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DEAR COLLEAGUES AND FRIENDS,

It is a great pleasure to welcome you to the International Ferenczi Conference: Faces of Trauma. Sándor Ferenczi, the Hungarian psychoanalyst, who lived and worked in Budapest, caused a paradigm shift in trauma theory in 1932, when he presented his seminal Conference of Traungs concept. Since then, a great body of clinical experience has accumulated and a number of new approaches and theoretical concepts have emerged both in clinical studies and research of psychical trauma. Our scientific meeting focuses on clinical studies, theoretical approaches, historical and academic research, and eighty years after Ferenczi's Conference of Traungs.

The conference is organized by the Sándor Ferenczi Society and the International Ferenczi Foundation, in collaboration with the Hungarian Psychoanalytical Society and the Ferenczi Network: Associations Culturales Sándor Ferenczi (Italy), Association Cultural S. Ferenczi (Argentina), Mason Ferenczi (France), Image International (London), Ferenczi Center, New School for Social Research (New York), in cooperation with Sociedad Psicoanalítica Italiana, Asociación Psicoanalítica de Madrid, International Federation of Psychoanalytic Societies.

The first international Sándor Ferenczi Conference was held in Budapest in 1995, and then, every three years it has been organized in a different city – Baden-Baden, Buenos Aires, Budapest, Florence, London, Madrid, New York, Paris, Sao Paulo, Tel Aviv and Turin. Now, the main meetings.

These conferences, extending over two decades, have nourished the development of the Ferenczi Network, the source of serious scientific work and results. We are confident that the 2012 Budapest meeting will also enrich our scientific work and friendly collaboration. In fact, our First Announcement generated an unexpectedly large response and interest in this event. We happily obliged and switched to a conveniently located larger venue site and extended the conference by one day.

One of the most tangible results of the ongoing international cooperation was the purchase of Ferenczi’s original office in his beloved villa, which became the site of the International Ferenczi Center and Archives in 2011. Many thanks to our donors, to our colleagues who had been working with us, and to all who supported this dream come true. It is our great pleasure that one of the conference events will take place in the garden of the Ferenczi House.

The opening ceremony of the conference will be held in the main building of the Hungarian Academy of Sciences, the historic site of the 9th Congress of the International Psychoanalytical Association in 1918, and the 1987 Hungarian international psychoanalytic conference, the first after WWIII.

An exciting social program, including a festive opening, a gala reception and a closing event will accompany our rich scientific programs.

We are looking forward to welcoming you in Budapest and wish you a successful meeting.

Judith Daport, Horacio Echeverry, Charles Hanly, Andrei Haynal, Gyorgy Ilidoy

COMMITTEES

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JOURNALS SUPPORTING THE CONFERENCE


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**REGISTRATION INFORMATION**

**REGISTRATION DESK OPENING HOURS**
- Thursday, May 31st, 2012, 8:00-20:00 at the Hungarian Academy of Sciences
- Friday, June 1st, 2012, 8:00-18:00 at Hilton Budapest WestEnd (Mezzanine floor)
- Saturday, June 2nd, 2012, 8:00-18:00 at Hilton Budapest WestEnd (Mezzanine floor)
- Sunday, June 3rd, 2012, 8:00-12:00 at Hilton Budapest WestEnd (Mezzanine floor)

**REGISTRATION FEES AND SERVICES INCLUDED**

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<th>Registration type</th>
<th>Fees until 15/02/2011</th>
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<tr>
<td>Participant</td>
<td>€ 220</td>
<td>€ 270</td>
<td>€ 330</td>
<td>€ 360</td>
<td>Access to all conference sessions, Final Program and Book of Abstracts, Opening Ceremony and Welcome Reception, Tea, Coffee and coffee breaks</td>
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<td>CEE* Participant</td>
<td>€ 180</td>
<td>€ 230</td>
<td>€ 300</td>
<td>€ 340</td>
<td>Access to all conference sessions, Final Program and Book of Abstracts, Opening Ceremony and Welcome Reception, Tea, Coffee and coffee breaks</td>
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<td>Accompanying person</td>
<td>€ 120</td>
<td>€ 180</td>
<td>€ 250</td>
<td>€ 290</td>
<td>Opening Ceremony and Welcome Reception, Tea, Coffee and coffee breaks</td>
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*CEE (Central-Eastern European Countries): Albania, Belarus, Bosnia-Herzegovina, Bulgaria, Croatia, Czech Republic, Estonia, Hungary, Kosovo, Latvia, Lithuania, Macedonia, Moldova, Montenegro, Poland, Romania, Serbia, Slovakia, Slovenia, Ukraine

| Daily ticket (1 or 2 June) | € 150 | Final Program and Book of Abstracts, Coffee and coffee breaks |
| Daily ticket (31 May, 3 June) | € 70  | Opening Ceremony and Welcome Reception, Tea, Coffee and coffee breaks |

**SOCIAL PROGRAM INFORMATION**

**OPENING CEREMONY AND WELCOME RECEPTION**
- Thursday, May 31st, 18:00-21:00
- Hungarian Academy of Sciences
- Address: 1051 Budapest, Steindl tér 9.
- Price: included in registration fee of participants and accompanying persons.

**GARDEN PARTY AT THE FERENCZI HOUSE**
- Friday, June 1st, 19:00-21:00
- Ferencz International Center
- Address: 1066 Budapest, Liszt Algyő 11.
- Price: € 50/person - includes a € 20 contribution to the Ferencz House Project
- TICKETS ARE AVAILABLE AT THE REGISTRATION DESK.
- Departure of bus transfer at 18:30 from Hilton Budapest WestEnd (congress venue)

**GALA DINNER**
- Saturday, June 2nd, 19:00-23:00
- Hilton Budapest WestEnd
- Address: 1062 Budapest, Yábló 1-3.
- Price: € 80/person - included in registration fee of participants and accompanying persons.
- This program is optional for CEE participants.
- TICKETS ARE AVAILABLE AT THE REGISTRATION DESK.

**CANCELLATION POLICY OF REGISTRATION**

All cancellation requests and changes must be sent to the Conference Secretariat (CongrEsztor Ltd.) in written form. All refunds will be processed after the International Ferencz Conference 2012. Please send your exact bank account details in the written cancellation. No refund in case of cancellation received after April 15th, 2012.
**Conference General Information**

**Conference Venues**

- **Opening Ceremony venue:** Hungarian Academy of Sciences, Main Building
  - Address: 1051 Budapest, St. Istvan utca 9.
  - Date: Thursday, May 31st, 2012

- **Conference venue:** Hilton Budapest WestEnd, Mezzanine floor
  - Address: 1062 Budapest, Váci út 1-3.

**Official hotels**

- **Hilton Budapest WestEnd 4* (Conference Venue)**
  - Address: 1062 Budapest, Váci út 1-3.

- **Hotel Metropolitan 4***
  - Address: 1055 Budapest, Nagy Sándor utca 21.

- **Hotel Metro 3***
  - Address: 1132 Budapest, Kerepesi út 1.

- **Hotel Metford 3***
  - Address: 1061 Budapest, Jókai út 9.

- **City Hotel Ring 3***
  - Address: 1137 Budapest, Simon Kevés lær. 22.

- **Adina Apartment Hotel Budapest 4***
  - Address: 1133 Budapest, Hegedüs Gyula utca 52.

- **Radisson Blu Böböl 4***
  - Address: 1067 Budapest, Teréz lær. 43.

- **Crowne Plaza***
  - Address: 1066 Budapest, Jókai útca 26.

**Official Language**

Language of the conference is English. Simultaneous interpretation in Italian will be provided on the plenary panels.

**Meals**

Tea, coffee and pastries will be available during breaks. Light conference buffet lunch will be available in the hotel’s Aranbina Restaurant. Lunch tickets are available at the Registration Desk for €22/meal.

**CME Credits**

The International Ferenczi Conference was granted 25 Hungarian CME Credits. Conference Code on Office: SE/TK 2012/1/00001.

**Slides/Presentations Preparations**

Speakers are kindly requested to give their presentations to the technicians in the session rooms during the lunch break before their scheduled presentation time, or at least. Please note, that speakers cannot use their own laptop for presentation.

**Restaurants Near the Conference**

Aranbina Restaurant and Ziba café are situated in the conference hotel Hilton Budapest WestEnd. Over 40 restaurants and cafés are available at the WestEnd City Center’s joint building, representing the well-known fast food brands as well as à la carte restaurants, including several nationalities (e.g., Hungarian, Italian, Indian, Thai, Polinarian, Turkish, Israeli).

Within a 5-10 minute walking distance there are a wide range of bars, cafés, tea shops and restaurants situated on the Grand Boulevard (Oktogon) and the surrounding streets.

**Program Changes**

The organizers cannot assume liability for any changes in the programme due to external or unforeseen circumstances.

**Publication of Selected Conference Presentations**

American Journal of Psychoanalysis
Forum of International Psychoanalysis
Cambridge Scholars Publishing
ABSTRACTS

THE MARKETING CHILD
ALVAREZ, Carlos
EMECC 90, Rio de Janeiro, Brazil

After eighty years, the ferociousness of a parent, today, is also embodied by a large portion of the entertainment industry that in a very violent way has been focusing their efforts on children between the ages of 6-12 as a prime target for their marketing activities. Children are treated as active consumers and should be exposed from the first moment of their lives so that they can get used to the addiction of competitive consumption.

As a consequence, children's emotions is obliged to produce "the marketing child" that will be taught to try to absorb the constant barrage of the multiple languages offered by the marketing industry. The child is seduced by the "magic" (mimicry) of this hyper-ton world and has no choice than to join it.

Our goal is to discuss the following topic: 1) Aspects of contemporary child psychology under the idea of "emotionalization" can be understood as a defense (unsuccessful) against the invasive barrage of the marketing industry. 2) What is the so-called "body-psychotherapy"? 3) What is the role of the psychoanalyst concerning these questions? Can the ferocious "mimicry" proposal (in order to create the illusion of the inevitable advent of trauma) still be supported?

Keywords: trauma, culture, child, marketing

TEACHERS' SUFFERING: ON ENCOUNTERS AND WASTEBASKETS
ARCHANGELO, Ana
University of Campinas, Faculty of Education, Campinas, Brazil

As social and historical institutions, schools are inevitably spaces of tension. The sources of tension might be teachers' lives and their interactions with students, the school's administration, and the broader social context. Teachers generally feel themselves incapable of understanding the various dynamics that produce and maintain social and emotional tensions. They end up in situations of suffering and the school is ill-equipped to cope with it. As a result, teachers tend to focus on instrumental actions and neglect their own sensitivity.

These strategies are, to a certain extent, both a professional defense mechanism against the anxiety that arises from the difficult task of solving the daily problems that circulate in a school and in the world. It seems like surviving the lack of institutional support. In spite of the temporary relief, these mechanisms trigger several problems with the pupils, perpetuating and even amplifying the initial suffering. This paper seeks to discuss, on one hand, how Ferenczi's and Bion's ideas of trauma might be useful for the understanding of what is missing between teachers and the school. On the other hand, by describing two episodes that took place in a Brazilian state school, this paper sheds light on how teachers might benefit from a "psychic environment" (Bion, 2004) in the form of periodical meetings between teachers and a psychoanalytically oriented researcher.

Keywords: teachers' suffering, teachers' psychic necessities, psychoanalysis and education; trauma

CONFUSION OF TONGUES: DEFENCE MECHANISM AND COMPLEX COMMUNICATION OF EARLY BROKEN INTIMACY IN UNWELCOME CHILDREN
ARFILLI, Patricia University of Santa Catarina, Psychology, Florianópolis, Santa Catarina, Brazil
VIGNE-DELLALI, Massimo Società Psicoanalitica Italiana, Turin, Italy

Starting from the concept of confusion of tongues between passion and tenderness, the Authors will illustrate some clinical situations of traumatized children and adults and try to show how this kind of patients are not able to give voice to and symbolically represent their psychic anxieties, connected with their being ferocious "unwelcome children". Therefore they often make use in the therapeutic situation of the language of "passion" and decodification in order to communicate to the analyst their early broken intimacy and their traumatized "tenderness", related to a lack of parental emotional involvement and of maternal availability to their raw emotions, which have been to their "passion of death". Sketching out some clinical cases (a child, an adolescent and an adult), the Authors will describe how, in their opinion, this confusion of tongues may be the only way for some patients to represent and to share with the analyst the traumatic events of their past, and at the same time it may become a deep, strong, rigid and exciting defence mechanism against an early child depression connected with deepening unresolved identifications.

Keywords: confusion of tongues, unwanted children, passion of death, decodification

DREAMS AND CHANGE PROCESSES IN AN EX-PROSTITUTE UNDER RELATIONAL PSYCHOANALYTIC PSYCHOTHERAPY, FERENCZIAN AND POST-FERENZIAN VIEWS
AVILA ESPADA, Alejandra; DOMINGUEZ ROBREDO, Ross
Institute of Relational Psychotherapy, Training & Research, Madrid, Spain

The change process that takes place in a woman, an ex-prostitute, is analyzed within the context of the psychotherapeutic treatment followed during a period of three years within a relational psychodynamic focus that is influenced by Ferenczi's ideas regarding trauma, offering us the opportunity to re-think the validity of the Ferenczi's clinical ideas and attitudes integrating a plurality of later influences. The patient is a woman originating from Colombia, who migrated to Spain at the age of 26, and was trapped during more than six years in the brothel prostitution network, finally initiating a psychotherapeutic treatment at the age of 30 years. The observed process is an example of the interplay between the relational factors that characterize this person and the opportunity of co-creation that the therapist offers to differentiate and integrate a richer internal world, making her life possible with better attitudes and autonomy for her personal growth within a new social and family environment in exile, than those available under precarious original family environment, marked by the confusion of language, the lack of bonds and the fragility of bonds. This model of the intense traumatic charge of her history and the ways of and the hope that live in the present and how the events of her dreams and experience and brought to the treatment. An thorough review from Ferenczi's ideas about trauma and the expressive role of dreams: M. Khon's concept of cumulative trauma and his contributions to the working through function of dreams: the dreams role in the anticipation of change and the working through function of dreams; the dreams role in the anticipation of changes together with S. M. Miller's conception of relationality and the role of the therapist in the therapeutic relationship this development support an interesting way of understanding the role of dreams in the process of change and the relational development with the therapist. The patient's account and the therapist's experience and how the dreams role of in the process.
THE LOSS OF PSYCHIC PROPRIOCEPTION

BÁNSZI, Aniko
University of Debrecen, Medical and Health Science, Department of Behavioural Sciences, Debrecen, Hungary; Sándor Ferenczi Society, Hungary

Proprioception is our so-called sixth sense. It keeps our body in balance, controls and organizes our body movements in a way which is not conscious for our self. It provides an essential ground for our identity. The concept of psychic proprioception was coined as a metaphor which refers to a general condition in our modern Western culture. All of us live with background sensation that it can refer to a real being. Nevertheless it is more and more difficult supporting this I hear with rational argumentation. This vulnerability makes a consumer search for abandoning itself (like in the Ferenczi trauma scene) and at the same time there is tendency for obsession self-reflection. History of psychic proprioception has very important aspects concerning its relationship to the problem of fading-away proprioception.

