

GHOSTS

IN THE CONSULTING ROOM

*Echoes of Trauma in
Psychoanalysis*

Edited by
ADRIENNE HARRIS,
MARGERY KALB *and*
SUSAN KLEBANOFF



Ghosts in the Consulting Room

Ghosts in the Consulting Room: Echoes of trauma in psychoanalysis delves into the overwhelming, often unmetabolizable feelings related to mourning. The book uses clinical examples of people living in a state of liminality or ongoing melancholia. The authors reflect on the challenges of learning to move forward and embrace life over time, while acknowledging, witnessing, and working through the emotional scars of the past.

Bringing together a collection of clinical and theoretical papers, *Ghosts in the Consulting Room* features accounts of the unpredictable effects of trauma that emerge within clinical work, often unexpectedly, in ways that surprise both patient and therapist. In the book, distinguished psychoanalysts examine how to work with a variety of ‘ghosts’, as they manifest in transference and countertransference, in work with children and adults, in institutional settings, and even in the very founders and foundations of the field of psychoanalysis itself. They explore the dilemma of how to process loss when it is unspeakable and unknowable, often manifesting in silence or gaps in knowledge, and living in strange relations to time and space.

This book will be of interest to psychotherapists and psychoanalysts, as well as to social workers, family therapists, psychologists, and psychiatrists. It will appeal to those specializing in bereavement and trauma and, on a broader level, to sociologists and historians interested in understanding means of coping with loss and grief on both an individual and larger-scale basis.

Adrienne Harris is on the faculty and is a supervisor at the NYU Post-doctoral Program in Psychotherapy and Psychoanalysis. She published *Gender as Soft Assembly* in 2005. She writes about gender and development, about analytic subjectivity, about ghosts, and about the analysts developing and writing around the period of the First World War.

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1 Greenberg, J. & Mitchell, S. (1983). *Object relations in psychoanalytic theory*. Cambridge, MA: Harvard University Press.

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Ghosts in the Consulting Room

Echoes of trauma in
psychoanalysis

Edited by Adrienne Harris,
Margery Kalb, and
Susan Klebanoff

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Contents

<i>Author biographies</i>	ix
Introduction	1
ADRIENNE HARRIS, MARGERY KALB, AND SUSAN KLEBANOFF	
Clinical	17
1 “I always wished I could stop time”: an adolescent girl, unresolved mourning, and the haunted third	19
SUSAN KLEBANOFF	
2 Ghostly intrusions: unformulated trauma and its transformation in the therapeutic dyad	36
HEATHER FERGUSON	
3 Travel fever: transgenerational trauma and witnessing in analyst and analysand	52
MICHAEL J. FELDMAN	
4 Shadows, ghosts, and Chimaeras: on some early modes of handling psycho-genetic heritage	76
JOSHUA DURBAN	
5 Vaginal ghosts: memorializing the disappeared	97
SUE GRAND	
Community & culture	113
6 Ghosts in psychoanalysis	115
ADRIENNE HARRIS, MICHAEL S. ROTH, JACK DRESCHER, DANIEL G. BUTLER, DOUGLAS KIRSNER, AND DON TROISE	

7	Empty arms and secret shames: reverberations of relational trauma in the NICU	139
	SUSAN KRAEMER AND ZINA STEINBERG	
8	Mourning in the hollows of architecture and psychoanalysis	156
	MARIA MCVARISH AND JULIE LEAVITT	
9	First kiss, last word: stairway to heaven	181
	ADRIENNE HARRIS	
	<i>Afterword</i>	199
	SAM GERSON	
	<i>Index</i>	204

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Introduction

*Adrienne Harris, Margery Kalb, and
Susan Klebanoff*

This book and its companion, edited collections of essays on “ghostliness” and demonic presences in psychoanalytic and cultural life, emerged from the collective work of a group of analysts. Both collaboratively and individually, we were struck by the way uncanny and spectral presence, or absent presence, entered minds, bodies, and consulting rooms. The attention to ghosts did not stop just in the clinical dyad. We found ghosts haunting our theories, our practices, and our training institutes. We found them in many interstices of cultural and social life, too. There is no dearth of spectral presences. In addition to familial, intrapsychic, and relational ghosts, ghosts emerge from war and catastrophes that cannot easily be assimilated in the surrounding cultures and communities or in the minds and bodies of individuals.

