

C O N T E N T

Welcome	4
Committees	5
Supporters of the Conference	5
Program Overview	6
Registration Information	10
Social Program Information	11
Conference General Information	12
Publication of Selected Conference Presentations	13
Abstracts	14
Authors Index	61
Donors to the Ferenczi House	65

DEAR COLLEAGUES AND FRIENDS,

It is our 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 *Confusion of Tongues* 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 psychic trauma. Our scientific meeting focuses on clinical studies, theoretical approaches, historical and academic research, and eighty years after Ferenczi's *Confusion of Tongues*.

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: Associazione Culturale Sándor Ferenczi (Italy), Associazione Culturale S. Ferenczi (Argentina), Maison Ferenczi (France), Imago International (London), Ferenczi Center, New School for Social Research (New York), in cooperation with Società Psicoanalitica Italiana, Asociación Psicoanalítica de Madrid, International Federation of Psychoanalytic Societies.

The first international Sándor Ferenczi Conference was held in Budapest in 1993, and then, every three years it has been organized in a different city – Baden-Baden, Buenos Aires, Budapest, Florence, London, Madrid, New York, Paris, São Paulo, Tel Aviv and Turin, just to name 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 collaborations. 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 event 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 Fifth Congress of the International Psychoanalytical Association in 1918, and the 1987 Hungarian international psychoanalytic conference, the first after WWII.

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

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

Judit Mészáros, PhD

President of the Sándor Ferenczi Society

Chair of the Program and Organizing Committee

Carlo Bonomi, PhD

Prof. Franco Borgogno, PhD

János Harmatta, MD, PhD

Co-Chairs of the Program and Organizing Committee

COMMITTEES

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JOURNALS SUPPORTING THE CONFERENCE

The American Journal of Psychoanalysis, International Forum of Psychoanalysis, Le Coq-Héron

CONFERENCE SECRETARIAT

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REGISTRATION INFORMATION

REGISTRATION DESK OPENING HOURS

Thursday, May 31st, 2012 16.00-20.00 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

Registration type	Fees until 15/02/2011	Fees from 16/02/2011 to 15/09/2011	Fees from 16/09/2011 to 15/05/2012	Fees after 16/05/2012	The fee includes
Participant	€ 220	€ 270	€ 330	€ 360	Access to all conference sessions Final Program and Book of Abstracts Opening Ceremony and Welcome Reception Gala Dinner Coffee and Tea (during breaks)
CEE* Participant	€ 100	€ 100	€ 100	€ 140	Access to all conference sessions Final Program and Book of Abstracts Opening Ceremony and Welcome Reception Coffee and Tea (during breaks)
Accompanying person	€ 120	€ 120	€ 120	€ 140	Opening Ceremony and Welcome Reception Gala Dinner Half-day Sightseeing tour in Budapest
Daily ticket (1 or 2 June)	€ 150				Final Program and Book of Abstracts On the chosen day
Daily ticket (31 May, 3 June)	€ 70				Access to all conference sessions Coffee and Tea (during breaks)

*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

CANCELLATION POLICY OF REGISTRATION

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

SOCIAL PROGRAM INFORMATION

OPENING CEREMONY AND WELCOME RECEPTION

Thursday, May 31st, 18.00-21.00
Hungarian Academy of Sciences
 Address: 1051 Budapest, Széchenyi 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
Ferenczi International Center
 Address: 1016 Budapest, Lisznyai u. 11.
 Price: € 50/person – includes a € 20 contribution to the Ferenczi 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, 19.00-22.00
Hilton Budapest WestEnd
 Address: 1062 Budapest, Váci út 1-3.
 Price: € 40/person - included in registration fee of participants and accompanying persons.
 This program is optional for CEE participants.
 TICKETS ARE AVAILABLE AT THE REGISTRATION DESK.

CONFERENCE GENERAL INFORMATION

CONFERENCE VENUES

Opening Ceremony venue

Hungarian Academy of Sciences, Main Building

Address: 1051 Budapest, Széchenyi tér 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 **+ (Conference Venue)**

Address: 1062 Budapest, Váci út 1-3.

Hotel Marmara ****

Address: 1055 Budapest, Nagy Ignác u. 21.

Hotel Metro ***

Address: 1132 Budapest, Kresz Géza u. 1.

Hotel Medosz ***

Address: 1061 Budapest, Jókai tér 9.

City Hotel Ring ***

Address: 1137 Budapest, Szent István krt. 22.

Adina Apartment Hotel Budapest ****

Address: 1133 Budapest, Hegedűs Gyula utca 52.

Radisson Blu Béke ****

Address: 1067 Budapest, Teréz krt. 43.

Cotton House ***

Address: 1066 Budapest, Jókai utca 26.

OFFICIAL LANGUAGE

Language of the conference is English. Simultaneous interpretation to 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 Arrabona 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 Oftek: SE-TK/2012.I./00301.

SLIDES/PRESENTATIONS PREPARATIONS

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

RESTAURANTS NEAR THE CONFERENCE

Arrabona Restaurant and Zita 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 a la carte restaurants, including several nationalities (eg. Hungarian, Indian, Italian, Thai, Pakistani, Turkish, Israeli)

Within a 5-10 minute walking distance there are a wide range of bars, cafés, teashops and restaurants situated on the Grand Boulevard (Körút) 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

IBMEC-RJ, Rio de Janeiro, Brazil

After eighty years, the ferenczian's aggressor, 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 0-12 as a prime target for their marketing activities. Children are treated as active consumers and should be co-opted from the first moment of their lives so they can get used to the addiction of compulsive consumption.

As a consequence, child's eroticism is obliged to produce a "body-prosthesis" that will be built to try to absorb the continued harassment of the multiple languages offered by the marketing industry. The child is seduced by the "magic" (mania) of this hypnotic world and has no choice than to join it.

Our goal is to discuss the following topics: 1) Aspects of contemporary child psychopathology under the idea of "compulsion" can be understood as a defense (unsuccessful) against the invasive harassment of the marketing industry. 2) What is the so called "body-prosthesis"? 3) What is the role of the psychoanalyst concerning those questions? Can the ferenczian "mutual forgiveness" proposal (in order to create the introjection 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 children with serious school-related difficulties, excessive bureaucratic demands and/or loss of both authority and power to make decisions, amongst others. The teachers generally feel themselves incapable of understanding the various dynamic processes that produce and explain the said tension. They end up in situations of suffering and the school is ill equipped to cope with it. As a result, the teachers tend to focus on 'educational aims' and to attack their own sensitivity. These strategies are, to a certain extent, both a professional defence mechanism against the anxiety which arises from the difficult task of tolerating primitive aspects that circulate in school and a means of surviving the lack of institutional support. In spite of the momentary relief, those 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 Borgogno's idea 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 also sheds light on how teachers might benefit from a 'psychic environment' (Borgogno, 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

ARFELLI, Patrizia University of Aosta Valley, Psychology, Turin, Italy

VIGNA-TAGLIANTI, 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 to symbolically represent their archaic anxieties, connected with their having been ferenczian "unwelcome children". Therefore they often make use in the therapeutic situation of the language of "passion" and sexualization in order to communicate to the analyst their early broken intimacy and their traumatized "tenderness", related to a lack of parental libidinal involvement and of maternal permeability to their raw emotions, which gave rise 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-rooted, strong, rigid and exciting defence mechanism against an early child depression connected with devaluing unconscious identifications.

Keywords: *confusion of tongues, unwelcome children, passion of death, sexualization*

DREAMS AND CHANGE PROCESSES IN AN EX-PROSTITUTE UNDER RELATIONAL PSYCHOANALYTIC PSYCHOTHERAPY. FERENCZIAN AND POSTFERENCZIAN VIEWS

AVILA ESPADA, Alejandro; DOMINGUEZ RODRIGUEZ, Rosa

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 psychotherapeutic focus influenced by Ferenczian 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 originally from Colombia, who immigrated to Spain at the age of 28, and was trapped during more than six years in the mesh of prostitution networks, finally initiating a psychotherapeutic treatment at the age of 39 years. The observed process is an example of the inter-influence between the resilient factors that characterize this person and the opportunity of co-creation that the treatment offers to differentiate and integrate a richer internal world, making her life possible with better aptitudes and autonomy for her personal growth within a new social and family environment in her life, than those available in her precarious original family environment, marked by the confusion of language, the hazy limits and the fragility of bonds. The marks of the intense traumatic charge of her history and the rays of sun and hope that live in the present are intermingled in the dreams that are evoked and brought to the treatment. A thorough review from Ferenczi's ideas about trauma and the expressive role of dreams; M. Khan's concept of cumulative trauma and his contributions to the working-through function of dreams; the dreams' role in the anticipation of changes together with S. Mitchell's conception of relationality and on what is micro and macro-traumatic (M. Eigen, M. Crastopol); these developments support an interweaving of resilient capacities of people who demand help, and the potential relations of the self-object, ethically implied, that therapists can offer, compose a scenario that recuperates the essence of the Ferenczi of 1932.