Keywords: psychic proprioception, history of psychic trauma

CONFUSION OF TONGUES BETWEEN ADULTS AND ADULTS IN POST-WAR BRITISH PSYCHOANALYSIS

BARI, Hamid
Birkbeck College, University of London, History, Classics and Archaeology, London, United Kingdom

Ferenczi described traumatic events as an epistemological encounters between two very different types of subjects: children and adults. This distinction between adulthood and childhood in the psychoanalytic context was tremendously important. However, the definitions of ‘childhood’ and ‘adulthood’ are historically flexible. For instance, the relationship between Mr. K. and Lova would merely be defined today as sexual abuse, but a hundred years ago it was perceived by Freud as an almost legitimate relationship between two consenting individuals. The belatedness of ‘childhood’ and ‘adulthood’ are necessary steps on the road to understanding any particular confusion of tongues.

I’d like to demonstrate my arguments in the context of post-War British psychoanalysis in Britain. Juliet Mitchell described that period as the “decade of the child”, when upbringing of children was the aim and family life was a means. British psychoanalysis integrated itself into those social conditions by its preoccupation with child psychoanalysis. This is the context of the experiences made by influential figures such as Balint and Winnicott in regenerative treatments. By analyzing a few of their case studies, I’d like to suggest that the ideas on repression which appeared in Britain at that time represent a tendency towards reshaping ‘childhood’ and ‘adulthood’ as historical categories. The Ferenczi notion, as Clara Thompson suggested, was for the adult patient to regress “deeper and deeper into infancy and childhood situations”. But since Winnicott believed that the lines between adult psychoanalysis and child psychoanalysis itself, and treated their regressed patients as if they were actually children. Besides its fertile psychoanalytic experience, it also created a confusion of tongues, but this time it was between adults and adults. I also hope to demonstrate by these case studies the possibility of using the ‘confusion of tongues’ as a methodological concept in historical research.

Keywords: child psychoanalysis, adulthood, Balint, Ferenczi, Winnicott

FETISH: AFRICAN AMERICAN ANALYST AS A TRAUMATIC LOCATION IN PSYCHOANALYSIS

BERNSTEIN, Jocelyn
Columbia University, Counseling Service Unit, New York, United States
JONES, Annie Lee
E.U. D.V.A., Community Living Center, St. Albans, New York, United States

This paper is an attempt to frame the presence of sexualized gendered bodies in psychoanalysis in a manner that releases the African American analyst from the pulse of western history's legacy of chased slavery. "The 'Fetishistic' experience of being the object of such a prolonged gaze-suggests reiterating the encounter to the realm of Ferenczi's identification with the aggressor. The location of African American analysts is unstable due to concerns about how one can be viewed, which is ultimately re-culturally over determined trauma from membership in a racial group that is devalued and where the entire group is perceived as having the negative features routinely attributed to the least of the group. Vignettes will be provided that illustrate the 'Fetish' of African American analysts in the psychoanalytic community. The analyst is often held in a contradictory space where on the one hand identified because of success in overcoming many obstacles to graduate from an institute, while also designated because they are the 'Other', unknown and unknowable in the eyes of their colleagues.

Keywords: racial fetish, negation, racialized gaze, dissociative bluntness, identification with the aggressor, fantasitic

THE UNKNOWN POET: SANDOR FERENCZI

BERMAN, Emanuel
Hadassah University, Psychology, Haifa, Israel
FOLCZIK, Máté
Hungarian Academy of Sciences, Institute for Psychology, Hungarian Psychoanalytical Society, Budapest, Hungary

We know a lot about Ferenczi the clinician, the theorist, the organizer. We know much less about Ferenczi the poet. To the best of our knowledge, Sándor Ferenczi never published his poetry. A collection of 120 poems written by Ferenczi during the first three decades of the 20th century was discovered byclimate, Ferenczi's grandson of Gitta Ferenczi's brother, among family papers and documents kept by his late mother. These poems were translated into English by Mirra Falôp, and will be explored and quoted in our joint presentation. The poems express intense emotions: desire (both sexual and emotional), love, erotic ecstasy, jealousy, pain, despair, hope, enthusiasm. They convey thoughts and ideas, depict various views of human life, and describe a wide range of experiences, from the medical dissecting room to the chamber of naissance in Sepsis. They offer us a new perspective on Ferenczi's emotional life and personality.

The presentation will be made in English. We plan screening during the presentation on the Hungarian sound of poems we'll quote in translation, for the benefit of members of the audience who read Hungarian.

Keywords: emotion, desire, love, pain, enthusiasm
HIROSHIMA MON AMOUR: TRAUMA, THE UNCANNY AND THE CRISIS OF WITNESSING

RUSZ, Varja
University of Pisa, Italy

This lecture examines the above concepts from an interdisciplinary perspective, including, beyond psychoanalytic theory, the neighboring fields of literary and cultural criticism. This perspective enables a dialogue between adjacent discourses, relating to these concepts through a discussion of Alan Bennet’s 1957 “Hiroshima Mon Amour.” We are familiar with the psychoanalytic concept of Trauma and the Uncanny through the writings of Freud from the early twentieth century. The crisis of witnessing is a notion derived from more recent, post-modern theorizing which corresponds with inter-subjective theories. I propose a hybrid reading, in which each concept integrates with the other without complete demarcation and distinction. The guiding question is whether the cinematic medium could function as the ultimate site of visibility for a traumatic historical moment – as Reinerman mentions usually the unrepresentable event. The two protagonists perform their personal trauma, while functioning as generic, nameless characters, representing general cultural positions. I propose considering the movie as a story about the ways in which one’s trauma is read through another’s. The mutual opportunity afforded to each protagonist, to be their own witness as well as the other’s, sets in motion the process of working through validating, symbolizing and providing meaning for trauma, which enables the transformation and representation of each protagonist’s life, as the culmination of the survival process. The creation of an intersubjective space allows for the hierarchization of trauma as viewers become second-degree witnessing subjects vis-a-vis the site of trauma facing them.

Keywords: trauma, uncanny, crisis of witnessing

THE CHILD IN PSYCHOANALYSIS

BÖKÁV, Attila
University of Pisa, Psychoanalysis PhD Program, Pisa, Hungary

The paper discusses the idea of the child as a projection, construction of the self in psychoanalysis and in literature. The basic idea is that the child is a traumatic construct formed first in the pre-Oedipal phase and later reconstructed in the oedipal context. The central task is Sandor Ferenczi’s positioning of the child and his theory of trauma, the relation of his ideas to Freud’s concepts and to later developments in psychoanalytic theory and practice. Besides the psychoanalytic theories I discuss the parallel philosophical positions concerning the figure of the child (Merleau-Ponty, Giorgio Agamben) and analyse a few literary works (Rilke, Walter Benjamin, Ants Jüri) examples too.

Keywords: child, trauma narrative, imaginary, Ferenczi

FERENCZI’S INFLUENCE ON FREUD REVISITED

BONOMO, Carlo
Instituto di Psicoanalisi dell’U. S. S. Stella, Florence, Italy

If Ferenczi took over Freud’s “heritage of emotion” and further elaborated it (Bonomo, 1998), then discussing the “analytic of his analytic”, how did Ferenczi’s rediscovery of trauma resonate in Freud? Ferenczi’s 1929 claim that “no analysis can be regarded... as complete unless we have succeeded in penetrating the traumatic material” resonated deeply in Freud, influencing his last works. According to the author, it reactivated in Freud the same traumatic memories that were at the heart of his self-analysis, starting a process of revision which included the self-analytic essay “A Disturbance of Memory in the Acropolis” (1936), “Analysis Memorable and Inexpressible” (1937), “Constructions in Analysis” (1937), the trauma theory endorsed in Moses and monothemism (1939), and the notion of the “splitting of the ego” in the process of defense (1938, 1939).

ELASTICITY OF TECHNIQUE: THE PSYCHOANALYTIC PROJECT AND SANDOR FERENCZI’S JOURNEY

BOROGÓVÁ, Anna
University of Pisa, Psychology, Pisa, Italy

The topic of this paper is the elasticity of psychoanalytic technique in the work of Sandor Ferenczi. The author suggests that this can be considered neither as an ultimate arrival point nor as a particular stage of Ferenczi’s clinical-theoretical body of work, but rather as an ensemble of affective qualities, attitudes and values, which Ferenczi gradually developed through experience, signaling a paradigm shift in the history of psychoanalysis. The following areas will be explored: the new sensitivity demonstrated by Ferenczi concerning the relational and communicative factors present in the analytic session, his subtle and acute attention to the participation of the analyst’s own subjectivity in the therapeutic process, and how these enduring elements of Ferenczi’s technique anticipate several significant future developments in psychoanalysis.

ON FERENCZI’S COUCH: A COMPARISON OF THE ANALYSES OF CLARA THOMPSON AND ELIZABETH SEVERN

BRENNER, William
National Training Program, Pleasant Hill, United States

“There is a mirror, a ventriloquy, rising from the south in which he is or she or someone else, either a contemporary or an ancestor, wear hushed alms, squandered, with their desires cut out, deprived of both food and life, and above all, something has been left unattended...” Maria Thököly, “Freud’s: An Alternative to Theory: Viewing on unpublished interviews conducted by Kurt Eissler, and sequenced in the Freud archives, Ferenczi’s patients will speak directly of their experience on Ferenczi’s couch. The interviews provide a missing fragment which supplements our understanding of Ferenczi’s Clinical Diary. For the first time we hear the story of the analysis from the other side of the couch. I will compare the analysis of Clara Thompson and Elizabeth Severn, two of Ferenczi’s most important patients, as they revealed their experience to Kurt Eissler. The patient’s report provides us with more historical accuracy about how Ferenczi really worked. An interview, like a clinical session, can reveal the unconscious at work, as material emerges, is moved away from and defended against, affective connotations eased and unconscious defenses tire narratives lines. I will explore how the unconscious is still at work within the transcripts of the interview, as the ghosts of transformation appear, and the wars and revolutions of past trauma continue to haunt and displace, providing us with clues to what trauma has been processed and what has not been metabolized.

Keywords: Ferenczi, Clinical diary, Clara Thompson, Elizabeth Severn, psychoanalytic theory
THE THIRD TIME OF TRAUMA: NOTES FOR A BETTER UNDERSTANDING
OF INTERSUBJECTIVITY IN TRAUMA FORMATION

CAMPINA DAS MUZONI, Paola
University of Sao Paulo, Psychology, Sao Paulo, Brazil

By observing cases where a trauma and its consequences are central to the treatment, this text seeks to articulate the concept of trauma and interpersonal trauma in order to rethink the temporality and the elements involved in the formation of a psychic trauma. This articulation, that takes into account the environment and its reaction to the event as a third moment of a psychic trauma, can provide clinicians with a different approach to patients who have experienced grief trauma. From these authors' standpoint, it seems that a trauma can be formed in a single moment (a first time), when a very large influx of stimuli enters the psychic apparatus and is not mastered; it can also be formed when an experience, that is itself not traumatic, is taken as an affront here, when reorganized and reorganized in the individual's memory (a second time). Ferenczi also stresses, especially in his 1929's conference, the importance of recognizing and validating the traumatic experience by the environment: what today we may call the post-traumatic situation. When such recognition does not happen, a great disturbance is caused by the experience in psychic functioning. Working with these concepts, this study tries to understand the role of intersubjectivity in trauma formation.

Keywords: trauma formation, intersubjectivity, temporality, environment

TRAUMATIC EXPERIENCES AND THEIR UNCONSCIOUS INTROJECTION:
A DIALOGUE BETWEEN CHARLES RYCROFT AND SANDOR FERENCZI

CASSUELO, Gabriele
Turin University, Psychology, Turin, Italy; Association S. Ferenczi, Turin, Italy

In his brief presentation, the Author reflects on some possible and valuable interpretations between the model of the mind expressed in Charles Rycroft's psychoanalytic theorization and the pioneering theory of trauma that Sandor Ferenczi developed in the last years of his life. In so doing, the Author will focus mainly on the little-known paper The Psychic and the Senses by Rycroft and on the last writings on trauma by Ferenczi.

Keywords: historical theoretical research, Rycroft's theory of mind, Ferenczi's theory of trauma, history of psychoanalytic ideas

ON THE NEED FOR A “DOUBLE ETIOLOGY” IN THE CONSIDERATION
OF PSYCHOPATHOLOGIES

CARRASCO MENDEZ, Carlos Alberto
The Complutense University, Madrid, Spain

In his seminal work (1926), concerning the pathogenesis of neurosis, Ferenczi stated that “not only deep enough in its symptoms the origin of danger; it could lead to further elaboration: relating to predisposition and constitution”. It is considered here that with this argument Ferenczi means to cover, among other important aspects, the need of considering the etiological signification of social contexts. It should be noted that we deal with a consideration that Ferenczi holds since his pre-psychoanalytical phase, as, in a thread dating back to 1931, he already asserted the possibility, and the possibilities, of a “double etiology” (social and psychological) so as to better take into account psychological affections and therefore understand them more adequately and provide better aid in their “healing”. In this paper, a brief review of Ferenczi's work shall be made in order to corroborate the continuity of the aforementioned consideration, and also to emphasize the importance of etiological, as well as metapsychological, inclusion of the social.

Keywords: double etiology, etiological and metapsychological inclusion of the social, work and psychotherapeutic

THE GIRL WHO WROTE TO PRIMO LEVI - THE “FOREIGN BODY” SPEAKS

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Reviewing a clinical case, the author explores the strategies for psychic survival to the feelings of inner catastrophic deriving from a gross sexual abuse, and the attempts to communicate and share it. The paper refers to two main achievements of Ferenczi's research: the consequences of the traumatic experience expressed not only as disorganization, fragmentation, psychotic agony, but also as feelings of body disintegration and alienation, the focus on countertransference as emotional sharing and as responsiveness to the deep unconscious communications which, being unspeakable, can be transferred semantically to the psychoanalytic. The author illustrates how, within a trauma-countertransference process, the extreme suffering of a sexually abused body and mind of a minor, which have become a “foreign body,” can move to the body of the analyst. Thus, the traumatic feelings can be relieved and shared deeply, opening up the possibility of working them through in the present analytic interaction.

Keywords: sexual abuse, countertransference, non verbal message, Shoah
SYMBOLIZATION OF EARLY SEPARATION TRAUMA AND THE FORMATION OF NEW REPRESENTATIONS. EXPERIENCES FROM THE ANALYSIS OF A FORMER INSTITUTIONALIZED CHILD.

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Early separation and attachment traumas are psychically "individuated" and leave "traces," unconscious imprints in the psychic structure. Very early on in the analysis of some patients with traumas of this kind, the attempt is made (successfully or not) to achieve a transformation of primary resistances to an "object as process" (transference).

In this endeavor, dreams and non-linguistic creations facilitate access to trauma-related "hiders" in the psychic traces. They are the expression of reparatory symbolization processes. The article draws on pictures and sculptures produced by a male analysand to illustrate the specific nature of this transference relationship. The author also discusses therapeutic techniques for reducing the risk of recurrent trauma.

Keywords: separation trauma, symbolization disorder, primary resistances, creativity

A COMPARISON OF FERENCZI'S AND FAIRBAIN'S THEORIES OF TRAUMA

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Frankel has suggested that there are many parallels and connections between Ferenczi's later thinking on trauma and Fairbairn's developed theory. Fairbairn's early clinical papers along with his MD thesis on Depression and Regression and other early papers now available reveal the concept of dissociation/spiritualizing and the development of possible alternative selves in response to trauma. Fairbairn's dissociation between ego-ideal and the super-ego echoes Ferenczi's distinction along similar lines in his 1926 paper on the theory of psychosomatic technique.

I would like to look at significant developments in Ferenczi's later thinking on trauma and the parallels in the development of a throughput-going object relations theory by Fairbairn.

