

A Journey to Pain

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What the sufferer does not grasp is the difficult task of relating to suffering—there lies his real suffering—suffering within suffering. (H. Michaux, 1944.)

This paper explores the restoration of the capacity to feel pain and guilt accompanying a process of re-integration, illustrated by material from an analysis of a woman whose four-month-old baby died in a car accident due to her recklessness. Analysis revealed the need to enact the unconscious fantasies and conflicts connected with her parents' survival guilt. In the transference, this was expressed through an attempt to destroy the analyst by a series of attacks on the therapeutic relationship. The analyst's survival of the attacks without retaliation enabled the patient to differentiate between self and object and to relinquish omnipotent ideas about her destructiveness.

The analytic experience facilitated the emergence of feelings of mourning and guilt which had been strongly defended against, leading to the revival of her psychic life.

CASE ILLUSTRATION

Josepha, a 37-year-old scientist, married and the mother of a 2-year-old daughter, sought analysis because of a feeling of emptiness and futility in her life. Josepha had long toyed with the idea of treatment, but previously hadn't summoned the courage to commit herself to it.

Josepha is the protagonist of a very tragic story. At the age of 31 she had been involved in a terrible car accident. Her baby, a 4-month-old girl, had been seated in a little basket next to her in the front seat, not secured by safety belts, when Josepha suddenly crossed the highway dividing line and collided with a car coming from the opposite direction. The baby was killed. Josepha's legs and pelvis were broken, her teeth were destroyed and her jaw bone fractured. She was unconscious for ten days and woke up in hospital where she was informed of her daughter's death. Faced with the loss of her child, Josepha wished herself dead but survived nevertheless. She underwent a series of orthopaedic and dental operations, which were experienced by her as very traumatic. After some time in a wheel-chair, she returned to work walking on crutches. Contrary to medical expectations, she eventually regained her ability to walk, with only a slight limp. A denture was constructed for her and her jaw bones were repaired, although she had difficulty opening her mouth. Three years after the accident Josepha gave birth to another daughter.

Josepha sought treatment at a period in her life in which she felt she had already overcome the irreversible effects of the accident. At the same time, a feeling of psychic numbness—an inability to feel joy or pain—accompanied by a sense of futility and meaninglessness made her decide to seek help.

I would like to describe here briefly my feelings

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when confronted with this patient's catastrophe. I must admit that I was disconcerted and somewhat frightened at the prospect of this psychoanalytical work. I asked myself, what happens to the psychic system of someone whose death wishes have been horribly realized due to her own destructive deeds? What could psychoanalysis do for someone who had lost her child in such terrible circumstances and whose whole psychic life now seemed to be paralysed?

I had heard about Josepha's accident years earlier through several newspaper reports which were accompanied by a picture of her in the orthopaedic department, strapped to her bed and crippled. The lurid headline was 'I killed my baby', and the accident was described in detail. I remember feeling shocked and revolted by the journalistic 'scoop'. It never occurred to me that years later Josepha would come to me for analysis. When she first appeared in my office, I thought that she displayed a courage that, under similar circumstances, I might not have demonstrated. But, to understand clearly her experience of loss, to serve a holding function, I had to be accessible to the fear of being responsible for the irrevocable loss of a child. This threat became clearer to me when, in reaction to her account of the accident, I wasn't able to feel either fear or pity, but was overcome by a feeling of numbness. Gradually, I realized that I was protecting myself against the terror that she conveyed through her story, as well as identifying with her defences, which enabled her to continue living in the world.

I wondered whether my personal experience with suffering could enable me to accompany her. Was it desirable to restore the pain of mourning and the burden of guilt, in order to revive her psychic life, and at what price? And if this was the aim of analysis, was it indeed possible?

Anamnesis

Josepha is the third daughter in a farming family. Her parents were near 40 when she was born. During her first year of life, her father was mobilized for over a year and her mother had to shoulder the heavy burden of running the farm alone.

Josepha's parents had arrived in Israel as teenagers, after finishing high school in Eastern Europe. Her mother had two older brothers, and a sister whom she had never met, since the latter had emigrated to the U.S. before her own birth.