Keywords: *dream processes, change process, resilience, relational psychoanalysis*

THE LOSS OF PSYCHIC PROPRICEPTION

BÁNFALVI, Attila

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 use it with background sensation that it can refer to a real being. Nevertheless it is more and more difficult supporting this I-ness with rational argumentation. This vulnerability creates a constant search for abandoning itself (like in the Ferenczian trauma scene) and at the same time there is tendency for obsessional self-reflection. History of psychic trauma 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

BAR-HAIM, Shaul

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

Ferenczi described traumatic events as 'epistemological encounters' between two very different types of subject: 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 Dora would surely 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 historicization of 'childhood' and 'adulthood' are necessary steps on the road to understanding any particular 'confusion of tongues'.

I'd like to demonstrate my argument in the context of post Second World War 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 the means. British psychoanalysis integrated into these social tendencies by its preoccupation with child-psychoanalysis. This is the context of the experiments made by influential theorists such as Balint and Winnicott in regressive treatments. By analyzing a few of their case studies, I'd like to suggest that the ideas on regression which appeared in Britain at that time represent a tendency towards reshaping 'childhood' and 'adulthood' as historical categories. The Ferenczian notion, as Clara Thompson suggested, was for the adult patient to regress "deeper and deeper into reliving childhood situations". But some British thinkers blurred the lines between adult-psychoanalysis and child-psychoanalysis itself, and treated their regressed patients as if they were actually children. Beside 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

BENNETT, Jenice *Columbia University, Counseling Service Unit, New York, United States*

JONES, Annie Lee *U.S.D.V.A. Community Living Center at 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 yoke of western history's legacy of chattel slavery. The "fantasmatic" experience of being the object of such a legacied gaze risks relegating the encounter to the realm of Ferenczi's identification with the aggressor. The location of African American analyst is unstable due to concerns about how one will be viewed, which is linked to culturally over determined traumas from membership in a racial group that is devalued and where the entire group is perceived as having the negating features routinely attributed to the least of the group. Vignettes will be provided that illuminate the 'fetish' of African American analyst in the psychoanalytic community. The analyst is often held in a contradictory space where on the one hand idealized because of success in overcoming many obstacles to graduate from an institute, while also denigrated because they are the 'Other', unknown and unknowable in the eyes of their colleagues.

Keywords: *racial fetish, negation, legacied gaze, dissociative binary, indentification with the aggressor, fantasmatic*

THE UNKNOWN POET: SÁNDOR FERENCZI

BERMAN, Emanuel *Haifa University, Psychology, Haifa, Israel*

FÜLÖP, Márta *Hungarian Academy of Science, Institute for Psychology; Hungarian Psychoanalytical Society, Budapest, Hungary*

We know a lot about Ferenczi the clinician, the theoretician, 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 by Blaise Pasztory, the grandson of Gizella Ferenczi's brother, among family papers and documents kept by his late mother. These poems were translated into English by Marta Fulop, 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, debate various views of human life, and describe a wide range of experiences, from the medical dissecting room to the charms of nature in Spring. 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 the Hungarian texts 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

BLUM, Varda

Hebrew University, Jerusalem, Israel

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 Alain Resnais' 1959 "Hiroshima Mon Amour". We are familiar with the psychoanalytic concepts 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 interacts with its counterparts without complete delineation and distinction. The guiding question is whether the cinematic medium could function as the actual site of visibility for a traumatic historical moment – as Resnais manifests visually the unrepresentable event. The two protagonists perform their personal traumas, 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 retold through another's. The mutual opportunity afforded to each protagonist, to be their own witnesses 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 repossession of each protagonist's life, as the culmination of the survival process. The creation of an intersubjective space allows for the historicization of trauma as viewers become second-degree witnessing subjects vis-à-vis the site of trauma facing them.

Keywords: *trauma, uncanny, crisis of witnessing*

THE CHILD IN PSYCHOANALYSIS

BÓKAY, Antal

University of Pécs, Psychoanalysis PhD Program, Pécs, 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 preoedipal phase and later reconstructed in the oedipal conflicts. The central text is Sándor 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 views I discuss the parallel philosophical positions concerning the figure of the child (Merleau-Ponty, Giorgio Agamben and analyse a few literary-poetical (Rimbaud, Walter Benjamin, Atila József) examples too.

Keywords: *child, trauma narrative, imaginary, Ferenczi*

FERENCZI'S INFLUENCE ON FREUD REVISITED

BONOMI, Carlo *Istituto di Psicoanalisi H.S. Sullivan, Florence, Italy*

If Ferenczi took over Freud's "heritage of emotion" and further elaborated it (Bonomi, 1996), thus becoming the "analyst of his analyst", 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 last self-analytic essay "A disturbance of memory on the Acropolis" (1936), "Analysis terminable and interminable" (1937), "Constructions in Analysis" (1937), the trauma theory endorsed in Moses and monotheism (1939), and the notion of the "Splitting of the ego in the process of defense" (1938, 1940).

ELASTICITY OF TECHNIQUE: THE PSYCHOANALYTIC PROJECT AND SÁNDOR FERENCZI'S JOURNEY

BORGOGNO, Franco *Turin University, Psychology, Turin, Italy*

The topic of this paper is the elasticity of psychoanalytic technique in the work of Sándor Ferenczi. The author sustains 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, signalling 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

BRENNAN, William *National Training Program, Pleasant Hill, United States*

"There is a murmur, a ventriloquy, rising from the tomb in which he or she or someone else, either a contemporary or an ancestor, was buried alive, sequestered, with their desires cut out, deprived of both life and death; and above all, something has been left unsettled..." Maria Török, "Theoretra: An Alternative to Theory." Drawing on unpublished interviews conducted by Kurt Eissler, and sequestered 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 analyses of Clara Thompson and Elizabeth Severn, two of Ferenczi's most important patients, as they revealed their experience to Kurt Eissler. The patient's reports provide 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 constellations coalesce and dissociations rupture narrative lines. I will explore how the unconscious is still at work within the transcript of the interviews, as the ghosts of transference reappear, and the resonances and reverberations of past traumas continue to haunt and disturb, providing us with clues to what traumas has been processed and what has not been metabolized.

Keywords: *Ferenczi, clinical diary, Clara Thompson, Elizabeth Severn, psychoanalytic history*

THE THIRD TIME OF TRAUMA: NOTES FOR A BETTER UNDERSTANDING OF INTERSUBJECTIVITY IN TRAUMA FORMATION

CANESIN DAL MOLIN, Eugénio

University of São Paulo, Psychology, São Paulo, Brazil

By observing cases where a trauma and its consequences are central to the treatment, this text seeks to articulate the concepts of Freud and Ferenczi 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 gross traumas. 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 in itself is not traumatic, wins this attribute later, when reorganized and reinstated in the individual's memory (a second time). Ferenczi also stresses, especially in his 1932'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 SÁNDOR FERENCZI

CASSULLO, Gabriele

Turin University, Psychology, Turin, Italy; Associazione S. Ferenczi, Turin, Italy

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

CASTILLO MENDOZA, Carlos Alberto

The Complutense University, Madrid, Spain

In *Confusion of tongues* (1932), concerning the pathogenesis of neurosis, Ferenczi states that "not delving deep enough in its exogenous origin is dangerous: it could lead to rushed explanations 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 text dating of 1901, he already asserted the possibility, and the possibilities, of a "double etiology" (social and psychical) so as to better take into account psychical 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, socio and psycho pathogenesis.*

THE GIRL WHO WROTE TO PRIMO LEVI - THE "FOREIGN BODY" SPEAKS

CERAGIOLI, Giuditta

Associazione S. Ferenczi, Turin, Italy

Reviewing a clinical case, the author explores the strategies for psychic survival to the feelings of utter catastrophe 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 dissociation, fragmentation, psychic agony, but also as feelings of body distortion and mutilation; the focus on countertransference as emotional sharing and as receptiveness to the deep unconscious communications which, being unspeakable, can be transferred somatically to the psychoanalyst. The author illustrates how, within a transference-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 relived 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 TRAUMAS 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 „indigestible“ and leave „dead““, unsymbolized patches 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 transference form of primary relatedness to an „object as process“ (Treumier). In this endeavor, dreams and non-linguistic creations may facilitate access to trauma-related „holes“ in the psychic texture. They are the expression of reparatory symbolization processes. The article draws on pictures and sculptures produced by a female 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 relatedness, creativity

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

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Frankel has suggested that there are many parallel's and connections between Ferenczi's later thoughts on trauma and Fairbairn's developed theory. Fairbairn's early clinical papers along with his MD thesis on Dissociation and Repression and other early papers now available entail the concept of dissociation/splitting and the development of possible alternative selves in response to trauma. Fairbairn's distinction between the ego-ideal and the super-ego echoes Ferenczi's distinction along similar lines in his 1928 paper on the elasticity of psychoanalytic technique. I would like to look at significant developments in Ferenczi's later thinking on trauma and the parallels in the development of a thoroughgoing object relations theory by Fairbairn.

