Critical thinking, creativity, and contemporary issues in psychoanalytic practice and theory.

c r i t i c a

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c r i t i c a

The Newsletter of the Psychoanalytic Institute of Northern California

Critica Committee

Class, Social Inequity and PINC

Bruce Weitzman,
Psy.D., M.F.T.

I am not prone to procrastination. However, writing this editorial for the newsletter—my first as President of PINC—has been a continuous process of avoidance. With all that is going on in the world—COVID, Black Lives Matter, the environmental impact of global warming, this country's corrupt and inadequate leadership, the looming election—trying to hone in on a single topic has been quite difficult. The times in which we are living are urgent ones, calling upon each of us to plumb previously untapped resources. These times, however, have also brought into sharp relief a gross inequity in the way resources in our society are distributed.

Little about this year has been predictable. However, the ability of individuals and families to cope with uncertainty has been highly dependent on their financial resources. Many of my more affluent patients escaped the most traumatic immediate impacts of COVID by holding up in rural second homes or by renting Airbnb's in vineyard, beach, and mountain communities. Few have been furloughed or hard hit by job loss. Most adapted easily to working from home. As back-to-school season approached, those with children organized childcare or even private instruction to solve the challenges of home schooling.

By contrast, 13.6 million people remain unemployed in the U.S (Bureau of Labor Statistics, Sept. 4, 2020). More

than 5000 Bay Area business were forced to close, 2000 of which have been shuttered permanently (SF Chronicle, Aug. 8, 2020). Among my less affluent patients, some are struggling to make rent. Others are exhausting what little savings they have. Those lucky enough to work must simultaneously juggle employment and childcare responsibilities. Those without jobs and savings must cope with the threat of eventual eviction.

The CDC has noted that social inequities have put many people at greater risk of getting sick and dying from COVID (CDC, July 24, 2020). A recent study found that poorer counties—notably, those with substantially Black and Latino populations—had COVID infection rates of nearly 8 times that of wealthier counties and a morbidity rate that is more than 9 times greater (JAMA, July 28, 2020). Such studies highlight the additional burdens placed on these communities, including subsistence-level jobs, higher density living situations, inadequate access to healthcare, and lack of savings to cover essential needs and emergencies.

Class and social inequities are important but long-avoided topics that should be taken up by psychoanalysis and our institute. Despite our significant investment in launching a Community Psychoanalysis Training Track—a remarkable feat for any psychoanalytic institute—psychoanalysts seem to mostly cater to wealthier people, who can afford high-frequency, long-duration treatments. This is not to say that we do not see the occasional low-fee case. Some of us may treat mostly lower fee patients. However, the current model of psychoanalysis demands a tremendous amount financially—an amount that may be infeasible for most people. We perennially speak about the risk of psychoanalysis losing its significance. Affordability may be our most formidable challenge.

The problem of affordability extends to training our candidates. My own training, completed five years ago, cost in excess of $200,000.

I imagine that number would be even greater today. Only a very small percentage of this—about 7%—was tuition. No surprise, the bulk of the cost had to do with my personal analysis and supervisions. The high cost of training is burdensome to our candidates and prohibitive for many clinicians in our community. Some candidates go into debt to complete their training. A number of clinicians say that they would like to do training but inevitably conclude that this is beyond their financial reach.

If we hope to increase the relevance (viability, availability, value) of psychoanalysis, we will need to work on issues of affordability—both for analysands and potential candidates. I do not have a simple answer to this issue. However, the current economics of psychoanalysis—both treatment and training—ultimately determines the demographics of our membership. If we want to build a more diverse institute, we must attend to these economics. This touches on the question of who can afford training, and therefore, the inherent whiteness of our membership. By whiteness, I am referring to the historical and ongoing institutional structure, elitism, and exclusivity inherent to psychoanalytic training and, perhaps, to psychoanalysis itself.

Melanie Suchet, in her eye-opening paper, Unraveling Whiteness (2007), defined whiteness as "that which is not seen and not named. It is present everywhere but absent from discussion. It is the silent norm … an ideology, a system of beliefs, policies and practices that enable white people to maintain social power and control" (p. 869).

Our Community Psychoanalysis Training Track is not the answer to affordability for either analysands or candidates. This program is important because it brings PINC into contact with other organizations in the community—agencies that serve diverse populations. It is not a salve for the challenge of affordability.

Tackling this problem will take years. It will require us, as a community, to look at the truth of who we are and who we serve. It will require our openness, humility, and courage to see our community accurately and a willingness change.

In collaboration with PINC's Board and motivated, committed leadership—Gail Kaplan, Julie Leavitt, Kali Hess, and myself—PINC has begun the process of looking at itself with regard to whiteness. In August, our diversity consultants, Visions, Inc., began to meet with focus groups. This process will likely continue for several months. At the end of this process, our consultants will engage the community in a town hall meeting with the goal of raising our awareness regarding institutional whiteness and the work required at PINC to invite diversity. Many of you will be asked to participate in focus groups to help in this learning process. I believe this project will raise some uncomfortable questions and will to lead us to look at ourselves and psychoanalysis in a clear and honest way. In the end, we are asking of our community no less than we ask of our analysands: to tolerate truths about ourselves in relationship to others and to our community as a whole.

Carolina Bacchi,
Psy.D. Co-Chair

Editorial Note

This issue of the newsletter required an attempt to find a creative voice inside or born from overwhelm. In the beginning of 2020, we have decided to have this issue be focused on Trauma. When the Pandemic struck in March, we were all forced to transition to remote work and deal with the unprecedented (or perhaps lived before in times of collective turmoil) reality of being immersed in a similar traumatic experience as our patients. In this process, the editorial board encountered a community feeling out-of-words or lacking emotional bandwidth to engage with writing in the midst of uncertainty, collective grief, an ongoing emergence of clinical challenges and the intensity of anti-other sentiment. As we were still catching our breath from one crisis a new one would emerge, revealing the multi-faceted reality of trauma being deeply lived at the core of the moment. We are extremely grateful to the authors who took the invitation to reflect on their experience and, like in Winnicott's squiggle game, offered us the first squiggle so we could engage and create new forms. As for the ones who had something to say, but not quite yet, we all know that in the apres-coup meanings can be formed, found or assembled. In the waiting, without giving up, we may trust that what is yet unknown will find its way in. It may take time, but the platform is open so those voices can be heard when the time comes. Isn't that what working with trauma looks like?

Anyways, working in the trenches and finding ourselves in the eye of the storm, we have been attempting to learn as we go, and to co-create a new path for psychoanalytic knowledge. As we put together the papers we received, we decided to present them as a collage, a kaleidoscope of ideas that hopefully will lead to new and ever-changing forms as we encourage our community to reflect together about the inherent struggle of inviting the beast and keeping engaged. In this issue, we had authors reflecting on their emotional experience through literary pieces; others wonder about trauma and its manifestations and clinical implications, while some challenge psychoanalysis from within to consider whiteness, racism, oppression, and silence. I hope those voices will help us in gradually defining a new pathway for PINC, or at least allow for our hearts to connect with the heavy work of grief and hope that any crisis, if fully engaged, calls for.

