over difficulties led them to take charge of the provisions and the next expedition. Hatred acknowledged and discharged onto the mountains, which can take a bit of hatred without retaliation, allowed the group to discover their ability to work together, to be constructive and feel of value. The discussion turned to what prevents the development of concern. Developmentally, we know that trauma disrupts ‘going on being’ which affects the emergence of concern. An example came from Iran where the trauma of war, revolution and sanctions has fostered a “short term society”, where values such as conscience and honour have been overtaken by self-indulgence and a narrowing of any concern. Concern does not flourish in societies where there is oppression, gross inequality or where individuals are cut off from nature, only viewing it on screen. True concern arises out of a connection, a relationship, whether human or non-human.

The capacity for concern is based on the achievement of unit status, closely linked with the ability to be depressed. In contrast, corporate bodies, government and big businesses appear to operate at a much more primitive level akin to borderline or psychotic functioning. An example was given of Coca Cola being marketed where there is no clean drinking

water. We live in a mad world ultimately of our own making, yet we try to make sense of things using mature neurotic thinking. Winnicott's papers *The Use of an Object* and *Fear of Breakdown* helped the group to think about this conundrum. The group wondered if Putin's recent invasion of Ukraine could be a response to the fear of Russia breaking up even though the breakdown (of the USSR) had already happened. Could the Climate Crisis be seen in the same light? Are we living in an environment which we experience as breaking down, but which has already broken down due to our neglect and poor stewardship, of which we were unaware? In order to continue living in this unbearable state we use disavowal, holding two or more contradictory states of mind at the same time. The group turned to thinking about the Nuclear Holocaust and the climate catastrophe which both threaten humanity with annihilation, ending the continuity over time and generations. Winnicott thought that Death does not interrupt the “continuity of being” and can be thought about but annihilation from either nuclear or climate disaster is unthinkable.

A participant from Brazil reminded us that these anxieties are not new in South America, where massive environmental destruction is well established. Ultimately, we could render the environment incapable of sustaining life. The group repeatedly returned to questioning the dominant neoliberal consumerist, economic and political model, acknowledging that Climate Justice and Social Justice are inextricably linked. In a powerful contribution from Japan, a psychoanalyst related the alarming increase of life-threatening anorexia to the profound change in emotional climate after the war, when the Japanese economy became increasingly Westernised and performance focussed, with a rapid rise

of individual consumerism: “Something went wrong in the way we live. Too much emphasis is placed on the intellect. Not enough attention is being given to the emotional life of infants and children”. Closely linked to this theme are Winnicott's views on dependency. Collaboration and interdependency, both between ourselves and the natural world, is at odds with the dominant individualistic culture which has also permeated non-Western countries. Indeed, the fear of dependency and the associated fear of infantile helplessness is exacerbated by the Climate Crisis and the realisation that resources are finite.

COP 26 brought promises and hope, but despite a year of floods in Pakistan, droughts in Africa, fires in Australia and war in Ukraine, the group did not succumb to cynicism or apathy. The feedback in the plenary session was generous, although attendance dropped off. One participant felt that the group was a symbol of hope where imaginative possibilities could be played with. There was interest in exploring different contemporary themes in a more condensed series of workshops as monthly sessions spread out over a year lacked continuity. Participants thought themes explored in *Fear of Breakdown*, *Use of the Object* and *Capacity for Concern* were particularly relevant.

*Dr Chris Brogan lives in the Tyne Valley and is a retired Medical Psychotherapist and Psychoanalytic Psychotherapist, a member of SAPP and a Trustee of The Squiggle Foundation, which is an organisation dedicated to promoting the work of Donald Winnicott.*

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A fuller version of this article and the list of key papers can be found on: <https://squiggle-foundation.org/resources/exploring-some-key-papers-of-winnicotts-in-the-light-of-the-present-climate-crisis-reading-list-for-the-2022-study-group/>

## Do you need a proofreader specialising in psychoanalytic writing?

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## On the Ground

# 10 Windsor Walk: a New Centre for Psychoanalysis and Psychotherapy in South London

Emma Staples Hotopf and Maxine Dennis

**1**0WW was founded in 2018 by a small group of adult and child psychoanalysts and psychoanalytic psychotherapists in response to concerns about the limited availability of psychotherapy in the NHS, and to offer a home for psychoanalytic approaches in South London. It has become a hub for psychotherapists and psychoanalysts and others interested in a psychoanalytic approach.

There were lots of motivations for the project: to provide accessible intensive psychoanalytic treatment to those in need in the local community, to become a space for creative thinking around the applications of psychoanalytic ideas, to enable more people to have access to training in psychoanalysis, and to run psychoanalytic events. South London is comprised of ethnically and culturally diverse communities and we hope to reflect this diversity through accessibility for those seeking analytic help and those interested in participating in events and training.

The idea of disseminating psychoanalytic thinking was where we started. In 2015 we established the Maudsley Lectures, working with the Institute of Psychoanalysis and the South London and Maudsley NHS Foundation Trust. We started a series of lectures every Monday evening which has ranged from clinically orientated lectures on psychosis and depression to lectures on art and culture; the most recent was on Jane Austen and her ability to convey unconscious thought. These lectures have been popular and have attracted a diverse audience of those in our profession, a wider community of mental health practitioners, and members of the public. They took place first in an events space owned and run by the Maudsley Charity. We had built a community, but we needed a physical space of our own.

A group of us managed to persuade a wider team of experts to form an informal board, including experts in property development, law and governance, the charity sector and finance. An opportunity arose to lease or purchase a four storey Victorian house, 10 Windsor Walk. (The building was about to be sold by the Maudsley Charity and we persuaded them to let us lease it while we raise the funds ultimately to buy it, which is still

our aim.) We moved in, in October 2018, and gradual refurbishment has created a homely setting for our work. With support from lawyers working de bono we formed a Community Interest Company. The house now has nine consulting rooms, a child and family room, group room, events space and garden.

Taking on this enterprise required money and a lot of energy. We agreed with the Institute of Psychoanalysis that they would lease clinical rooms and event space and the income stream we generated from the Maudsley Lectures allowed our activities to develop. We received generous grants from the Melanie Klein Trust and Winnicott Trust and a number of private individuals. The enterprise, acting on a not-for-profit basis, is now, after some anxious years during which we wondered if it would fly, solvent and self-sustaining, through a combination of room rentals, events and grants.

The site is on the periphery of the Maudsley Hospital and Institute of Psychiatry, Psychology & Neuroscience (IoPPN, part of King's College London) campus. This campus is headquarters to the UK's largest mental health provider (South London and Maudsley NHS Foundation Trust) and the largest centre for mental health research and education in Europe (IoPPN). The setting allows those at the Trust and IoPPN to easily access rooms and events, allowing psychoanalytic ideas to permeate these organisations through meetings and collaborations, and providing the opportunity for trainees in psychiatry and clinical psychology to gain greater exposure to psychoanalytic ideas than would otherwise have been possible. There is a strong analytic history and presence of psychoanalytic psychotherapists and analysts at the Maudsley, but until now it had no centre.