Keywords: dissociation, structure, trauma, ego-ideal, inner reality

BEWITCHING AS A CULTURAL SYMPTOM OF FAMILY TRAUMA

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Radu Clit, Paris, France

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 parents had developed the conviction, after a long absence from home, that 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 aroused 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 fairly extensive investigation of the parents' histories. The parents had both previous existences marked by many personal traumas, unexpressed 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 could see no hope, and you continued with the analysis.” (Patient to Winnicott, 1960)

Many relational analysts believe that hope and despair make a dynamic dialectic underlying all 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 Israel. The focus of my original paper was on “Contemporary Application of Ferenczi: Co-Constructing Past Traumatic Experiences through Dream Analysis.” Since that time there have been three more Ferenczi's conferences: in Turino, Baden-Baden, and Buenos Aires. In the intervening years, much aided by active listening to my Ferenczian 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 this process of reflection I have become deeply aware of my participation in the emotional matrix of the treatment. I realized that not only I was as resistant as Dana to surrendering to my despair, but also this resistance 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, Psicoanálisis de la migración y del exilio (1984), L. and R. Grinberg also spoke of their belief in the existence of a “greater or lesser predisposition to emigrate” (1989,24). The work I have been conducting in Munich since 1999 with Italian patients in our common mother tongue allowed me to confirm the subsequent finding of S. Akhtar (1999) and I. Kogan (2005) pointing to the traumatic background of such a predisposition, which activates a series of defense mechanisms originally described by S. Ferenczi (1932). All the migrant 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 my 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 side of human nature is the capacity to start a War, and nothing is more perverse and self destructive than the Civil War, that is to say both the collective social conflict and the acting out of self dissolution. Trauma has its "Pan's Labyrinth" with separated directions: death end or way out: melancholy or mourning. In this paper I will invite you to join me along the tremendous journey of understanding choices and the triangulation between trauma, mourning and melancholy. I will emphasize the acceptance of the human destructive potential and the capacity of betrayal. I will point out the human capacity of acknowledging its potential of abandoning the omnipotent defenses just like an ultimate love gesture. The awareness is best voiced out by Gertrude, acting both as an antique choir and persona describing Ophelia who had just fallen into the river, lying on the water, singing and incapable of her own distress, "her garments heavy with their drink/Pull'd the poor wretch from her melodious lay down to muddy death."

Keywords: *trauma, mourning, melancholy, love triangulation*

ORDINARY SADISM IN THE CONSULTING ROOM

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Hate 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 hatred, it can be reintegrated and will ultimately enrich the patient's personality. In this paper, I will focus on the sadistic aspect of countertransference, the analyst's more or less conscious hateful retaliation for suffering endured. Building on theoretical concepts from Ferenczi, Winnicott, Joseph, Ghent and Benjamin, I suggest that just as the desire to surrender can degrade into masochism, sadism can be construed 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, mutuality and respect for the patient's subjectivity clash with recognizing the patient for who he is, as such a patient might evoke sadistic dynamics in the analytic relationship. Using clinical material 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 though, 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 curative function of a "creative act" on the part of the patient as it sometimes happens unexpectedly in the treatment of traumatized patients. In two vignettes, taken from the treatments with very ill patients, whom I call "the swimmer" and "the cat", I will illustrate the important role of narcissism as outlined in Sigmund Freud 1914 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 recognition, understanding and appreciation on the part of the analyst/object 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/object with the aim to achieve a better "fit", which can help him to overcome the debilitating restrictions that traumatization had imposed on him. This will lead to questions of acting out and object manipulation vs. "making use of the object" in a constructive way.

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

LAPSUS LINGUAE, OR A SLIP OF THE TONGUE? SEXUAL BOUNDARY VIOLATIONS: TRAUMA, RECOVERY, ETHICS

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Sexual boundary violations are as old as psychoanalysis itself. And Ferenczi warned us about the state of mind that makes them possible. Yet, even as this professional, intellectual, ethical, clinical, and personal dilemma is receiving more attention in the literature, it endures. Is our shared shame, or even ambivalence, in the way? Is the primal crime inherently unstoppable? In this presentation, the author, an analyst herself, puts her own experience of a sexual boundary infraction into clinical and theoretical perspective, and addresses how "the confusion of tongues" can manifest in the analytic relationship.

The author, speaking from the dual vantage as 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 treatment. Importantly, the author leans into her experience in order to reflect on matters of therapeutic action, therapeutic pacing, cure, and *Nachträglichkeit*.

Locating her analyst's transgression in its 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 combust with the author's to produce a conflagration 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 ethical lapse be transformed?

Keywords: *transgression, silence, shame, Nachträglichkeit, 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 worst 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 mentalizing; 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 BOULIMIA

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GOUGOULIS, Nicolas SPP, Paris, France

Early traumatic experiences function as psychic organizers 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 that of «psychic 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 transitional space in which thinking normally develops is overwhelmed by an overexcitation corresponding to an experience of forced feeding.

Overanxious 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 paradoxical unconscious phantasy according to which the feeding experience of the baby satisfies the psychic needs of the care-taker. In this pattern the baby is thus left with a diminished protective shield. Later on this pattern might induce symptoms that are expressed by compulsive behaviour together with a failure in psychic representation. The aforementioned unconscious phantasy of «psychic stuffing» appears in the psychoanalytic encounter, 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 behavioural discharge.

INFANTILE TRAUMA, THERAPEUTIC IMPASSE, 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 a profound and hidden psychic retreat. They became separated from themselves emotionally and unreachable by others, although their cognitive and physical development continued, sometimes precociously. Their infantile psychic trauma continued to retraumatize them in their adulthood, hindering work, pleasure, and love. A narcissistic idealization of their retreated and withdrawn selves interfered with their object choices and destroyed their object relations. Freud believed these patients were not treatable but psychoanalysts today have found methods of understanding and speaking to these early traumas 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, retreat, transference, treatment*

ON LOVE AND COERCION

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This paper will focus on work with individuals who have been so traumatized 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 behave 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 deconstruct the ways things begin to become "crazy," before things can escalate to toxic proportions, can become the crucible of and the medium of the work. Detailed clinical process will be presented to illustrate how zeroing 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 "mutative insight" or "revelation." 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”?

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The paper unfolds the historical background and the particular circumstances of Sándor Ferenczi's invitation to the newly established Chair of Psychoanalytic Studies and psychoanalytic clinic at 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 governments 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; focussing on the specific role psychoanalysis played in this struggle.

Keywords: Sándor Ferenczi, revolutions, Kulturkampf, universities, institutionalisation of psychoanalysis

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 (Faimberg 1981, 2005) I proposed the hypothesis that a 'wise baby', concept coming from Ferenczi, is wise because he is obliged to create by his own means the necessary conditions to bring their 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 interests lie (Faimberg 2003).

In order to be able to depend on this kind of parents the wise baby knows how to adapt his own interests 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

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 Adults – The Language of Tenderness and of Passion" (1933, 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

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

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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 interrupts the secure indwelling within one's body and can be experienced by both therapist and patient as a breach of an "omnipotent contract". Confrontation with illness and potential death stimulates, in both participants of the dyad, intense 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 inter-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 1932 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. These very early traumas – a “confusion of tongues” – led to chronic symptoms that drove her on a desperate journey to alleviate her psycho-emotional suffering, finally bringing her to Budapest, and her last hope, Sándor Ferenczi. In this challenging clinical work with Severn – even the mutual analysis, Ferenczi rigorously maintained a context of continuous reflection and thinking about his process and the techniques at play in her case. Ferenczi's reflective 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 use multi-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 assault, is motivated by the need to survive and also to maintain a connection to a needed but threatening object. It includes behavioral submission, loss of self, and compulsive blame-taking—all forms of accommodating the object, which act synergistically. The result is psychological enslavement—to the aggressor in the moment, and as an ongoing tendency.

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 Milgram'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 analysis 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 Analytic perspective: A perspective that was first given shape by Wilhelm Reich and placed within the framework of relation-oriented psychoanalysis developed by Harald Schelderup. We emphasize to communicate a concrete and practical understanding of how psychoanalysis contains an expansion of the therapist's attention to span both content and form; a therapeutic attitude that includes both “what” and “how”, both “to listen” and “to see” – both words and the body.

Character analysis thus contains a psychotherapeutic attitude rather than a set of specific therapeutic methods, 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 give examples of the theme and experiences of border/limits and lack of borders/limits. It will be illustrated through experiences of a character analytical therapy with a traumatized patient, in which I also used somato-psychotherapeutic methods.