I would like to thank our editorial team for all the effort that they put into this issue, navigating the uncertainty of these times together, and gradually finding a path to follow. Our meetings and conversations were quite meaningful and inspiring, leading to thoughtful insights. Luca Di Donna Ph.D., his inclusive and caring attitude allowed for many invaluable reflections on our struggles during the Pandemic Isolation; Rosalinda's creative presence both in our discussions and in her beautiful paintings opened the way to touching and deep considerations; Jane's sharp mind and editing abilities were vital in consolidating the many papers that were submitted and Laura Mayen, Ph.D. candidate, is a new member of the editorial team. Laura's warm and clever contribution enriched our conversations while she helped in navigating technical issues and compiling papers for publication. Our editorial team worked very hard this Summer to present you with the beginning of a reflection on our current times. I feel grateful to have been able to work with such a wonderful and collaborative team. Without them, this issue would never have been born.

Luca Di Donna
Ph.D. Co-Chair

Editorial Note

The year 2020 will be remembered for the Corona virus and the Black Lives Matter movement. These events completely changed our lives and our profession. The Corona virus is a monster cell, an invisible enemy that has created perpetual fear, helplessness, anxiety, and a state of "collective trauma".

At the same time we have witnessed the brutal killing of a black man by a policeman. This killing made visible the inequality, racism, violence, sadism and fragmentation of social justice in our society.

The impact of these events has affected the psychoanalytic community around the world, and many changes are taking place in psychoanalytic institutions that focus on the interplay of history, power, race and sexuality.

In this time of instability our own institute has created many avenues to mitigate our anxiety. Bruce Weitzman's leadership and organizational skills have been extraordinary. Bruce and the leadership group have kept us informed of all the changes taking place at PINC, and created an E-mail system which facilitates constant communication between us.

This is a difficult time and I noticed my own difficulties in setting out to write. I wrote many drafts of this editorial, but I felt that I was unable to express my ideas/ feelings and thoughts clearly. The editorial seemed

fragmented, unclear, and unfocused. My mind was paralyzed. Our editorial team as a whole felt this paralysis. What takes place when the ink cannot flow, and your head is too clouded to think? Carolina Bacchi, helped describe some different forms of paralysis that were being activated.

My not being able to write forced me to think about what was going on both in my mind and in the world. I began to read, and encountered the works of many critical thinkers, including Maurice Blanchot and Walter Benjamin.

The French philosopher Maurice Blanchot helped clarify our dilemma in a book he wrote in 1987 entitled “Writing after the Catastrophe”. The essence of this complex book was the idea that we must not forget; we must write to not forget. We must write to keep the past alive. He was writing about the Holocaust.

I found Benjamin’s work to be a source of inspiration. In one of his late papers on “On the Philosophy of History” he used the word “Jetztzeit”, translated as “now is the time“. The word implies, both an historical moment of change, and an opportunity for action.

Walter Benjamin and Maurice Blanchot were both exceptional men, political, innovative and not afraid to write or speak against injustice. Inspired by their example, we felt that the publication of a Newsletter could serve as a vital and historic response to such a call for action. The newsletter, as a form of transmission, would prevent our paralysis of writing and speaking.

Critica

The Editorial Team

"CRITICA" is this new newsletter. The word Critica points to the potential for dialogue that involves our current times for critical thinking, creativity, and openness, leading to a new twist in psychoanalytic writing.

In times of change, our editorial team was faced with attempting to address the need for a new forum for psychoanalytic ideas born in conversation with social science, critical thinking, and the arts - a newsletter which would be kaleidoscopic in nature.

In our conversations, a magazine published after the war titled "Critique edited by Maurice Blanchot, Georges Bataille, and Pierre Prévost caught our attention.

Commenting on the magazine, Philippe Roger (2006) mentions that "Critique is arguably the most original, and surely the most unclassifiable….". In the first issue the editor said it hoped " To provide as complete a glimpse as possible of the various activities of the human mind in the domains of literary creation, philosophical reflections and historical scientific and economic research." p.694.

Critique sounded like an interesting platform to convey aspects of psychoanalytic thinking that would integrate historical, political and philosophical ground.

From a Psychoanalytic point we would like to expand more on the role of the political, such as the important issues of race, gender, sexuality and the interplay of the psychic and the social. Furthermore, we would like to propose a reading of psychoanalysis that is more contemporary; integrating the French school, the new Lacan, the middle school, and the latest in relational–intersubjective models.

Essential also to psychoanalysis are the reviews of books, films, poetry, the arts and music, which bring a multifaceted perspective on understanding the psyche. In brief our new format will include a multidisciplinary perspective with a particular new voice in psychoanalytic literature.

We intend this platform to allow for a kind of writing tha,t instead of promoting control and linearity, would create rupture and tension in a similar way that the language of our unconscious allows for new meanings to be created.

Philippe Roger (2006) Critique, The Columbia History of Twentieth-Century French Thought Edited by: Lawrence D. Kritzman. Columbia University Press, New York.

I can’t breathe

I can’t breathe
I can’t breathe

I can’t breathe
I raise a fist
I can’t breathe
I take a knee
I can’t breathe
BlackLivesMatter is real
I can’t breathe
Rainbows are true
I can’t breathe
Money for power
I can’t breathe
Yes, #metoo

What does it take?
When will you believe?
Here be heroes
Quiet like

Kalpana Asok
LMFT, Community
Member at PINC

Life During Pandemic 2020

Panic

Privilege! (my home)

Bubble Bubble

Food Shopping, NEWS Footage

Panic

Privilege! (fresh air)

Bubble Bubble

More Zoom, Less Sleep

Panic

Privilege (still able to work)

Bubble Bubble

No mask? Back up!

Panic

Privilege (health family)

So far.....

Melissa Holub,
Ph.D.

TRAUMA

Rosalinda Taymor, M.D.

Title of painting : Pandemia
Medium: Oils on gesso board
Dimensions: 20 x 16
Artist: Rosalinda Taymor

The Oxford Dictionary "defines" Trauma as a deeply distressing and disturbing experience." In an effort to be able to think about the current "coronavirus epidemic," I told myself to reflect on the effects that other epidemics might have had on people throughout history and especially how did people react to the period of "quarantine" that helped them move forward.

For the purpose of this essay my inquiry compares the covid-19 quarantine to the "bubonic plague" quarantine. The scale of death and social upheaval of these events not only produce devastation but also can become a source of exploration of the breakdown of society and its institutions and the way we treat one another.

In the fourteenth century, the world suffered through a horrible epidemic that lasted for a about four years. They called it the" black death". This epidemic spread throughout Asia, Europe, and Africa and it took the lives of approximately 50 million people; about 60% of the world population. The pandemic event had several outbreaks. The current covid-19 has taken approximately 1.3 million lives world -wide.

I found myself anxious and frightened but also inspired to know that Shakespeare wrote "Macbeth" and "King Lear" during the quarantine of the bubonic plague. What a phenomenal accomplishment!! Newton was able to describe his" theory of gravity" during the same period of time!! And there are many other examples of how people behaved during the quarantines. How can some people remain creative, inspired and organized? I want to make sure I follow suit. Unbelievable!!