When Josepha's maternal grandfather died, her mother, who had a Zionist upbringing, was sent alone to Israel. She went to a kibbutz where she met her husband, who came from a similar background. They decided to leave the kibbutz, bought land and built a farm from scratch. They considered this project vital for their existence. Josepha grew up with stories about famine and suffering caused by lack of food.

Josepha had almost no knowledge of her father's family. Josepha knew only that he had been very attached to his own father, after whom she was named, and who died after her father had emigrated to Israel.

I shall now describe here the different phases of the analysis which are relevant to our subject. The first three phases lasted for about two years, and the last phase continued through another year and a half.

Phase I—The fragmented self behind the fractured jaw

In the first sessions, Josepha conveyed her catastrophe via fragmented and incoherent locution. This jumble of ideas and words brought to my mind the image of debris scattering in all directions during a car accident. Gradually it dawned on me that the disconnected sentences were an example of her inability to consolidate multiple splits of her own personality.

In the here and now of the analytic session I felt lost and disoriented, moving in a chaotic, meaningless world. I realized that this was Josepha's way of conveying to me her own feelings of confusion and loss. Moreover, I felt trapped in a sado-masochistic game in which I was assigned the role of victim and persecutor intermittently.

When she cast me as the victim, Josepha attempted to drown me in her incomprehensible discourse, and I felt paralysed and numb. When I pointed out that I was sane and alive by demanding to understand her gibberish, I was immediately put into the role of a persecutory

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object. My attempts to assemble her words and ideas into a more coherent pattern, to enable us to extract meanings from them, was experienced by her as oppressive. She rebelled against being 'pushed towards normality', and rejected meaning as belonging to another world 'where your language prevails'. Coherence, intelligibility and integration were all experienced by her as threatening her fragmented self, which she named 'a conglomeration of worlds'.

Josepha abhorred reality and saw me as its representative. She played omnipotently with realistic boundaries by being late for her sessions, but always 'on time' by her own watch. 'Her' time was different from mine, different from the time she felt forced to accept for analysis.

Frequently, Josepha twisted my interpretations, emptied them of meaning and rejected them. I became aware that an encounter with her fantasized murderous aspect was unavoidable.

Her gibberish was usually accompanied by inadequate affect, a fixed smile and a joyful demeanour. I often felt bewildered and asked myself whether she was not psychotic. There were, however, two important areas which demonstrated that Josepha had some ego resources: her ability to take care of her family, and her capability to function in the scientific world.

Apparently, Josepha was able to be more coherent when she needed to function in the world. She considered this a mask behind which she hid her real, fragmented self. Josepha warned me not to encourage her fake normality during the sessions.

Her dreams were another area which seemed to be more 'connected', pointing to a healthier self. The dreams usually formed a clearer, more intelligible narrative, as if primary and secondary processes exchanged places. I concluded gradually that Josepha longed to establish with me a special kind of relationship based on extra-sensitive rapport: I was supposed to know how she felt and what she thought without her communicating to me in words. This constituted for her the only intimate, valid and nourishing type of object-relatedness.

In this phase of treatment, I formulated several working hypotheses:

- a. The splitting of speech was a concretization of the way Josepha experienced her self (body and psyche).
- b. Josepha resented a treatment which employed verbal thought in the solution of mental problems (**Bion, 1955**). She dreaded and hated me for attempting a psychoanalytic understanding of her problems, partly because she felt that psychoanalysis demanded from her the very verbal thought she so feared.
- c. Her destructive attacks on our verbal intercourse during sessions symbolized the way she related to primary love objects in her life.

My assumption was that all this was connected to the retreat from feeling guilty, i.e. rather be fragmented, infantile, psychotic than feel guilty of murder.

Phase II—The gate to mental pain

In this phase in analysis we seek Josepha's imprisoned feelings. The wish to escape the inner prison by internalizing forces from the therapeutic relationship is expressed through a dream:

Josepha is found in the science department dressed in prisoner's clothes; she has lost her way, feels totally disoriented, cannot find the gate. Across the road she sees sick people who have been hospitalized in a psychiatric ward. She feels close to them in spite of the distance. She is looking for help, a young woman approaches her and gives her interpretations. 'Don't you see that I need to be taken by the hand and shown the gate?' asks Josepha. The woman redoubles her

efforts to help her. Josepha feels that all is in vain. Suddenly, she makes a decision, follows the woman, and finds her way. It has been a long journey.