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

Keywords: *refugee seeker, war trauma, relation trauma, structural dissociation/DID, character analytic psychotherapy*

PARANOIA – A TRAUMATIC ORIGIN

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

Ferenczi conceives his ambitious project of bioanalysis, Thalassa. He elaborates a theory of catastrophes and adaptation or survival mechanisms throughout history of mankind that left traumatic hereditary memory traces. His practice with traumatized patients is the ground-work for Thalassa and, in return, Thalassa influences his theory of personal trauma: at the very beginning is the catastrophe, the ur-urtraumatisch.

A clinical case will allow us to apprehend how a paranoid delusion can represent a survival mechanism in the face of an original trauma that impairs one's very sense of identity. Different transference and countertransference episodes in Henry's long analysis opens on a comprehension of the devastating effects of very 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 paranoid sometimes impairs our own capacity to think, on the other hand it is he that forces the most a constant reopening of our thoughts about our practice and our theory. The paranoid's quest for origin meets our own quest, our own interrogations concerning the traumatic origin of our personal psychic life.

Keywords: *trauma, origin, paranoia, transference, countertransference*

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 – presents in the serial work, urban agglomerates, and excess of information – participate 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 sophisticated with the increment of situations of daily violence during the 20th century, configuring a wide field of researches, the most important ferenczian contribution to this subject has not been receiving the prominence that it deserves. In Ferenczi, the traumatic is not so much defined by the violence or the excess of an event, but mainly by the subjective annihilation provoked by its denial (Verleugnung) Axel Honneth, a theoretician of Frankfurt School, points out that political fights are not caused only by economic factors, but mainly by a fight about recognition and denial, conceived in terms very similar to the notion proposed by Ferenczi. Articulating Benjamin, Ferenczi and Axel Honneth, the paper intends to reflect on 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 requested, nowadays, in clinical and social experience.

Keywords: *trauma, denial, contemporary societies 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, also thanks to some quotes from the masterpiece written by F. Molnar, is 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 Frankel defined “two essential processes of therapy”: a) the play and b) the renegotiation of self-other relationships through action.

THE PUBLIC-ACTION AS AN ACT OF “NEW-BEGINNING”

GRANIERI, Antonella

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Following Bion's and Ferenczi's thought, the Author focuses on the psychosomatic dimension and how it arises in the psychoanalytic relationship with patients who recurrently fall into physical diseases. In order for an actual transition from the body to the mind to take place it is essential for the psychoanalyst 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 side that entails a more “archaic” availability to “identify” with pre-symbolic areas. It implies the analyst's ability to “embrace” the pain that has taken shape in the body through the psychosomatic symptom. Some corporal features may get ill because they embody, to the point where they might lead to a personification, something that the patient wasn't able to integrate 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 “constant conjunctions” 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: *psychosomatics, personification, public action*

TRAUMA AND BASIC TRUST

GUASTO, Gianni

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The trauma discovery by Ferenczi was labelled by Freud as a return “to errors”, which he himself sustained to have committed before 1897. During the dramatic period that goes from Wiesbaden Congress (September 1932) 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 latest Ferenczi corresponds to a simple return to the origin of psychoanalysis, and is also a symptom of a serious psychosis. The theme of this relation is that Freud's opinion concerning Ferenczi's concept of Trauma is a result of misunderstanding: the trauma as described by Ferenczi is not the one that preceded (in Freud's theory) the desertion of the seduction theory, but is something that is much deeper and mortifying where the sexuality role is less central. The author stops to ponder and reflect about the importance of the concept “erschütterung” as a cause of losing the “basic trust”, a perspective that goes far away from the Freudian sex-centrism putting the psychoanalysis face to face with the sufferings of the victims of extreme trauma.

Keywords: *Ferenczi, seduction, erschütterung, extreme trauma*

THE “CONFUSION OF TONGUES” AS AN ANTICIPATION OF THE TRAUMATIC DIMENSION OF LANGUAGE

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The work of Sándor Ferenczi anticipates various problems of contemporary psychoanalysis – clinical, technical and theoretical –, standing out, due to its novelty that which he elaborated in relation to trauma. Ferenczi's 1930's writings were mostly read by the psychoanalysts of his time as a return to the first Freudian topic, including the way in which Freud himself 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 latest work, it is possible to conceptualize the notion of “confusion of tongues” as a novelty in the relation between trauma and language. It is even 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 *lalangue* and *traumatisme*.

Keywords: *confusion of tongues, Lacan, lalangue, trauma, traumatisme*

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, attunement, 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, until then, either existed as a potential, or has been dissociated.

In this paper I will focus on ways of reviving dissociated self-states in analysis, in the sense that Ferenczi has long ago written about it in his “Clinical Diary” (1988). 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 to these fascinating writings by Ferenczi.

Keywords: *psychoanalytic mothering, dissociated self states*

FERENCZI 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 Reality”. 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 torture, generally the focus is on the psychic reality of survivors. The elaboration of the perpetrators' complex world is a great task for social scientists and medical professionals alike. Theories on the psychology of torturers 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 dynamics between the victim and the perpetrator. The Cordelia Foundation has been treating refugee survivors of torture 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, Rozmarin and Michael Sebek) on the presence of intergenerational figures, part objects, spectral presences, present absences, ghosts, in short, in the scenes of abuse and child assault. The confusion of tongues mixes generations, the living and the dead, the patterns and traumas, large and small, adding to the confusion in sorting transference, countertransference and transformation. Clinical examples will be used.

Keywords: *intergenerational transmission, ghosts, history embodied*

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 repress 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, caress and acceptance of himself and they can't give up to try to get it. Ingeborg Bosch created a theory and a therapy method (Past Reality Integration) where she describes which mechanisms begin to work, when a child realizes that his basis needs are not going to be satisfied and feels danger. I want to demonstrate the theory and therapy method with individual and family therapy cases. I try to show in this cases, how could be transferred a traumatic reality, the “little trauma” throw the generations...

Keywords: *traumatic event, defensive mechanisms, multigeneration trauma, trauma processing, past reality integration*

TRAUMATISM - REVISITED

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It has now been eighty years, since the notion of Traumatism emerged with all its importance in Ferenczi's works. The later papers by Freud and those of the post-freudians after the war, such as Winnicott, Balint, Klein, Heimann, Fairbairn, Bion, Ogden and others, have become since then our travel companions. Taking into account scattered remarks of the Clinical Diary 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.N." Elisabeth Severn. It shows what we can learn from these historical documents and from the experience behind it. Commentaries, remarks and questions enrich the narrative of the case leading 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 25) is perhaps the earliest narrative of adult onset catastrophic trauma (according to Rabbinic tradition, Isaac was 37 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 unmentalized and dissociated experience of trauma. Being dissociated, not mentalized nor integrated, the annihilation trauma is then enacted in the subsequent story of Isaac's wife, Rebecca's, betrayal of him (Genesis 27). In this new reading of the Biblical text, understanding enactment as memory that is unformulated and dissociated allows for the making of meaning of a story that otherwise has been difficult to fathom. I will discuss enactment as a form of remembering psychic experiences that are not mentalized or integrated and thus enacted within relationships, including the therapeutic relationship.

I will then discuss adult onset catastrophic trauma in contemporary psychoanalytic thinking. Guided by the work of Donnel Stern and Ghislaine Boulanger, I hope to show what is unique to adult onset trauma as differentiated from childhood trauma, with special attention given to dissociation, the fear of annihilation and enactment.

Finally, I will explore and discuss the collusion 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 catastrophic trauma*

THE PSYCHOANALYTIC ASSESSMENT OF REFUGEES SUFFERING FROM PTSD: A PSYCHOANALYTIC APPROACH. DEPLETION AND RESILIENCE IN TRANSFERENCE AND COUNTER TRANSFERENCE

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Freud's ideas on "Kriegsneurose" have been the main topic at the IPA Congress in Budapest 1918, and Ferenczi's work has always been centered around questions of trauma. Today the "Kriegsneurose" entered into the ICD 10 as posttraumatic stress disease. Even if an interdisciplinary approach is necessary today, the psychoanalytic approach is the way to understand the traumatised patient and to show how a helpful interaction looks like. Assessments of refugees are embedded in the institutional framework of immigration services, courts of justice, and the police. This framework in itself already entails particular transference and countertransference 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) transference. Further, the differences between the acute, intrusive form of PTSD and its latent, avoiding form are explained in detail. From this, technical consequences for structuring the interviews are deduced. In the second part, a number of cases are reported in which an initial negative transference provoked a denial of the trauma which would lead to rejection of the refugee. These cases serve to illustrate how the examiner needs to use his counter transference, and how he needs to know the possibilities of a person's resilience while exploring the traumatic experiences.