During the current coronavirus social distancing quarantine, I became distressed at my loss of trust in journalistic sources and government officials who appeared to be involved in the unethical behavior of telling lies and hiding the

truth . I experienced a sense of betrayal when reading "fake news" and paranoid theories of conspiracies, in an effort to obscure the growing racist attitudes that governments were indulging in, rather than addressing the need for strong and decisive leadership, and our societal selfishness in the face of an unknown and frightening insult such as the current coronavirus pandemic and its multiple effects in our lives.

On Memorial Day, May 24th, 2020, the NYT published on the front page the names of 100,000 people who have died due to the Covid-19. We are mourning collectively the loss of loved ones and strangers.

Slavoj Zizek, a Lacanian psychoanalyst who is also a cultural philosopher and Senior Researcher at the Institute for Sociology and Philosophy at the University of Ljubljana, Global Distinguished Professor of German at New York University, International director of the Birkbeck Institute for the humanities at the University of London. He has written a book called Pandemia. I find his thinking provocative and useful. In this book Mr. Zizek criticizes capitalism gone amok as one of the causes for the lack of preparation with which our governments responded to a long-anticipated prediction that an epidemic would occur.

We are in the midst of many different crises, the crises of racism and immigration all over the world that has incarcerated people in jails unable to respect social distancing, bringing illness and death. An economic crisis has emerged secondary to lock downs and social distancing. Childcare is not available, education from elementary school through colleges is absent except for the internet.

South Korean born Byung-Chul Han is a Professor of Philosophy at the University of Berlin. In contrast to Michelle Foucault's bio-power, he has discovered the productive

force of the psyche. He has extensively analyzed our everyday existence under the challenges of “electronically induced hyper communication”. He warns us of the” burn out syndrome” of overworking and the experience of depression. Our relationships in general have changed due to the recommendation of social distancing ,and in our intersubjectivity we are forced to rely on the “gaze” and we connect only through looking into each other’s eyes as we speak.

The practice of Psychotherapy as well as Psychoanalysis has changed.We no longer meet in our consulting rooms, we are compelled to meet through the telehealth sessions and we question the effectiveness of the new styles of intervention. We look for support from our peers through zoom sessions and zoom conferences and we hope that we can elect leaders that respect human beings, their dignity, and their health.

I Felt:
Covid-19 through the Eyes of an Immigrant

Laura Mayen, Ph.D. Candidate
New Member of the Editorial Team

If 2020 could be summed up in one word it would be: COVID-19. The impacts of the pandemic traversed from the intangible to the palpable through social media platforms such as Facebook, and Instagram, to name a few. In just a few weeks, it felt like the themes of irresponsible personal and social practices, and selfishness had run rampant throughout our communities. As a young psychologist I was terrified to see these behaviors unfold. One of the behaviors I found particularly troubling was the hoarding of toilet paper. I tried not to panic and yet, I soon found myself conforming to the very behaviors I had found abhorrent. It was easy to comply with these behaviors because it felt like they were needed for the sake of survival. Realizing my hypocrisy, I became introspective, and began worrying about what COVID-19 was doing to us, as human beings. Not only was it physically affecting some peoples' ability to breathe, but it also seemed to be scratching at the foundational psyche that once dictated human decency.

As a person of color and an immigrant of this country, I can't help but think of immigrants and how much their lives might have been impacted by this pandemic, coupled along with the current political climate. I was particularly worried for undocumented immigrants. Unlike American citizens, undocumented immigrants are unable to apply for unemployment even though many faithfully pay taxes yearly. For these people, this is a dead end. With the realization of little to no financial help coming their

way, the only option is to risk their lives and continue going to work.

This reality of risking one's health because of one's immigration status instilled in me a feeling of loneliness and desperation—feelings I emulated from loved ones who were going through this very ordeal. I soon found myself crying and often labeled the reason for it as "no reason", but in reality, deep down, I knew the reason. I had just been accepted to start my Ph.D. in clinical psychology. With my life's ambition to help people, I felt an overwhelming sense of futility as I began empathizing with those impacted so terribly by the pandemic. I felt ashamed for being fortunate enough to still have a roof over my head, while many others have lost their jobs and homes. I felt that my identity and life's ambition felt small in the grand scheme of where we are in the world today. If I can really sum up why I began crying, I would simply sum it up in two words: I felt. And just like me, I bet a whole lot of others are feeling too. And, in that fact, I find clarity. I find solace in prospectively helping people sort out those feelings to help instill a sense of control and normalcy in otherwise hectic times.

We are at the end of November andCOVID-19 is skyrocketing in the United States. When I open any social media, I can see the pain and fear. I can see that we, as a society, are all hurting. Under all of these circumstances, I write to my fellow psychoanalysts, whether you have twenty plus years of experience or just starting out like me. I write to warn you that we have a lot of work to do. Not only are we listening and learning about our patients' trials and tribulations, but we are also seeing it and living through it. So, I send you encouragement. I send you a big hug, and I tell you all, that together, we will get through this with our heads held high, and a vigor to act as guides for our patients through a murky and uncertain future.

Virtually Wired

Online
On line
Line
On

are we
connected?

then what
from now on
line
live, at a distance
silence
fear
dissolution

Solitude
On line
we carry on
holding the
personal burden
or blessing
may we
find a way
in line.

Tears.
On line
can you
hear it?
Unmute
Initiate the call,

pick it up.
dont let go.

no touch
dis-comfort
interference
disruption
promise

so close
so far
so quiet
so sudden
from far
not really

on
line

again working
in the trenches.

dont give up
this is what you got
a line that is on
no body
no smell
no touch
are you there?
yes

and no
and now
and always.

I hear you

I hear you
hope
as we dance
together
online.

on.

Carolina Bacchi, Co-Chair

The Confederation of Independent Psychoanalytic Societies

Maureen Murphy, Ph.D.

What does psychoanalysis have to contribute in times of actual trauma-times that fundamentally disrupt lives?

This is the question voiced by many analysts at the outset of the pandemic. Usually it was some version of the question: is analytic work really possible in the face of so many concrete life and death concerns?

Today's program will not only provide essential interventions for dealing with frontline workers, patients and families, it will remind us that we already rely on many of these interventions under another name. As we learn from Laura, I invite you to use your everyday trafficking in the unconscious as a template for navigating these disruptive times.

For the purpose of this morning's conference, I'm going to briefly describe the phenomenon of trauma especially as relates to the body, describe what happens to the patient. what happens to the analyst and or caregiver and propose that psychoanalysis has plenty to contribute in times like these.

About trauma
Each person has a personal narrative that is part of a reciprocal process of making meaning out of experience. This narrative is an evolution of the earliest experiences of continuity of being-or, in Winnicott's terms, of going on being.

Trauma sets in when a person is confronted with experiences so overwhelming that the capacity to make meaning from experience is replaced with massive arousal without the capacity for discharge. Quoting Steven Reisner: "Being overwhelmed by sheer actuality without one's having a say either in

what's happening or what has happened".