In her associations, Josepha refers to her ambivalent feelings towards me. She sees me as unable to help her and considers my interpretations useless. Only lately has she begun to have some faith in analysis.

The progress in the process of re-integration, the gradual fusion of the multiple personality splits to fewer and fewer which enabled her at long last to bring meaning into her sentences and understanding into treatment, occurred through making acquaintance with her mental pain; the pain which, on the map of her psyche, was found 'at the frontiers and juncture of body and psyche, of death and life' (Pontalis, 1981).

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It was because this pain was so strikingly absent in Josepha that I realized that she refused to encounter what might overwhelm her. Psychically, Josepha felt empty and dead, guilt and mourning being foreign to her repertoire of feelings. The physical counterpart was the numbing of the body, the total lack of physical pain which accompanied her terrible injuries. Josepha was quite proud of her ability to induce this numbness.

The first change occurred when Josepha allowed herself in analysis to encounter her pain through toothaches. This unassuageable pain was caused by pressure on a nerve; Josepha claimed that there were people who, faced with such pain, lost consciousness, took morphia, or committed suicide. She, herself, preferred to come to analysis instead. Here we both become aware of her courage to encounter an excruciating physical pain, which symbolized the revival of her psychic pain. Josepha attributes to me the power to alleviate the pain evoked by the treatment, the very pain whose purpose is to save her from the inner death to which she has committed herself.

Just as she had delayed seeking analytic treatment, Josepha deferred turning to the dentist. She projected her guilt upon him and claimed that he had been so impressed by her suffering that he had given her a piece of chocolate before operating on her tooth, like granting the last wish of a person condemned to death. Josepha is afraid that I might feel pity for her and lose objectivity, out of guilt and inability to withstand the pain which is revealed in analysis. Thus, the analytic 'operation' which is needed to revive the dead part of her is, simultaneously, a terrifying execution by means of which the feeling of pain is brought back into her life.

In the transference, Josepha assigns to me the role of the dentist who has to perform the tremendously difficult job of treating her tooth through the impaired opening of her mouth. The work on the rotten tooth is supposed to ease the pain caused by the pressure on the nerve, but the forcing of the mouth open is, in itself, an agonizing procedure. For Josepha, to 'open her mouth' in analysis, to put words and sentences together into a meaningful, coherent narrative, is felt as immensely threatening, since it ushers in the awareness of psychic reality and with it the depression which is linked with destruction and loss of good objects.

Josepha's further associations about the bad smell coming out of her mouth as a result of the rotten tooth bring us closer to her inner reality. The smell of decay reminds her of a foul corpse found at the entrance to her house. She feels quite sure that a dead cat or dog is lying there in one of the closets, which must be opened, so it can be discarded and the lobby freed of the stench. She is determined to find the 'corpse' inside herself, unaware that she herself might have been its executioner.

Phase III—The reconstruction of the trauma

Conquering her fears about 'looking back', Josepha begins to bring up some meaningful childhood memories which give us an idea about the atmosphere in which she grew up.

Josepha has two sisters, ten and nine years older than herself, who are also scientists. The sisters were mother's favourite children. Josepha has never succeeded in competing with her sisters for her mother's love. She has always felt in the role of Cinderella in their company, the special bond with father being a consolation for her. It was father who took care of her from early childhood, fulfilling her basic needs. The story transmitted to Josepha was that her being a girl was a big disappointment for father, who had wanted a son to bear his late father's name. During childhood and adolescence, Josepha and her father acted out the fantasy that she was father's boy; on this level of reality she faithfully answered to the name of his father, Joseph. At the age of 6, Josepha accompanied father to work on the farm. In the beginning, she was assigned easy tasks which soon became time-consuming and burdensome. Josepha was getting up before dawn to feed the chickens or do some other chores on the farm, while her sisters, who were 'mother's daughters', were considered the feminine type and were spared the hard labour. Josepha remembers her work with mixed feelings. At first she liked it—she could spend a lot of time with father; she was liked by the other labourers on the farm. Later, the long, tedious hours of physical labour, together with schoolwork, demanded a lot of strength from

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her. She remembers childhood as a story of exploitation, full of anger and bitterness. Josepha did her utmost to satisfy her father, who fulfilled both maternal and paternal roles—he sang lullabies to her, shortened her dresses, bought her intimate apparel, etc. He also told her stories about a remote past in another country, and about his longing for his own father who died shortly after he had left him.