Keywords: dissociation, structure, trauma, ego-ideal, linearity

BEWITCHING AS A CULTURAL SYMPTOM OF FAMILY TRAUMA

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The follow up of a family of African origin in a child psychiatric institution has stumbled upon a symptom of a cultural nature: bewitching. The patients had developed the concept of bewitching after a long absence from home, thus their children were under the influence of a sorcerer. The person to take care of the children was found by the parents, but eventually they had to accept that their offspring were neglected and sexually abused by this person and her older children. It is this neglecting and abusing woman who became the sorcerer. The bewitching could be understood as the expression of a family trauma. The proposed ethno-psychiatric consultation initiated, with the first interview, a factual investigation of the parents' histories. The parents had both previous existences marked by many personal traumas, expressed in the initial follow up. Parents didn't participate to a second ethno-psychiatric interview and also stopped the initial follow up, in which the emphasis was on the present situation of children.

The question of the therapeutic approach in relation to trauma is posed in this particular kind of clinical situation.

Keywords: bewitching, cultural symptom, ethno-psychiatric consultation, family trauma, therapeutic attitude

GETTING INTO MUD TOGETHER: TRAUMA, DESPAIR AND MUTUAL REGRESSION.

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"The only time I felt hope was when you told me that you would give me hope, and you continued with the analysis." (Patient to Wanisiecz, 1996)

Many relational analysts believe that hope and despair make dynamic dialectics underlying human development, and therapeutic change is created in the space between them. This is beautifully illustrated by the above quote by Winnicott.

Twelve years have passed since I presented the case of Dana at the International Sándor Ferenczi Conference in Jerusalem. The focus of my original paper was on "Contemporary Application of Ferenczi's Concept of Traumatic Experience through Dream Analysis." Since that time there have been three more Ferenczi's conferences: in Turin, Baden Baden, and Buenos Aires. In the intervening years, much aided by active listening to my Ferenczi colleagues at those conferences, I began to rethink Dana's case from a different perspective. Simultaneously, I was trying to make new sense of the then described "temporary" emotional upheaval I had thought I left behind. In the process of rethinking I have become deeply aware of my participation in the emotional matrix of the treatment. I realized that not only was I an instrument on Dana's surrendering to my despair, but also this dependence on my part led to an impasse and may have closed some possibilities for Dana in dealing with severe trauma. This newly found emotional awareness has helped to transform my work with subsequent trauma patients through "getting into mud." To use my patient Gary's words, I was no longer afraid of regressing to a place where despair ruled the day. In this way, my patient and I discovered that genuine hope could be sustained.

Keywords: trauma, despair, mutual regression, surrendering

L. AND R. GRINBERG'S CONCEPT OF "THE PREDISPOSITION TO EMIGRATE" (1984) AND ITS TRAUMATIC BACKGROUND IN THE LIGHT OF ANALYTIC TREATMENT, IN THEIR MOTHER TONGUES, OF ITALIANS LIVING IN GERMANY

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In their pioneering contribution to the topic of this paper, "Traumatische Emigration und Selbst" (1984), L. and R. Grinberg also spoke of their belief in the existence of a "greater or lesser predisposition to emigrate" (1899-245). The work has been ongoing in Munich since 1999 with Irish patients in our common mother tongue allowing me to confirm the subsequent finding of S. Amsel and J. Kegan (1990) pinpointing the traumatic background of such a predisposition, which activates a series of defense mechanisms originally described by S. Freud (1920).

All the many patients I have been working with suffer from an inhibition of their psychological development due to a trauma in their early life: such an inhibition is both internalized and projected upon their native environment, and it is basically such a projection which brings them to emigrate. Once they realize that the more favorable conditions of the host country do not solve the wounds bound to their early traumas, they seek help. The long and complex therapeutic journey I experienced with some of them will show what I mean.

Keywords: L. and R. Grinberg, predisposition to emigrate, traumatic background, mother tongue, German health system
LOVE TRIANGLE
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One of the darkest sides of human nature is the capacity to start a war, and nothing is more pervasive and self-destructive than the Civil War: that is to say both the collective social conflict and the acting out of self-annihilation. Trauma has its “First Edition” with varied directions: death or way out; melancholy or mourning. In this paper I will invite you to join me along the tremendous journey of understanding these and the trapology between them. One might say that the human destructive potential and the trauma of bereavement. I will also play the role of a professional who sets out to understand as an exercise in the art of expressing the suffering of another human being, teaching oneself the art of expressing the suffering of another human being. This exercise is to be carried out by Gertrude, acting both as an agony chic and persona describing Cibola who had just fallen into the river, lying on the water, singing and incapable of her own distress, “her garments heavy with their drink/Self the poor wretch from her melancholy down to黑马 and death.”

Keywords: trauma, mourning, melancholy, love, trapology.

ORDINARY SADISM IN THE CONSULTING ROOM
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Here in the countertransference, which is generally conceived of as induced by the patient, can aid boundary formation as well as separation and growth. When the analyst allows herself to experience the patient’s harm, it can be reconstituted and will ultimately enrich the patient’s personality. In this paper I will focus on the punitive aspect of countertransference. The analyst’s more or less conscious hatred for the patient has endured. Building on theoretical concepts from Freud, Winnicot, Joseph, Gихn and Benjamin, I suggest that just as the desire to surrender can degenerate into masochism, sadism can be perceived as a perversion of object usage. The analyst’s wish to reach the patient, to have her sense of agency affirmed, make an impact and penetrate, can transform into sadism when ordinary attempts for communication and recognition are thwarted. When the patient refuses to speak any other language but that of domination and submission, the analyst must resist the temptation to respond to the patient’s submissiveness with subjectivity. Thus, the patient’s manipulation of the analytic relationship. Using clinical materials I will explore how sadomasochistic patterns can be traumatizing for both patient and analyst and will often lead to analytic stalemate and failure. Worked through, they can contribute to resolution and growth.

Keywords: sadism, domination, countertransference, mutuality.

"THE SWIMMER" AND "THE CAT": TRAUMA, NARCISSISM AND OBJECT RELATIONS IN THE "CREATIVE ACT"
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The paper investigates the creative function of a "creative act" at the heart of the patient as it sometimes happens unpredictably in the treatment of traumatized patients. In two vignettes, taken from the treatment with very ill patients, whom I call "the swimmer" and "the cat," I will illustrate the importance of narcissism as outlined in Sigourney Fried 1994 paper on Narcissism. I will give special attention to the link between primary narcissism and creativity in the recovery from trauma. I will argue further, that a failure in creativity, understanding and appreciation on the part of the analyst/observer regarding the meaning and function of the "creative act" and the grandiosity that goes with the associated primary narcissism, may lead to a particular sort of severe negative therapeutic reaction that may subsequently be very difficult to overcome in the further course of the analysis. I will then put forward the idea, that the traumatized patient may be actively using his creative potential in order to alter the analyst/observer with the aim to achieve a better "fit", which can help him to overcome the disabling restrictions that traumatization had imposed on him. This will lead to questions of scoring out and object manipulation vs. "taking care of the object" in a constructive way.

Keywords: trauma, creative act, narcissism, object manipulation.

LAPSUS LINGUIAE, OR A SLIP OF THE TONGUE?: SEXUAL BOUNDARY VIOLATIONS: TRAUMA, RECOVERY, ETHICS
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Sexual boundary violations are a topic of psychoanalysis itself. And Freud was warned us about the state of mind that makes them possible. Yet, even in the professional, intellectual, ethical, clinical, and personal dilemmas, many issues of this nature are not taken sufficiently. The author of this paper, the author of the analysis, puts a human experience of a sexual boundary violation into clinical and theoretical perspective, and addresses the "confusion of tongues" in the analytic relationship. The author, speaking from the dual vantage point of both patient and analyst, offers new ways of thinking about this perennial clinical problem. Using the heuristic of the Oedipal story, she employs psychoanalytic and social theory to detail the effects of gender and sexual hierarchies in trauma and treatment. Importantly, she returns to her experience in order to reflect on measured therapeutic actions, therapeutic pacing, care, and Nachleben of. Locating her analysis of the Oedipal story in the 1970s cultural history, the author attempts to decipher what led up to it: what did the analyst do and not do, say and not say? How did the analyst's character combine with the author's to produce a conflation about which the analyst never spoke and the author/patient remained silent for 30 years? And under what circumstances can the damage inflicted by such an event be transformed?

Keywords: transgression, shame, S6, Nachleben, Oedipal.
“CONFUSION OF TONGUES” AS A SOURCE OF VERIFIABLE HYPOTHESES

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In this paper I will try to read Ferenczi’s “Confusion of Tongues” with an aim to extract from it several hypotheses that can be put to test by empirical psychological research, and then review the results of such studies relevant for the topic.

Focusing on the developmental part of Ferenczi’s paper, I formulated the following hypotheses: 1) Trauma, specifically sexual, is a pathogenic agent with high prevalence in the pathogenesis of the neuroses; 2) Traumatized children show clear signs of paralyzing fear, splitting, and fragmentation; 3) Children who suffer from consequences of traumatization are those whose mothers cannot provide specific help; 4) Helping professionals have a significantly greater number of traumatic childhood experiences than other professional groups.

In the second part, I offer a thorough review of current research addressing those hypotheses: epidemiological studies on the prevalence of trauma; longitudinal and cross-cultural findings about disorganized attachment pattern in children; data about the importance of maternal sensitivity for coping with trauma and the development of normalization; research about psychological characteristics of helping professionals.

Finally, I conclude that Ferenczi’s clinical research was verified by empirical research, which also offered a more detailed knowledge about the influence of trauma on development.

Keywords: trauma, dissociation, disorganized attachment, maternal sensitivity, helping professionals

PSYCHICAL STUFFING AS A HYPOTHESIS FOR THE DEVELOPMENT OF SOME CASES OF BOULMIA

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GOGOUHLES, Nicolas SPP, Paris, France

Early traumatic experiences function as psychic organs which often induce adult psychopathology. In the case of patients with eating disorders and more specifically bulimia, the authors of this paper propose the existence of an unconscious phantasy of “psychical stuffing” which would correspond to archaic traumatic experiences in the way they lived their very early feeding relation. The feeding relation in the history of these patients is that of a mother/baby encounter where the transnational space in which thinking normally develops is overwhelmed by an overexcitation corresponding to an experience of forced feeding.

Overexcited mothers tend to cram their babies and prevent them from experiencing the transformation of need into desire. The emerging traumatic effect is therefore not one of lack but one of excess of stimulation leading to a paradoxic unconscious phantasy according to which the feeding experience of the baby satisfies the psychic needs of the care-takers. In this pattern the body is then left with a diminished aggressive shield. Later in the process might induce symptoms that are expressed by compensatory behavior together with a failure in psychic representation. The aforementioned unconscious phantasy of “psychical stuffing” appears in the psychobiological encounters, whereas the progressive construction of a psychic space may allow the representation of the very experience of the patient’s own body. Emotions then may merge and thus find new pathways of expression more elaborate than behavioral discharge.

INFANTILE TRAUMA, THERAPEUTIC IMPOSSE, AND RECOVERY

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This paper examines the treatment of patients whose physical and psychic pain when they were infants overwhelmed their defenses. The effect of their infantile trauma was profound and hidden psychic retrace. They became separated from themselves emotionally and unrecoachable by others, although their cognitive and physical development continued, sometimes precociously. Their infantile psychic trauma continued to manifestize them in their adulthood, hindering work, pleasure, and love. A narcissistic idealization of their rejected and withdrawn selves interfered with their object choices and distorted their object relations. Freud believed these patients were not recoverable but psychoanalysis today has found methods of understanding and speaking to these early trauma so that treatment is possible. The difficulty for the analyst is first in recognizing the condition, then in accessing it, and finally in speaking to it. The paper uses clinical examples to illustrate means of recognizing, accessing, and working with the patient’s seemingly inaccessible infantile transference.

Keywords: clinical, infantile, retrace, transference, treatment

ON LOVE AND COERCION

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This paper will focus on work with individuals who have been summarized that they cannot bear the vulnerability of desiring, and who, as they begin to “care” or to “love,” find their feelings escalating to proportions that feel unbearable and unmanageable. When such individuals do begin to “care” and “love” they often feel so desperate and so vulnerable that they believe in ways that seem to be anything but “caring” or “loving.” Rather, they become demanding, possessive, tyrannical, and, if they feel hurt or frustrated, often become consumed with uncontrollable rage. Many then want the other (now the analyst) to “suffer” as they inevitably blame the other for their own “suffering.”

The focus will be on how, as the relationship becomes more and more emotionally charged, the effort to constructively deactivate the overwhelming begins to become “mad” before things can escalate to such proportions, can become the crucible of and the medium of the work. Detailed clinical process will be presented collating how working in on the moment-to-moment shifts, and clarifying the ways boundaries become confused, can begin to generate new relational possibilities in the immediate analytic moment, and how the new experience of what was not even imaginable as possible in a relationship before becomes a new “insight” or “resolution.” This often allows for new perspectives on the past and for a necessary process of mourning.

Keywords: love, coercion, rage, unbearable feelings, therapeutic action
PSYCHOANALYSIS AND KULTURKAMPF: HOW SÁNDOR FERENCZI BECAME THE “WORLD’S FIRST PROFESSOR OF PSYCHOANALYSIS”?

By: Ferenczi

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The paper unfolds the historical background and the particular circumstances of Sandor Ferenczi’s invitation to the newly established Chair of Psychoanalytic Studies and psychoanalytic clinic in the Medical Faculty of the Budapest University in 1919. Ferenczi’s professorship became a legendary topic in the history of psychoanalysis. In the legend facts and fictions are mixed. While it is true that Ferenczi was in fact the first full professor who had been invited so far to head a psychoanalytic department, the relationship between psychoanalysis and higher education, especially medical training was a much more complicated story. The integration of psychoanalysis into medical training was already a long discussed topic. I will argue that Ferenczi’s professorship – along with other appointments of this period – was an important step in the early legitimisation and institutionalisation of psychoanalysis. At the same time, it was part and parcel of a Kulturkampf between the progressive reform initiatives and centralisation plans of the revolutionary government on the one hand, and the bitter resistance of the conservative faculties on the other. In the paper I will show – based on archival documents and other sources - the stages of this Kulturkampf that took place in Hungary in 1918/19, focusing on the specific role psychoanalysis played in this struggle.

Keywords: Sandor Ferenczi, revolution, Kulturkampf, universities, institutionalisation of psychoanalysis

FERENCZI ON MULTIPLE PERSONALITY

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Ferenczi’s “Child Analysis in the Analysis of Adults” (1931) and “Confusion of the Tongues between the Child and the Adult – The Language of ‘Terrorism and of Passion’ (1936, 1949) are reviewed with particular reference to Ferenczi’s ideas on the biphasic nature of the trauma of sexual abuse in childhood and to his ideas on the nature of the child’s response to such trauma, including altered states of consciousness with subsequent amnesia and splitting of the personality. A clinical example of multiple personality is provided, in order to illustrate that the clinical phenomena described by Ferenczi are typically found in cases of multiple personality, I will argue that Ferenczi may have been describing patients with multiple personality and I will suggest some reasons why he may have avoided being explicit on this point of diagnosis.

Keywords: multiple personality

THE NARCISSISTIC RELATION BETWEEN GENERATIONS

AND FERENCZI’S ‘WISE BABY’

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Bearing in mind the relation I established between the parents’ narcissism and the alienating identifications (Fainshein 1981, 2005) I proposed the hypothesis that a ‘wise baby’ concept coming from Ferenczi, is wise because he is not able to create his own means the necessary conditions to bring his parents to be interested in him, the baby. The wise baby knows, even better than the parents and in analysis even better than the analyst, where the parents’ (and the analyst’s) narcissistic investment (Fainshein 2002). In order to be able to depend on this kind of parents the wise baby knows how to adapt his own interest to the parents’ narcissistic interest. The dynamic of the wise baby relationship emerges as a (re)construction in a particular kind of transference. This shall be the core of my paper.