Because trauma interrupts going on being, it is experienced as the psychic equivalent of maternal abandonment. Our earliest sense of somatic wellbeing is grounded on the maternally constructed stimulus barrier, later on the family and on society's organizational foundation. In my own practice, I have noticed that patients who are the most terrified of contracting the virus are those with the greatest quotient of maternal misattunement.

One of the frequent comments I've heard from colleagues is that they feel like they are doing more supportive than depth work. Taking the experience of maternal abandonment into account, I hope that this is true since it stands to reason that our interventions will resemble those of Winnicott's environmental mother--not symbolic but all about provision.

When there is a sudden assault to the stimulus barrier- the personal narrative by which we recognize ourselves- the continuity of a representation of a good object -is jeopardized. In fact, in this time of COVID 19, quoting Mario Perini, we find ourselves orphans - "we are both 'motherless' and 'fatherless,'" because all social institutions turned out to be unable to offer maternal protection against a threatening world as well as a paternal guidance oriented by a shared reliable knowledge." Much of the fate of the damage from trauma will rest on the preservation or restoration of a good internal object. This is what we try to do every day.

Let's turn to what happens to the patient.
In good enough circumstances, individuals are able to transform global anxiety into manageable pieces or nameless dread into defensive strategies. In somatic trauma, self cohesion is undone by feelings of falling, shattering and fragmenting. Perceptions that encompass our usual mode of everyday life: logical thought, secondary process, temporal

spatial dimensionality are atomized and replaced by random disconnected sensations. Circumstances that defy time and space defy logical, symbolic thinking threatening - the usual landscape of psychoanalysis leading us to doubt our capacity as analysts.

Yesterday in a webinar, a person asked: “When speaking about feelings, we symbolize them but doesn’t ‘traumatic’ mean not being able to symbolize?” I would say to this, remember that speech, verbalization is compromised in a crisis. Even though a person may name fear, contagion, death doesn’t mean that those states are digested. They are more like what Ogden would call an autistic -contiguous phenomenon--naming something familiar in an attempt to hold on to some personal continuity.

So What happens to the Care Givers
I’m using the term care giver as analogous to analyst here to underscore an identity that is familiar to us as therapists--to suggest that we already have many commonalties with health care workers.

Dealing with a traumatized person or situation acts on the care giver in a real way. It requires bearing terrible events, hearing horrible stories, facing the loss of the patient. Personally, watching televised scenes of intubated patients, masked and exhausted health care workers has plunged me back into my earlier career as the head nurse of a pediatric intensive care unit. I value that experience and the sense of competence it gave me as a much younger person. At the same time, I’ve managed to foreclose the tension of constant urgency, of how hard it is to watch someone struggle to breathe, of never being able to do enough. All of the media has triggered a return of that hypomanic existence I thought I left behind. Often care takers don’t have the luxury of steady, thoughtful responses. For analysts, thinking usually trumps action but in times of trauma that dichotomy often can’t be maintained.

One of the issues we'll be talking about today is when front line workers are most able to use support. Time is tricky here. It may be the case, as we know from PTSD, that while health care workers are in the heat of a crisis, they may be too exhausted to seek or use help - but as they get some distance are more impacted by what they experienced and in need of support.

A traumatized person elicits in the analyst projected elements of their own early representations. Bodily representations that have long been established as cohesive begin to fray. Freud's paper the Uncanny comes to play here. Primitive images of disconnected body parts, feeling lost, not being able to stand up, torn skin provoke anxiety and the impulse to turn away.

Additionally, in these situations, the analyst has a sense that what is/has happened to the patient, could/has happened to me. One of most unusual aspects of COVID is that we are caught up in the same dangers and possibilities as our patients. It 's easy for boundaries between the caretaker and patient begin to blur-- they become a double of one another. We often speak of and work from our countertransference but here it's a bigger challenge for the analyst to convert their own terrors into something usable for the patient.

Coming back to the original question of what psychoanalysis has to offer in times of acute crisis, I'll mention just three possibilities. First, the analysts modulate between somatic regulation and the world of the imagination competing for the patient from the thrall of fragmented sensations with gestures that preserve relatedness. Then, by telling stories from our countertransference, we provide language imagining out loud new possibilities. Finally, we hold in trust a sense of the future even in the face of experiences that represent a negation of life.

Trauma

Terrance McLarnan,
MFT, PsyD

No Visiting

That Saturday afternoon
as spring began again
and daffodil has poked
its head up
Waiting to dance
In the back yard
The news hit her hard

She had to find her words
‘darling I won’t see you for a while’
she laid down
tears raced down
and laid on the bed sheet
where the room was
and where you were
room number 108
Like an inmate
whose dark thoughts
at the end
were eaten up with love

her shaky gaits
slipped through the hallway
and exited the door
that will stop her
to return

she peeled
the purple gloves
from her hands
she pulled her N-95 mask
From her nose and mouth
Took off the black curtain
from her eyes

‘the weeks crawl by
until we could be together’
‘darling I won’t see you for a while’

Mali Mann, M.D, F.I.P.A

Mali Mann is an Adult, Adolescent and Child Psychoanalyst & psychiatrist in San Francisco Bay Area. She is an adult and child Training and Supervising Psychoanalyst at San Francisco Center for Psychoanalysis. She has special interest in poetry, painting, Global medicine & Flying Doctors mission.

Going-On-Becoming Antiracist Psychoanalytic Practitioners

Molly Merson, MFT

Psychoanalysis, like other communities and systems throughout the world, is facing a reckoning in regard to its whiteness and collusions with systems of oppression.

Look around you. Who do you see represented? Look in your bookshelf, in your syllabus, in your theories. Who are you reading? Who are you listening to? Who, and what voices, are missing?

I believe that any invitation to center our work, our feelings, or our positions as people and psychoanalysts must begin with a recognition of our relationship to social location. What do we believe about our world? What do we think we know about ourselves and our values? Part of this questioning involves calling to mind the deep history of how the United States— where many of us practice psychotherapy— was created as a nation. It is easy to dissociate from the narratives of enslavement and settler-occupation which founded the framework of this country, but this only perpetuates a traumatic repetition which prevents reparative and restorative processes.

To put it bluntly: The United States, its wealth, its policies, its values, and its systems was built on unceded lands from the unpaid work of kidnapped people for the benefit of the wealthy, property-owning few. Here, I ask an old question: who is considered “equal” in the proclamation “all men are created equal”? In some ways this phrase is an historic reverberation of the claim that “all lives matter,” an impossibility in a system entrenched in anti-Black racism and oppression.

Our psychoanalytic institutes, theory, praxis, and practitioners are not immune to whiteness or racism/racist enactments, nor is psychoanalysis absolved or separate from the historical milieu of European imperialism and settler-colonial history in which our theories have been developed. In my view, the field of psychoanalysis is embroiled in racism, even with our radical roots or our fantasies of being "not racist," in no small part because of the landscape in which our practitioners work and the official systems within which we practice. Ibram X. Kendi (2019) states, "The opposite of 'racist' isn't 'not racist,' it is 'antiracist.'" Therefore, we must work to become anti-racist in all our efforts, policies, and practices.