Ghosts emerge in and as unwitnessed silences, and surely, from actual deaths. The body may be the absorber and also the communicator of ghosts. We draw on the term “ghosts” to capture the sense of objects that are neither internal nor external solely, that may disturb the atmosphere, the soma, the mind, temporality, and the surrounding fields.

We came to this topic unexpectedly. Or should we say, uncannily. We,¹ are seven psychoanalysts, different in backgrounds and in formation, who came together to discuss clinical work. The group formed out of the supervisory experience of one member and was made up of people new to each other, if not new to Adrienne Harris who formed the group.

We began a group process by reading Sam Gerson’s “When the Third is Dead,” (2009) his prize-winning essay on witnessing and its vicissitudes. The paper focuses on the oddness whereby historic injuries accrue around, between, and within persons as “present absences.” Gerson was concerned with what happens culturally and personally when there is no registration of a catastrophe that has happened, is happening, seems always already to be happening. He was interested in bearing witness and he was also interested

in what happened when such witnessing failed, when registration becomes beyond the capacity of an individual or the collective. He has written afterwords to both books, a mark for us of expanding influence on how we understand witnessing loss and its absence or failure or destruction.

Gerson deploys an evocative term for this lack of registration, “present absences.” This concept appears, too, in the work of Bollas (1994), Caruth (1996), and Ogden (1992). The phrase has been a guiding force in our group work. “Present absences” refer to just that—absences that can be emotionally, viscerally, or even unconsciously felt in the patient, in the analyst, and in their interaction. These present absences grow from overwhelming but under-processed feelings about loss (frequently, though not necessarily, an actual death), and often emerge in gaps in factual information, narrative or affect—things mysteriously missing. We can think of this un-knowledge as a perpetual struggle between mourning and melancholia (Freud, 1917). Something is under wraps, a secret too dangerous to be disturbed—and thus oftentimes discovered in the enacted sphere of the transference/countertransference matrix.

Reading Gerson was a way to begin a group process. This was thought of just in a rather instrumental way. We picked a common task, thinking that such common work binds people, but we must hold and ponder the question of uncanny prescience in making such a transformative choice.

The Gerson paper stimulated many interesting associations and clinical concerns in the group and as the cases began to pile up, so too did bodies, losses—conscious and unconscious—deep uncertainties, intergenerational transmissions of trauma and, we all came to agree, ghosts. And, in a way that certainly marked the group and shaped our collective and internal growth, there have been, over six years, four staggeringly difficult deaths experienced by members in the group, and the demands of serious illnesses carried privately and also borne by everyone. We have also had two weddings, joyous occasions carrying their own ghosts as well.

We offer these personal details because we suspect that they are not really very atypical. Part of the work on analytic subjectivity has been to comprehend the complexity of the interrelationship of the use of the analytic instrument and the demands of daily life (Deutsch, 2014; Harris and Sinsheimer, 2008). A commitment to a field, to a bi-personal unconscious and conscious transmission across the analytic dyad requires that we widen our view as to what enters and affects the analytic process. In the processing of the personal and the clinical, the theoretical and the historical, we were also able to, and really needed to, include our own histories

and countertransferences in our group process and in our individual clinical work.

Our hope is that in the clinical work we did on ghostly presences in treatments, and the writing it is stimulating, we can find ways to talk and think about the manner we and patients are haunted, and how these hauntings might be imagined and transformed. How do such possessions hijack lives and often treatments? Where are there demons? Are there good ghosts? Even as the presence of ghosts has historically signified the presence of unmetabolizable loss, are there limits to mourning? Is mourning, to some extent, an idealization and specters, whether grim or wishful, inevitable legacies of loss.