Keywords: wise baby, narcissistic transference, telescoping of generations, ‘Listening to Listening,’ alienating identifications

WHEN THE THERAPIST IS ILL: BETWEEN LIFE AND DEATH, FANTASY AND REALITY, CONTAINMENT AND LEAKAGE

By: Florschuh, Deora

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This paper deals personally and reflectively with therapeutic, humanistic and ethical dilemmas evoked by the author’s life-threatening illness. The issues are far beyond questions of self-disclosure that predominate in most of contemporary inter-subjective literature. Inevitably, physical illness intrudes the secure introversal within one’s body and can be experienced by both therapist and patient as a breach of an ‘essential contract’. Contamination with illness and potential death situations, in both participants of the dyad, inhere emotional death reactions and fantasies, even chaos. The ability to hold and contain is cracked and different ‘realities’ leak into the ‘illusional’ protected space. In such circumstances, the therapist’s ability to move freely between being an object and being a subject is impaired. It is especially difficult at times when patients need the therapist as an object that ‘brackets’ his subjectivity. In addition to several vignettes, a detailed clinical example will be presented in order to shed light especially on the difficulty to struggle for life with patients, who have never recovered from the hold death has had over their own lives. Nevertheless, hope remains that authentic coping with complex therapeutic reality will intensify the therapist and the therapeutic process, and supply more human significant, rich and growing experiences.

Keywords: death and life trauma, therapist’s illness, inescapable self-disclosure, leakage in ‘illusional’ space
"RN": SÁNDOR FERENCZI'S CRITICALLY IMPORTANT CASE IN THE HISTORY OF PSYCHOANALYSIS

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Over the last two decades, I have published extensively on Sándor Ferenczi's pivotal patient, Elizabeth Severn (RN), and her complex relationship with Ferenczi—most famously regarding their controversial, yet productive, mutual analysis. Severn's significance to Ferenczi's groundbreaking clinical ideas was confirmed by her many appearances as "RN" throughout his 1923 Clinical Diary. In this psycho-biographical presentation, I will provide new historical research on Severn's life, particularly focusing on her childhood, during which she seemingly suffered extreme abuse. This early trauma—a "confusion of tongues"—led to chronic symptoms that drove her on a desperate journey to alleviate her psycho-emotional suffering, finally leading her to Rodapie, and her last hope, Sándor Ferenczi. In this challenging clinical work with Severn—even the analysis, Ferenczi rigorously maintained a constant of continuous reflection and thinking about his process and the techniques at play in her case. Ferenczi's exhaustive methodology in this work was critical in helping him to formulate radical and profoundly important new psychoanalytic ideas.

In providing new psycho-biographical details of Severn's life, I will rely on original sources, including: Severn's published books, Ferenczi's Clinical Diary, a voluminous correspondence between Severn and her daughter, Margaret, as well as lengthy taped interviews. To enrich this exploration of Elizabeth Severn, and bring her to life, I will utilize media—photographs/paintings of Severn (and her daughter), as well as images of letters, postcards, books, and personal objects close to her.

Keywords: Ferenczi, Severn, RN, trauma, mutual analysis, psycho-biography

PSYCHOLOGICAL ENSLAVEMENT REVEALED THROUGH THE CONCEPT OF IDENTIFICATION WITH THE AGGRESSOR

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Identification with the aggressor (IWA), discovered and formulated by Sándor Ferenczi, has profound impacts on psychological development, the clinical interaction, and sociopolitical life more broadly. This paper examines the concept and its widespread applicability in all these areas, as well as developing a deeper understanding of the dynamics of the phenomenon itself.

IWA, a response to traumatic stress, is motivated by the need to survive and also to maintain a connection to a needed but threatening object. It includes behavioral submissiveness, loss of self, and compulsive blaming—all forms of accommodating the object, which act synergistically. The result is psychological enslavement—to the aggressor in the moment, and on an ongoing trajectory.

IWA can also be observed across a wide range of social, political, and economic life, suggesting that ubiquitous events generally not thought of as traumatic may in fact have traumatic potential. The widespread nature of this phenomenon has been demonstrated in the laboratory by William's and Zimbardo's experiments on obedience, and in the larger world: e.g., the Stockholm syndrome psychologists' participation in torture at Guantanamo Bay; political life on a large scale, where people act against their own interests and everyday economic life, where people buy what they don't need or even want.

IWA also operates in the clinical situation and was the rationale for Ferenczi's "mutual analysis." The vulnerable state that develops in analyses makes them especially susceptible to IWA in treatment. The workings of IWA, especially in the clinical situation, will be elaborated in detail, and illustrated with clinical material.

Keywords: identification, trauma, sociopolitical, clinical

CAN IT BE THAT WITH THE CASE OF RN FERENCZI FORESHADOWED THE EXISTENCE OF TRAUMA RELATED STRUCTURAL DISSOCIATIONS?

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Character Analysis perspective: A perspective that was first given shape by Wilhelm Reich and placed within the framework of relation-oriented psychoanalysis developed by Harald Schoedel. We emphasize to communicate a concrete and practical understanding of how psychoanalysis contains an exploration of the therapeutic situation in which both of us see, and both talk, and both know and what we see, and how we see things.

Character analysis contains psychotherapy as an instrument rather than as a goal, including Ferenczi's contributions to trauma theory and practice. This attitude is based on a holistic understanding of human function and development. In my case study I will provide examples of the theme and experiences of the experiences of a character analysis therapy with a traumatized patient, in which I also used somatic psychotherapeutic methods.

My patient was a traumatized refugee, a young woman living now in Norway who's geographical, bodily and mental barriers were wiped out or replaced.

Keywords: refugee, psychotherapy, trauma, relational trauma, structural dissociation, BMI, character analysis, psychotherapy

PARANOIA—A TRAUMATIC ORIGIN

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Regarding the question of origin, Ferenczi and Ferenczi exchange numerous letters and they each elaborate their proper humanism, their personal theory, their own construction regarding the outlines of what was before... and before...

Ferenczi conceives his ambitious project of biography: Thalassa. He elaborates a theory of catastrophes and adaptation or survival mechanisms throughout his thinking, using traumatic memory traces.

His practice with traumatized patients in the ground work of Thalassa and, in return, Thalassa influences his theory of personal trauma as a specific beginning in the catastrophe, the trauma-traumas.

A clinical case will allow us to apprehend how a pathologic delusion can express a survival mechanism in the face of a trauma that impairs one's very sense of identity. Difference traumatic and countertransference episodes in Ferenczi's long analysis opens up a comprehensive of the devastating effects of primitive traumas.

Elaboration of a new meaning and construction of a non delusional history enables him to become the subject of his own self and life. It also allows a new relation, different from hatred, to himself, to others and to the world.

If a pathologic sometimes bestows our own capacity to think, on the other hand it is he that forces the most constant reorienting of our thoughts about our practice and our theory. The paradox of for origin meets our own gain, our own interrogations concerning the traumatic origin of our personal psychic life.

Keywords: trauma, origin, paranoia, transference, countertransference
THE PUBLIC-ACTION AS AN ACT OF "NEW-BEGINNING"

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Following Eichmann's and Ferenczi's thought, the Author focuses on the psychoanalytic dimension and how it arises in the psychoanalytic relationship with patients who recently fell into physical disasters. In order for an actual transition from the body to the mind to take place it is essential for the psychoanalysis to remain within the patient's areas of "psychosomatic immobility" so that the process of elaboration, which allows the "inclusion of the body" in the development of shared feeling and thinking, can gradually be put in motion. This work requires a specific kind of "listening" from the analyst's role that entails a more "archaic" availability to "identify" with pre-symptomatic areas. It implies the analyst's ability to "embrace" the pain that has taken shape in the body through the psychosomatic symptoms. Some corporeal features may yet fill because they embody, to the patient's eyes, the pain that the analyst's eyes can recognize and transform into his psychic life. For the inclusion function to be consolidated in these patients, it is essential that the "private" knowledge, attained through the repeated experience of "emotional connotations" reached through the progressive moments of "meeting of insights" between analyst and patient, may become "public" knowledge after a clinical act of public action between analyst and patient in the analytic work.

Keywords: psychoanalysis, personalization, public action

TRAUMA AND BASIC TRUST

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The trauma discovery by Ferenczi was labelled by Freud as a return to "errors", which he himself maintained to have committed before 1897. During the dramatic period that goes from the Vienna Congress (September 1927) to Ferenczi's death (May 1933), Freud writes to numerous correspondents (among whom Jones, Eitingon, his daughter Anna), complaining that the theoretical elaboration of the last Ferenczi corresponds to a simple return to the origins of psychoanalysis, and is also a symptom of a serious psychosis. The theme of this relationship is that Freud's opinion concerning Ferenczi's concepts of Trauma is a result of misunderstanding: the trauma as described by Ferenczi is not the one that preceded (in Freud's theory) the distortion of the selection theory but something that is much deeper and modifies where the sexuality role is less central. The author seeks to ponder and reflect about the importance of the concept "traumatism" as a cause of scoring the "basic trust", a perspective that goes far away from the Freudian sex-centric putting the psychoanalysis face to face with the unfeelings of the victims of extreme trauma.

Keywords: Ferenczi, seduction, erschütterung, extreme trauma

TRAUMA AND DENIAL (VERLEUGNUNG) IN CLINICAL AND SOCIAL EXPERIENCE

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All critical understanding of the present time should have a theory of trauma as a starting point. Using the Freudian concept of trauma, Walter Benjamin had already showed that the shocks – present in the social work, urban aggressions, and excess of information – partake of the social subjectivity since Baudelaire's epoch. In this vulnerability to the traumatic, all of us are implicated simultaneously as perpetrators and as victims. However, although the trauma concept has been simplified in the process of the violence and the present war, violence is not as much defined by the violence or the excess of an event, but mainly by the subjective assimilation provoked by its denial (Verleugnung). As an experimentalist, the abstract trauma is in the social trauma, contemporary subjectivities and their possibilities of working through from the notion of denial, just as Ferenczi has proposed it. Based on this fact, the paper seeks to emphasize the new sensibility generated today, in clinical and social experience.

Keywords: trauma, denial, contemporary society and subjectivities

"WHERE COULD PAUL STREET BOYS PLAY?" - A SPOILT CHILD AND HIS PSYCHOTHERAPY AS THE CO-CONSTRUCTION OF A COURT FOR THE SYMBOLIC PLAY

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In this paper I'd like to present the development of the psychotherapy with Simon, a child of ten, for explaining in clinical terms the idea that the child therapy means building "a court", a place where a child could go everyday for playing.

The aim of the paper is thanks to some quotes from the masterpiece written by E. Möhr, to use the metaphor of the "court" for describing how, thanks to his personal use of the setting and thanks to the development of the relationship with the therapist, a spoilt child could build, together with the therapist, a place unknown in his past. A place that could be built thanks to what Freud defined "two essential processes of therapy", a) the play and b) the renegotiation of self-other relationships through action.
THE "CONFUSION OF TONGUES" AS AN ANTICIPATION OF THE TRAUMATIC DIMENSION OF LANGUAGE

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The work of Sandor Ferenczi anticipates various problems of contemporary psychoanalysis – clinical, technical and theoretical – standing out due to its novelty and the way in which it elaborated on these issues. Ferenczi's 1920s writings were mostly read by the psychoanalysts of his time as a return to the Freudian topic, including the way in which Freud himself had read them. Nevertheless, in Ferenczi, there is an innovation that makes him different from Freud. Even though there has been a growing interest in the psychoanalytic community regarding his traumatic theory – "the traumatic dimension of language" – itself and the effects it has over the subject have been less studied. In Ferenczi's later work, it is possible to contemplate the notion of "confusion of tongues" as a novelty in the relation between trauma and language. It seems possible to find in Ferenczi's traumatic theory an anticipation to Jacques Lacan's work on the traumatic dimension of language, which the French psychoanalyst referred to in his final theoretical production through the concepts of l'Instant and traumatism.

Keywords: confusion of tongues, Lacan, language, trauma, traumatism

PSYCHOANALYTIC MOTHERING

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I would like to suggest the concept of psychoanalytic mothering as a general notion referring to functions of mothering that the analyst can provide in analysis. These functions are known in the psychoanalytic literature as holding, containing, arousal, self-object relations, etc. This means creating a real and concrete illusion of a mothering function in analysis, which provides the patient with a spontaneous and authentic experience of herself. What is newly experienced has, small then, either existed as a potential, or has been dissociated. In this paper, I will focus on ways of creating dissociated self-states in analysis, in the sense that Ferenczi has long ago written about it in his "Clinical Diary" (1928). While doing this, I will also link the discussion to the theoretical framework of Winnicott, self psychology, and the intersubjective approach (including recent developmental psychology) in order to enrich the contemporary relevance of these fascinating writings by Ferenczi.

Keywords: psychoanalytic mothering, dissociated self states

FERENZI ON THE IMPORTANCE OF SELF-ESTEEM

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This paper considers Ferenczi's insights into narcissistic development and its relation to self-esteem based on his seminal work "Stages in the Development of the Sense of Honesty". The technical implications of Ferenczi's insights are clinically explored by considering case material.

Keywords: Ferenczi, self-esteem, narcissism

OUR INNER MEPHISTO

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Can we all turn into monsters? Under what circumstances? What are the intrapsychic prerequisites of becoming a perpetrator, and which psychodynamic mechanisms support this process?

In the psychological discourse of trauma and terror, generally the focus is on the psychic reality of survivors. The elaboration of the perpetrators' complex world is a great task for social sciences and medical professionals alike. Theories on the psychology of perpetrators deal with both the social and the intrapsychic dynamics of the phenomenon.

The presentation discusses the psychological background of the "sleeping devil", possibly present in all of us. It gives a view on the psychological dynamism between the victim and the perpetrator. The Conducting Foundation has been created refugee survivors of nazism for more than fifteen years, the authors' knowledge of the perpetrators' world partly stems from this practical experience.

Keywords: psychological discourse, refugees, torturers, experience

GHOSTS IN THE CONSULTING ROOM

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A panel of 3 papers (Harris, Rozman, and Michael Sosk) on the presence of intergenerational figures, part objects, spectral experiences, present absences, ghosts, in order, in the process of abuse and child assault. The condition of traumatic transmission, the in the living and the dead, the parents and the children. Largely small, adding to the condition in scoring endurance, countertransference and transformation. Clinical examples will be used.

Keywords: intergenerational transmission, ghosts, history, embodiment

THE ORDINARY TRANSGENERATIONAL TRANSMISSION OF TRAUMA

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My point of view is that children who are living in dependency of their caregivers have to express their own traumatic reality, and they have to create another reality. They create an illusion where they are guilty in everything what happened, and they have to change to make things better. They can't accept a reality where they should live without safety, care and acceptance of himself and they can't give up to try to get it. Ingeborg Borch created a theory and a therapy method (Borch's fantasy therapy) where she describes which mechanisms begin to work, when a child realizes that his hardships are to be satisfied and tools don't work. I want to demonstrate the theory in therapy method with individual and family therapy cases. I try to show in this cases, how could be transferred traumatic reality, the - "little trauma" - throw the generations...