Keywords: *transference, splitting, resilience, depletion, concretistic fusion*

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 31, 1931, 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 "Confusion of Tongues" paper that Ferenczi delivered, over the protestations of Freud and his closest associates, at the Twelfth International Psychoanalytic Congress that took place in Wiesbaden, Germany, in September 1932. With reference to primary sources, chiefly letters and other pertinent documents, my presentation will chart the course of the intensifying dispute between Freud and Ferenczi over the conception of psychic reality contained in their respective views on the nature of trauma. Although the controversy over the Confusion of Tongues 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 incompatible with each other.

Keywords: *trauma, psychic reality, confusion of tongues*

BETWEEN TRAUMA AND TRANSCENDENCE: A HISTORICAL, THEORETICAL AND CLINICAL CASE PRESENTATION

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The author will present clinical material from the 15 year treatment of a survivor of severe trauma. In this presentation, the author will attempt a dialogue between psychoanalysis and spiritual faith through 1) a description of the faith influences in Ferenczi's life; 2) the interaction of psychoanalytic treatment of trauma and spirituality in a clinical case example, and 3) the theoretical implications for treating trauma with a binocular lens of psychoanalysis and spirituality. 1) Excerpting from a recently published book, the author will suggest that Ferenczi's perspectives were influenced by the generous religious and ethnic pluralism of Hungary, particularly the impact of Kierkegaardian ideas. 2) The author will discuss the case of Mandy, a young woman who witnessed the murder of her mother by her father when she was six. This melee not only destroyed her 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 much plastic surgery. 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 as one which moved from the despair of perplexing and vexing symptoms, to a desire to transform the trauma in generative empathic outreach toward others. In that 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 consilient with Christian spirituality, and will explore the presuppositions of such an approach. These presuppositions will then be applied to an understanding of "enactment", "thirds", and the holding of dialectics in the treatment.

Keywords: *Ferenczi, trauma, Christian, spirituality, psychoanalysis*

FERENCZI'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 Ferenczi the traumatic induction of dissociative trance with its resulting fragmentation of the personality. Ferenczi introduced the concept and term, "identification with the aggressor" in his now famous "Confusion of Tongues" paper in which he described how the child who is being abused becomes transfixed 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 hypnotically transfixed by the aggressor's wishes and behavior, automatically identifying by mimicry rather than by an agentic 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 delimiting one. To expand upon Ferenczi's observations, identification with the aggressor can be understood as a two-stage process. The first stage is initiated by trauma, but the second stage is agentic and defensive. While identification with the aggressor begins as an automatic organismic process, as Ferenczi describes, with repeated activation and use, it becomes a defensive process. As a dissociative defense, it has two enacted relational parts, the part of the victim and the part of the aggressor. This emphasizes its intrapersonal aspects—how aggressor and victim self-states interrelate 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 FERENCZI'S PHYSIOLOGY OF PLEASURE

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In 1929 Ferenczi criticized psychoanalysis for "neglecting the organic-hysterical basis of the analysis". He was a pioneer of the "physiology of pleasure" ("Lustphysiologie") in which no organ is "psychically neutral". He stressed the plasticity of the body, the libidinal energy of bodily organs and the relations between them, and made a remarkable use of Freud's distinction between alloplastic and autoplasic control.

Ferenczi described these processes in an original blend of writing techniques of high aesthetic value. While his specific modes of encoding the body in Thalassa have been characterized by Sabourin as a "carnival of bodily organs", the impact of trauma on the expressions and configurations of bodily organs has not been examined sufficiently. The study aims at reconstructing Ferenczi's lifelong project "physiology of pleasure" putting a focus on the connection between its aesthetic contents and the etiologic shift from internal (phantasy) to external trauma. A comprehensive examination of trauma at organic level including Ferenczi's emphasis on the "adaptive potential" and the "Orphic powers" of the organism and unfolded in the context of Schopenhauer's and Nietzsche's philosophies will show a complex, more accurate picture than the carnivalesque one presented by Sabourin. A comparison with the role of trauma and body configurations in Groddeck's works will reveal a further "face of trauma".

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

ALBA SLEEPS FOR HERSELF BUT SHE DREAMS FOR ME. THE TRAUMATOLYTIC POTENTIAL OF DREAMS

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Freud tries to present himself as sharing Ferenczi's view that dreams have a traumatolytic function, and in fact appropriates the idea. However, both attribute a very different importance to it. In Ferenczi, it is central. In Freud, it is secondary, at least as regards the traumatic dream and after 1920. 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 Ferenczi's posthumous works, is clearly set apart from Freud's approach at the same time, but not so much from Freud's first works, such as "A Project for a Scientific Psychology" and The Interpretation of Dreams. A dream is used to illustrate Ferenczi's point of view.

Keywords: *dream, traumatolysis, drive theory, rest drive*

„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 threats African American young men experience on macro/micro aggression levels as cultural subjects of abjection and despair. 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 sons to attempt analysis. The silent and highly communicative protests of the sons 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 stigmatized youth can lead to fights and sexualized teasing as they actively contest middleclass white hegemonic masculinity and sexual orientation.

The dress, walk, and mannerisms that characterize this hotly debated phenomenon also attract the police, urban gangs and other risks. The symbolism involved in some mimicry of “pull up your pants” seems to be unconscious representations- of the vagabond, the convict, group staging of sexualized prison life and solicitation.

Keywords: *identification with the aggressor, “pull up your pants” phenomenon, African American male youth, abjection, 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-traumatizes 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 presently know, do not belong to the neurosis 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 past object relations or conflict repetition itself. For such patients, as a rule, the trauma is much more related to what did not happen, and to what was missing or failing, than to 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 have been and which should be the analyst’s intervention in front of an enactment. If we can affirm that the technical correlate of transference is the interpretation, which should be the technical correlate of an enactment?

Keywords: *enactment, borderline, intervention, transference*

OEDIPUS 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 terrified children arose from Ferenczi’s mourning for his never begotten children. Both narratives are reconcilable as attempts to heal patients through fusing their fragments and fortifying their egos. Despite their outward differences, both Oedipus and the Terrified Children begin with the same premise — children are interested 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 boundaries 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 sexually molested and their identity is atomized. 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 avert his eyes from the evidence given by his patients? From Anna O to Dora, female patients all but drew Freud a map with a red X circled around their genital area. From his inability to endure mutuality, 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’s and Freud’s inability to rise above their own quarrels created trauma 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 annihilating 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 concepts 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 to the traumatic events, understanding them as real occurred facts and relatively independent of the psychical reality. His clinical experiences with "difficult patients" led him to emphasize the power of external objects in the traumatization 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 in its maintenance. Therefore, when he emphasized the role that environment played in the formation of the trauma, Ferenczi also enhanced the role of analyst as potentially iatrogenic or as promotional agent of the cure, especially in reference of retraumatization. The original perception of trauma etiology led him to increasingly modify the analyst approach and to develop a set of therapeutic measures that included an amazing change of the analyst attitude and creative therapeutic tools in order to avoid the retraumatism 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 named) as the Elasticity of the Technique which was coherently being built as part of his Trauma Theorization. The idea of this paper is to discuss important aspects of Ferenczi's humanist legacy that include the comprehension of the origin of trauma, its perpetuation (retraumatism) and its cure; both in Ferenczi's clinic and in the contemporary one.

Keywords: *trauma/cure, retrauma, external object, elasticity of technique, contemporary clinic.*

UNDEADNESS: UNWELCOME GHOSTLY VISITATIONS AND THEIR COUNTERTRANSFERENCE VICISSITUDES

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Thirteen years into Cynthia's analysis I know startlingly little about the ghosts of traumas past that haunt her. And a great deal. For despite the vagaries of her history, ghosts have commandeered our attention by making their poisonous presence acutely felt in our relationship (Ferenczi, 1929, 1933; Fraiberg, 1975; Freud, 1917; Loewald, 1960). Early on, I felt ill sitting with Cynthia. I would break out into a sweat, feeling dizzy & unable to focus. I dreaded sessions. Cynthia - obese and very dark - spoke with little emotion or detail about a horrific past and a not-much-better present, and about her 'evilness.' One day, I stood up at the end of a session - simply stood up - & felt excruciating pain in my ankle. I yelled 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 'sucked of vitality' so that the other may live - or, more accurately, remain undead. Paradoxically, despite my unwelcoming 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, transference-countertransference, unwelcome, body, ghosts*

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 onto the doctor, thereby avoiding knowledge about their own unconscious. He takes Freud's concept of «übertragungen», neurotics transference and extends it beyond the person of the analyst or doctor, saying that it is a psychic mechanism that manifests itself in all of life's circumstances and underlies most morbid phenomenon. Ferenczi invites us to consider transference in a more general way, beyond the analytical frame. He talks about the tendency of neurotics to «imitate» to put themselves in the other's place, to feel other person's emotions rather than their own.

Based on my clinical work with patients who have experienced childhood trauma, I will explore the different processes of introjection in transference and counter transference, 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 imitation" based on fantasies of oral incorporation. A kind of regressive defence against "mature" 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 him/her". How can analytical listening, associative work and interpretation stimulate maturational 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 clinical description than in the correlation between clinical cases and psychoanalytic theory. For Ferenczi, theory was the handmaiden 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 conundrums. As a result, the standard view of the unconscious as the repository of drives and biological forces was, for Ferenczi, subordinated to the needs for psychoanalytic engagement in response to trauma.