As the group's project has evolved to include an expanded group of authors, we ask and have been asked. Why ghosts? Why demons? Why not internal objects, why not dissociation or disavowal? Why do we need this new/old perhaps melodramatic language? In evolving answers to these questions, are we struggling towards a new conception that lives liminally in different sectors of clinical life, cultural thought, and practices?

Theorists have thought of these phenomena differently: intergenerational transmission of trauma (Davoine, 2007; Davoine and Gaudilliere, 2004), telescoping of generations (Faimberg, 2004), witnessing and Thirdness (Benjamin, 2004; Gerson, 2009), encrypted identifications (Abraham and Torok, 1994), or radioactive identifications (Gampel, 1992; Puget, 1989, 2002). Freud (1919), Loewald (1960), and more contemporaneously Reis (2011) and Grand (2010) have written about the impactful presence of ghosts, vampires, and other kinds of haunting objects that enter the analytic field.

Working on ghosts and demons required an expansion of vocabulary and imagination. There are ghosts that protect, that hold us hostage; ghosts that we protect and cannot separate from (Baranger, and Baranger, 2009). But there is a murderous side to this; demons and vampires, dybbuks, and monstrous and grotesque forms that often represent the impossibility of containing and metabolizing loss and trauma. The body and the mind can be the site of attack and invasion. Eros and Thanatos can intermingle and disturb individuals and cultures.

In this book, we hope to explore the actual and psychic legacy of loss, of violence, phobic hatreds, and migrations that bear so heavily on the lives, minds, and bodies of contemporary patients. In tracking the present-absence and absent-presence of ghosts and various forms of hauntings within psychoanalytic treatments, we are tracking the power of hidden and often shame-laden histories to enter and shape the clinical work.

You could think of the ghost world as the place to manage excess, to find a skin of strangeness and uncertainty in which to imbed things hard to bear or hard to fathom. This is another melancholy solution but rich and engaging also. In some of the chapters, particularly the clinical ones, we have found ourselves in deep engagement with the differences and meanings of melancholy and mourning, ultimately wanting to expand the space and scope and duration of melancholy, while not avoiding or reifying its pathological aspects.

Harris (2013) wrote about Bion's well-known ideas about death in life in the context of his advice to analysts to work without memory or desire.

This is Bion's famous instruction to the analyst: work in the present moment, without reference to history and desire. (Bion, 1967, p. 612)

As a sentence, an invocation, a call, this sentence is charming, evocative, interesting, putting us in touch with the foundational Freudian injunction of "evenly hovering attention." Yet, we might remember Racker's reworking of this injunction as a call to meditative states, states of altered consciousness. And we also can evoke now Ferro's idea of the task of analysis as one of inducing dreaming. It is a goal of analytic work to arrive at primary process. All these ideas seem to be exceedingly useful injunctions to analysts, pushing us to be attuned to bodies, minds, affects and to try (never fully successfully) to entertain experiences "outside the sentence" (Barthes, 1975).

But let us introduce another Bion quote to add to the complexity of Bion's relationship to temporality. To wit:

I died on August 7th, 1917, on the Amiens-Roye Road. (Bion 1982, p. 265.)

He meant it.

So, Bion, in every waking minute, including the careful unfolding minutes of analytic sessions, is both changing, remembering, and still walking on that road, where his friend is still, in every present minute, being killed and he (Bion) not moving, or saving, or helping. And so forever, walking and dying on that road, both men. And, if so, we might say that the living man (Bion) is actually then conducting analyses from what Françoise Davoine (2007) refers to as "the bridge world," a space between the living and the dead" (Harris, 2013).

Bion was haunted, surely, but his haunting underwrote his vocation. Looked at from this biographical perspective, then, working with no history and no future, is actually at base the work of a traumatized, ghost-riddled analyst, a person working with time suspended, usefully and tragically. This might be so for all of us, even if our traumas are significantly less acute than Bion's. Loewald (1989) too, talks about this and so we might include him in this account of the impact of trauma on theory building, wondering what was carried personally for him, from the death of his father and the bereavement of his mother, in the injunction to turn a ghost into an ancestor.