Keywords: traumatic event, defensive mechanisms, intergeneration trauma, trauma processing, past reality integration
TRAUMATISM - REVISITED
HATZIOLAS, Andri
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It has now been eighty years since the notion of "Traumatism" emerged with all its importance in Ferenczi's work. The later papers by Freud and those of the post-Freudians after the war, such as Winnicott, Balint, Kler, Heimann, Fairbairn, Rico, Opgen and others, have become since then our revered companions. Taking into account scattered remants of the Clinical inquiry and minor works by Ferenczi, this conference reconstructs this dramatic psychoanalytic process of Ferenczi's principal patient, that of the analysis of his colleague "R.M." - Elizabeth Severn. It shows what we can learn from these historical documents and how these help us in the center of the psychoanalytic thinking. Ferenczi's. Hopefully these stimulations may renew our thinking about important subjects concerning our contemporary practice of psychoanalysis and the problems of human relationships and emotions.

THE EARLIEST TRAUMA STORY: DISSOCIATION AND ENACTMENT IN THE BIBLICAL NARRATIVES OF ISAAC AND REBECCA
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The biblical story of the "Binding of Isaac" (Genesis 22) is perhaps the earliest narrative of adult onset somatogenic trauma (according to the midrash literature, Isaac was 27 years old). I will examine how the text of "The Binding" is characteristic of a trauma narrative, i.e., a dissociated story, wherein the manifest content, not unlike a patient's narrative of trauma, functions as the conscious layer of meaning and reflects the normalized and dissociated experience of trauma. Being dissociated, not neutralized nor integrated, the actual trauma is then encoded in the subsequent story of Isaac's wife, Rebecca, on behalf of him (Genesis 24). In this new reading of the biblical text, understanding enactment as a narrative that transformed and dissociated allows for the making of meaning of a story that otherwise has been difficult to follow. I will discuss enactment as a form of remembering psychic experiences that are not neutralized or integrated and that enacted within relationships, including the therapeutic relationship. I will then discuss adult onset somatogenic trauma in contemporary psychoanalytic thinking. Guided by the work of Donald Winnicott and Gabrielle Weis, I hope to show what is unique in adult onset trauma as differentiated from childhood trauma, with special attention to dissociation, the fear of annihilation and enactment.

Finally, I will explore and discuss the collision of the reader, or analyst, in a dissociative enactment, particularly the tendency to push out of consciousness the true impact of the terrifying horror of the unimaginable.

Keywords: enactment, dissociation, adult somatogenic trauma

THE PSYCHOANALYTIC ASSESSMENT OF REFUGEES SUFFERING FROM PTSD: A PSYCHOANALYTIC APPROACH: DESTRUCTION AND RESILIENCE IN TRANSFERRED AND COUNTER TRANSFERRED
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Freud's ideas on "Kriegserinnerungen" have been the major topic at the IBA Congress in Budapest 2018, and Ferenczi's work has always been centered around questions of trauma. Today the "Kriegserinnerungen" entered into the ICD 10 as post-traumatic stress disorder. Even if an interdisciplinary approach is necessary today, the psychoanalytic approach in the way it understands the traumatized person and how he knows about his historical trauma looks like. Assessment of refugees is embedded in the institutional framework of immigration services, courts of justice, and the police. This framework in itself already entails particular interference and counter-enactment problems. In this chapter, I argue that a psychoanalytic approach may help to transform the static diagnostic categories of ICD 10 and DSM IV into psychodynamic terms. Moreover, this may help deciphering the trauma of a person who cannot talk about it. In the first part, theory and practice of examination are discussed from the perspective of (social and individual) transfers. Further, the differences between the acute, informal form of PTSD and its later, avoiding form are explained in detail. From this, technical consequences for structuring the interviews are derived. In the second part, a number of cases are reported in which an initial negative transfer of a denial of the trauma which would lead rejection of the refugees. These cases serve to illustrate how the examiner needs to use his counter transfer, and how he needs to know the possibilities of a person's resilience while exploring the traumatic experiences.

Keywords: trauma, splitting, resilience, depression, countertransference

OF SHADOWS AND REALITIES IN PSYCHOANALYSIS: A HISTORICAL COMMENTARY ON FERENCZI'S CONCEPTION OF TRAUMA
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Psychoanalytic Center of Philadelphia, Philadelphia, United States

In a letter of May 21, 1932, Ferenczi sent Freud a set of "Preliminary Communications" containing the substance of a lecture that he was planning to give at the International Psychoanalytic Congress to be held later that year. Although the Congress was postponed until the following year, the ideas contained in these communications form the basis for the controversial "Confession of Tenderness" paper that Ferenczi delivered in 1932, the proceedings of the Congress and Freud's closest associates at the World International Psychoanalytic Congress that took place in Weisbaden, Germany, in September 1932. With reference to primary sources, chiefly letters and other previously unpublished documents, my presentation will chart the course of the internal dispute between Freud and Ferenczi over the concept of psychic reality contained in their respective views on the nature of trauma. Although the controversy over the Confession of Tenderness paper marks a crisis in the personal relations between Freud and Ferenczi - and a turning point in the history of psychoanalysis - I hope to demonstrate that Freud's and Ferenczi's diverging views of trauma are not incommensurable with each other.

Keywords: trauma, psychic reality, confessions of tenderness
The author will present clinical material from the 15-year treatment of a survivor of severe trauma. In this presentation, the author will examine a dialogue between psychoanalysis and spiritual analysis through: 1) a description of the faith influences in Ferenz’s life; 2) the interaction of psychosomatic treatment of trauma and spirituality in a clinical case example; and 3) the theoretical requirements for trauma with a biocultural lens of psychoanalysis and spirituality. 1) excerpting from a recently published book, the author will suggest that Ferenz’s perspectives were influenced by the generous religious and ethnic pluralism of Hungary, particularly the impact of Kálmán’s ideas. 2) The author will discuss the case of Manu, a young woman who witnessed the murder of her brother by her father when she was six. This incident not only destroyed Manu’s mother and her soon-to-be-born brother, but resulted in the loss of her eye and the sustaining of lacerations across her face requiring many plastic surgeries. This young woman lost both parents and would be raised by a mentally ill grandfather and a struggling grandmother. The author will delineate the path of the treatment at one which moved from the despair of perpetuating and vowing symptoms, to a desire to transform the trauma in order achieve empathic outreach toward others. In this process, the impact of spirituality as a hope-giving third will be described through each phase. 3) The author will present the theoretical basis for a psychoanalytic approach that is consistent with Christian spirituality, and will explore the presuppositions of such an approach. These presuppositions will then be applied to an understanding of “enactment,” “chaos,” and the holding of dialectics in the treatment.

Keywords: Ferenzi, trauma, Christian, spirituality, psychoanalysis

Ferenzi’s Concept of Identification with the Aggressor: Implications for Understanding the Dissociative Structure of Mind Involving Interacting Victim and Abuser Self-States

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No one has described more passionately than Ferenzi the traumatic induction of dissociative trance with intermediate fragmentation of the personality. Ferenzi introduced the concept and term, “identification with the aggressor” in his now famous “Confession of Tongues” paper in which he describes how the child who is being abused becomes estranged and “robbed of his senses,” as a result of which he becomes subject to automatic mimicry of the abuser. As a result of being traumatically overwhelmed, the child becomes hypervigilant before the aggressor’s wishes and behavior, automatically acquiring by mimicry rather than by an active identification with the aggressor’s role. Rather than a healthy identification in which the process augments the child’s developing sense of identity, this process is a dissociative and alienating one. To expand upon Ferenzi’s observations, identification with the aggressor can be understood as a two-stage process. The first stage is minimised by trauma, the second stage is aggressive and defensive. While identification with the aggressor begins as an automatic mimetic process, as Ferenzi describes, with repeated repetition and use, it becomes a defensive process. As a dissociative defense, it has two main relational parts: the part of the victim and the part of the aggressor. This emphasizes an interpersonal aspect—how aggressor and victim seek to maintain isolation in the internal world, and how this becomes enacted in the external. This formulation has particular relevance to understanding the dissociative structure of mind, borderline personality disorder, and dissociative identity disorder.

Keywords: dissociation, identification, aggressor, BPD, DID

“Uterus Loquitur” Traumatic Expressions & Configurations of the Human Organism in Ferenzi’s Physiology of Pleasure

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In 1929 Ferenzi criticized psychoanalysis for “neglecting the organic biological basis of the patient.” He was a pioneer of the “physiology of pleasure” (“Euphysiology”) in which no organ is “physically neutral.” He stressed the plasticity of the body, the biological energy of bodily organs and the relations between them, and made a remarkable use of Freud’s distinction between alloplastic and exoplastic control.

Ferenzi described these processes in an original blend of writing techniques of high aesthetic value. While his specific model regarding the bodily actions have been characterized by Schützauer’s and Riecke’s philosophy, they will show a complex, more accurate picture than the cartesioeque one presented by Schützauer. A comparison with the role of trauma and bodily configurations in Grotowski’s works will reveal a further “face of trauma.”

Keywords: physiology of pleasure, aesthetics of internal trauma, external trauma, adaptive potential, Orphic power

Alba Sleeps for Herself But She Dreams for Me. The Traumatoletic Potential of Dreams

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Frend rises to present himself as sharing Ferenzi’s view that dreams have a traumatolytic function, and in fact, appropriates the idea. However, both attribute a very different importance to it. In Ferenzi, it is central; in Freud, it is secondary, at least as regards the traumatic dream and after 1930. This view is influenced by the various metapsychological conceptions on which they are based, and which are occasionally very different, especially as regards the drive theory. This, in Ferenzi’s posthumous works, is clearly an attitude from Freud’s approach at the same time, but not so much from Freud’s first works, such as “A Project for a Science of Psychology” and “The Interpretation of Dreams.” A dream is used to illustrate Ferenzi’s point of view.

Keywords: dream, traumaanalysis, drive theory, rest theory.
"PULL UP YOUR PANTS" PHENOMENON IN YOUNG AFRICAN AMERICAN MEN: THEIR BODIES AS CULTURAL SPACE

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This paper is an exploration of a clinical phenomenon called "pull up your pants" and its developmental and relational aspects. "Pull up your pants" is an externalization of the self’s response to the pain, suffering, and shame African American young men experience on macro/micro aggression levels as cultural subjects of aggression and disempowerment. A clinical case study will accompany this theoretical piece to show how Ferenczi’s identification with the aggressor as cultural performance of trauma, raises the discourse surrounding this construction of stigmatized signifiers of individual internal processes to a level of communication for both sides of the dyad to do the work of psychoanalysis.

Over the past three years, this analyst has struggled with conceptualizing the "pull up your pants" phenomenon in a way to engage the issues to attempt analysis. The silent and highly communicative process of the unconscious have given way to and affirmed the mother’s attribution of danger to their son’s mannerisms and appearance. "Pull up your pants" phenomenon among poor and impoverished youth can lead to rights and sensitized readings as they actively resist misbehavior while hegemonic masculinity and sexual orientation.

The dress, walk, and mannerisms that characterize this body disengaged phenomenon also affect the police, urban gangs and other risks. The symbolism involved in some memory of "pull up your pants" seems to be unconscious representations of the vagabond, the convict, group aging of sensitized prison life and solicitation.

Keywords: identification with the aggressor, "pull up your pants" phenomenon, African American male youth, objection, cultural performance of trauma.

VICISSITUDES OF HONESTY AND TACT

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Ferenczi emphasizes the significance of psychoanalytic ‘tact’ in his 1928 paper which not only means the silent acceptance of the patient’s inner world but his appropriate mirroring and interpretation. It is difficult to find and maintain the optimal tension of honesty and tact for both patient and analyst. The pure honesty of the analyst re-examines the patient through the feeling of abandonment.

Keywords: tact, honesty, containment, mirroring.

ENACTMENT MANAGEMENT

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The interpretation of transference was established by Freud as one of the pillars of the psychoanalytic practice. However, with Ferenczi, we can notice that the psychoanalytic technique should have more flexibility as well as more elasticity to cover certain pathologies that, as we previously know, do not belong to the normal field and have been welcomed within the vast spectrum of the borderline pathologies. Nowadays, it has been questioned whether the analytic relation among these patients should be called transference, for, by examining the etiology as well as the clinical history of such patients we observed that what disturbs them, are not just object relations or conflict repetition. For such patients, as a rule, the trauma is much more related to what did not happen, and not so much to positive or satisfying, as a specific event itself. Thus, the concept of enactment appears as an option to describe what is going on in the analytical relation with these patients. Therefore, the aim of this paper is, by a recapture of this concept, to discuss, from the examples presented in psychoanalytic texts that approach the subject, what has been and which should be the analyst’s intervention in front of an enactment. Can we affirm that the technical correlates of transferences in the interpretation, which should be the technical correlate of an enactment?

Keywords: enactment, borderline, intervention, transference.

ODIPUS WRECKS, OR HOW A WELTANSCHAUUNG TERRIFIED PSYCHOANALYTIC CHILDREN INTO MUTE, CONFUSED TONGUES

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An impetus for the birth of the Oedipal narrative arose from Freud's mourning for his father. Similarly, an impetus for the birth of the two terrorized children arose from Ferenczi's mourning for his neo-born children. Both narratives are reconcilable as attempts to help patients through fusing their fragments and fortifying their egoes. Despite their outward differences, both Oedipus and the Terrified Children begin with the same premise—children are immersed in sexuality and this interest begins with familiar adults. However, the outcome diverges afterwards. Oedipal theory is predicated on the idea that the adult/child boundary will be maintained and the child grows by identifying with the same-sex parent. The Terrified Children theory is predicated on the reality of the consulting room—the child is socially isolated and their identity is anonymized. The Oedipal outcome may well predict the outcome for the normal population. This paper will explore how Freud's refusal to adopt a scientific attitude toward competing ideas traumatized the analytic community. How could Freud save his eyes from the evidence given by his patients? From Anna O to Dora, female patients all lost their Freud a map with a red N circled around their genital area. From his inability to endure mundanity, Freud widened the trauma in the analytic community by insisting that it was Oedipus or nothing. This paper will attempt to reconcile these two theories by exploring how the confusion of roles in Ferenczi's life was utilized towards the generation of the Confusion of Tongues narrative and how both Ferenczi and Freud’s inability to rise above their own personal trauma to see the world in subsequent analytic generations. As children should never have to choose between their parents, analysts should never be asked to declare loyalty to one by simulating the other through dichotomous ideologies.

Keywords: sexual trauma, psychoanalytic trauma, ideology.
RETRAUMATIZATION AND CURE IN THE WORKS OF FERENCZI
AND IN CONTEMPORARY CLINICAL WORK

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The concept of trauma, the idea of the retrauma and the role that external objects play in Ferenczi's clinic are fundamental and current. An original and distinguishing point of his Theory of the Trauma is the legitimacy that he confers on the traumatic events, understanding them as real occurred facts and relatively independent of the psychic reality. His clinical experiences with “difficult patients” led him to emphasize the power of external objects in the retraumatization process to the point that he understood the shock between external objects and the ego as the main factors in the genesis of the trauma. Environment function is crucial, he realized, as much as in the origin of trauma as its maintenance. Therefore, when he emphasized the role that external objects played in the formation of the trauma, Ferenczi also enhanced the role of analysis as potentially transformative or as a therapeutic agent of the cure, especially in reference to retraumatization. The original perception of trauma ecology led him to increasingly modify the analyst approach and to develop a series of therapeutic measures that included an amazing change of the analyst attitude in the therapeutic setting in order to avoid the retraumatization phenomenon and to create a new and genuine therapeutic setting that would facilitate the cure of trauma.