"Becoming antiracist" is not a simple task, and I don't know whether there is really a "right" pathway nor an ultimate achievable destination towards this ongoing, iterative work. Just as some people might say "love" and "ally" are gerunds, there is a "going-on-becoming" involved in delinking racist assumptions and collusions from our actions and systems. However, just because we don't have the answers does not mean we wait to begin. To that end, I offer several suggestions for our institutes and our field to take up interrogating whiteness with the aim of creating a living, anti-racist field.

The first is to make actionable commitments to interrogate our racism and whiteness inherent in the field. Second, inquire into our syllabi and curriculum to ensure the material is taught through a critical lens. Third, create spaces for constituents to work through their own whiteness and identifications with racism and how that may show up in psychoanalytic practice and institutional policy, including the system of complaints, fees, hierarchies, and "hoops". The fourth suggestion is to consult with [and pay] BIPOC on creating inclusive spaces

that are set up intentionally for BIPOC, rather than for tokenization or diversity optics. Fifth, each white member of any decision-making group should commit to doing their own personal anti-racist work, including paid work through Layla Saad, Rachel Cargle, Guilaine Kinouani, among other Black and Indigenous clinical mental health workers who have written syllabi and workbooks for this very purpose.

I believe we can do this— I believe we must do this, to focus our efforts on building an anti-racist community in the psychoanalytic field by attending to our own policies, ethics, racism, biases, and complicity in our practices, our theories, and our personal lives. Like COVID-19, racism is a public health issue, and is disproportionally killing people in communities who have been historically marginalized. When it comes to rethinking where we invest our efforts, and how we expose the paradoxes of our systems, Angela Davis (2013) "[urges] us to think about things together that appear to be separate, and to disaggregate things that appear to naturally belong together. (104)" Psychoanalysis is well-positioned to take up this work of linking things that have been kept separate (like the social and the personal), and de-linking collusions with systems of oppression— if we can prioritize these efforts within ourselves and our institutions, too.

Poem in May

Helicopter eye overhead
The drone of surveillance
The relief of protection

Young cyclist suddenly spills
Hits the hard road surface
Bright red blood Runs
And gathers on his knuckle
Red flags of vulnerability
Our common bond

Yellow wildflowers outside my window
Faces open to sun and wind
My eye lingers on them
Envying their normality

Jennifer Davids is an Adult, Child, and Adolescent Psychoanalyst – British Psychoanalytical Society

Letter from London

Luisa Marino, Ph.D.

I apologize for replying so late. I would have loved to have written in a more appropriate way, perhaps a shorter and drier version, but I am still at times overwhelmed and find myself spending a lot of energy to regroup with myself and my loved ones. It takes a toll and leaves me with less time for extracurricular clinical activities.

Still, I wish to share what follows, keeping in mind that it has been a very personal experience.

I decided a couple of months ago, more or less based on the known science about this pandemic, that I would not be returning to my in-person clinical work at least until after the August summer break.

I closed my office in the second week of March 2020 after giving one week's notice to all the patients informing them we would have to move to working remotely. My decision, I have to admit, was based on a very specific feeling of being split.

On one hand, since mid/end of February, my family and friends in Lombardy (Italy) were starting their first quarantine and then quickly after that, was the enforcement of a very strict lockdown. On the other hand, the news in the UK reported that they were struggling to cope with the flood of conflicting information coming both from China and then unlucky Milan and other smaller cities in the then-called red zones.

What I'm saying is that me and some other Italian colleagues and friends in London, were stuck between two unbelievable realities, we were disconcerted and very fearful for our loved ones in Italy, and probably in some sense of denial in London and, consequently struggled with a lack of trust towards the local authorities.

A lot has happened since then, which we know is history now, and the UK is one of the worst-affected countries in the world for Covid-related deaths.

Now, it's the middle of June and resuming my in-person clinic is clearly not going to work for me from many different perspectives.

My office is in the heart of central London and one can only reach it via public transport, walking for a long time or cycling in the urban jungle). It is located in a building with office spaces, communal spaces and toilets shared with at least other 50 people.

My office itself is very tiny and barely allows the two meters distance from one another now required in the UK. I would have to spend most of my time cleaning and following necessary hygienic procedures, including wearing a mask, and battling myself with feelings of fear and denial of my own safety, as well as concern and worry about my patients as well as how much contact they are having with their families and friends, and so on.

I do not think this is worth the price.

Finally, our insurance companies are still not sure if and how they can cover us in the event of something happening as a direct consequence of Covid-19 in our offices.

In the past (the before the pandemic-era), I had been working with some of my patients remotely; I am used to this practice, have been studying it and publishing about it. Still, I'd like to emphasize that this is a completely different situation.

During this pandemic, remote treatment has become the only possible option since we are living in an emergency; this decision was taken not either by a personal choice, nor that of my patients; it was just the only sensible option to keep everyone safe and going on with our precious analytic work.

This has created a very different and specific transference and countertransference dynamic than when remote treatment is (was) proposed by either the patients (for their specific reasons), or by the analysts (for their own personal reasons/ choices). This choice, caused by the pandemic, has a very different impact on our use, evaluation, 'effects' and 'results' of remote treatments as we had practiced them.

The UK has been severely affected by the pandemic. Covid-19 is not a metaphor. It has been real and is still a concrete threat to people's health and lives.

All things considered, some of us are privileged in that we are able to keep working with our patients, from the warmth of our own homes and theirs, in some ways a very lucky situation. I am aware this choice will have to be reevaluated in due course depending on the personal and external variants that will arise in the foreseeable future.

In a way, I do not find it so difficult to accept the unknown at the moment. Isn't the negative capacity so valued in our profession? My patients and I will have to accept this uncertainty for a little longer and follow the scientific developments concerning the pandemic in an atmosphere of "soft communal denial" as Marilia Aisenstein called it in a recent IPA podcast interview, commenting on being able to keep working analytically in our safe remote 'far away so close' cyberspace.

International Psychoanalytical Association Italian Psychoanalytical Society
British Psychoanalytic Society - guest member

Through a Prism of My Own

I come to you from a secret cell
home to the mother of muses
for comfort & for counsel
to find a new pulse, all ‘n all
we’ve never been that well;
there are no words of trust
between the shades of us
when there’s so much rust.

As power becomes seedy
the streets get weedy & the
deadhearted are given to boast
becoming our bastards & ghosts
re-igniting this quarrel:
Will this cha snce at renewal
bring jasmine’s scent
to those held in descent or
will it all be given
to those with jewels &
wreaths of laurel.

Through a prism of my own
I hear their years & years of tears
take march, as
choruses of voices sing out
so even I,
can find a home, but
at a certain point,
my heart will anoint, this
wandlike pen to speak,
when there's so much rust,
between us.

Terrance McLarnan

For The Ivy Notes: Class of 1976

"Words and Gardens, Berkeley, CA"

Michael Korson, MFT

Dear classmates,

I hope this finds you well. I'm writing during this most strange and menacing time. The pandemic rages on. Whatever bending of the curve that was achieved now lifts off into seemingly endless sky of escalating cases and

deaths. Phrases such as “It didn’t have to be this bad” echo in countless conversations. Medical expert after expert, in an attempt to explain why the richest country on earth ingloriously leads in fatalities from the virus, speaks as a Greek chorus to a failure of leadership at the top. A man who will not even wear a mask as day after day experts, including from his administration, stress the necessity of doing so.