An initial grant from the Maudsley Charity enabled us to run our first project: Therapeutic Relations for nurses across the South London Partnership. A third of the nurses who participated in this achieved promotions during their time on the course, many saying that the course had given them confidence to apply. At a time when retention and recruitment is such a concern this outcome was particularly impressive.

Reaching those who would otherwise not access psychotherapy is an important motivator for this project: can we reach those from the local, ethnically diverse and disadvantaged communities that often do not make it to psychotherapy settings? Low fee psychoanalysis has become available through the IoPA clinic setting. Attending to something Freud raised as early as 1929: 'The very group of patients who need our treatment are without resources.'

**“The playgroup has had a positive impact on parents and children living through the tumultuous experience of seeking asylum”**

An example of 10WW demonstrating innovative socially inclusive work is the Therapeutic Playgroup for Refugee and Asylum-Seeking Families, a playgroup underpinned by a psychoanalytic approach. A major aim of the group is to forge a sense of belonging for the members who have all experienced displacement and trauma. Some mothers had been sex trafficked, some saw family members murdered and fled war zones. Mental health issues include depression, PTSD and anxiety. The playgroup has had a positive impact on parents and children living through the tumultuous experience of seeking asylum. One mother recently reported, 'I've been coming to this group with my son and now I have friends. Before, I had no one. It makes life easier for myself and baby. I enjoy and love everything.' This has been possible through funding from Anna Freud Foundation New York, Paul Hamlyn Foundation and a number of individuals.

A further focus of the project has been to work alongside NHS clinicians in settings beyond mental healthcare. We established a psychosomatic workshop which brought psychoanalytic psychotherapists together with colleagues from the Paris School of Psychosomatics, and is a forum for case discussion with clinicians from diverse medical disciplines. Another aspect of



this crossover with physical health is the T1DE Project, which supports people with the challenging combination of type 1 diabetes and disordered eating – where patients may express their emotional distress through risky use of insulin or dangerous dietary practices. The service, commissioned through NHS England, pioneers a fully integrated model of care with diabetologists, diabetes specialist nurses, a psychoanalyst, psychiatrists and CBT therapists. 10WW provides the therapeutic home for the service.

10WW is planning further projects to apply psychoanalytic ideas in innovative ways beyond traditional clinical treatment. More information on our website:

<https://www.10windsorwalk.org.uk/>

*Dr Emma Staples Hotopf is Clinical Director of 10 Windsor Walk. She trained in psychiatry at the Maudsley, in medical psychotherapy at the Tavistock, and is a Fellow of the British Psychoanalytical Society. In her NHS practice she is consultant psychiatrist at the Maudsley, where she leads the Specialist Self Harm Service and teaches and supervises junior doctors training to become psychiatrists. She established the Institute of Psychoanalysis' Maudsley Lectures in Psychoanalysis which have been running since 2015.*

*Maxine Dennis is a founding member of the Advisory Board of 10 Windsor Walk. She is a Psychoanalyst and Consultant Clinical Psychologist. Maxine was a senior clinician in the Tavistock Trauma service and Fitzjohn's Service (for complex presentations). She was chair of the British Psychoanalytic Council Task group on Ethnicity and Culture and Chair of Ethics for the Tavistock Society of Psychotherapists. She is currently in private practice and involved in teaching, training and supervising.*



## Monarchy

# The Queen is Dead, Long Live the King: Spatialisation Following the Queen's Death

Deborah L.S. Wright

**G**raham Norton hailed the public reaction following Queen Elizabeth II's death in 2022 as 'genuine but not rational'. What is this irrational phenomenon and how can we best think about it in relation to the Queen's funeral processions, lying in state and viewing queues?

## "Sigmund Freud was fascinated by the 1290 funeral procession of Queen Eleanor of Castile"

Sigmund Freud was fascinated by the 1290 funeral procession of Queen Eleanor of Castile, whose embalmed body processed through the area of her properties from Lincoln to Westminster Abbey, where memorial crosses were erected at each night's stay along the way, such as at Charing Cross. Freud used this event to illustrate space being fashioned by projection, after observing that some of his patients manifested their unconscious feelings spatially. He called these manifestations 'mnemic symbols':

'Their symptoms are residues and mnemic symbols of particular (traumatic) experiences. We may perhaps obtain a deeper understanding of this kind of symbolism if we compare them with other mnemic symbols in other fields. The monuments and memorials with which large cities are adorned are also mnemic symbols. [...] What should we think of a Londoner who paused today in deep melancholy before the memorial of Queen Eleanor's funeral [...]? Not only do they remember painful experiences of the remote past, but they still cling to them emotionally.' (Freud, 1957[1910], pp.16–17).

Freud writes of the placing of these memorials on a kind of mourning path that marks out space – a physical representation of an emotional state. These creations are exemplifications of mnemic symbols, into which feelings are not only projected but that are constitutive of these feelings in the first place. The greater our need for containment, the higher a perceived threat and the greater

the pressure of internal instincts, the less we will be able to think, and the more a primitive form of functioning, which I am calling 'spatialisation', will become utilised. The term 'spatialisation' (Shields, 1991) has been used to describe social meaning related to spaces. I use the term 'spatialisation' not only for the purpose of ascribing meaning to space, but also to refer to the psychological and physical mechanisms by which this happens, as well as the motivation behind its use. Spatialisation simultaneously involves a psychological projection of meaning and a physical acting upon the environment, utilised to master the undifferentiated, relentless, internal pressure of instinct (Freud, 1915).

Karl Figlio and Barry Richards (2003) write of the ritualistic, spatial and physical aspects of society, such as street lighting and road systems, and that the 'containment' of these, 'occurred in premodern societies, but, in the absence of continuous physical reminders of the social, it would have been carried more by the intense, if episodic, regimes of psychic management of rituals and by manifest symbolic associations, as in the layout of a cathedral'(p. 412). Figlio and Richards refer in this context to the 'shared illusion' of society 'generated through collective imagination' (p. 420).

## "Members of the queue discussed their own meaning of the experience – some felt it connected them to a dead parent or grandparent, or that they were queuing on behalf of them"

In Queen Elizabeth II's funeral procession and the queuing to see her body lying in state, we can see a spatialised manifestation of meaning relating to the Queen's potential transference 'super-good mother', which 'super-contains'. The queue was found to be diverse in

terms of age, culture and socio-economic background, so we can infer that the elements driving people to join the queue are more primitive and universally human. Members of the queue discussed their own meaning of the experience – some felt it connected them to a dead parent or grandparent, or that they were queuing on behalf of them. People also made friends in the queue, joining, in a spatialised way, with other members of society; a pseudo-family. The queue seemed imbued with meaning and emotion, a spatialised 'screen' experience enacted outside the mind.