In her father's stories, grandfather travelled frequently for business, while he waited for him to return. When Josepha grew up and went out with friends, she would return to find her father waiting for her at the intersection of the main road and the road to the farm. Josepha felt that her father was anxious to see her but, at the same time, expected to lose her, thus somehow repeating the experience with his own father.

During this period, Josepha was chronically late to her sessions (15–20 minutes). By being late, she acts out in the transference her omnipotent game with death and

revival. In this game, she fulfils the double role of the father/child who disappears, and then miraculously comes back to life. By acting the missing father, she tries to put me in the role of the helpless child who fearfully and angrily waits for his omnipotent parent to return; as my missing child, she attempts to make me feel the agony of a parent whose child has disappeared. Both father and child are miraculously brought back to life by her coming to the session.

Josepha describes her whole childhood as a game of hide-and-seek with death, connected to the father-child relationship. She illustrates this by morbid episodes in which fantasy and reality merge.

One of Josepha's favourite pastimes was to risk being shot by a neighbour. This man was irritated by the stray cats hovering around the farm. When he heard them mewling, he would pick up his gun and shoot them without hesitation. Josepha would sometimes hide behind bushes and 'miaow' in order to provoke him. The man would come out of his house cursing the cat and fire into the bushes, barely missing her.

We find here the theme of being killed by the loved/hated parent, which, later in analysis, we are able to understand as a reversal of her own death wishes towards him.

In the transference, Josepha dreads her destructive power and warns me against it. On the other hand, she projects upon me her own punitive superego, fearing my retaliation. In the therapeutic relationship, I am attacked for being insensitive to her pain, distant and 'too normal' to understand her. She does not let me speak, but cuts me off sharply, rejecting my interpretations as irrelevant. She is late in her payments, and attempts to pay her debt in small amounts over a long period of time. We understand the unconscious fantasy behind the wish to split the fee into insignificant fragments as chopping her analyst's value into worthless bits. In this way, she attempts to relate to me as to a part of her own devalued self.

The analysis of her murderous wishes towards me in the transference leads me to the revelation of the same wishes towards the paternal object. Josepha is finally able to share with me her deep conviction that her father's fatal heart illness was caused by her hatred and destructiveness. She connects his first heart attack, which occurred while she was still in high school, to the fact that he couldn't stand the rhythm of her work. 'He cursed me and said I was bringing him death', said Josepha, 'he dug his own grave'. When father was struck by a heart attack, Josepha's worst fantasies had been confirmed by reality. She did not allow herself to feel guilty, but projected her own murderous wishes upon her father—'he always waited for something terrible from me. Death was always there between us'.

Father's health deteriorated, and several years later he was close to death. He expressed the wish that Josepha, who by then was married, should have a child before he died. Josepha obeyed and became pregnant, the unconscious fantasy being that this would be 'father's child'. During this pregnancy her father died; Josepha has never really mourned him. Like her own father, she gave the girl her father's name, thus realizing the omnipotent fantasy of bringing him back to life.

Enquiring about the tragic accident which happened when her first daughter was 4 months old, I learned that it happened several days before the first anniversary of her father's death. Thus father's death and the death of the child bearing his name became inseparably linked. In

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her unconscious fantasies, Josepha had 'killed' father a second time. Josepha wishes for her own death, but feels a prisoner of life, carrying the burden of crime against father and child alike. She shares with me myriad magic omnipotent ideas which connect the 'murder' of the father with that of the child. She believes that, through the accident, father has taken revenge on her for her deeds against him; he waited for her with the angel of death behind him, attempting to strike her; inadvertently, he struck her child and left her alive, thus bringing upon her the ultimate punishment.

It becomes clear to me that Josepha uses magic omnipotent ideas in order to defend herself against feelings of mourning and guilt, which could have been overwhelming for her.