These complex whole of new measures can be characterized (and traced) in the elaboration of the Technique which was coherently being built as part of his "Trauma Theorization. The ideas of this paper is to discuss important aspects of Ferenczi's humanism legacy that include the comprehension of the origin of trauma, its perpetuation (retraumatization) and its cure, both in Ferenczi's clinic and in the contemporary one.

Keywords: trauma/cure, retrauma, external object, elaboration of technique, contemporary clinic

TRAUMA CHILD ON THE COUCH - TRANSFERENCE, COUNTERTRANSFERENCE, IDENTIFICATION

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In his article on Transference and introjection, Ferenczi warns that one of the major difficulties of psychoanalysis stems from the very nature of neurotic patients, to transfer their feelings, reinforced by unconscious emotions, upon the doctor, thereby acquiring knowledge of their own unconscious. He takes Freud's concept of "introjected", returns transcendent and extends it beyond the person of the analyst or doctor, saying that it is a psychic mechanism that manifests itself in all life's circumstances and underlies most moral phenonemon. Ferenczi invites us to consider transference in a more general way, beyond the analytical frame. He talks about the tendency of neurotics to "incorporate" others into themselves in the other's place, so feel other person's emotions rather than their own.

Based on my clinical work with patients who have experienced childhood trauma, I will explore different processes of introjection in transference and countertransference, paying particular attention to the dynamics of identification between analyst and patient. Childhood trauma can have a severe effect on the future adult's capacity for object relations. Instead of "healthy" identification with the other, taking account of difference and reality, the mode of object relations can be that of "pathological identification" based on fantasied or oral incorporation. A kind of regressive defence against "normal" relationships; it is an attempt to acquire a substitute identity through magical imitation. Instead of saying, "I am like him/her", it is as if the person were saying "I am like him/her". How can analytical listening, associative work and interpretation stimulate unnormalized processes within the patient and help him/her to let go of immature relational modes fixed to childhood traumatic situations?

FERENCZI, TRAUMA AND THE UNCONSCIOUS

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While Freud and the main currents of psychoanalysis have incorporated into their theories Freud's formulations of the unconscious along with assumptions about Oedipal development and Oedipal conflict, Ferenczi was more interested in the unconscious in the correlation between clinical cases and psychoanalytic theory. For Ferenczi, the theory was not a random collection of clinical work, and an aid to thinking more freely about clinical materials and encounters. In this emphasis, he accepted Freud's view of the unconscious only insofar as it helped him with clinical communications. As a result, the usual view of the unconscious as the repository of drives and biological forces was, for Ferenczi, subordinate to the needs for psychoanalytic engagement in response to trauma.

Keywords: Ferenczi, trauma, unconscious, trauma, double consciousness

UNDEADNESS: UNWELCOME GHOSTLY VISITATIONS AND THEIR COUNTERTRANSFERENCE VICISSITUDES

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This recent years into Cynthia's analysis I have heard curiously little about the ghosts of unname past that haunt her. And a great deal. For quite of her history, ghosts have commanded our attention by making their poisonous presence acutely felt in our relationship (Ferenczi, 1929, 1933; Fraiberg, 1975; Freud, 1917; Loewald, 1960). Early on, in her interview with Cynthia, I would break out into a sweat, feeling dizzy & unable to focus. I threaded sessions, Cynthia - asleep and very dark - spoke with fits of emotion or dwell on a horrific past and a not too much better present, and about her wellness. One day, the mind at the end of a season, simply stood up & felt excruciating pain in my ankle. I helped involuntarily, but single-mindedly managed to get Cynthia out the door. And then I passed out. Next session, upon seeing my broken ankle, Cynthia said, "You know I thought I did that to you." Cynthia frequently asserts one of us must die; 2 people cannot survive & thrive together. Like vampires, one must be "made of vanity" so that the other may live - or, more accurately, remain undead. Paradoxically, despite my uneasiness feelings toward Cynthia (Ferenczi, 1929), my body was permeable and receptive to the ghostly visitations. Thus are the traumatic ghosts embodied and made available.

Keywords: trauma, transfence-countertransference, anomie, body, ghosts

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FERENZI, TRAUMA AND TACT
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In this presentation, we will address Ferenczi's clinical approach to trauma, relating it to the concept of tact and of touch. In Italian they are the same word, tactis. The wish to be touched and the fear of being touched are intimately connected with boundaries and psychic shape. Trauma disturbs the ability to bear the conflicts inherent in these wishes and fears of touching and being touched. When these wishes and fears play off each other, they become sources of mistrust, disidentification, and shame.

Keywords: tact, trauma, tactis, sensory organization, tactile response

THE "FINER MECHANISM OF PSYCHIC TRAUMA AND ITS RELATION TO PSYCHOSIS" (Ferenczi, 1930): THE ROLE OF THE OTHER
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In this presentation, I review psychoanalytic approaches to psychic trauma, with special attention to the often neglected problem of psychosis. I argue that Freud's notion of an inherent stimulus barrier in the central nervous system that prevents the psyche from excessive stimulation can be better understood as a function of the social link mediating potentially traumatic experience. This link depends on the subject's embeddedness in the Other, the generalized Other of a coherent system of cultural symbols. When the Other fails, or the self is a coherent manner in which it has never functioned adequately, the subject is essentially alone in an inexplicable world, vulnerable to unmediated sensations of internal and external experiences and memories. The permeable boundary of inner and outer, past and present, are unable to maintain the continuity of self or to protect it from intrusive impulses. Isolated and without a framework to contain fantasy, the subject switches from relationships and social demands that are interpreted idiosyncratically. Where trauma disrupts a previously functioning link to the Other, repair by psychoanalytic treatment is possible. For early and severe trauma, however, like traumatic attachment disorders, the results may be a liability to psychotic reactions that cannot be healed in the same manner. For this reason, treatments of psychotic subjects must address alternative ways to stabilize the self and provide continuity of being.

Keywords: trauma, psychosis, subject, Other, psychoanalysis

TRAUMA AND CREATIVITY: NON-VERBAL COMMUNICATION AS ENHANCING THE POSSIBILITIES OF HEALING
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Pressure separation at infancy may become an unbearable, traumatic-emotional event, which defies processing. It is an experience that can over the psyche so deeply that no notable change can be sensed. Then, the inner,批示ing mind creates an external, supporting shell for itself. This shell provides a rigid cover, which serves as a barrier between the inner, emotional world and the external world, and inhibits development and creativity. The possibility of cure exists in the internal processes that the therapist undergoes during the sessions with the patient. While remaining in a neutral relationship, the therapist, offering specific verbal interventions, leads the analysis to a deeper understanding and to the realization that the patient is under irrational body sensations and emotions which are unconsciously reproduced in the traumatic experiences of the分析师. When the analysis can use the powerful emotional experiences, and return them to the analyst in a way that would be tolerable to him, the obstructing barriers vanish. I shall illustrate this manner with a case of a patient who is listless, lonely, and detached, whose only comfort is in curling up tightly in bed. A session, where he was allowed to dream, while the analyst is present in neutral attention, experiences strange bodily sensations and feelings, is presented. This unconscious connection was the beginning of crumbling down the obstruction, which was expressed by a remarkable change in the patient's creativity.

Keywords: trauma, creativity, non-verbal communication, analyst's body sensations, unconscious encounter

CUMULATIVE TRAUMA AND RECOVERY
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Introduction: When a young child wakes up screaming from a nightmare, it usually is the parent who comforts her. However, what happens to the child whose nightmare is a recurrent disturbing dream of the replay of sexual abuse by one's own father? Delayed and chronic post traumatic symptoms have been described in adult incest victims. According to Kardiner (1947) this disorder was first given those soldiers in World War I trenches (DSM IV) who suffered from multiple assaults on the self, some more disorganizing than others. He compares the depictions and distortions learned in the "combat family" to those experienced by a young child in her own family. This paper will provide a comprehensive exploration of the profound impact of cumulative trauma on the sense of self and self in relationships. A connection between trauma, difficulty in affect regulation and self mutilation will be addressed and demonstrated through selected case vignettes. The transformative experience of the therapeutic relationship for improving affect regulation and recognizing its relationship to attachment will be underscored. Various ways to create salary to facilitate the expression of unmediated experiences and to allow the recovery of damaged agnosia as well as relearning of childhood languages will be highlighted. The present will demonstrate how the interminable relational experience can lead to posttraumatic growth when creating a wide range of repressive patterns in traumatized patients. The nature of corrective and counter-emotional transference in the treatment relationship will be discussed. The concepts in this presentation are informed by neuroscience research, attachment and psychoanalytic theory.

Keywords: cumulative trauma, posttraumatic progressions, self mutilation, affect regulation, chronic PTSD
USES OF COUNTERTRANSFERENCE ANALYSIS

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Classical analytic technique has traditionally been thought to be problematic or ineffectual for more severely ill patients. Psychotic, bipolar, and schizophrenic patients have usually been excluded from analytic treatment as poor candidates for analytic self-exploration. While this may be true for more fragmented patients who struggle to remain in reality on a daily basis, good prognosis, well-functioning ambulatory schizophrenic and bipolar patients may benefit significantly from a clinical dyadic approach. Offering analytic treatment to patients traditionally treated with medications without benefit of psychological interventions can help in the rehabilitation and inner growth of those who have had a devastating and fragmenting internal experience.

The challenges of working with a more regressed patient will be examined in working through the transference/countertransference (T/CT) as portrayed in a detailed presentation of an analysis of a patient with Schizoaffective Disorder. Psychotic decompensation, hospital admissions, suicidal ideation, resistance to medications, and paranoia about the analyst complicated the analysis. Anxiety, despair, hopelessness, worry about the patient's safety, and paranoia were CT resistances that challenged the analysis. Countertransferences of the T and CT were essential in the progress of the analysis. Psychotic breakdowns may be considered a disintegration of the self. Psychoanalysis assists the psychotic individual in self-reintegration.

Keywords: countertransference analysis, dream analysis of delusions.

REALITY AS TRAUMA

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To write about (or have a conference on) “trauma” is the risk of reducing trauma to a thing, an objective post event that can be dealt with psychologically in one way or another. Such reduction betrays the unintended fact that trauma is ever present for all of us, an acid dissolution of presumed objectivity and the continuity of self. Trauma, from this perspective, is the assault of reality on ones very existence. Trauma is the miscalcable current, the enveloping phenomenal flow of time and space towards the precessional temporal of death.

Ferenczi, who recognized the reality of trauma, constructed a “conflict of tension” between the abuser and abused. In effect, the abuser misuses the one whose use is and acts accordingly. The reality of the one soared the reality of the other. Ferenczi and Rank had a period of mutual influence which shall be discussed. Rank's resultant “birth trauma” universalized trauma. Everyone who is born is forced from the Garden of Eden into a screaming reality. Though subsequent development makes that reality more bearable, it remains a hell whose lure is an unpredictable moment of death.

Implications of this line of thinking lead to a conception of psychological health as more open to change in identity, and psychopathology as more closed. In the end, death may indeed lose its sting, becoming no longer ever having trauma, and instead, more and more change.

Keywords: trauma, Ferenczi and Rank, relationship, constructive, reality, identity change, death.

TRAUMATIC RE-ENACTMENT IN VICTIMS OF INDIAN RESIDENTIAL SCHOOL ABUSE

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In the 1870s, the Canadian government determined that it was responsible for the education and care of the country's aboriginal people, and that they should learn English and Christian values. In 1920, it became mandatory for all Indian children between the ages of 6 and 15 years old to attend Indian Residential Schools (IRS), which were operated by national church organizations such as the Catholic and United Churches. Tragically, there was much extreme sexual, physical, and psychological abuse of the aboriginal student residents by the school staff and clergy. The present work assessed and treated numerous victims of such abuse. Many of the traumatized individuals show repetitive re-enactment of their trauma, in the context of experiencing severe psychopathology such as Complex PTSD. Such “repetition compulsion” exemplifies the clinical axiom that “trauma repeats,” as well as Freud's ideas (first articulated in 1920 in Beyond the Pleasure Principle) about the way in which individuals “revive unpleasant memories” (an idea) and repeat certain situations from childhood to try to gain mastery over them. The present work will review the history and nature of IRS abuse and traumatic research evidence about the psychology that resulted. Present case studies illustrate victims' traumatic re-enactments with their children, peers, and authority figures and discuss such repetitions in light of Ferenczi's trauma theory, including his concept of “identification with the aggressor.”

Keywords: trauma, sexual abuse, re-enactment, repetition compulsion, identification with the aggressor.

CONFUSION OF TONGUES, TRAUMA AND MASS DYNAMICS – SÁNDOR FERENCZI AS A POLITICAL THINKER

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In his paper read on the 1932 APA meeting Sandor Ferenczi undertook a profound and evocative questioning of the then mainstream technique of psychoanalytic treatment. He also proposed a new distinction between infantile and adult sexuality: repression and passion thus stressing the hierarchical aspect as well as the loss of structure. This seems to imply a necessary traumatic effect. These were not just theoretical reflections but also as much explicit political statements for the psycanaesthetic community. Yet the political implications extend the then actual conflicts. Ferenczi might have underestimated the impact of repressed infantile aspects in the adult, as the confusion, not only of tongues but of desires, arises in states of common regression due to the adult (the psychoanalytic) loss of thinking capacity. Ferenczi's reflections can easily be applied to mass psychology when rising anxieties trigger massive collective regression and induce defensive submission under an idealized leading figure. The implicated dialectical processes of collective regression and surrender under a supposedly overwhelming power can be observed in many political phenomena and has implications comparable to the ones Ferenczi suggested in his clinical examples.

Keywords: mass psychology, regression, metaphysics of trauma.
THE TRAUMATOLYTIC FUNCTION OF DREAMS

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On 26 March 1931, Ferenczi wrote a short paper entitled On the revision of the interpretation of dreams, which raised two interesting questions. In the first, he enquired whether a second function, bound up with traumatic experiences, could be attributed to dreams, while the second concerned a revision of metapsychology to include the mechanisms underlying psychic pathology and trauma – in particular, the fragmentation and automation of the personality – thus anticipating his well-known hypotheses on the ‘conversion of tongues’. Ferenczi thus postulated that a more complex definition of the function of dreams would include not only the undisputed function of with fulfillment, but also a second function, that of traumatolysis, whereby traumatic experiences were dispersed and undone. In his view, many dreams, lacking unconscious representations, did not present insurmountable psychic contents or erotic images, but gave rise only to painful sensations or experiences of physical or mental suffering. Ferenczi held that, besides their wish fulfillment function, dreams served for the recovery, through these sensory and bodily experiences, of the memory traces of a language that had been rendered mute. It was this possibility of working through that Ferenczi called the traumatolytic function of dreams, which foreboded by a number of years the notion of ‘healing dreams’ coined by Winnicott (1949) in his well-known paper, Than in the counter-transference.

FROM THE DESTRUCTION OF THE SELF THROUGH WORD AND BODILY STRENGTH

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There is no age. Anyone can be destruemos from itself. Violence is a trivial way that operates beyond what sees the identity of the supposed par-ticular type of society. This is a fact. The produced accrue the mind. Short, psychic coercion. From the old times, like Ferenczi would say, sensitive to the winds that lead to mental illness. Assuming here that all may lie in a plot that comes from outside. Destruemos is not only to happen in childhood, any age can be defeated; this is a question of strength and circumstances. However, there are situations that reveal the ways of abstract and senseless aggressions as the clinic of difficult exists has taught us to live. Sándor Ferenczi revealed more than Sigmund Freud certainly the sensibility that allows us to operate with a multiplicity of sources of breakdowns, suffering (within the limits of ethical, beyond the death penalty...) that human, in a transformed world, can live. What Psychological defenses can be constructed from the action of harmful words and the erotic domination from a body against another body? It’s about the clinic and the metapsychology of these cases one wants to think.