A time when another contagion, racism, breaks through the repression barrier of White America to reveal its systemic and historical roots. Another black man killed by police and Covid-19 flashes in neon clarity the inequities in this country with far more cases and deaths suffered by African Americans and Hispanics.

I write this with fewer than 3,000 hours to go to the national election, and I can’t describe the fear I feel at the prospect of that man being re-elected. Someone who daily denigrates the office with his self-proselytizing and Twitter attacks. Who speaks about the “great job” he is doing as the numbers of deaths solemnly march across the TV screen. He should be offering condolences and leading the country in action, mourning and unity. He has offered no plans nor guidance (with the exception of dribble about getting light inside the body, the potential therapeutic value of ingesting bleach, and the proclamation that it would just one day disappear).

It is a time for thinking, for me and others, about privilege. What is privilege? Whiteness? I am one of the lucky ones, having made the transition to working from home. And having work that I love and adds meaning to my life. The other day a former patient had a session the day before his wedding. After years of working together, we observed the arc of his life which has brought him to this moment of joining his life with another’s. Words cannot express how fortunate I feel. While fortunate, my Whiteness, which means among other things access to education and resources, has benefited me. I’m mindful of those who have not benefited. The many

millions now out of work. Those without homes. I recognize the roots of racism grow deep inside me, fertilized by an acid rain of ongoing prejudice. I read books and participate in group discussions. I watch 13th again and sob throughout as the systemic roots are exposed -- the very survival of this capitalist system exists on the welted backs of slaves then and the new slaves now, the incarcerated, their labor profited by the prison-industrial complex.

Many people speak of silver linings. Of gratitude. I am grateful to live here in Berkeley. As I go on my daily walks, the gardens are brimming with colors and scents. And such sweet language. Cenanothus. Aster. Yarrow. And, so appropriate for Berkeley, Garden Cosmos. The children have festooned the sidewalks with protest chalk drawings, Black Lives Matter, Remember Their Names, No Justice No Peace. And local leaders show real leadership, making difficult decisions about slowing down reopening so as to save lives.

It is an upended time of extreme opposites. To protect a loved one means to maintain distance and hugs threaten. Time itself has changed: quickened, (it's been four months of shelter-in-place!) and slowed with its Groundhog Day repetitiveness. I think of the four plus decades since we were a motley crew, young and ignorant but nonetheless full of opinions (the end of the Vietnam war, the best Hermann Hesse book). Will the children now see four decades to come? Given the other great scourge, climate change, some seriously doubt it. Such a precarious time: full of threat and yet the obdurate promise of possibility. As death suspends invisibly in the air, the flowers rage in their beauty, the alphabet of life assembles on sidewalks and elsewhere in words, some written in grief, some full of hope. Be well.

Nesting

Dawn Shifreen-Pomerantz,
M.F.T. Psychoanalyst

Medium: Encaustic
Size: 36 x 48

Diving in

Carolina Bacchi, Psy.D.

I felt the urge growing inside, a turbulence floating as the weather was changing. The clouds were forming; the darkness and cold invading while the wind started to blow stronger and stronger. March 13th, 2020 was the first and the last day. The academic year ended; the quarantine began. At home, suddenly, an abrupt interruption, sudden silences, quietness, and everything slowed down. At first, fear and uncertainty, doses of relief followed by waves of disbelief and deep worry. What hits us when a Pandemic strikes?

Working from home, I attempted to re-create the quietness, isolation and safety of my office. I found a corner from where to listen while I observed the clouds in the blue sky, birds flying and the sounds of my household invading the room while I tried to concentrate. I appreciated the stop - my life needed reset and rest. I considered the many ways in which this life is still so precious to me, while engaging with how it could also be precious to others. The only writing I could do was a will imagining my absence from the center of the life still being lived and attempting to create (or continue) a dialogue. My will had a message to all who depended on me, a message of care and dedication, of love and fright. And after that, I found silence. My creative voice lost inside overwhelm. How do we make sense of global crises?

We cling to an imagination of a future to latch ourselves to in order to bear the raw experience of being alive. My will delineated the precarious attempt to create a future where I would be present and yet absent. It guaranteed the continued existence of the ones I care (and cared) for. Weirdly comforting, imagining my death became a way to grab onto my life.

What is a will if not a desire to still be heard? to still be found? to have a say on this life that continues beyond one's

death? I find it interesting that this set of instructions that you can leave to the ones' who survive you to be called "a will". If you look at a dictionary, will is defined as 1. expressing the future tense; 2. expressing inevitable events; 3. expressing a request; 4.. expressing facts about ability or capacity; 5. expressing habitual behavior; 6. expressing probability or expectation about something in the present.

However, from that place of absence, a will is the possibility of being able to make a request based on the present as one is faced with what was inevitable. My will is a dialogue with a future absent me who is still engaging with my future potential life. In that life, my will is expressed, and left as a request that marks my existence in a continuum embraced by others' memories.

I thought about the many plans for 2020, some of them felt so solid and certain. And, now, I only have today, and maybe tomorrow. My calendar goes as far as next week, and even that feels shaky. It still holds emptiness and uncertainty, many forgotten and cancelled events. It also stores modified meetings, which I am unsure where to record. Every day is a day to be engaged with, the small adjustments hour by hour of what is added, and what was removed. Our present is almost the ticking sound of seconds passing by as we traverse the next moment. Time was measured by where the sun is hitting on my balcony, as I oscillate in opening and closing my shades in between patients. With open shades, I sometimes notice the clouds forming and passing by. I almost only know about their presence after they have gone, when for a second I am invaded by the thought of their absence. Clouds are short lived. I resent when they make the sky white, and cold, sometimes gray, and foggy. I embrace them when I see their soft cotton fluctuating dance forming shapes that I wonder about. Quarantine gave me time for contemplation. Through my balcony, dream space between the inside of my house, and the undeniable presence of the world, I see myself flying with the birds that sing during the Spring. Life still goes on. At least, for now.

A letter from Mexico

Jani Santamaría Linares, Ph.D.

First of all, I hope you, your family and loved ones are healthy and safe. Faced with the sudden loss of our everyday parameters, please allow me to share with you some thoughts that aim to create emotional continuity.

No experience can push the limits of our psychic capacity to deal with the pandemic we are experiencing/living/suffering; the catastrophic effects have altered all mental functioning; the well-known mechanisms of omnipotence, denial, and projection, show us the obsolescence of this operation. Omnipotent thinking tells us at first that the entire coronavirus problem is not in our backyard, that those who get sick and die are always other people. Projection smashes external reality and in a globalized and hyperconnected world, not only do news arrive, so does the virus, a virus that shows us that the "enemy" – the virus – lives outside and inside. It's volatile, it has no nationality, color, or taste. It's oblivious to social classes and human nature. It doesn't know borders or retaining walls. It doesn't care about ethnic groups, religions and political systems. Despite it being created by man, even God himself cannot stop it.