Here is another Bion notion. Patients and analysts are working always at the edge of the abyss, the terror at the moments of transition. (Goldberg, 2008). James Grotstein, Bion's analysand, thinks that Bion remained stymied, stuck, hopelessly lost in the wake of the death of that beloved friend in 1917. Grotstein ends his discussion of Bion's memoir with this comment:

Someone once said that Bion was "miles behind his face." I take this to mean that he was withdrawn, lonely, and unreached. (Grotstein, 1998, p. 613)

If you are a psychoanalyst caught up in this way of seeing the task or problem of analysis, history is necessary but history is also an albatross. Sometimes the ghostliness seems embodied in spectral presences, in figures actually dead or missing. Fascinating psychic processes underlie the deeply committed attempts patients make to keep the dead alive, close down space, or alternatively keep it open and ready for habitation. Killing and saving seem often too close to each other.

Rey (1988) has an intriguing way of thinking about this: the task of the analysand is to have the analyst cure the damaged objects he/she brings to the work. And, as Harris (2009) has argued, in clinical impasses, we often see how the analyst similarly arrives in the work to cure old injuries, bury the undead, undertake the final repair of history.

The task of repair of internal objects, laced into our countertransferences, is the source and wellspring of powerful sublimations and transformations into work ethics and skill. But there remains in anyone conducting this work, the residue of uneasy spirits and unfixed figures. Part of the shared task of analytic work is the transformation of melancholy into mourning,

an always partially incomplete task. Many chapters in this book attest to the unending exhausting task of mourning. Margaret Little's (1985) pronouncement seems apt, "Mourning is for life."

It was in considering our clinical work and the complexity of encryption that we found it necessary to consider the profound role of the body and embodiment. In the current theoretical work on reconsidering levels of representation and registration of experience (Botella and Botella, 2005; Levine, Reed, and Scarfone, 2013; Stern, 2015) we are reaching for an account of what the body carries and communicates that builds on different models of mind and body, more integrated ideas of mental and bodily life and the complex structures in which experience is carried. As variable phenomena as body image, somatic illnesses, affect storms, gait, posture, the set of the face and gaze, the experience of weather, of space and time, are all saturated in meaning. Indeed, each and every one of our clinical chapters encompasses some form of unstable somatic dimension. We have found it useful to see these phenomena as ghostly, spectral, and ambiguous.

Although we began in the consulting room we found we could not entirely stay there. In many traditional cultures, ghosts and the spirit world can live both easily and strangely within daily life. Looking back now, it is fascinating to realize that the popular culture following the First World War seemed full of ghosts and vampires, creatures popping out of movies and television and popular novels. Was this popular depiction an attempt to contain or perhaps express the cultural level of melancholy and mourning? Did these effects and influence come from the past (slavery, wars, historical trauma, gulags) or, as some might say, from the future already present (climate change, terrorism, economic pain)?

In thinking of the long shadow of war (in both familial and cultural intergenerational transmission of trauma), we encountered some other interesting material on ghosts. Ghosts, sightings, séances, attempting to reach and speak to the dead, appear very powerfully in Western Culture in the wake of loss on a mass scale. The Civil War, in the United States, particularly the South (see Gilpin, 2009), and World War I in Europe, brought of an astonishing outbreak on spiritism. Visions of the dead and sightings of religious figures haunted battlefields and post war settings. Freud and Ferenczi were engaged in discussions about the occult and "thought transference," over quite a long period. Their discussions were a mix of fascination, skepticism, and anxiety (see Freud-Ferenczi correspondence, Vol 1 Brabant, Falzeder and Giampieri-Deutsch 1993; Meszaros, 2014).

We are in the complex domain of unconscious communication. But words like uncanny and haunted are required, the words and language of object relations and internal objects seem too orderly for the experiences the authors in these books are describing.