At this point in analysis, I begin to prepare Josepha for my forthcoming vacation. She reacts to our separation with a sharp memory from childhood. When she was 6 years old, her mother left her for a period of six months. Her mother travelled to the U.S. in order to visit her sister whom she had never met. Josepha felt abandoned by her mother and neglected by her father, who was very busy with the farm at that time. She stopped eating and lost so much weight that her life was in peril. Only her mother's return gradually helped her to recover.

In the transference, we attempt to work through how vital analysis is for Josepha and what a life-threatening quality she attributes to our separation.

Phase IV—The revival of feelings of pain and guilt

The aggressive and destructive reactions to my 'abandonment' appear only after the resumption of treatment, when she attempts to act out within the transference the traumatic events which have been re-activated by our separation.

First, Josepha launches a series of destructive attacks upon me as well as upon the therapeutic relationship. She makes a sudden decision to interrupt analysis for a period of one month, claiming that she has to 'concentrate her efforts' on a final examination. I try, in vain, to connect her wish to leave analysis to her feelings of anger and retaliation towards me, caused by our separation. She rejects my interpretation, interrupts analysis and 'disappears', not turning up for the next session. She arrives two weeks later, only after I 'searched' for her with several phone calls. Back in treatment, she explores the fact that she 'has never left analysis'; for her, analysis has continued all the time, and would have continued like this had I not called and brought reality into the situation. Actually, she has come to inform me that now, because of financial difficulties, she cannot continue her treatment on a regular basis. Instead of four times a week, she 'offers' to come to sessions twice a month.

Josepha stresses her 'inability to kill relationships' as the main reason for her wish to retain a 'thread' of analysis.

While listening to Josepha's proposal, I become aware of feelings of anger and frustration swelling inside me. I felt the deadly blow Josepha directs against me as well as against the therapeutic relationship. She wants to turn me into a 'thread', weak and inefficient, and to make analysis a meaningless fragment of her life.

I refrain, however, from acting upon the impulse and reject her 'offer'. Instead, I ask Josepha to come for several sessions so that we can better understand the meaning of her request. During the ensuing few sessions, I become aware of the importance of my 'staying alive' for her, which means avoiding falling into the trap of retaliation by 'murdering' the therapeutic relationship. The refusal to see her on her terms would mean disappearing from her life at a moment in which she attempts to 'kill' me in the role of her father-analyst, playing thus into her omnipotent fantasy of being a murderess. A fragment from Josepha's words illustrates this: 'I've noticed this book you have on your shelf—The Brothers Karamazov, this is before Crime and Punishment. Somebody committed parricide, but this is true about all sons, isn't it? Who is the person who has never wanted to kill his father?' Only later in analysis are we able to connect her aggressive act against me to the abandonment of the other primary love object (her mother) in her childhood.

The inquiry into the unconscious wishes and fantasies behind her special request brings us to the understanding of its symbolic meaning. We connect the period of four months, during which she asks to see me sporadically, to the age of her baby when killed in the car accident. We find

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that she intends to come back to analysis on the fatal week of the month in which she had lost her father and her baby.

I realize that Josepha, in the role of the child, has to come back to analysis and find that I am there for her, alive and well, in spite of her efforts to destroy me.

I agree, therefore, to see her sporadically for the next four months, at which point we are supposed to return to analysis on a regular basis. For the first time, Josepha is able to express feelings of gratitude, experiencing my acceptance of her request with great relief.

Josepha resumes regular analysis on the appointed date. There is a change in her attitude towards me and towards analysis and she expresses it in the following way: 'Today when I came to you, I saw a funny advertisement on a billboard. Its title was—I got lost. It was about a limping puppy, whose owners took her to get X-rayed and then it got lost. A terrible story. Whoever finds a puppy with crooked legs, like mine, should help her to come back'. Josepha is able now to accept the realistic boundaries of time and payments. During the following year we attempt, anew, to work through her aggressive wishes towards her father in the light of the transference relationship. Josepha begins to differentiate between the fantasy of father punishing her by killing her child and the reality of the tragic accident. She does not believe any more that it

was his retaliation for what she did to him. 'This was only a fantasy', she explains to me.

Her crippling defences are giving way to feelings of mourning and guilt. For the first time, Josepha is able to cry. She mourns her lost baby, relating to it as a lost part of her own self. She refers to her love towards her new daughter and attempts to disconnect the live child from the missing father: 'This is a new life, a new story', she says.