In Ernst Kantorovich's *The King's Two Bodies, A Study in Mediaeval Political Theology*, monarchs have many fantasies projected onto them by members of society relating to their position as protector of the cohesion of that society. When they die, their physical body dies and the projected meanings pass onto a replacement physical body – the King is dead, long live the King. There is then an issue of what to do with the physical body as it contradicts the symbolism of the immortal body. Society had to create 'new fictions' (Kantorovich, 1997 [1957], p. 314) to protect against this potential threat to cohesion. One of these fictions involved covering up the dead body with a monument in the form of an image of the body.

## "Will King Charles be a 'good enough' or not-good father, in any way equal to this legendary mother"

'The Queen is dead long live the King' may potentially bring with it anxieties about the shift from the super-good mother Queen to King Charles. Will King Charles be a 'good enough' or not-good father, in any way equal to this legendary mother from all these years? The ambivalent media – perhaps representing something of the general population – seem to present both concern about the monarchy's purpose, cost, usefulness, and goodness, whilst also shutting down anxiety with a re-enforcement and a

bedding-in of the new King to create a phantasy spatialised stability. King Charles' opening-up of the Crown Estates properties as 'warm spaces' to help with the cost-of-living crisis jettisoned his popularity on social media, entering him into a potential arena for a 'super good' father. His new portrait has been designed to 'capture his warmth and sensitivity', and not only have his crown options been discussed but, most interestingly, the special gold silk coat worn for King Charles's coronation, which was also worn by his mother for her Coronation. With the help of the magical gold silk mother-coat, he may yet hope to reach the super-good projective heights of his mother.

## "With the help of the magical gold silk mother-coat, he may yet hope to reach the super-good projective heights of his mother"

Dr Deborah L. S. Wright is a BPC registrant, a Psychotherapist in private practice, an Artist, Academic, Lecturer, and Programme Director of the Clinical Professional Doctorate Programmes in the Department of Psychosocial and Psychoanalytic Studies at The University of Essex.

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## Education

# My Teaching. Lacanian Reflections from the Classroom

**Nick Stock**

Lacan once said, ‘we are always a little cretinized because there is no escaping secondary school’ (1967, p.74). He may have been tongue in cheek in his lecture *My Teaching*, though perhaps there is more here. Teachers like myself may find his derision a bitter pill to swallow, but I have sought to work through Lacan’s barbs about the state of education theoretically and in classroom practice. I have been teaching teenagers English Literature for twelve years and researching education for much of that time. Much like Lacan’s teaching of psychoanalysis, a lot of my work has sought to undermine the supposedly redemptive goals of education. I also run a psychoanalysis reading group with my students where we discuss the (often educational) implications of the field through reading Lacan, amongst others. Lacan provides us with a framework for exploring our relation as a ‘subject’ to things such as the school through the ‘Real’, ‘Symbolic’, and ‘Imaginary’. Many of the ideas below arose when studying Lacan with my reading group and talking about these ideas.

When I asked the group what ‘the subject’ is, they of course responded with English, Maths, Sociology, Law, etc. In psychoanalysis, though we could substitute the word ‘subject’ for ‘individual’, Lacan’s subject is always *divided* by its relationship with its desire. It is not ‘whole’, because the subject is divided by the unknowable (and Real) nature of their desires that must be expressed in the slippery manner of speaking. They must say who they are, using signifiers that always fall short of encapsulating themselves as subjects. Interestingly, in the strange environment of the school, students often identify themselves through their *subjects*: ‘I am an English student’, ‘Well I am a Biology student’ (read: don’t waste their time with that literary rubbish). I see these sorts of interactions regularly, but what these subjects confront each other with is only their subjects. They are two signifiers representing one another, not a Real subject interacting with another.

However, the division of the subject also occurs because they must *say* what they want. Many of my group study Literature and made links between this idea and Gatsby, a man who seems eternally troubled by obtaining what

he says his desires are. When pressed about their own desires, in the peculiar world of the school they often they draw on signifiers like ‘good grades’, ‘getting into uni’, ‘getting a good job’, and so on. Though these answers are easily explained by the neoliberal agenda that haunts contemporary education – even noted in this magazine (Yates, 2022) – the Lacanian dimension allows us to explore the structure of schooling beyond the neoliberal managerialization of learning. True, I once asked a class what they deemed to be the traits that made humanity ‘great’, if they believed us to be so; a reply twice to this question was our ‘competitive nature’. Clearly, we can see the fantasy of the neoliberal subject has become thoroughly imbued in this response. But what if the likes of competition, greatness, betterment, and so forth, are suffused within education more widely, not just contemporary politics?

To think through this idea, my reading group considered how desires are sustained by fantasy (Lacan, 2015) – that is, how things would not be desirable if we did not have fantasy and the Imaginary. The desire one of them held for a certain university, for example, might be sustained by the fantasy image they have of themselves in that institution, likely laced with images of ‘student life’ from films and TV and traced with the cache of the signifier of that institution’s name. We might also see how their desires are being enunciated by the signifiers available to them in the world they reside in. Many often talk of how capitalism has capitalised our desire – but what of the school? What if, as I asked them, ‘being educated’ is but another fantasy that is being grasped at to enunciate their desires for something more?

This strange world I keep referring to is the ‘Symbolic Order’, the ordering of the world into chains and patterns of signification. In their day-to-day lives, they exist as ‘students’ with ‘teachers’ in ‘learning spaces’ like ‘classrooms’ where ‘progress’ happens via ‘pedagogy’ and is punctuated by ‘assessment’, and so on. Not only this, the shape of this ordering of signifiers is always an upward curve towards a better and brighter future. Students are regularly told that *even if this is boring and irrelevant, it makes you a more rounded human being*. Thus, the claim goes in the classroom, that if the



signifiers above interact as they ‘should’, children will go on to prosperity and happiness (and so might we all). But here we return to Lacan’s claim regarding the subject: it is divided, and it will never be whole. The Symbolic Order they exist in proclaims an eventual wholeness that can never be reached.

**“But it is harder and harder to deny the Real trauma that many students find in facing the demand to belong in education’s Symbolic order”**

Our final discussion concerned what lingers behind the Symbolic and Imaginary. The Real is the monstrous and horrifying unnameable thing that seeps through the cracks of the Symbolic. Put differently, did the group *really* believe that they would reach fulfilment if they obtained the educationally inflected desires they spoke of? Despite its interminable inability to produce the sorts of redemptive outcomes that it claims, many still hold onto educational desires. But it is harder and harder to

deny the Real trauma that many students find in facing the demand to belong in education’s Symbolic order. They must achieve the fantasy that sustains our desire to teach them or face the harsh hand of discipline or failure. Every member of the group could speak to painful experiences in school – many involving racism, classism, sexism, and mental health difficulties.

Perhaps this is the cretinization that Lacan spoke of – that the Symbolic remains upheld despite its evident failure to embody it. What Real education ‘is’, of course, unknowable, but as educators embroiled in the ordering of educational betterment, perhaps we might seek to gaze into education’s cracks.