Keywords: *Ferenczi, ignorance, unconscious, trauma, double conscience*

FERENCZI, TRAUMA AND TACT

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In this presentation we will address Ferenczi's clinical approach to trauma, relating it to the concepts of tact and of touch. In Italian they are the same word, tatto. 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 of each other, they become sources of mistrust, disorientation and shame.

Keywords: *tact, trauma, tatto, sensory organization, trauma 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 intrinsic stimulus barrier in the central nervous system that protects 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 in a catastrophic manner or where it has never functioned adequately, the subject is essentially alone in an inexplicable world, vulnerable to unmediated intrusions of internal and external experiences and memories. The permeable boundaries of inner and outer, past and present are unable to sustain the continuity of self or to protect it from disruptive impingements. Isolated and without a framework to contain fantasy, the subject withdraws 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 result may be a liability to psychotic reactions that cannot be healed in the same manner. For this reason, treatment 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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Premature separation at infancy may become an unbearable, traumatic emotional event, which defies processing. It is an experience that can cut the psyche so deeply so as to leave it all tattered. Then, the torn, bleeding 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 quiet heedfulness and listening, offering scarce verbal interventions, the analyst is wholly given to the analysand; the analyst is then under intensive body sensations and emotions which unconsciously reproduce the traumatic experiences of the analysand. When the analyst is able to metabolize the powerful emotional experiences, and return them to the analysand in a way that would be tolerable for him, the obstructing powers vanish. I shall illustrate the matter with a case of a patient who is listless, lonely and detached, and whose only comfort is in carving bowls only, in hard wood. A session, where he recounted a dream, while the analyst is present in total immersion, experiencing 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, but, what happens to the child whose nightmare is a recurrent distressing 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 deprivations 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 tracked 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 safety to facilitate the expression of unarticulated experiences and to allow the discovery of disavowed aggression as well as reclaiming of childhood longings will be highlighted. The presenter will demonstrate how the intersubjective and relational approach can lead to posttraumatic progression when treating a wide range of dissociative patterns in traumatized patients. The nature of curative transference and counter-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 progression, 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 treatments 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 classical dynamic 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 decompensations, hospital admissions, suicidal ideation, resistance to medications, and paranoia about the analyst complicated the analysis. Anxiety, despair, hopelessness, worries about the patient's safety, and paranoia were CT reactions that challenged the analysis. Consistent analysis of the T and CT were essential to the progress of the analysis. Psychotic breakdowns may be considered as 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" runs the risk of reducing trauma to a thing, an objective past event that can be dealt with psychologically in one way or another. Such reduction betrays the unattended fact that trauma is ever present for all of us, an acid dissolver of presumed objectivity and the continuity of self. Trauma, from this perspective, is the assault of reality on one's very existence. Trauma is the inescapable current, the enveloping phenomenological flow of time and space towards the precipitous waterfall of death.

Ferenczi, who recognized the reality of trauma, construed a "confusion of tongues" between the abuser and abused. In effect, the abuser misconstrues who the abused is and acts accordingly. The reality of the one shatters 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 womb's Garden of Eden into a screaming reality. Though subsequent development makes that reality more bearable, it remains a hell where lurks 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 lurking trauma, and instead, mere and more change.

Keywords: *trauma, Ferenczi and Rank relationship, constructivist, 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 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 presenter 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 compulsions" exemplify 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 "invite unpleasure into their lives" and repeat painful situations from childhood to try to gain mastery over them. The presentation will review the history and nature of IRS abuse and trauma; present research evidence about the psychopathology that resulted; present case studies illustrating victim's 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-enactments, 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 IPA congress Sándor Ferenczi undertook a profound and evocative questioning of the then mainstream technique of psychoanalytic treatment. He also proposed a pervasive distinction between infantile and adult sexuality - tenderness 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 just as much implicit political statements for the psychoanalytic 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 adults (the psychoanalysts) 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, metapsychology 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 an extension of metapsychology to include the mechanisms underlying psychotic pathology and trauma – in particular, the fragmentation and atomization of the personality – thus anticipating his well-known hypotheses on the ‘confusion of tongues’. Ferenczi thus postulated that a more complete definition of the function of dreams would include not only the undisputed function of wish fulfilment, but also a second function, that of traumatolysis, whereby traumatic experiences were dissolved and undone. In his view, many dreams, lacking unconscious representations, did not present interpretable psychic contents or oneiric images, but gave rise only to painful sensations or experiences of physical or mental suffering. Ferenczi held that, besides their wish-fulfilment 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 foreshadowed by a number of years the notion of ‘healing dreams’ coined by Winnicott (1949) in his well-known paper, *Hate in the counter-transference*.

FROM THE DESTITUTION OF THE SELF THROUGH WORD AND BODILY STRENGTH

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There is no age. Anyone can be destitute from itself. Violence is a trivial way that operates beyond what sets the identity of the expected positive circle of society. This is a fact. The produced acts reach the mind. Shock, psychic commotion, “from the old times, like Ferenczi would say, sensitive to the winds that leads to mental illness. Assuming here that all may lie in a plot that comes from outside. Destitution is not only to happen in childhood, any age can be deprived; 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 cases has taught us to face. 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 lethal, beyond the death pulsion...) that human, in a transformed world, can live. What Psychological destinies 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 commotion, clinic, Ferenczi*

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

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How did psychoanalysis find 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 hospitalised or traumatized but “resilient 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 continuity of structural dimensions: psychobiological 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 actuality of Ferenczi's concept of denial in order to elaborate the fate of early trauma in the psyche. We will base our ideas on a clinical material from a case of anorexia. 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 externality. The defense, according to Ferenczi, focuses precisely on the synthesis ability of the ego. The sensitive part of the trauma is brutally destroyed and disinvested, while the surviving part knows everything but feels nothing. In this regard, Ferenczi believes that the psychical 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 oneself.” It follows from this conjecture that the defense introduces a particular mental functioning, whose clinical manifestations are an appeal to the limits of the body to deal with the excesses 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, anorexia*

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 (mostly from his Diary) can still be relevant for today's intervention on victims or survivors of social and relational trauma and how the intersubjective view of psychoanalytic treatment finds in the Hungarian psychoanalyst a precursor.

I would highlight how in the work with survivors a reconstruction of the reality of the event 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 "Remembering and telling the truth about terrible events are prerequisites for the restoration of the social order and for the healing of the individual victims" (Trauma and recovery).

In the cases I will present, I hope to show how working with the victims acquires a fundamental intergenerational meaning: in fact the problem for trauma is that precisely the unknown and unrevealed elements in oneself can be transferred to one's children, even to the third or fourth generations (as the studies on the generations survived to the Shoah have shown). Repetition of trauma in fact may become "an unconscious organizing principle" (as psychiatrist and survivor Dori Laub 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 lines with Ferenczi's life example and work, even the psychotherapeutic work carried out with the victim in the narrow space of the therapy room may assume a fundamental testimonial value which might end up with a form of healing and reparation of the community at large, restoring peace 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 AGGRESSOR IN THE QUEST FOR INTIMACY – TOWARDS POST-TRAUMATIC MASTERY

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Women with histories of unattended childhood sexual and related traumas are frequently fraught with feelings of unworthiness, distrust, and shame. They tend to perceive concern and tender feelings within themselves and others, including the analyst, as a Trojan horse, rife with hopeful opportunity and the potential for terrifying demise. Given the often foreign nature of more benign, loving affects, defensive states involving identification with the aggressor, may be called upon to regulate and negotiate other emotional experiences, including rage and panic, leading to fight-flight responses. These reactions may be associated with new experiences that can disorient the patient from familiar ways of relating, as well as from her structure of internalized object relations. Focus will center on identifying and navigating dissociated states that emerge in the analytic dyad vis-a-vis enactments, noting the role of identification with the aggressor—especially as the patient struggles to embody positive self-regard, as well as tender or loving feelings for the analyst, as well as from her. Clinical material will incorporate vignettes from a twenty 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 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 seventies, characterized by healthier self-esteem and mutual regard, 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. The members occupy the nodal points and each event of relating connects the points between the members who relate. Along the horizontal axes the matrix is the totality of relationships at any given time. Along the vertical axes past events are related up to the present time. At different times different parts of the group members' personalities come to the surface in the group. The horizontal axes with stimulate and contain the actual parts that surface at one time. The vertical axes will integrate the parts of a member's personality that surfaced at different times. The trauma is split off part of the personality. Along the horizontal axes the matrix will stimulate 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 intensified and complicated 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, prompts re-traumatization. In some cases, the unspeakable is initially communicated via physiological processes and frightening perceptual distortions. The voice is shut down and other systems take on its role. The scream is locked in nonverbal proto-communicative channels, e.g. physiology, visual perception, fused imagery. The affective storm of silent screams can erupt and gain voice only after the analyst and patient co-create a potential safe space. As the "confusion of tongues" and the "identification with the aggressor" is absolute and total, 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 details of sight, sound, action, etc. The analyst follows the patient into the dark nightmare of imprisoned screams so they both can "see 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 Ms. S. whose blood pressure temporarily shot up to dangerous levels upon entering any internist's office.