Keywords: trauma, psychic coercion, ethical, Ferenczi

FERENCZI’S PARADIGM SHIFT IN TRAUMA THEORY, THE “WISE BABY” PHENOMENON & RESILIENCE

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How did psychoanalytic think its way from ‘traumatic progression’ or ‘precocious maturity’ described by Ferenczi at the beginning of the 1930s with its background of the ‘wise baby’ phenomenon to the research of resilience? The paper focuses on the psychoanalytic approaches of resilience. What was the contribution of ego psychology, object relations and attachment theories, self psychology, and group experiences to understanding resilience? Results concerning resilience are based on longitudinal studies of early hospitalized or traumatized “wise children”, child survivors of genocides, wars and communal violence, populations of children and adult refugees. The paper shows the different approaches of resilience, from the factorial components through the views of structures and processes, including the new ideas that put resilience and depletion as phenomena at the two ends of the same continuum of structural dimensions: psychological and object relational.

Keywords: wise baby, traumatic progression, resilient children, resilience, depletion

"BEING OUTSIDE ONESELF" - THE CLINICAL IMPORTANCE OF THE CONCEPT OF DENIAL

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This paper analyzes the security of Ferenczi’s concept of denial in order to elaborate the fate of early traumas in the psyche. We will base our ideas on a clinical material from a case of anxiety. The concept of denial implies the consideration of an aesthetic dimension in psychoanalysis. The lack of recognition of the subject in the look and the speech of others is what makes trauma able to crack the psyche. So, the denial, by impeding the introjection, causes a short circuit in the drive-object system that prevents the occupation of the real body and the creation of meaning, leading to what was regarded as a functioning on extremity: The defense, according to Ferenczi, focuses precisely on the syntheses ability of the ego. The sensitive part of the trauma is thus dispersed and dislocated, while the surviving part knows everything but feels nothing. In this regard, Ferenczi believes that the psychic cleavage is followed by a psychical traumatic progression, which involves the identification with the aggressor. The author says that symptoms of trauma are “to be outside ourselves.” It follows from this conception that the defense introduces a particular mental functioning, whose clinical manifestations are an appeal to the limit of the body to deal with the excess of either the repetition of a sensory mark that cannot be inscribed as a memory trace and/or the surplus energy related to the inability to symbolize.

Keywords: trauma, denial, aesthetic dimension, lack of symbolization, ancesia
TRAUMA, HEALING AND THE RECONSTRUCTION OF TRUTH IN THE INDIVIDUAL AND IN SOCIETY

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In my paper I would like to stress the main differences in the theory of trauma in Freud’s and Ferenczi’s writings, underlining the implication that different theories make for the treatment of traumatized patients. I would stress how Ferenczi’s reflections (most of the time) can be relevant even for today’s intervention on victims or survivors of social and relational trauma and how the intersubjective view of psychoanalytic treatment founds in the Hungarian psychodynamic psychotherapists.

I would highlight how in the work with survivors a reconsideration of the reality of the events is fundamental for the recovery of truth not only for the individual but also for the community. With Judith Herman I would in fact say that “Rediscovering and telling the truth about terrible events are prerequisites for the reconstruction of the social order and for the healing of the individual victim” (Trauma and recovery).

In the cases I will present, I hope to show how working with the victim acquires a fundamental intergenerational meaning: in fact the problem of trauma is that precisely the unknown and unremembered elements in oneself can be transferred to one’s children, even so the third or fourth generations (on the subjects on the generations survived to the Shoah have shown). Regression of trauma in fact may become “an unconscious organizing principle” (psychiatric and survivor Dori Lenz argues). active through generations and as a consequence it might damage community at large. It is not simply the “identification with the aggressor” mechanism, but also a component of death instinct at work.

In some cases Ferenczi’s lifestyle and work, even the psychotherapeutic work carried out with the victim in the empty space of the therapy room may assume a fundamental testimonial value which might end up with a form of healing and separation of the community at large, restoring power of truth that belong to the entire social and historical body. It becomes a fundamental ethical work, in a world devoid more and more of truth and engagement.

THE USE OF IDENTIFICATION WITH THE AGRESSOR IN THE QUEST FOR INTIMACY – TOWARDS POST-TRAUMATIC MASTERY

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Women with histories of unaddressed early childhood sexual and related trauma are frequently fraught with feelings of unalterable, disowned, and alienated. They tend to perceive and render feelings within themselves and others, including the analyst, as a Trojan horse, full of hopelessness and power and the potential for derailing, and. Given the often foreign nature of more benign, loving affects, defensive measures involving identification with the aggressor, may be called upon to regulate and negotiate other emotional experiences, including rage and panic, leading to heightened vigilance and grief responses. These reactions may be associated with low experiences that can disassociate the patient from familiar ways of relating, as well as from her sense of internalized object relations. Focus will remain on identifying and navigating disrupted states that emerge in the analytic dyad via a vicarious transmission, noting the role of identification with the aggressor—especially as the patient struggles to embody positive self-representation, as well as render or rendering feelings for the analyst, as well as her from her. Clinical material will incorporate vignettes from a thirty-two year-long analytic treatment with a woman who was molested starting at the age of two years old, as well as severely neglected. Components of re-traumatization within the therapeutic hour, and the movements towards post-traumatic growth will be highlighted, also manifested by the patient’s capacity to forge a new relationship in her sevenies, characterized by healthy self-esteem and autonomy, as well as intimate – versus dissociated – sexuality.

Keywords: identification with the aggressor, enactment

INTEGRATING EFFECT OF THE GROUP AS A WHOLE

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The matrix is the total web of relationships in the group. It involves the nodal points and each event of relating concerns the points between the members that relate. Along the horizontal axes the matrix is the totality of relationships as any given time. Along the vertical axes past events are reflected up to the present time. At different times different parts of the group members’ personalities come to surface in the group. The horizontal axes stretch simultaneously and contain the actual parts that surface at one time. The vertical axes will integrate the parts of a member’s personality that surface at different times. The trauma is a split-off part of the personality. Along the horizontal axes the matrix will integrate the trauma to the surface and contain it in the group. Along the vertical axes the matrix will integrate the split-off part. Thus the analytical group, where we help to bring the unconscious mental content to the surface, is a very effective medium for working with the trauma.

CAN YOU SEE MY SCREAM: RELATIONAL DIMENSIONS OF THE ANALYSIS OF TRAUMA

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Psychic trauma intensifies and complicates by cumulative trauma and object loss can greatly impact a person’s fundamental and relational self-definition. Involvement in analytic work, usually sought as a last resort, purports re-traumatization. In some cases, the unpeachable is initially communicated via psychological processes and frightening perceptive distortions. The voice is shut down and other systems take on its role. The scream is locked in nelkiss cellular communications channels, e.g: physiology, visual perception, fused imagery. The affective state of silence screams can erupt and pain voice only after the analyst and patient create a potential safe space. As the “identification of trauma” and the “identification with the aggressor” in absolute and real, the patient needs to be assured that the analyst’s presence is real, and the analyst will not intrude or disappear. The ultimate test may be the transference-countertransference co-experience of traumatic situations including attacks of rage, assault, action, etc. The analyst follows the patient into the dark nightmare of imprisoned screams so they both can “live the screams together”. Only then can the patient scream, sing, communicate and create with his/her own tongue and voice. Only then can translations and interpretations have meaning.

The above mentioned relational paradigm of analytic work and subsequent growth are illustrated with the help of clinical vignettes of multiply traumatized patients: Mr. K., who found part of his face missing in the mirror and Mrs. S, whose blood pressure temporarily shot up to dangerous levels upon entering any instrument’s office.

Keywords: psychic trauma, cumulative trauma, re-traumatization, potential safe space, affect storm, confusion of tongues, identification with the aggressor

Keywords: identification with the aggressor, enactment
FROM THE DEAD TO THE LIVING: ACTING IN THE TRANSGENERATIONAL TRAUMA PRESENTATION

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When a clinical experience is interpreted as the revelation of a transgenerational trauma, one finds a transformed version of the traumatic and an enigma in the clinical science. Which are the transmission paths between the parent’s denied trauma and its impact on the child? Which are the figuration conditions? These problems will be addressed in this work through clinical material extracted from childhood analysis. In transgenerational trauma, elements that are denied by the parent function as absence and compromise the intersubjective dynamics between adult and child, impoverishing symbiotic processes (Staham and Tory, 1994). Though death denial, an empty field is created, one of separation and unlikeness: a gap without a corpse to be voided. In these inhibited psychic conditions, acting presents itself as a first mode of inscription of that which is denied by the family. The child under analysis faces a death scene, and act in the place of the dead, in an almost hallucinatory immensity, characteristic in ‘invented’ fantasies (Forenzoni, 1924). Dead words and actions gain life in the child’s body and voice, in a transmuted appearance of the family scene. If, in many cases (Freud, 1914), it is a reminiscence that should occupy the place of acting, there are others when therapeutic success appears in the patient’s presentation, through acting, of that which will still become memory. The mode through which a child under analysis figures this scene, and act in, begins the elaboration process and enriches the inhibited fantasy life.

Keywords: transgenerational trauma, child analysis, acting, invented fantasy

THE NEW TRENDS IN ‘NEUROPSYCHOANALYSIS’ AND THEIR LIMITATIONS

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Empirical psychology has commonly been trying to find substructures of psychodynamic notions in three domains: subversion, the impact of the desire system on perception, motivated memory distortions; the development and consequences of attachment, the role of child rearing practices in personality development.

The talk shall concentrate on the first issue. In the 1990s, there was an early alliance between the New Look approach to perception and the psychodynamic interpretation of repression. Jerome Kagan and associates have shown that values and desires play both facilitation and inhibiting role. Heated discussions followed around the notion of ‘perceptual defense’. With new technologies – masked priming, fMRI, imaging – new data supporting subconscious early semantic processing emerged as New Look II and III. According to Ehrigs (2006) the effects show an affinity between a Freudian and a Brunswikian approach to perception and cognition, with multiple stages, constraint conversions and automatizations.

Lately these efforts have been accommodated to new theories of ‘neuropsychoanalysis’. Subconscious semantic processing is clearly evidenced, its time constraints are clearly outlined. At the same time all of these effects are still struggling with the notion of repression, and its possible neural substrate. Repression is either localized in the prefrontal area, or in the brain stem. It is harder to interpret the topological model of Freud in modern neuroscience terms. Ironically, the place of both Freud and Wieder seem to be clearer, while the poor ego is still struggling to find its place in the brain, as well as in society at large.

WAR TRAUMA: FROM WWI TO OEF/OIF (OPERATION ENDURING FREEDOM AND OPERATION IRAQI FREEDOM)

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Sandra Ferronzi, with Ernst Surner and other early psychoanalysts, pioneered the treatment of War Neurosis during World War I (1917). Their findings were presented at the Fifth International Psycho-Analytical Congress in September, 1918. These reports will be reviewed with special attention to similarities and differences of war neurosis compared to posttraumatic stress. After World War II (1945), psychoanalysis gained prominence in the United States, in large part, through treatment of veterans and training of mental health workers in the Veterans Administration (VA) hospital systems. The concept of war neurosis will be followed through iterations of shell shock, battle fatigue, acute stress disorder (PTSD) and traumatic brain injury (TBI). Current treatment of PTSD and TBI in the VA with cognitive behavior therapy (CBT) and exposure therapy (ET) will be reviewed. Other neurobehavioral treatments including extracranial movement desensitization reprocessing (EMDR) and quantitative EEG will be discussed. Attention will be paid to what theories and methods are rediscovered under different names and to what methods have proven efficacy.

Keywords: war neurosis, PTSD, TBI

PHYSICAL TRAUMA, DEATH COGNITION AND THE GROWTH PROMOTING INTERACTION BETWEEN DYADIC AND OEDIPAL PROCESSES

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This model conceptualizes personal experience of mental process which facilitates physical recovery. Loss claimed that meaning is a vital human need. Dyadic Projective Identification transmits primal body sensations into meaning through mourning the pain of differentiation between hunger sensations intramural and the perceived breast’s figure uncontrolled externality. Primal meaning is a representational recognition of linking between these differentiated bodily events. Thus, meaning is a representational way to organize past unacknowledged chaotic events through mourning their uncontrolled externality. Primal meaning allows translation from ‘body without mother’-choos into recognition ofterritorial breast’s loss. Sympathy and differentiation are acknowledged. This model describes how body immersion transmutes, reactivates and recognizes primal processes. This reactivation transforms the trauma of body injury and chaotic sensations into meaning the pain of loss of previous body and self image. It is a transition from their schizophrenia split perceptions toward their renew meaning through depressive integration. Integration difficulties lead to expansion into mental chaos and psychic defenses. It is arrested through schizophrenic fixation by a body’s mechanical experience. Fixation, which is a mental death, and the body’s mechanical experience stimulate death cognition. It reestablishes oedipal recognition that the future coming death is survived by parental orics and Birth. Thus, anxieties of death and future uncertainty can be named, the body’s vulnerability is acknowledged and a depressive recognized meaning of body and self perceived is fabricated. I am suggesting that growth and creative unique personal toship society are dependent on synergy between these internalized dyadic pain organizing processes and oedipal future processing survived processes.

Keywords: body, trauma, death, mourning, growth
THE CONFUSION OF TONGUES BETWEEN DR. SÁNDOR FERENCZI AND MRS. ELIZABETH SEVERN: TRAUMA, MUTUALITY AND INNOVATION IN THE ANALYSIS OF THE INCEST TRAUMA

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In the summer of 1925, Mrs. Elizabeth Severn left New York to journey to Budapest to begin an analysis with Dr. Sándor Ferenczi, referred to Otto Rank (Raichman 1997). Ferenczi had already developed a worldwide reputation as “the analyst of difficult cases” (Raichman 1997). Henry Stoekl-Sullivan was to refer Clara Thompson to Ferenczi about the same time Severn was being seen (Supple 1968). Severn was an American therapist with her own ideas about treatment and theory (Severn 1913, 1920, 1922). Severn was described as a “motherly figure,” an emotionally detached individual struggling with crippling psychopathology and severe psychological disorder. Neither Ferenczi, nor Severn could have predicted the epic journey they were to take in their eight-year analysis. The Ferenczi/Severn analysis was historically important because it helped develop the Concept of Tongues paradigm, the contemporary analysis of the incest trauma and the introduction of non-invasive measures in psychoanalysis. The first formal application of the Concept of Tongues paradigm (Ferenczi 1922, 1923) was in the analysis of Severn’s incest trauma (Raichman 1994, 2000). A reconstruction of the Ferenczi/Severn analysis was attempted by referring to Ferenczi’s actual clinical interaction with Severn (Ferenczi 1923), and Severn’s account of their analysis (Severn 1933). This biographical analysis, therefore, can be viewed as the first co-created, mutually interactive treatment of trauma (Raichman 2004). In addition, the newly acquired Elizabeth Severn Papers (Raichman 2011) can contribute to our understanding. The Ferenczi/Severn analysis can now be re-evaluated not as a “blind analysis”, but a pioneering contribution to the analysis and treatment of the incest trauma using the Concept of Tongues paradigm and non-invasive measures (Raichman 2010a) and as an “in vivo” clinical experiment in intersubjectivity (Raichman 2010b). Severn can also be viewed as an unknown hero of psychoanalysis (Raichman 2010, a, b, 2011).