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## Désordre

# In Defense of Mess: Désordre is not Disorder

Emmanuelle Smith

**W**hen Marie Kondo recently said she had given up on tidying since having her third child, I breathed a tentative sigh of relief. Did this mark the end of the dominant tidy-up culture? Could I confidently invite friends over without having to warn them that my home looked like the ‘before’ scenes in an episode of Stacey Solomon’s *Sort your life out?* Our living spaces, and how we do – or do not – organise them, have become something of a battleground, both in popular culture and in the field of mental health. On the one side, ‘Instagrammable’ minimalism, storage solutions and a constant striving for order, and on the other, well, mess.

But this polarisation is nothing new. In 1926, French essayist Gérard Bauër published *Eloge du désordre*, a treatise in praise of mess. Bauër writes of the ‘tyranny’ of tidying, that leads some people to create ‘an empire of inanimate objects, implacably immobilised’. In a point somewhat mired in the sexism of its time, Bauër remarks that if you have ever lived with messy women, you will agree that they are ‘moins insupportables’, less unbearable, to live with than tidy ones. He goes on to extol the benefits of mess and its links to creativity – hence the preference for a wife who won’t tidy up the piles of books and papers on the desks of genius men.

Bauër’s theory, that mess equals creativity, is one that has gained quiet traction over recent years, with titles such as Tim Hartford’s *Messy: how to be creative and resilient in a tidy-minded world* joining Kondo’s *The Life Changing Magic of Tidying Up* on booksellers’ shelves. And at the time of writing, an Instagram search for #maximalism brings up a healthy 431,000 hits – albeit compared to 27.5 million for #minimalism.

**“To instinctively love mess is the sign of generosity of heart and spirit”**

I concede there might have been an element of confirmation bias at play when I read – and found myself in broad agreement with – Bauër’s thesis. He writes that of all our ‘faults’, messiness is

the one that is the most closely linked to our temperament: ‘To instinctively love mess is the sign of generosity of heart and spirit’. I felt seen.

I have long been curious about ‘stuff’, in part due to my own relationship to physical objects; I am definitely on team maximalist. Why do we acquire things? What do we keep and let go of? How do we arrange our possessions? What meaning do objects hold? And, thinking psychodynamically, how can object relations be thought about in terms of the actual, physical objects we surround ourselves with, pass down, give and receive? These are questions that arise in my practice too, with some clients considering their difficulties in relation to tidying up to be a result of neurodiversity, some feeling it is a moral failing, and others a pathology.

**“the French word for mess, désordre, is literally translated as disorder”**

And messiness *is* pathologised. Indeed, the French word for mess, *désordre*, is literally translated as *disorder*. Our lived environments, like our minds, are subject to classification. I recently reviewed a clinical guide to hoarding published by the APA. I learnt that as a disorder, hoarding has only existed since 2013 when it appeared in the DSM-5. But as a concept, it has been around perhaps forever, with Dante’s fourth circle of hell featuring ‘hoarders’ in eternal battle with ‘wasters’.

What really caught my attention though are some of the diagnostic tools featured – the ‘children’s saving inventory’, the ‘compulsive acquisition scale’, and, my favorite; the ‘clutter image rating’. A bedroom, kitchen and living room are depicted in grainy black and white photos numbered one to nine. In the ‘one’ photos, there are no objects in sight other than furniture, and in the ‘nines’ the furniture is so covered in mess (newspapers, clothes, drink bottles...) that you can barely see it. On seeing the pictures, I automatically looked around me and wondered which photos best matched my home and whether it was problematic – before

stopping myself. What if the scale itself was the problem?

**“hoarding can be linked to early experiences of poverty and to transgenerational trauma”**

Whether or not we call it a disorder, hoarding can be linked to early experiences of poverty and to transgenerational trauma. In its extremes, it can cause distress, relationship problems, isolation and even homelessness. And messiness can sometimes be a symptom of depression, just as tidiness can be a result of OCD. But what about when it isn’t? Diagnostic measures of disorders, be they linked to the way we organise our things or our thoughts, often leave no room for the complexity and diversity of people’s experiences and preferences. After all, someone could live in a ‘nine’ and be functional and happy and live in a ‘one’ and not be. One person’s trash is another person’s treasure. And although I am a proponent of mess, it is actually its ‘disorderisation’ that I object to, rather than tidiness itself, which is simply another way of being.

The same year Bauër was praising mess, Freud wrote in *Inhibitions, symptoms and anxiety*, that ‘the systems which the obsessional neurotic constructs flatter

his self-love by making him feel that he is better than other people because he is specially cleanly or specially conscientious’. Freud proposes that this can be the result of an ‘exceptionally severe and unkind’ super-ego: ‘And the ego, in obedience to the super-ego, produces strong reaction-formations in the shape of conscientiousness, pity and cleanliness.’ The ‘anticathexis’ described by Freud is that the attitude – here tidiness – that is being reinforced by a severe super-ego is ‘the opposite of the instinctual trend that has to be repressed’. Tidy-up culture could be understood as a manifestation of this very mechanism writ large – our messier instincts collectively repressed. So maybe it’s time to make way for *désordre* and give mess a chance to spark joy.

**“So maybe it’s time to make way for désordre and give mess a chance to spark joy”**

*Emmanuelle Smith is a psychodynamic psychotherapist working in the NHS and in private practice.*

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## Healthcare

# The Time of Care: A Waiting Times Conference

Jocelyn Catty

This was the final conference of *Waiting Times*, an interdisciplinary psychosocial study of waiting as a core experience of healthcare, funded by the Wellcome Trust and led by Professor Laura Salisbury, Exeter University, and Professor Lisa Baraitser, Birkbeck, University of London. In their opening address, they conveyed the richness of the project's four strands, its shared commitment to exploring the value of waiting even in the face of anxiety, urgency and political pressure, and the inter-disciplinarity of its project team – comprising researchers and academics from psychosocial, psychoanalytic, historical and literary fields – and its endeavour.

**“exploring the value of waiting even in the face of anxiety, urgency and political pressure”**

The first day focused on *Speaking of Waiting* and *Watchful Waiting*. The former, led by Michael Flexer, demonstrated the project's meaningful engagement with patients and staff in GP practices, and people attending hospices. The liveliness of this work, even where the context was painful, was vividly conveyed, as well as the distortions the team had to go through in 2020 (such as hosting online Bingo). Flexer, Stephanie Davies and Martin Moore then turned to the figure of the ‘frequent attender’ in general practice. Moore emphasised how GPs sought to consolidate their power in the post-war years through racialised, gendered, and classed constructions of this figure, characterised as neurotic or hypochondriacal. He and Davies contrasted GP complaints with Balint groups, which invited GPs to suspend time to hear what their patients really wanted of them. Davies argued that Balint-style case discussions today develop a shared sensitivity in which to hold intolerable, chronic states, at odds with an outcomes-driven NHS and a prevailing fantasy that such care can be achieved without relationship.