This virus is an inanimate piece of inorganic matter which potentially holds a devastating power of disorganization and even destruction over organic matter, the organic matter we are made of. In that respect, viruses are older than life.

This pandemic is not announced at the reception of Eros, it enters (penetrates), breaks through the extremely fragile doors of the human race. Confidence in life went out the back door,

fear went in through the front door, and helplessness went in through the keyhole. Everything seems to be upside down, a threat, a challenge. In addition to sickness and death, as Freud mentioned, the first victim of war (pandemic) is truth. This pandemic has also caused great economic hardship and the absence of law in some countries.

Keeping distance from the people we love seems to be an expression that we do care about those people. Working "from home" seems to be a punishment and we forget that in Winnicott's words "home, is where we start from." In the analysis room, the couch – now the computer –, the patient, technological networks and the analyst's mind, articulate and try to be a hinge in this social tragedy.

We know that working through social difficulties is nothing new; suffice it to remember the insistence with which Melanie Klein, while analyzing little Richard, brought up psychic reality where the war sought to impose itself with its pressing and stark presence. ¿How can we forget the anecdotal phrase "bombs over London" that Winnicott used to point out in a meeting while simultaneously discussing the article "war neurosis," while an air attack was taking place?

This leads me to ask myself: what can we offer as analysts in these uncertain challenges? Are there any roads that lighten the burden of this transitory time?

The answer Freud gave Einstein to the question "Why the war (Virus)?" comes to my mind. I am aware that what we face is not war, because war implies human will to destroy other human beings. The trauma of the threat of dying from a natural cause (a tsunami, an earthquake, a flood, etc...) is very different in its consequences, I think, than the trauma of being suddenly confronted with the threat of being annihilated by other human beings. Today, more than ever, I want to share with you some of the factors Freud pointed out

in that article, because in my opinion, they are still useful for any experience of psychic threat. Freud mentioned:

1- People must acquire sufficient understanding of their common elements and tolerate their differences so as not to merge the concepts of foreigner and enemy into one. In this matter, to avoid confusing the foreigner with the enemy would make wars more difficult, merging concepts is an advantage.

2- Everything that establishes affective bonds between men, along with cultural development, would act against war. (1933, p. 3213) (1933, p. 3215).

3- It would be important to establish an institution to be in charge of solving all conflicts of interest (1933, p. 3210).

4- Paradoxically, fear of mutual destruction could favor the cause of peace (#StayHome).

As a summary, Love (Eros) and Knowledge (Logos), were the proposals of the Viennese master.

The challenge of staying human in an unusual situation, knocks on our door all the time, as Hanna Segal wrote: "We live in a crazy world, but for those of us who believe in human values, it is really important we keep this fire alive, it's about believing in the power of love." This thought agrees with what García Marquez wrote in his book Love in the Time of Cholera:

"He says there's still hope, that life is more eternal than death, that we must continue to pursue our dreams, correct our mistakes, become worthy and that even if the time of cholera (coronavirus) arrives, there will be space for love, to fulfill dreams, for happiness…"

Thought is not possible without silence. In order to think and work, we must be able to close our eyes and contemplate, keep a minute of silence in honor of all the people that have left this

realm, manage to receive and transform all the whirlwind realities that hit us daily, and keep trusting our method, seeking not to deviate from the analytical route: to make room for psychic reality, which, by the way, is deeply modified. We experience going into the "lockdown" of the session (virtual session on the phone or Skype) within the experience of being confined at home. And so, this kind of "lockdown" within the lockdown, tends to blur the limits of inside and outside.

If we remain within the dimension of our profession, our usual compasses and frameworks are so shaken that we need to improvise and accept uncertainty and treading in foreign territory. I think that if we can keep going, it could have quite enriching consequences on the way we think and practice psychoanalysis.

The confinement experience (stay inside, there is no outside for you anymore) can be experienced in so many ways. The fact that we have to fight against a "natural enemy" and not a human one, may have positive consequences on the ability to come closer together.

This letter is also an invitation to build a community mentality that promotes the culture of prevention with one goal: that Eros and Ananké, as Freud emphasized, return to be human and culture progenitors again!

Hope we meet again. Warmest regards and please stay safe!

Jani Santamaría Linares Ph.D.
Training analyst for children and adolescents –
Mexican Psychoanalytic Association (APM)
Latin American IPA Board member - 2019-2021.

The Disorientation and Fragility of Humanity

Anna Ferruta, Ph.D.

Translated by
Sonia de Cristofaro

Entering the thoughts everyday life, the corona virus has awakened us from the deep sleep that kept human fragility confined elsewhere (children, refugees, Africa) or considered as an exception regarding the less fortunate, either because of their illnesses (cancers, strokes – often attributed to an unhealthy life style), or to environmental hazards of sorts.

The course of humanity (described by Harari in his book "Sapiens. A brief history of Humankind," 2011, 5 million copies sold, translated in 30 languages) seems to have been interrupted, facing us with a sense of disorientation and with the fear of being lost.

Everyone's eyes lift from the smart phone they had been navigating the web with until that moment, sustaining the idea that one can light heartedly dismiss the limits and fragilities of the human predicament. Everyone is summoned to reflect upon themselves and on their place in relationships with other people, animals, plants and matter.

The Corona virus is the Sphinx
All of a sudden, a tiny microscopic virus with spikes questions mankind, a new kind of Sphinx bars the road and poses an enigma.

The immediate reaction is of course to avoid the crossroad that forces us to contend with human fragility and to take shelter in thoughts that provide some kind of respite from becoming aware of the situation (fleeing the country, isolation); or, an overwhelming sensation of fear and of not knowing where to turn in such an unexpected and unforeseen situation (rushing to shop for groceries – one never knows what may happen).

The next reaction that also provides some degree of momentary relief, is to accuse the people who have issued the guidelines to curtail the general population's health of being wrong, many times without even examining the advice given. It is simply an understandable defensive reaction to cast out the angst of being met with the invisible and insidious enemy, and the request and need of protection that will be denied.

Three sources of strength

Abruptly and brutally confronted with the forgotten fragility of the human condition, we however have an opportunity to rediscover three sources of strength that have been dismissed as uninteresting. We can all assume our personal responsibility in a renewed fashion and with greater awareness abiding by the rules that protect us and the people close to us (for example by avoiding situations that amplify the contagious note of this virus). The pleasure that comes from being responsible and being able to take care of one's self and those who depend upon us is an extraordinary antidote to fear as it allows us to uncover unknown energies and use them to secure ourselves and others. Everyone can do something.

Another source of energy consists in becoming aware of how important the "hideous others" who we share the world with actually are to us. The people we distractedly brush by every day and rediscover when for some reason, as is happening now, they evaporate, disappear from the train stations, from

bars, from the streets and classrooms and make us feel poor, deprived of our community and sense of belonging.

But the most important of all resources is the chance to overcome the fears raised by the sudden perception of our fragility (often used to create an easy bias for some form of propaganda) by relying on the knowledge provided by men and women of science: they and only they have the tools to give useful advice on what measures to take.