THOUGHTS ABOUT FERENCZI’S TERMINAL PHASE FROM ONCOPSYCHOLOGICAL POINT OF VIEW

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Nowadays some psychoanalysts work in the field of oncological medicine as the members of multidisciplinary teams. To work as the “bedside” during “intensive” supervision helps to do psychoanalytical observations and gain more and more experience about the confrontation with death. At the National Institute of Oncology we have described the phenomenon of “tumour psychic regression” together with Ivan Szekas in the 1980s. To my belief I would like to share some thoughts about Ferenczi’s mental state during his somatic disease. I hope to express new ideas on the basis of modern psychoanalytical oncopchologory about Ferenczi’s mental health in his last period of life.

Keywords: psychoanalytical oncopchologory, terminal phase, fluctuant psychotic regression, Sándor Ferenczi’s death

THEORIES OF TRAUMA TRANSMISSION FOLLOWING FERENCZI: SURVIVOR SYNDROME AND TRANSCATIONAL PHANTOMS

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In the 1990s, Budapest School psychoanalysts were already interested in how social influences affect personality development. Later, starting in the 1980s, Hungarian psychoanalyst Tivadar Virág studied children of Holocaust survivors and their psychological problems in doing so he demonstrated the importance or social traumas from the psychodynamic perspective and suggested the therapeutic approaches. Roughly at the same time, in the 1960s, Mádor Abraham and Mária Toth, a Hungarian psychoanalytic couple living in France, proposed an approach to the social traumatization that was partly different from Virág’s views. Abraham and Toth introduced in this context the concepts of “pychic trauma” and “psychic phantom.” Their account and novel therapeutic suggestions proved helpful in understanding the mechanisms of certain traumas. Unfortunately Virág and the Abraham–Toth couple never learned about each other’s work; still there are substantial similarities in their theories that are due to their shared background. Both theories originate from the core elements of the Budapest School; in addition, both exceed the limits of traditional psychodynamic approaches and emphasize the social traumatization in the individual’s life history. In my talk I point out the common ideas in these two theories that date back to Ferenczi’s theory of memory. I shall lay out the similarities and differences between the two views, make suggestions regarding their therapeutic consequences, and summarize how these interpretations contribute to our understanding today.

Keywords: Budapest School, Sándor Ferenczi, social traumatization, translocal traumatization

A CALCULABLE TRAUMA? MATHEMATICS INTERFACES WITH PSYCHOANALYSIS

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This talk is an attempt to show that both the psychoanalytical theory and its practice could be obtained from a dialogue with the mathematical sciences. Ferenczi’s (1920) ideas that the traumatization is a more or less unconscious awareness of his own formal psychic processes, together with suggestions from Ferenczi’s disciple, Imre Hermann (1924), that a formal logic can be inferred from the unconscious are compared to those of contemporary philosophers Alain Badiou (1988, 2006). It is suggested that the human psyche presents an isomorphism with mathematical structures and that we can be modelled through set theory entraining a particular logic. Psychiatric elements would have the structure of mathematical sets, preserving their proprieties but also their paradoxes. Using, as an example, Hermann’s (1945) essay on József Bokonyi, the Hungarian mathematician that developed the concept of hyperbolic spaces, together with later propositions advanced by Jacques Lacan, a topological structure of the psyche is backed-up. Taking into account Ferenczi’s (1932) Confession of tongues, a psychic trauma is formalized as that which shatters or sexually changes each structure. Trauma reactions, which could be understood by set theory and topology, would be both those that try to re-establish the previous order, from which symptoms appear, and the ones that endeavour to establish a new order, among which psychoanalytical treatment is a possibility. Limits of such a mathematical perspective are also considered, leading to the analysis’s attitude and ethics.

Keywords: psychoanalysis, mathematics, trauma, Ferenczi, Imre Hermann
FREUD, FERENCZI, AND ROSMERSHOLM: INCESTUOUS TRIANGLES AND ANALYTICAL THIRDS

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In "Some Character Types Which within Psychoanalytic Work," Freud analyzes Rosenzweig's book to illustrate the concept of being "wreathed by success." In Freud and Edgins, I have argued that Ferenczi's view is an instance of this type due to the death of his baby brother, Julius, which fulfilled a wish to dispose of his sibling rival, and left Freud with survivor guilt. Now, I turn to a reading of Rosenzweig's play to show that the relationship between Rosenzweig and his brother parallels that between Freud and Anna Freud, but also that the rivalry between Rebecca and Rosmersholm's childless deceased wife, Nora, can be compared to that between Elma Pfister and her mother, Girola. Thus, Rosenzweig's play serves as an "analytic object" in the sense of Freud and Ferenczi, which for Ferenczi constituted in the end a massive cumulative trauma. To read Rosmersholm, as I am proposing, as an "analytic object" in the Freud-Ferenczi relationship likewise opens up the possibility that Freud is writing implicitly about Ferenczi — but also about himself — in his papers on the psychology of love, where the concept of the Oedipus complex is introduced for the first time.

SÁNDOR FERENCZI’S MATERNAL RESPONSE TO THE TRAUMAS OF HUNGARIAN SOCIETY

SAJGO, Buster
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Hungary and Austria celebrated their marriage in 1867 (following a long period of engagement) and got separated in 1868. After experiencing the disintegration of their family (the Austro-Hungarian Empire) and the loss of their father (Austria), in 1920, as a result of the Treaty of Trianon, Hungarians witnessed the mutilation of their mother. In this paper I will focus on the impact of Hungary's traumatic history on Sándor Ferenczi's technique. Using psychoanalytic anthropologists' theories on patriarchy and on border symbolism, I will demonstrate that the violation of the Magyar motherland's borders also contributed to drive the Hungarian psychoanalytic in the 1920s to transcend the boundaries of psychoanalytical morphology. Ferenczi's work has focused on Central European psychoanalysts' cosmopolitan worldview whereas their patriotic feelings seem to have been paired with altruism. The purpose of this essay is to show that Ferenczi was one of these numerous Hungarian intellectuals who felt a strong attachment to their country and who aimed for a free, authentic and tolerant society.

According to my hypothesis, the elaboration of the "maternal technique" allowed for Ferenczi to mourn the lost motherland and to act out a rebellion against the self-proclaimed father of the nation (Miklós Horthy) and his authoritarian leadership style.

Keywords: trauma, society, politics, symbolic representation, border, mother, father

WHEN THE SINS OF THE FATHER ARE VISITED UPON THE SON: IS PARANOIA BORN OR BREED? TRAUMATIC EFFECTS OF WITNESSING UNBROKEN AGGRESSION

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New Jersey Institute, Child and Adolescent Psychotherapy Studies program, Teaneck, United States

As he was growing up, "Larry" repeatedly bore helpless witness to, and experienced the effects of his father’s unbridled, unpredictable, uncontrollable aggression, which proved to be more than he could tolerate, and thus traumatic. In the process, his sense of self became inundated with anxiety. As a consequence, Larry dissociated and disavowed his primary awareness of his unbearable emotional anguish. When Larry attempted to make sense of what was happening, his thoughts initially took the form of isolated "fooling," and subsequently became organized into a set of paranoid symptoms, whose purpose seemed to be Larry's attempt to create an explanation for his feelings, albeit one based on hypervigilance, suspiciousness, and experiences of persecution. This paper will review a portion of Larry's ongoing psychoanalytic treatment, tracing it from his initial fight against-with and against the dangers involved in trusting to the establishment of object-relations, and give and take immediacy.

Keywords: paranoia, hypervigilance as transitional object

EXPERIENCING THE CONSTRUCT "TRANSGENDERED" FROM THE OUTSIDE IN AND THE INSIDE OUT

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Ferenczi was one of the first clinicians to put a human face on the variety of sexual expressions, as seen in the case of Rita G. It is the type of experience to conceptualize a way of being in the world, such as being "transgendered," by listening to a theoretical paper or a clinical case. In the Ferenczi tradition, this presentation invites you to explore another way of knowing by engendering a "felt sense" of the transgender identity experience through guided imagery exercises and discussion.

Keywords: Ferenczi, transgender, sexuality, identity

Keywords: trauma, society, politics, symbolic representation, border, mother, father
TRAUMATIC TRANSMISSION IN THE MEMOIRS OF LINDA GRAY SEXTON

Linda Gray Sexton, daughter of Anne Sexton, the 20th-century confessional American poet, writes in Searching for Mercy Street (1990) that her mother physically and sexually abused her, while at the same time nursing her back to creativity. In Half in Love: Surviving the Legacy of Suicide (2013), Linda Gray Sexton struggles to separate herself from the suicidal legacy left by her mother, while preserving her own creative voice. Although there is substantial evidence that Anne Sexton (who killed herself in 1974) was herself a victim of sexual abuse, her daughter does not make this aspect into an excuse to frame her understanding of her own subjectivity. Linda Sexton’s memories agree to Freud’s observation that the phenomenon of intergenerational transmission often results in a malignant chain of repetition in which “the individual carries on a two-fold existence: one to serve his own purposes, the other as a link in a chain, which he serves against his will, or at least ineffectually.”

Sándor Ferenczi added to this discovery an understanding of how traumatic experience involves a confusion of tongues between perpetraitors and victims. We can add that through repetition of trauma these voices can become indistinguishable. While her mother’s memories are still entangled from this insecure pattern by a new generation of traumatic experience in creative arts, her powerful narrative of discovering herself as a unique subject carrying a traumatic history represent both the effects of an imprisonment in an intergenerational story and a quest for freedom as an individual one.

Keywords: trauma, transmission, subjectivity, confusion of tongues

DEATH AND THE LIMITS OF AFFECT IN FERENCZI’S CLINICAL DIARY

STOIOHOU, Mark

In the work leading up to his “Confusion of Tongues Between Adults and the Child” essay, Sándor Ferenczi posits death as an operative principle within trauma that is neither the usual concept nor that which Freud designates as the death drive. This death is not the terminus event in which the psyche comes to an end, but rather death stands at the very beginning of a subjectivity that is always a simultaneously constructed. The ego, as Ferenczi implies, comes into being only through a progressive response to objects that are not “outside” of the child, but which give the possibility of this inside/outside dichotomy; it is the result of a series of events in which the ego emerges as an “a-dying.” If from his Theory of Genitality, the preferred metaphor is of a gesture of autonomy, it is only through this act of seizing that the soul can come to be.

The labor of death is one that serves, but from what does it serve if the subject is only the product of this process, its effects? Ferenczi references the “enmarcheutic and supreme wisdom” of the infantile stage, a wisdom that, if it is anything, refers to the permeability of the infant to affect, which it would receive without mediation and without events. The work of death would be the severing of an effective stance that would not be individual, thus forcing individuation.

SÁNDOR FERENCZI – THE FIRST INTERSUBJECTIVIST

SÁNDOR FERENCZI MD (1873-1933) has been a controversial person in the history of psychoanalysis. He was on the hand closely attached to Freud, on the other he experimented with a methodology different from Freud’s, that led to a schism between him and many leading analysts. Compared to his contemporaries, who saw countertransference as an impediment to analysis, Ferenczi emphasized that the analyst has to concern himself with the experienced trauma of the patient in order to find the core of the relationship between analyst and analysand. By placing the personal relationship between patient and analyst as the essence of treatment, he aimed to refine the field of psychoanalysis itself. Today there are few analysts who do not accept that intersubjectivity is central to psychoanalysis.

A JUNGIAN APPROACH TO TRAUMA THEORY

SZOMBAI, Ágnes

The central element of the concept is what is to evaluate Ferenczi’s trauma concept using the (Jungian) Analytical Psychology approach. The personality-forming effects of identification with the aggressor will be analyzed on the basis of the theory of archetypes. The last decades most important findings and achievements in the field of Analytical Psychology which have contributed to a better understanding of the nature of trauma therapy resistances will also be addressed.

Keywords: trauma, aggressor, archetype, analytical psychology

TRAUMA OR DENIAL (IS THIS THE QUESTION?)

TARACZYŃSKI, Marcz

Ferenczi, the psychologist who suffered the intellectual “exile” of his colleagues for a very long period of time, comes back (although he never did) with his way of conceiving psyche, helping us treat our present day clinical trials. The Freud/Ferenczi controversy continues. This constitutes a challenge to us from looking controversial on the great issues in Psychoanalysis, one of these issues being “trauma.”

Defining trauma as originating from without (we know that defining “out” is very complicated), every definition in relation to it and its effects, necessarily implies taking position in how we consider the individual and how we consider reality (as 1995) in his theory of trauma Ferenczi points to the fact of the denial on the part of the mother on what the child is saying as a substantial part of the trauma. He adds that the dramatic result of these events, its more evident consequence, would be the absence of cinetomy in oneself. That is the loss of trust in the traumatized subject’s own perceptions, especially that he has been lived by him, generating a lack of trust in his own sensations. If we consider the concept of imitation an introduced by Ferenczi (1905) (1933) it is rarely refers to subjectivity, it is centered in bringing into the psychic sphere the events generated by the object, which is a support for representations that are already formed. Therefore imitation leads us to the conceptualization of subjectivity and the concept of narcissism. The aim of the paper is to follow how trauma and denial act on the narcissism of the traumatized individual, forcing him towards the lack of certainty in himself.

Keywords: denial, trauma, narcissism
THE MANY SOUNDS OF TRAUMA: THE CONFUSED TONGUES OF RICHARD STRAUSS’ „SALOME”

TITTEBAUM, Stefan

Salome knows the decapitated John the Baptist’s mouth and wonders if the taste of blood is the same as love. Musing on Confused Tongues and confused tongues, I see life tongue and death tongue entwined: a perverse representation of fused life and death instants. Richard Strauss’ operatic setting of Oscar Wilde’s play immerses confusion by fusing highly complex, often shocking contents with simple, child-like beautiful melody. The opera experience unleashest boundless affect through the reversal of verbal and non-verbal, sight and sound, beyond the bounds of representation.

Chaussonneau-Sipigrig introduced a fusion between Ferdinand’s traumatic assimilation or polychromy of complex mental processes with Fiono’s psychic process. She named him a “wise-baby grandson” Ferdinand. Ferdinand noted his omission of perversion in his theory of gratification, and perversion appears nowhere in Fiono’s prolific work. This essay explores Chaussonneau-Sipigrig’s creative formulations of perversion and feminine mutism in linking the two men. Hypothesis perversion as the feminine psyche’s distinctive effort to represent inexpressible trauma utilizing a psychoanalysis fiction called Consequent Conjunction. Additionally, andrée Green’s work on reversal, affect and representation is woven into the fusion. Salome is the case study, and excerpts from the opera will be shown and played. Clinical examples using music and the musical ear in the psychanalytic effect of traumatic affect will be presented.

Keywords: affect, music, constant conjunction, perversion

THE MOTHER’S PERMISSION – SÁNDOR FERENCZI’S CONFESSIONS

VINCZ, Anna

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In his Clinical Diary and in his correspondence with Freud and Groddeck, Ferenczi reveals his feelings and his conscious motives with unique honesty. In my presentation, building on L. Nemes’ ideas, I would like to present the notion that the driving force of Ferenczi’s relationship with Gisella was the desire to repair his ambivalent relationship towards his mother. For Ferenczi the biggest – conscious or unconscious – proof of this was Gisella’s permissive and accepting reaction towards the engagement of Ferenczi and her daughter Elma. Gisella was capable of this, despite the fact that Ferenczi broke the biggest taboo, and – as this is obvious, from her letters – he caused her much pain. Gisella also demonstrates in other situations that she is capable of complete acceptance, the repression of the original trauma. The maternal permission of sexuality is more important than Elma herself or their child. In the background we see his deep ambivalence towards women. (E. Pfeiffer 2005)

Keywords: maternal permission, ambivalence, repression

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