The second day began with *Waiting in Late Times*, focused on the ‘meanwhiles’ of healthcare and the post-war period. Laura Salisbury read ‘doomscrolling’

against the prevailing idea that it is simply an addictive social practice, using psychoanalytic accounts of anxiety to reinterpret doomscrolling as paying careful attention to events in the present and what they signify for the way the future might unfold. Martin Moore then scrutinized historical snapshots of the GP waiting room of the post-war era, focusing on the sense of malaise and neglect they communicate. He argued that waiting rooms provided a space within which racist anxieties could be voiced, with some GPs themselves actively contributing to racist processes of segregation. Finally, Kelechi Anucha's paper elucidated the concept of ‘fugitive care’. She defined this as the ways in which care can be inventive, using strategies and finding pathways through institutions, using Jacqueline Roy's novel *The Fat Lady Sings* (2001/2021), set in a psychiatric ward, to illustrate the validity of this concept in the politicised terrain of the modern NHS.

The conference ended with two panels on *The Psychic Life of Time*. The first considered the kind of psychoanalytic time that can be made available without charge, in the psychoanalytic ‘free clinics’ studied by Raluca Soreanu or the NHS. Speaking about Freud's vision of psychoanalysis for the ‘poor man’, Lisa Baraitser and Raluca Soreanu described ‘revolutionary time’, not just in the future but here and now, rejecting any schematic distinction between psychic work on the internal world and social and political work in the external world. I then spoke about psychoanalytic work with adolescents in Child and Adolescent Mental Health Services. I argued that this must be managed against the particular temporal demands of the NHS, particularly during the adolescent suicidal crisis, when clinical urgency and anticipatory anxiety present particular pressures, systemic and psychic. I argued, nonetheless, for the work that can be done with adolescents facing a sense of ‘too lateness’, if their unbearable feelings and projections can be heard and contained.

My focus on the pressures of crisis in adolescent work, and the interplay of acute and chronic crisis, was also reflected in the second panel, in which Jordan Osserman presented his research at the Gender Development Service (GIDS) at the Tavistock and Portman NHS Foundation Trust. This was framed by the onset of the pandemic in 2020 and the announcement of the closure of GIDS in 2022. Osserman examined two vignettes



of team meeting discussions, and two examples of the public debate on GIDS – the Bell vs Tavistock case at the High Court (2021) and an open letter written by GIDS clinicians (2023) – to trace the ways in which time and waiting and the shadows of acute and chronic crisis may be observed. He noted how disorientating it is to notice the persistence of chronological, linear time – patient appointments, team meetings – during crisis times, and the ‘untimeliness’ of trying to provide care in the midst of such times. But he also argued that there is an untimeliness about care for young people questioning their gender, an ‘out of sync’ quality that he found mirrored in some of his observations of a service working in the shadow of an impending closure.

**“clinical urgency and anticipatory anxiety present particular pressures, systemic and psychic”**

It was clear throughout the conference (as it has been to me, as a member of the team), that one of the strengths of *Waiting Times* has been the relationships it has fostered in both personal and intellectual ways: its creative commitment to collaboration and inter-disciplinarity. These are now bearing fruit in the shared concepts and exchanges emerging from the varied workstreams of the team: the concept of ‘waiting with’, elaborated by Salisbury and Baraitser from roots in Bion that has been guiding the project work; or the sense of something specific

to the NHS (‘NHS-ness’) that emerges from the historical understanding of care in *Late Times* and *Watchful Waiting* in the NHS today. A similar strength of the project has been its relationship to a range of interlocutors, represented at the conference by invited respondents to each panel who brought a richness of perspective and depth.

*Dr Jocelyn Catty is Senior Research Fellow on the Waiting Times project. She is a Child and Adolescent Psychoanalytic Psychotherapist (ACP), Co-Lead for Child Psychotherapy at Bromley CAMHS, and Research Lead for the Child Psychotherapy doctoral training at the Tavistock. jcatty@tavi-port.nhs.uk. For more information about the Waiting Times project visit <https://waitingtimes.exeter.ac.uk/>*

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## Racism

# The Subtle Racism of White Women in Therapeutic Spaces

Lucia Sarmiento-Verano

**R**ecently, we have seen more spaces for reflection on social inequalities and the impact they have on people's mental health. I believe it is important to continue with these reflections, especially when it comes to our field and the potential impact of oppression on our work and our clients. The therapy profession has long been female-dominated which is why focusing on the specific gendered dynamics in which racism and oppression can be enacted might be of particular interest.

The concept of 'coloniality of gender' (Lugones, 2008) may help us in this reflection. Lugones argues that, 'feminism centered its struggle and its ways of knowing and theorizing against a characterization of women as fragile, weak in both body and mind, secluded in the private, and sexually passive. But it did not bring to consciousness that those characteristics only constructed white bourgeois womanhood.' Women racialised as inferior in the colonial system were marked as females but without the characteristics of femininity – dehumanised and considered strong enough to do any sort of labour.

**“We can interrogate how these normative ideas of womanhood based on whiteness influence how a therapist is expected to act and practice”**

We can interrogate how these normative ideas of womanhood based on whiteness influence how a therapist is expected to act and practice. After the relational turn, much of our training is based on developing ways of being and relating to clients paired with theoretical understanding. In my experience those ways of being relate to honesty, authenticity, empathy, self-reflection, and willingness to show vulnerability when appropriate.

What is forgotten, is that these ways of being are gendered and raced. Many of them correspond to attitudes and characteristics traditionally attributed to femininity in Western culture. They also include modes of emotional expression considered appropriate within femininity: tears and vulnerability are preferred to rage, as well as verbal expression of emotions as opposed to other ways of experiencing them. We might then reflect on how difference from this norm could be easily problematised or pathologised when not understood.

To look into the ways in which oppression might be reproduced within our profession through specific gendered dynamics, I'd like to introduce the notion of 'benevolent whiteness' coined by Kanaka Maoli (native Hawaiian) Professor Natalee Kēhaulani Bauer (2017). She examines the role of white women as active agents of the settler colonial project in the U.S. school system: benevolent helpers who dehumanised non-white womanhood and disciplined native families and children. The repercussions of this colonial dynamic are still present in education as well as other 'helping' professions, the third sector, and the white saviour narrative in general.

I think this perspective useful to understand many of the dynamics that marginalised people have to contend with in this profession, especially in relation to their white colleagues, and most importantly, the barriers to challenging such attitudes.

No person or space is exempt from the reproduction of oppression through conscious or unconscious dynamics. However, the 'wounded healer' fantasy, pervasive in our profession, much like images of the benevolent whiteness of women, fuel therapists' entitlement to the preservation of their own good and innocent self-image. It is especially hard, as therapists, to think of ourselves as capable of harming others so deeply.