We attempt to understand the feelings of emptiness and psychic numbness which she complained about at the beginning of analysis. She is able now to connect the feeling of being abandoned by me to her painful memories about her mother.

Josepha had been conceived and born in special circumstances. When the Second World War ended, mother heard rumours that her relatives (mother, brothers and their families) had perished in concentration camps. She became very depressed and reacted somatically (with terrible headaches) as well as with feelings of depersonalization and derealization. During this year, she became pregnant with Josepha and, in contrast to previous abortions, she decided to bear this child.

Josepha was told that her mother's physical and mental state had deteriorated markedly after her birth.

In analysis, Josepha attempts to explore 'the big hole' she had perceived in herself from an early age. She links this to what she felt to be mother's lack of interest in her mere survival. She had experienced herself as non-existent (a hole) for mother, who was then very preoccupied with the death of her relatives. Mother felt especially guilty towards her own mother who, she thought, had been abandoned by all her children to be murdered by the Nazis.

When Josepha was 6, her mother was visited by a woman from her hometown and informed about the fate of her relatives. She learned that her brothers and their families had, indeed, perished in concentration camps, but that her mother had died peacefully of old age before the German invasion.

This information led Josepha's mother to decide to leave her family for half a year and travel to the U.S. to meet her older sister, the only other survivor of the family. Josepha stayed alone with father who was very busy with the farm. During this period she stopped eating, she sometimes slipped out of the house and hid during mealtimes, but no one looked for her. We understand now her 'hiding' from me when she 'disappeared' from analysis, and her manipulating me into searching for her. Josepha is able to realize that she links food, survival and analysis into one vital knot.

Josepha attempts to work through her relationship with the internal maternal object. She describes mother's personality as fragmented. She relates to three different images of mother, calling each by a different name. The first image is of a woman who caters to normality, for whom the outside world is very important. This mother is experienced by Josepha as coercive and false, pushing her towards 'being like the others'. In the transference, this image has been projected upon me at the beginning of therapy.

The 'second' mother is the unpredictable, insane one who adheres to no rules. Josepha confesses that many times in the past she thought that under the facade of normality, I am 'wild' and unruly. Mother has never accepted the loss of her relatives, and believed in their revival; a belief she tried to convey to her children. Similarly, Josepha perceived me as struggling to convince her that she is not dead, but is able to feel again.

The most painful relationship for Josepha was the one with mother as a stranger (whom Josepha named 'she'), a wasteland devoid of feelings. Josepha describes a woman she has recently seen stealing food from a restaurant—crazy, old, with a big hole on the side of her head'. 'This woman could have been my mother', she says, 'I am she'. This was the very 'hole' which she had introjected and which she once believed could not be filled.

In the transference, Josepha is aware of her longing to fill the void in her heart with feelings offered to her in analysis. And in her words: 'I thought you were wasting your time with me. I felt empty, totally empty, a blank page. I even lack imagination. Empty people need someone to throw something into their emptiness',

We begin to work through the guilt connected to the unconscious fantasy of destroying mother by coming into the world. Josepha is grateful to me not only for surviving her aggression, but for allowing her to be born emotionally in analysis, without feeling that she injures me.

The theme of being reborn recurs in this period in her dreams. A typical dream is the following:

Josepha slides down a hill towards a lake with blue waters, her mother sitting behind her. Down on the lake she gives birth to a child; then she emerges from the water with the baby.

We connect this dream to Josepha's wish to fill the 'void' in herself by giving birth to the child aspect within herself in analysis. Josepha refers to her daughter as representing this newly-born aspect of herself. She describes her as pretty and intelligent, with very well developed verbal skills. In the transference, I point out the change in her manner of communicating with me. We are both aware that Josepha has used the long journey in analysis to find and unlock the gate to her imprisoned feelings.

DISCUSSION

I would like to explore here: (a) The phenomenon of psychic pain owing to object loss. (b) The inability of the sufferer to be in touch with her pain. (c) The restoration of the capacity to feel pain and guilt accompanying re-integration as a result of the emotional experience in analysis.