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

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 scene of the traumatic and an enigma in the clinic theory. Which are the transmission paths between the parents' denied trauma and its impact on the child? Which are its figuration conditions? These problems will be addressed in this work through clinical material extracted from a child's analysis.

In transgenerational trauma, elements that are denied by the parents function as absences and compromise the intersubjective dynamics between adult and child, impoverishing symbolization processes (Abraham and Torok, 1974). Through death denial, an empty field is created, one of repetition and unlinage: a grave without a corpse to be veiled. 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 enacts a death scene, and acts it in the place of the dead, in an almost hallucinatory intensity, characteristic to "invented" fantasies (Ferenczi, 1924). Dead words and affects gain life in the child's body and voice, in a transformed apparition of the family secret. If, in many cases (Freud, 1914), it is a remembrance that should occupy the place of acting, there are others when therapeutic success appears to lie in the patient's presentation, through acting, of that which will still become a memory. The mode through which a child under analysis figures this scene, and acts it, begins the elaboration process and enriches its inhibited fantasmatic life.

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

THE NEW TRENDS IN 'NEUROPSYCHOANALYSIS' AND THEIR LIMITATIONS

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Empirical psychology has constantly been trying to find substantiations of psychoanalytic notions in three domains: subception, 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 1950s, there was an early alliance between the New Look approach to perception and the psychoanalytic interpretation of repression. Jerome Bruner 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, ERPs, imaging – new data supporting subconscious early semantic processing emerged as New Look II and III. According to Erdelyi (2006) the effects show an affinity between a Freudian and a Bartlettian approach to perception and cognition, with multiple stages, constant constructions and rationalizations.

Lately these efforts have been accommodated to new theories of "neuropsychanalysis". 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 areas, or in the brain stem. It is harder to interpret the topological model of Freud in modern neuroscience terms. Ironically, the place of both Es and Überich 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 (OPEARTION ENDURING FREEDOM AND OPERATION IRAQI FREEDOM)

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Sándor Ferenczi, with Ernst Simmel and other early psychoanalysts, pioneered the treatment of War Neurosis during World War I (WWI). Their findings were presented in Budapest 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 peacetime neurosis. After World War II (WWII), 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 system. The concept of war neurosis will be followed through iterations of shell shock, battle fatigue, astasia abasia, post-traumatic 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 extraocular movement desensitization retraining (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. Bion claimed that meaning is a vital human need. Dyadic Projective Identification transforms primal body sensations into meaning through mourning the pain of differentiation between hunger sensations internality 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 unrecognized/chaotic events through mourning their uncontrolled externality. Primal meaning allows transition from "Baby without mother" chaos into recognition of temporal breast's loss. Temporality and differentiation are acknowledged. This model describes how body involvement traumatizes, reactivates and reorganizes primal processes. This reactivation transforms the trauma of body injury and chaotic sensations into mourning the pain of loss of previous body and self image. It is a transition from their schizophrenic split perceptions toward their renewed meaning through depressive integration. Integration difficulties lead to regression into mental chaos and psychotic 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 reactivates oedipal recognition that the future coming death is survived by parental coitus and birth (Rank). Thus, anxieties of death and future uncertainty can be tamed, the body's vulnerability is acknowledged and depressive reorganized meaning of body and self perceptions is facilitated. I am suggesting that growth and creative unique personal kinship to society are dependent on synergy between these internalized dyadic past organizing processes and oedipal future procreating survival processes.

Keywords: *body, trauma, death, meaning, 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 autumn of 1925, Mrs. Elizabeth Severn left New York to journey to Budapest to begin an analysis with Dr. Sándor Ferenczi, referred by Otto Rank (Rachman 1997). Ferenczi had already developed a world-wide reputation as “the analyst of difficult cases” (Rachman 1997). Henry Stack Sullivan was to refer Clara Thompson to Ferenczi about the same time Severn was being seen (Dupont 1988).

Severn was an American therapist with her own ideas about treatment and theory (Severn 1913, 1920, 1933). Severn was intellectually gifted, but, an emotionally disturbed 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 Confusion of Tongues paradigm, the contemporary analysis of the incest trauma and the introduction of non-interpretative measures in psychoanalysis. The first formal application of the Confusion of Tongues paradigm (Ferenczi 1932, 1983) was in the analysis of Severn's incest trauma (Rachman 1994, 2000). A reconstruction of the Ferenczi/Severn analysis was attempted by referring to Ferenczi's actual clinical interaction with Severn (Ferenczi 1988), and Severn's account of their analysis (Severn 1933). This historic analysis, therefore, can be viewed as the first co-created, mutually interactive innovative treatment of trauma (Rachman 2010c). In addition, the newly acquired *Elizabeth Severn Papers* (Rachman 2011) can contribute to our understanding. The Ferenczi/Severn analysis can now be re-evaluated not as a “wild analysis”, but a pioneering contribution to the study and treatment of the incest trauma using the Confusion of Tongues paradigm and non-interpretative measures (Rachman 2010a) and as an “invited” clinical experiment in intersubjectivity (Rachman 2010b). Severn can also be viewed as an unsung hero of psychoanalysis (Rachman 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 somatic medicine as the members of multidisciplinary team. To work at the „bed-side” during „intensive” supervision helps to do psychoanalytical observations and gain more and more experiences about the confrontation with death. At the National Institute of Oncology we have described the phenomena of „fluctuant psychic regression” together with Istvan Szekacs in the 90's. In my lecture I would like to share some thoughts about Ferenczi's mental state during his somatic disease. I hope to express new idea on the basis of modern psychoanalytical oncopscychology about Ferenczi's mental health in his last period of life.

Keywords: *psychoanalytical oncopscychology, terminal phase, fluctuant psychic regression, Sándor Ferenczi's death*

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

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Professionals today are generally aware of the mechanisms that explain the transgenerational transmission of social traumas. A century ago, however, the Budapest School of psychoanalysis was already interested in how social influences affect personality development. Later, starting in the 1980s, Hungarian psychoanalyst Teréz Virág studied children of Holocaust survivors and their psychological problems; in doing so she demonstrated the importance of social traumas from the psychodynamic perspective and suggested therapeutic approaches. Roughly at the same time, in the 1960s, Miklós Ábrahám and Mária Török, a Hungarian psychoanalyst couple living in France, put forward an approach to the social inheritance of traumas that was partly different from Virág's views. Ábrahám and Török introduced in this context the concepts crypt and phantom. Their account and novel therapeutical suggestions proved helpful in understanding the mechanisms of certain traumas.

Unfortunately Virág and the Ábrahám-Török 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 basic tenets of the Budapest School; in addition, both exceed the limits of traditional psychoanalytic approaches and emphatically called attention to social traumas in the individual's life history.

In my talk I point out the common roots in the two theories that date back to Ferenczi's theory of traumas. I shall lay out the similarities and differences between the two views, make suggestions regarding their psychotherapeutic consequences, and summarize how these interpretations contribute to our social knowledge today.

Keywords: *Budapest School, Sándor Ferenczi, social traumas, transgenerational trauma transmission*

A CALCULABLE TRAUMA? MATHEMATICS INTERFACES WITH PSYCHOANALYSIS

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This work's objective is to sustain that a valuable result, both for the psychoanalytical theory and its practice could be obtained from a dialogue with the mathematical sciences. Ferenczi's (1920) ideas that the mathematician is someone keenly yet unconsciously aware 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 from contemporary philosopher Alain Badiou (1988, 2006). It is suggested that the human psyche presents an isomorphism with mathematical structures and that it can be thus modelled through set theory entertaining a particular logic. Psychic elements would have the structure of mathematical sets, presenting their properties but also their paradox risks. Using, as an example, Hermann's (1945) essay on János Bolyai, 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 then into account Ferenczi's (1932) Confusion of tongues, a psychic trauma is formulated as that which endangers or actually disrupts such 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 may appear, and the ones that endeavour to establish a new order, among which psychoanalytical treatment is a possibility. Limits of such a theoretical perspective are also considered, leading to the analyst's attitude and ethics.