The wounded healer image invites us to consider how we personally emotionally benefit from our practice of therapy. As our clients are wounded, so are we. How does our work with them help us soothe our own wounds? How does it help us maintain a positive self-image as helpers? I would argue none of this is bad or

wrong per se. However, it is also important to consider what may happen when our benevolent self-image is challenged by a presence or by words that directly or indirectly confront us with our privilege and power, or with our potential to enact harm.

Unfortunately, we are all capable of harm. And when benevolent whiteness is called out for its oppressive harm, defensiveness emerges. Other than outright aggression, White Womanhood's preferred method of defense, in line with what is considered appropriately feminine, might be self-centredness and displays of vulnerability or distress. In this way, much of the racist violence enacted within the profession could be linked to the socially acceptable way of being for white women. It is not explicit or aggressive, but insidious and done under the guise of empathy, openness, vulnerability, and good intentions.

Consider the possible encounter of two women, a white therapist and a black patient. When exploring the impact that racism has had on her life and on her family, the patient starts expressing anger. In this dyad, the white therapist is directly confronted to her own position of privilege by the work, as the anger is expressed toward a group to which she belongs, and toward a system from which she benefits as a white woman.

If to this we add the concept of coloniality of gender, intense and enduring anger may be interpreted as a problem and a source of pain for the client consciously, and, unconsciously, provide a source of discomfort for the therapist. If work is done to process and assuage that anger

from an individualistic perspective, symptoms may be relieved, but the therapist may be robbing the client from the adaptive function of Black Rage (Stoute, 2021) which may provide support in enduring assault on dignity and dehumanisation.

In this example, the therapist might have restored a sense of comfort in her self-image of benevolence by conducting the work as a skilled helper from a Eurocentric perspective. We might want to reflect on the subtle harm done to the client. Or perhaps, on what such a process might look like if the therapist, fully aware of the impact of racialised gender norms, benevolent whiteness, and her own potential to enact harm, sat with the discomfort of her white womanhood in from of the black patient, and fully welcomed Black Rage into the room.

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## Review

# Sensitivity into paranoia

**Katya Orrell**

*Tár film review*

**T**ár opens with sound only, depriving the audience of anything visual for the first few minutes. We are literally kept in the dark. We don't know what is going on, but this ambiguity and the possibly disturbing experience of hearing and not seeing sets the tone, hinting at what is to come. This is a film constantly evoking a sense of dissonance, at times honing into the minute, whilst simultaneously revealing a wider, more complex vista – both skills required of a Maestro.

**“This is a film constantly evoking a sense of dissonance”**

Lydia Tár, the protagonist, is a virtuoso pianist, performer and composer as well as the conductor of a prestigious orchestra in Berlin. The film's publicity photograph is bewitching, with its magnificent image of Cate Blanchett, powerful, beautiful, with her arms outstretched, an image reminiscent of Dali's 1951 painting of Christ but taken from below. As a conductor, we are given the impression, at least initially, of her absolute control. She chooses what to give and what to hold back as she states:

‘Time is the essential piece of interpretation. You cannot start without me; I start the clock.’

The paradox is that time is the one thing we cannot control, but Tár gives us this illusion – what she can't control is her reputation. Tár's sensitivity tips into paranoia, as if something malignant is watching her just under our line of sight, drawing us in, making us complicit. We sense her need to be aware of everything, initially in an apparently healthy capacity as a conductor, but this turns into something else, something containing the seeds of her undoing.

**“The paradox is that time is the one thing we cannot control”**

The film itself manipulates, seducing us as we follow Tár's glamorous, fast-

paced life. We watch her dexterously switching from an interview to teaching a master class. In this scene, a clash with the younger generation alerts us to Tár's combativeness and need to win at any cost. Indeed, when the student says he's 'not really into Bach', Tár aggressively takes the bait and with nuanced contempt calls him 'a robot'.

Whatever we might think of her desire for power, Tár is so attuned to her orchestra that she can pick out individual instruments and comment on their performance. She is sensitive to incidental noises throughout the film – we never know whether they have been set up to disturb her. The metronome, the fridge, even when she is out running she hears screams, leaving us wondering what these sounds might be saying about her inner world. The metronome evokes something of J. M. Barrie's ticking crocodile that haunts Captain Hook, or even Lewis Carroll's white rabbit. We observe how Tár makes use of everything (and everyone) at her disposal, like the beeping she hears in her flat, which she creates a composition from.

**“She is sensitive to incidental noises throughout the film – we never know whether they have been set up to disturb her”**

The theme of restraint appears and then is later lost – the home Tár inhabits is beautiful, stark and minimal except for huge bookcases and her daughter's room, which is warm and inviting. There is no obvious maternal warmth in the way Tár relates to her daughter, Petra, except when she holds her foot, grounding her or perhaps signalling Tár's Achilles heel? We see this earlier, when Tár is driving Petra, who tells her about an incident involving her nemesis at school – this cuts to Tár stalking across the playground, unseen and menacing as she threatens the classmate, invoking the omniscient power of God and saying, 'I'll get to you'. The other intimate scene is when Petra sets out her toys in an imaginary orchestra, all

of them conductors, but then Tár intones, 'There can only be one' – for Tár, it's all about autonomy.

She is married to Sharon, her first violinist, whose face we watch in visceral close-ups. We see in Sharon emotion, often pain, as the film progresses, which contrasts with Tár who tells Sharon to take her heart medication; Tár is in charge of everything that is beating. A passing reference to Barenboim and Jacqueline du Pré gives the audience a clue to the passion being stirred by Tár watching the recording of a young cellist's first public performance – but Sharon notices it too.

Tár's appearance throughout is subtly understated, with little contrast between the public and private. However, by the end of the film things have changed and her hair is messy, her skin blotchy, she looks unkempt. Tár's encounter with a dog in a derelict basement symbolises an ominous sense of growing danger, especially as it is accompanied by the sharp staccato sound made when her face makes contact with the pavement – we feel her downfall. These are all signs she is losing control.

**“Tár's encounter with a dog in a derelict basement symbolises an ominous sense of growing danger”**

There is a constant hint at sexual impropriety. We never get to see the face of the woman Tár has encountered and whose family took her to court after her suicide, but we see that Tár is haunted by her in dreams. The idea of using her position to get what she wants is portrayed quietly alongside other elements, such as when the film is set – Tár washes

her hands reminding us of the Covid pandemic, but is it also an echo of Pontius Pilate? We see this again when Tár encounters the naked dying body of her neighbour's mother, which serves as a reminder of human frailty, and yet when this woman dies Tár does not offer ordinary condolences, she hastily washes herself.

**“watching Tár is not a comfortable experience”**

The film stayed with me for longer than I expected, and I wonder if this is because watching Tár is not a comfortable experience. There are different parts which don't fit seamlessly together, like musical tempos constantly changing until the denouement, when Tár's rage prevails and she transgresses, openly crossing the body boundary, her aggression taking over when a rival performs Mahler's 5th symphony using her score. Something snaps inside Tár. At the beginning, Tár is the one who sets the pace, but, like a female Lear, by the end she is brought low.