(a) Psychic pain owing to object loss

Freud considers psychic pain to be a phenomenon that parallels physical pain. He outlines a theory of pain in the 'Project for a scientific psychology' (Freud, 1895) and in 'Inhibitions, symptoms and anxiety' (Freud, 1926, Addendum C). In the 'Project', Freud defines pain as the consequence of a breach in the protective shield.

Freud also considers psychic pain to be a reaction to the loss of the object and connects it to anxiety. He believes that in psychic, as well as in physical pain economic conditions are the same: the cathexis of longing concentrated upon the lost object (anxiety) is similar to the cathexis focused upon an injured part of the body (pain). The continuous nature of the cathectic process and the impossibility of inhibiting it produce a similar state of mental helplessness. Thus, we can easily understand the painful character of object loss (Freud, 1926, Addendum C).

Grinberg (1964) also refers to the connexion between physical and psychic pain. He believes that if pain appears in any mourning situation owing to object loss, it is because it produces an experience that in the unconscious fantasy means an attack upon the ego (in particular, upon the body ego, which brings back the birth trauma situation); this attack provokes physical pain which has been, in turn, incorporated as psychic pain.

Joffe & Sandler (1965) point out an additional aspect of psychic pain connected to object loss. They consider psychic pain to be a discrepancy between the actual state of the self on the one hand, and an ideal state of well-being on the other. When a love object is lost, we not only have the loss of the object in its own right, but also the loss of the object-complementary aspect of the self and the affective state of well-being

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that is intimately bound up with it. In such a state of object loss, the affective value cathexis of the object is greatly increased because it is the key to the re-attainment of the lost state of the self.

Pontalis (1981) also sees psychic pain as being connected to object loss. Pain stems from the fact that the object is irremediably lost but eternally maintained: 'Where there is pain, it is the absent, lost object that is present; it is the actual, present object that is absent'.

(b) The inability of the sufferer to be in touch with her pain

In the case described here, the patient used psychic numbing as a defence against unbearable feelings of pain and guilt. These feelings stemmed from situations where actual traumas have been associated with an underlying fantasy of hatred and destructiveness. This impaired the work of mourning and led to turning the aggression against the self.

Greenacre (1967) has pointed out that, in situations where actual traumatic experiences have been associated with an underlying fantasy, the memory trace that remains—the imprint—is more intense and the tendency to fixation may be greater than in instances where experiences have been bland and incidental. This is

why father's illness and death, which were perceived by her as the realization of her omnipotent destructive fantasies, brought about unbearable feelings of pain and guilt. Since she was not able to complete her mourning, Josepha not only attempted to give birth to father through her child, but became, herself, father (**Freud, 1917**). Following this, the aggressive wish towards father was deflected towards herself.

Josepha's incorporation of mother was expressed through her fragmented self, rejection of reality and preoccupation with death. The 'void' in mother's psychic sphere became her own. (This 'void' was probably also the expression of an anaclitic depression caused by the mother's incapacity for holding during the first year of Josepha's life.) Aggression towards the mother was deflected towards the self and was expressed by the wish to starve herself to death in her absence.

Another mechanism used by Josepha as a substitute for mourning' was the phenomenon of 'concretization' (**Bergmann, 1982**); (**Kogan, 1989a**) through acting out. This phenomenon refers to the realization of fantasies connected to the traumatic past of the parents. Concretization differs from the Sandler's concept of 'actualization' (Sandler, A.-M. & Sandler, J., 1989), which they use to explain when a person causes another, for instance the analyst, to act in a certain way rather than expressing a wish in words. The concept of concretization includes actualization, but is broader in scope. Although all persons may be inclined to act in favour of verbalization in times of stress, traumatization gives the concretizing need a particular urgency, as we have seen in Josepha's case.

Josepha lived out her fantasies, grafted them upon the environment, and wove them into current reality. These contained, unconsciously expressed, themes of the original trauma: the act of bestowing her late father's name on her child symbolized the reanimation of her father, since, by being given father's name, the child became father (**Gampel, 1986**); the tragic accident symbolized the deanimation of father perpetuated upon her own body and that of her child. We can see Josepha's acts as her attempt to enact her parent's unconscious conflicts and fantasies connected to their own survival guilt. The concretization of her expressive wishes points to a confusion between self and object, past and present, fantasy and reality.