The antidote to fear
Simple, essential, precise guidelines that come from those who investigate the pathological effects of the virus, are a good antidote to fear as they re-establish the contact with the emotional experience of trust in a caregiver, the trust that kept us all alive at the beginning of our existence.

Furthermore the trust we place in researchers exploring the unknown, who study the virus and the ways to contend with it (vaccines, prevention, diagnosis) continues in the footsteps laid down over centuries, of man's ability to study the heavens and Earth, the planets and animals, despite his intrinsic fragility (let us keep in mind that Rita Levi Montalcini identified the NGF, the neuron growth factor in snake venom and Fleming's discovery of penicillin came from studying molds).

Personal and community responsibility, a confident ear lent to those who boldly explore the unknown instead of shunning it and resorting to what is already known, help us confront human fears, keep our eyes open and our vision focused on the future of new generations.

"We may insist as often as we like that man's intellect is powerless in comparison with his instinctual life, and we may be right in this. Nevertheless, there is something peculiar about this weakness. The voice of the intellect is a soft one, but it does not rest till it has gained a hearing. Finally, after a

countless succession of rebuffs, it succeeds. This is one of the few points on which one may be optimistic about the future of mankind, but it is in itself a point of no small importance. And from it one can derive yet other hopes." Freud S. (1927). The future of an Illusion. XXI, SE, 52.

Anna Ferruta, IPA Member and Training Analyst, Italian Psychoanalytic Society. This Article was originally published on the website of the Italian Psychoanalytic Association. We would like to thank The Italian Psychoanalytic Society for giving us permission to publish this article.

April Poem

Sharp sirens and seagulls pierce the London spring
Breath beneath my face mask
Sweat slides under my gloved palms
Shops are closed
Red buses carry but a few
Runners prance and pant
Eerie silence

Absence
Invisible virus with the name of a beer
Corona
Covid 19
PPE
ICU
The in-out ventilator sighs

Warnings
STAY HOME
SELF ISOLATE
SAVE LIVES
The tally grows

Panic buying
Febrile fights
A suitcase filled with pasta
And toilet roll
Like there's no tomorrow

Who are
The
Unknown spreaders?
You? Me?
Here. There. Everywhere.
How I long for
The breath of the sea

Six feet

Faced alone

No touch

No words

No sight

The ultimate fight.

Jennifer Davids is an Adult, Child,
and Adolescent Psychoanalyst
– British Psychoanalytical Society

Corona Story

Mali Mann, M.D.

The hardest challenge for me as a child psychiatrist and psychoanalyst around COVID-19 has been the management of children and adolescents while I do psychoanalytic work by working with them remotely.

Along with this challenge, there are concerns about helping parents who may not be prepared for the roles they are being asked to do; becoming teachers or coaching their children and at the same time working from home remotely. The kind of

coexistence with all family members during the lock down is certainly a new way for stay at home parents to be accessible at all times for their children.

Parents do what they can and what is asked of them or expected of them while knowing people outside everywhere are suffering and dying. We know that our medical system is broken and breaking further. How can parents protect themselves and their children while they stay at home, isolated from people they love and the ones they rely on for their children?

At the same time, we as mental health professionals since early March 2020 when the World Health Organization (WHO) declared the corona virus disease 2019 (COVID-19) outbreak a pandemic, our lives have been drastically changed.

To maintain our own mental and physical health, we must remind ourselves and give ourselves permission to change the narrative of "the patient is always first" to "the patient is not always first" – only first when we know we have exercised self-compassion.

Transitioning from being in body in our consultation room to being present only by our voice and visual image can present challenge, more so when we work with children. I remember working with an eight-year-old bright boy remotely by sharing screen and doing together mind craft; a computer game. At the very end of our session, when I said we had only 5 more minutes to the end our time, our connection abruptly stopped.

I tried to enlist his parents to help us to resume our connection, and after 10 minutes waiting, I succeeded to see him on the screen, and I said bye for now and I will see you on two days.

His parent told me that he became intensely anxious and started crying. When I resumed my connection with him, He told me "How

would I know and if you were not kidnapped?" The abrupt disconnection with me was a traumatic separation from me, especially with his history of having had a mother with post-partum depression.

Hopefully, there will come a time when we will resume our normal lives. Until then, we should acknowledge the uncertainty without reacting immediately to the anxiety that it creates.

Covid Life

Kalpana Asok, MFT

My first conscious thoughts after waking up were invariably centered around trying to visualize my calendar page for the day, figuring out when I need to leave home. In these Covid days, that is replaced with a dread-hate towards the Orange-one and a piece of the Depression that is blanketing the globe.

The chickadees, mocking-birds, woodpeckers, crows, robins, wagtails, hummingbirds, hawks, ducks, and Canada geese, are louder and bolder in Spring glory. I am grateful to see and hear more of them.

My adult children have moved back home – one to continue studying from home and protect me from grocery shopping, and the other who has locked himself in to study for an exam. Their energy crowds me in positive and irritating ways. Too much to sort through in the fridge (which I remind myself is a privilege) and

gratitude to have them at home because life is uncertain.

I find myself thinking more often about my patients, and those wafting thoughts linger. I allow myself that luxury. Being less frantic has filtered into more restfulness. I tell myself that my patients will feel it too.

I am grateful for all that I do have in the world - food on the table, a family that is loving and kind, fortunate friendships and lucky in health and ability. I am more in touch with all the gratitude I feel and the inner softness it brings.

This is not to say that it is all unfolding in graceful slow-motion. There are days when I have a lump in my throat that threatens to spill over into the family, and I am careful to keep it in check so I can model patience to my children who complain or sigh depending on their frustration levels.

One day last week when the afore-mentioned lump in throat was getting larger, it grew so large it threatened to burst. Inconveniently, in the middle of the morning. I rushed out to the car, leaving my phone at home, drove myself to the deserted library parking lot, and noticed 4 other cars all politely distanced, facing out towards the cherry orchards. I did the same, kept the windows up and started sobbing uncontrollably. No lady-like tissues dabbing the eyes here. Just great howling, wracking, loud, wretched sobbing that went on for who-knows-how-long. I wept and wept more, not knowing why or caring why. I wept for all the injustice in the world, all the children separated from their parents, all my friends who were dealing with stuff that I could not hug away, all the sentient animals that are mistreated, and all the people who are cruel and traumatized. Or maybe I just wept because it was a physiological need and stress hormones had built up in spite of walking and exercising them out. When I was all wept-out, I honked

into the tissues I had in the car, put my glasses back on and sat up from slumping over the wheel.

Okay, I told myself, that is taken care of, and I can go on. I looked around as I started to back out, noticing the parking lot was empty. Except for one other car – a sheriff's car carefully parked behind a row of trees. So, I am back to being in the gratitude mode again. I am aware of my blessings, aware that I posed no threat to anyone, safely alone in my car, grateful for whoever kindly called the sheriff, for the sheriff who did not approach the car, who let me cry in peace and privacy.

So, that is where I am in this cycle of our new lives. Whether there will be more trips to deserted parking lots or I settle in to a new, slower, meditative life, I am beginning to accept a new normal.