This contrast is starkly apparent when Tár goes back to her childhood home and there is a clip of her watching Bernstein. She is connecting to something real because she ends up robotically conducting a South Asian orchestra for a computer game recording and now a mechanical ticking sound dictates the music to her, in another painful contrast with how she began, extolling the virtues of Bach.

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## Review

# Hunters hunted

Lydia Prior

Review of *Drive Your Plow Over the Bones of the Dead*, Barbican Centre, London, and on tour.

**D**rive Your Plow Over the Bones of the Dead, a novel by Polish author and Nobel prize winner Olga Tokarczuk, presents a challenge for both reviewer and anyone hoping to adapt it for another medium: it is about everything. Or, at least, it stubbornly refuses to be about one thing, just as its narrator, Janina Duszejko, resists being written off as a ‘crazy old woman’. The stage production by the celebrated theatre company Complicité, adapted and directed by artistic director Simon McBurney, sympathetically conserves this complexity, in spite of the constraints of time and space that theatre entails.

**“What could be less remarkable, less troubling than an old woman with a plastic bag?”**

‘I want to tell you a story,’ Janina (Amanda Hadingue stepping in for Kathryn Hunter in the performance I saw) begins, a slight, grey-haired woman standing alone on stage, speaking into a mic, clutching a plastic bag. What could be less remarkable, less troubling than an old woman with a plastic bag? But the condescension, contempt and disregard faced by older women is something Janina both rails against and uses to her advantage, gaining our trust with her frankness and humour so that we do not see the wool even as it is being pulled over our eyes.

*Drive Your Plow* is, on one level – and if it is not already clear, this is a work of many levels – a whodunnit. Bodies abound: dead and alive, human and non-human, healthy and failing. The story begins with the discovery of the corpse of Janina’s neighbour in their remote rural community near the border with the Czech Republic. Although he appears to have died choking on a bone, four further (human) deaths follow of men prominent and powerful in the local community, and in these cases foul play is clearly involved. The men are all hunting companions, an activity as abhorrent to Janina as it is accepted and even celebrated in her community. As the corpses pile up and Janina’s attempts to have the hunters’ activities curbed by official channels are derided or ignored, she advances the

theory that animals themselves have conspired to wreak vengeance on their persecutors, a theory that naturally leads her to be dismissed as crazy. Crazy or not, she is obsessive, single-minded and, like the best detectives in the noir tradition, already haunted – she is in mourning for her ‘little girls’, two dogs which disappeared in mysterious circumstances some months before.

**“Janina exposes the perversions inherent in a society where priests, policemen and politicians...kill for fun”**

Tokarczuk’s novel was initially criticised by some in Poland as an apology for eco-terrorism, and in one sense it is a morality play which pits noble animals against corrupt, greedy and senselessly destructive humans. In her urgency and fearlessness, Janina’s voice resonates with the messages of organisations like Just Stop Oil and Animal Rising and that of Marxist geographer Andreas Malm, author of *How to Blow Up a Pipeline*. They call for militant protest where polite argument has failed. Janina exposes the perversions inherent in a society where priests, policemen and politicians – supposed protectors of civilisation – mount so-called ‘pulpits’ (hunting towers) to kill for fun. But the way that the actors shift between human and animal forms makes it clear that the ‘four legs good, two legs bad’ split is not the whole story. It is not that animals are innocent – they are just as bloody and violent as humans – but what is questioned is the idea that humans are superior. Just as the border with the Czech Republic features as an arbitrary, man-made division, we are invited to question any stark divide between human and non-human animal. And while Janina makes an impassioned case for animal liberation, it is also a plea for human liberation: liberation from an omnipotent, hyper-rationalist and anthropocentric view of the world that impoverishes and imprisons us all. The hunters’ hatred and denial of dependency – on nature, on animals, on women – makes them feel powerful but in fact leaves them more vulnerable as they destroy the very things they need. Is the complexity and interconnectedness of the ecosystem intolerable for a certain

type of fragile masculinity because it gives the lie to delusions of self-sufficiency and innate superiority? Is eco-cide matricide writ large? These are among the many questions *Drive Your Plow* hints at, without forcing any of them.

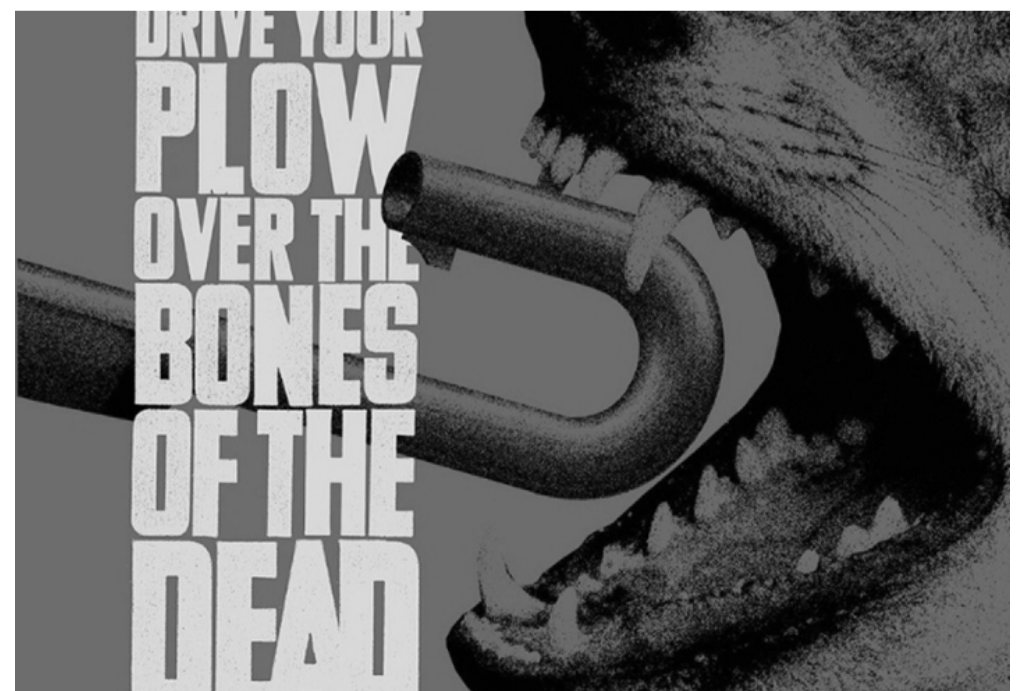
**“Janina, like Medea or Antigone, is a character who transcends the individual to expose profound societal cracks”**

The novel is a natural fit for Complicité, a company founded on an ethos of collaboration and collectivism. The role of Janina is colossal, but Janina, like Medea or Antigone, is a character who transcends the individual to expose profound societal cracks. The production would make no sense without the company of actors orbiting her, shape-shifting and moving together, using their bodies to create the dream-like environment she inhabits. Then there is the fact that Janina’s many lines are the result of a sequential collaboration between two women, Tokarczuk and her translator, Antonia Lloyd-Jones. The narration in the Complicité script cleaves closely to the text of the novel and it seems fitting that when Janina speaks, she is interpreting the voice of a woman interpreted by another woman.