Despite these cautionary notes, there is the triumph when narrative enters treatment, when fragments and chaos are ordered through naming and genealogy. This has been Davoine and Gaudilliere's (2004) perspective, seeing the long hand of history. It takes a half-century, they felt, to process a war. Unprocessed historical trauma was a prime engine of psychotic functioning. So there is, in the permanent tasks of mourning, both triumph and despair and this must be parsed and held by analyst for the patient and for him/herself.

Consistent with Davoine's thinking, some fifty-plus years after World War II, we are absolutely deluged with memoirs and novels, movies and plays, dances and operas, which are attempting to work through the emotional/psychological aftermath of the Holocaust. Some of these artistic projects have been initiated by second- and third-generation survivors in an effort to bear witness to their parents' and grandparents' previously unmetabolized wartime experiences. Some stories take the form of realistic historically accurate retelling; others are more intuitive and sensory near, like the French film *Le Secret*. In this movie, a boy is born after the war to survivor parents who had lost a son but agreed never to speak about the experience to anyone. Nevertheless, their post-war child is haunted by the spectral presence of his dead brother. Only when his parents finally reveal their loss can their child let go of his brother's ghost, which he had been unconsciously holding for his parents. We wonder if this outpouring of trauma-based artistic endeavours has both a containing and a retraumatizing effect in its conscious effort to put into narrative what is often beyond explaining with words.

We think here of Maya Lin's Vietnam war memorial in Washington DC, with its miles of engraved names of all who were killed. Or the 9/11 memorial in NYC which similarly offers up the engraved names of each of the 2,977 victims on the stone rim surrounding the dramatic multilayered descending memory pools. Perhaps our need for these memorials intensifies as our media-fueled barrage of trauma—absent much space for genuine containment or witnessing—intensifies. In all likelihood, the presence of these memorials does help to counteract absence (Slochower, 2011). But while such public memorials, and the rituals that surround them,

are useful, they cannot substitute, says Gaines (1997), for the necessary language and affect accessed through private, internal, personal mourning.

Our attention was drawn both to the wider and larger cultures but also to something closer to home. Ghosts in psychoanalysis, in our profession, our institutes and our theories signify unburied, unmourned losses. In 2014 we read a news story, front page in the *New York Times*, about the discovery of 55,000 psychiatric patients in unmarked graves in New York. “In New York, more than 55,000 deceased psychiatric patients lie in unmarked graves. Near the former Willard Asylum, a small committee has spent the past three years fighting to memorialize the dead” (Bracken, 2014).

What kind of professional PTSD in our field allowed this to happen, so silently, over a period of so many years? We found ourselves, too, struggling and too often failing to be able to hold on to the specters and fearful shadows that haunt very many psychoanalytic institutes in regard to boundary violations and other moral matters.

The more open we were to looking for ghosts, the more we found them, lurking inside both our patients and ourselves, inside our personal and historical pasts, our internal and external spaces and the architecture of our lives. Ghosts and their ilk (vampires, demons, etc.) are widespread in contemporary popular culture. The television series *Lost*, for example, involves a constant oscillation between fantasy and reality, with none of the containing real-world limits of time and space. People die and reappear and ghosts wander about with an alternating comforting and alarming presence, as they simultaneously revisit their pasts, which are filled with dark secrets and unresolved trauma. Numerous other television series also explore similar experiences of people traumatically gone missing, and the psychological impact on those left behind.

We wonder why contemporary culture seems, right now, particularly strongly pulled toward the world of ghosts, of haunting? Could it be that we are living in a time of greater general uncertainty and chaos in the world—socially, economically, around the globe? Could it be the accumulated mass traumas and losses of modern day warfare, in concert with the fact that these events are no longer reported in a contained way on the 6 o’clock news and in the morning newspaper, but instead broadcast incessantly in excruciating, lurid detail on 24-hour news channels and across countless portholes on the internet all day and night long? It is harder—for better and worse—to shut out what is going on in the world. But it is also harder to metabolize the abundant and raw exposure.