Keywords: *psychoanalysis, mathematics, trauma, Ferenczi, Imre Hermann*

FREUD, FERENCZI, AND ROSMERSHOLM: INCESTUOUS TRIANGLES AND ANALYTIC THIRDS

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In "Some Character-Types Met with in Psychoanalytic Work," Freud analyzes Ibsen's play *Rosmersholm* to illustrate the concept of being "wrecked by success". In *Freud and Oedipus*, I have argued that Freud himself 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 Ibsen's play to show that the relationship between Rosmer and Rebecca West uncannily parallels that between Freud and Minna Bernays, but also that the rivalry between Rebecca and Rosmer's childless deceased wife Beata can be compared to that between Elma Pálos and her mother Gizella. Thus, Ibsen's play serves as what Thomas Ogden terms an "analytic third" in the dyad formed by 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

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Hungary and Austria celebrated their wedding in 1867 (following a long period of engagement) and got separated in 1918. 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 patriotism and on border symbolism; I will demonstrate that the violation of the Magyar motherland's borders also contributed to drive the Hungarian psychoanalyst in the 1920s to transcend the boundaries of psychoanalysis fixed by its father, Sigmund Freud. Much research has focused on Central European psychoanalysts' cosmopolitan worldview whereas their patriotic feelings seem to have attracted little attention. The purpose of this essay is to show that Ferenczi was one of those numerous Hungarian intellectuals who felt a strong attachment to their country and who strived for a free, authentic and tolerant society. According to my hypothesis, the elaboration of the "maternal technique" allowed for Ferenczi to mourn the lost mother(land) 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 BRED? TRAUMATIC EFFECTS OF WITNESSING UNBRIDLED AGGRESSION

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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 disconnected from 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 ideational "flooding," 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 expectations of persecution. This paper will review a portion of Larry's ongoing psychoanalytic treatment, tracing it from his hard-fought battle with and against the dangers involved in trusting—to the establishment of object-relatedness, and give-and-take mutuality.

Keywords: *paranoia, hydrocodone 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 Roza K. It is one 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 Ferenczian 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*

TRAUMATIC TRANSMISSION IN THE MEMOIRS OF LINDA GRAY SEXTON

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Linda Gray Sexton, daughter of Anne Sexton, the 20th-century confessional American poet, writes in *Searching for Mercy Street* (1996) that her mother physically and sexually abused her, while at the same time nurturing her gift for creative writing. In *Half in Love: Surviving the Legacy of Suicide* (2011), 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 take this aspect into account as she attempts to frame her understanding of her own subjectivity. Linda Sexton's memoirs attest 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 involuntarily." Sándor Ferenczi added to this discovery an understanding of how traumatic experience involves a confusion of tongues between perpetrators and victims. We can add that through repetition of trauma these voices can become indistinguishable. In writing her memoirs, Linda Sexton attempts to untangle herself from this inexorable pattern by a new figuration of traumatic experience in creative acts. Her powerful narratives 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

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In the work leading up to his "Confusion of Tongues Between Adult 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 terminal event in which the psyche comes to an end, but rather death stands at the very beginning of a subjectivity that is always traumatically constituted. The ego, as Ferenczi implies, comes into being only through a progressive response to shocks 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 always as a "dying to." If from his Theory of Genitality, the preferred metaphor is of a gesture of autotomy, it is only through this act of severing that the autos can come to be.

The labor of death is one that severs, but from what does it sever if the subject is only the product of this process, its aftereffect? Ferenczi references the "omniscience and supreme wisdom" of the infantile state, a wisdom that, if it is anything, refers to the permeability of the infant to affect, which it would receive without mediation and without event. The work of death would be the severing of an affective tissue that would not be individual, thus forcing individuation.

SÁNDOR FERENCZI – THE FIRST INTERSUBJECTIVIST

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Sándor Ferenczi MD (1873-1933) has been a controversial person in the history of psychoanalysis. He was on the one 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. Contrary 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 analysis as the essence of treatment, he aimed to refine the gold of psychoanalysis itself. Today there are few analysts who do not accept that intersubjectivity is central to psychoanalysis.

A JUNGIAN APPROACH TO TRAUMA THEORY

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The central element of the lecture 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 decade's 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 sketched out.

Keywords: *trauma, aggressor, archetype, analytical psychology*

TRAUMA OR DENIAL (IS THIS THE QUESTION?)

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Ferenczi, the psychoanalyst who suffered the intellectual "exile" of his colleagues for a very long period of time, comes back (although he never left) with his way of conceiving psychism, helping us out with our present day clinical task. The Freud-Ferenczi controversy continues. This constitutes a challenge for us to keep up reflecting 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 (an 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 is a substantial part of the trauma. He adds that the dramatic result of these event, its most evident consequence, would be the absence of certainty in oneself. That is the loss of trust on the traumatized subject's own perceptions, especially that has been lived by him, generating a lack of trust in his own sensations. If we consider the concept of introjection as introduced by Ferenczi (Pinheiro, 1995?) it barely refers to subjectivity, it is centered in bringing into the psychic sphere the feelings generated by the object, which is a support for representations that are already invested. Therefore introjection leads us towards the constitution 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”

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Salome kisses the decapitated John the Baptist's mouth and wonders if the taste of blood is the taste of love. Musing on Confused Tongues and confused tastes, I see life tongue and death tongue entwined; a perverse representation of fused life and death instincts. Richard Strauss' operatic setting of Oscar Wilde's play intensifies confusion by fusing highly complex, often shocking tonalities with simple, child-like beautiful melody. The opera experience unleashes boundless affect through the reversal of verbal and non-verbal, sight and sound, beyond the bounds of representation.

Chausseur-Smigel intuited a filiation between Ferenczi's traumatic atomization or pulverization of complex mental processes with Bion's psychotic process. She named Bion a "wise-baby grandson" Ferenczi. Ferenczi noted his omission of perversion in his theory of genitality, and perversion appears nowhere in Bion's prolific work. This essay explores Chausseur-Smigel's creative formulations of perversion and feminine intuition in linking the two men. I hypothesize perversion as the feminine psyche's delusional effort to represent unrepresentable trauma utilizing a psychical operation Bion called Constant Conjunction. Additionally, Andre Green's work on reversal, affect and representation is woven into the formulation. 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 psychoanalytic treatment of traumatic affect will be presented.

Keywords: *affect, music, constant conjunction, perversion*

THE MOTHER'S PERMISSION – SÁNDOR FERENCZI'S CONFESSIONS

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In his Clinical Diary and in his correspondence with Freud and Grodeck, Ferenczi reveals his feelings and his conscious motives with unique honesty. In my presentation, building on L. Nemes' idea, I would like to present the opinion that the driving force of Ferenczi's relationship with Gizella was the desire to repair his ambivalent relationship towards his mother. For Ferenczi the biggest - conscious or unconscious - proof of this was Gizella's permissive and accepting reaction towards the engagement of Ferenczi and her daughter Elma. Gizella 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. Gizella also demonstrates in other situations that she's capable of complete acceptance, the reparation 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. (R. Pfizner 2005)

Keywords: *maternal permission, ambivalence, reparation*

AUTHORS INDEX

Alvarez, Carlos	Florsheim, Dvora	Klett, Susan
Archangelo, Ana	Fortune, Christopher	Koritar, Endre
Arfelli, Patrizia	Frankel, Jay	Króó, Adrienn
Avila Espada, Alejandro	Fülöp, Marta	Langan, Robert
Bánfalvi, Attila	Gadaesi, Susanna	Ley, Robert
Bar-Haim, Shaul	Garon, Josette	List, Eveline
Bennett, Jenice	Gondar, Jo	Martin Cabre, Luis Jorge
Berman, Emanuel	Gonella, Vittorio	Menezes, Aluisio
Blum, Varda	Gougoulis, Nicolas	Mészáros, Judit
Bókay, Antal	Granieri, Antonella	Moreno, Maria Manuela
Bonomi, Carlo	Guasto, Gianni	Mucci, Clara
Borgogno, Franco	Gurevich, Hayuta	Nusbaum, Gwenn
Brennan, William	Gutiérrez-Peláez, Miguel	Ormay, Tom
Canesin Dal Molin, Eugenio	Hanly, Charles	Papiasvili, Eva
Cassullo, Gabriele	Hárdi, Lilla	Pereira, Adriana
Castillo Mendoza, Carlos Alberto	Harris, Adrienne	Pléh, Csaba
Ceragioli, Giuditta	Havelka, Judit	Poster, Mark
Charlier, Thomas	Haynal, André	Pud, Amnon
Clarke, Graham	Henik, Libby	Rachman, Arnold
Clit, Radu	Henningsen, Franziska	Riskó, Ágnes
Coelho Jr., Nelson	Hoffer, Peter	Ritter, Andrea
Cohen, Etty	Hoffmann, Marie	Rona, Paulo
Conci, Marco	Howell, Elizabeth	Rozmarin, Eyal
Cooper, Em	Hristeva, Galina	Rudnytsky, Peter
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De Clerck, Rotraut	Juhász, Angéla	Seitler, Jeanne
Dimen, Muriel	Junqueira, Camila	Skorczewski, Dawn
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Saggiaro, Viola
Sak Bun-Petit, Cecile
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