**“The idea of the horoscope is important in the novel and the play as a symbol of something fixed in a shifting world”**

Tokarczuk trained as a psychologist, briefly practised as a psychotherapist and has talked about being influenced by Jungian ideas. Janina, like Jung, has a keen interest in astrology, collecting dates and places of birth and making charts for people she meets, including the murder victims. The idea of the horoscope is important in the novel and the play as a symbol of something fixed in a shifting world, a cosmic order that can only ever be grasped in part. Being a tiny part of a vast plan can be seen as a prison or a key to freedom depending on how much one is willing to know. For Janina, it is the latter: ‘It crossed my mind that in spite of our fragility and ignorance, we have an incredible advantage over the stars – it is for us that time works, giving us a major opportunity to transform the suffering, aching world into a happy and peaceful one.’ This urgent, complex, transformative production feels like a worthy use of anyone’s time.

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## Covid-19 vaccination

# Covid-19 Vaccination, A Failure in Critical Thinking and Reality Testing

**Dr Marco Chiesa MD, FRCPsych**

*This article was submitted in response to the article 'VAXX' by Andrea Sabbadini in the Spring 2023 issue of New Associations.*

**T**here is substantial scientific evidence that casts serious doubt on the efficacy and safety of the Covid-19 vaccine. It usually takes around eight years for a new vaccine to go through the various stages of testing before it is approved for use in the general population, but this time the experimental Covid-19 vaccine received fast track emergency authorisation, with only a few months testing on humans, and was declared 'safe and effective'. The vaccine was not tested for contracting and transmitting the infection, and for protection against hospitalisation and death, and there was no available data regarding medium and long-term adverse effects. Early reports indicated that the protective effects of the vaccine waned quickly over time (Chemaitelly, 2021), that rates of infections among the vaccinated and unvaccinated were very similar, and that both groups could equally transmit the infection (Dagan et al., 2021). As the second, third and fourth doses were made available, new studies showed that the vaccine increased the risk of contracting Covid-19 (Nordström, Ballin, & Nordström, 2022; Shrestha et al., 2023). The negative effectiveness of the vaccine has thus contributed to the increase of the spread of the infection (Gazit et al., 2022). Several scientists and virologists had warned that, since Coronaviruses mutate frequently over time, with new variants escaping the detection of the antibodies produced by the original vaccine, a non-sterilizing vaccine is unable to slow down transmission (Van Egeren et al., 2023).

**“The negative effectiveness of the vaccine has contributed to the increase of the spread of the infection”**

Once the lack of effectiveness in preventing infection and transmission could no longer be denied, the message shifted to the supposed protection the vaccine offered to prevent hospitalisation and death. A study comparing rates of hospitalisations and deaths between the vaccinated and the unvaccinated, stratified by age, would give evidence of efficacy – but this has not yet been done despite the data being available at governmental level. The UK Department of Health and Social Care published a report on 25 January 2023 showing that 68,050 injections with the bivalent booster vaccine were needed to prevent a single hospitalisation in the healthy 40-59 age bracket, while for the most vulnerable group, the over 70 with co-morbidities, 800 injections were needed to prevent one hospitalisation. On the basis of the UK government's own data, a cursory cost-benefit analysis would conclude that the vaccine is not effective.

**“Hundreds of millions of people have been repeatedly injected with a poorly tested vaccine”**

With regard to safety, by May 2022, UK, US and EU vaccine adverse events reporting bodies had received hundreds of thousands serious adverse events, and thousands of fatalities. A scientific study showed that serious adverse events of special interest occur once in every 800 injections (Fraiman et al., 2022). We have seen an increase of neurological, cardiovascular, gastro-intestinal, and endocrine diseases following vaccination, including myocarditis and sudden deaths in younger age groups (Dowd, 2022; Kralik et al., 2022). Autopsy-based studies have documented the causal link between the vaccine and sudden deaths (Schwab et al., 2022).

Hundreds of millions of people have been repeatedly injected with a poorly tested vaccine, with no data on long-term adverse effects being available, and

without proper informed consent. When there is a situation in which entire societies are in the grip of massive fear, free floating anxieties, when things do not seem to make sense and understanding is missing, many people seek to believe anything that power focuses them on, and can literally be led anywhere the establishment tells them to go, like in a hypnotic state. The climate of fear and terror created by governments and amplified by mainstream media created a process of mass formation, which compromised individuals' ability to think critically, to reflect, to retain ethical self-awareness and undermined their capacity to appraise the available evidence (Desmet, 2022). In this situation, the desire for safety induces people to desperately grasp at whatever is promised as salvation from the perceived threat, and lead to a clamour for action, however irrational these actions may be. The dangerousness of the virus was dramatically overestimated based on the computations of flawed mathematical models. One of the most comprehensive studies examining the infection fatality rates (IFR) in 38 countries, based on the presence of specific SARS-COV-2 antibodies in the blood, found that the IFR was as low as 0.07% for under 70 (Pezzullo, Axfors, Contopoulos-Ioannidis, Apostolatos, & Ioannidis, 2023).

**“The climate of intense fear in the population has had the effect of shutting down thinking and open debate”**

The climate of intense fear in the population has had the effect of shutting down thinking and open debate, creating a climate reminiscent of totalitarian states of mind. An unprecedented level of censorship and repression for a liberal democracy has taken place, and scientists and doctors who challenged the official narrative were systematically excluded,

attacked, vilified, smeared, and in some cases their careers were destroyed. Many people under the influence of a well-orchestrated campaign to induce fear desperately cling to what is promised as salvation, and identify with what is portrayed as protecting them from danger, in a similar dynamic explored by Rosenfeld in several of his contributions on pathological narcissism and borderline states (Rosenfeld, 1987). This process of introjective identification accounts for the kind of rigidity, intolerance and tyrannical attitudes, bordering on fundamentalism, which are then played out in the relationship with others who do not share the same values. In part, this explains the highly rejecting, discriminatory and condemnatory attitudes that we have witnessed in the last two years against those who exercised the free choice of not being injected with the experimental vaccine. In the absence of critical thinking and in the prevailing atmosphere of denial, attempts to correct misrepresentations and misperceptions usually fail, and in some instance, we find evidence of a 'backfire effect' in which corrections actually increase misperceptions among the group in question (Nyhan & Reifler, 2010). It is quite understandable that people who have had the vaccine may resist appraising scientific evidence that contradicts the 'effective and safe' mantra, as it may otherwise generate serious anxieties. This may also explain the persistence in the implementation of failing and discriminatory health policies, long after they were shown to be based on flawed science.

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