(c) The restoration of the capacity to feel pain and guilt

The patient was not able to bear feelings of pain and guilt because they were associated with her hate and destructive wishes. She connected the loss of her baby to a series of events which appeared to her to be the realization of her aggressive wishes towards primary objects throughout her life.

Freud (**1920**) referred to the polarity between love and hate in object-love, connecting it to 'the great opposition between the life and death instinct'. Riviere (**1955**) continues this thought, adding that the loss and absence of loved objects can be equivalent in our unconscious to lack of

love, hostility, hate, even malevolence, in them to us and in us to them. She expresses this in the following poetic way: 'Deep in the dynamic reservoir of instinctual forces, in the id, Eros the life force and Thanatos the death force are in never-ending strife, one always aiming at ascendancy over the other. Whether in absence, or in death, or in other situations of estrangement, the intolerable fear rises that it is our own deadly hate which brings about the loss; and the greater is the love, the more hate is feared' (p. 364).

Thus it is Josepha's love and need for father which made her perceive herself as a murderess. This became traumatic when reality gave credit to those fantasies by means of the tragic accident in which her child was killed. Kris (1956) considers the further course of life as the factor which determines which experience may gain significance as a traumatic one. The trauma made Josepha feel that the only punishment fit for her murderous deed was her own self-destruction.

Josepha felt guilty towards mother from the beginning of life. Her mere existence was reason for guilt, since her birth caused the deterioration in mother's fragile health. Her guilt feelings were reinforced at the age of 6, by mother's long absence. Her unconscious aggressive wish towards mother was fulfilled by mother's disappearance, which was experienced by Josepha as death. Starving to death was the punishment that she inflicted on herself.

Thus both father's illness and subsequent death and mother's abandonment were perceived by Josepha as the realization of her aggressive wishes, reaffirming her belief in her destructive forces and her search for punishment.

During the course of analysis, unconscious feelings of pain and guilt were re-activated in the transference. The patient's reaction was an aggressive attack on the therapeutic relationship, launched through an episode of acting out, **1** By trying to destroy the therapeutic relationship, the patient attempted to 'murder' the father-analyst, as well as to destroy the mother-analyst for abandoning her (feelings which were reactivated by our separation), and thus to act out her destructive fantasies within the transference.

By surviving her fantasized destruction and not letting her ruin the therapeutic relationship, the analyst did not play into her omnipotent fantasy of being a murderess. As a result of this experience, the patient's omnipotence diminished and her perception of herself became less dangerous and less destructive; she began to differentiate between reality and her infantile aggressive wishes and fantasies (Kogan, 1989b). Feelings of pain and guilt became bearable by their being dissociated from hate and destructive wishes (Winnicott, 1964). Depression could be faced, therefore, without overwhelming feelings of anxiety and could enable some 'real' adaptations' (Balint, 1952).

Winnicott (1971) referred to this kind of emotional experience in analysis in the following way: 'In psychoanalytic practice, the positive changes that come about in this area can be profound. They do not depend on interpretative work. They depend

on the analyst's survival of the attack, which involves and includes the idea of the absence of a quality change to retaliation' (p. 91).

For this patient, psychic numbing was a defence used by the ego to preserve the self from a mental pain that threatened to annihilate it. The task of analysis was, therefore, to enable the ego to relax its omnipotent control systems so that the capacity to feel pain could be restored without the threat of annihilation.

SUMMARY

This paper explored the restoration of the capacity to feel pain and guilt as a result of the emotional experience in analysis. This was illustrated by the first part of an analysis of a woman who lost her four-month-old baby in a car accident. Analysis revealed in this case a fragmented self unable to deal with unbearable feelings of pain and guilt which threatened to annihilate it. She connected the accident to a series of events which appeared to her to be the realization of her aggressive wishes towards primary objects throughout her life. The perception of the impairment and loss of loved

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objects as due to her destructiveness led to the inability to differentiate self from object, the impairment in the work of mourning, and aggression turned against the self. The analyst's survival of the destructive attack without retaliation enabled the differentiation, a better adaptation to reality and the restoration of the capacity to feel pain and guilt.

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¹ We can conceive of this behaviour also as 'acting in', a term which refers to acting out within the treatment situation (Zeligs, 1957); (Rosen 1965); (Eidelberg, 1968).

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