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Uncaging the Aggressor:

NARRATIVE-IDENTIFICATION IN WORK WITH AN OBSESSIONAL TRAUMA SURVIVOR

Abstract. This article proposes a defense termed narrative-identification, an obsessive focus on generic narratives as stand-ins for historical human objects. The article provides a clinical illustration in which a female trauma survivor's masochistic obsession with predator-prey news stories insulated her from emotional spontaneity in her personal relationships, and concealed a core transference element in her work with me—that is, her fear of my becoming a sadistic aggressor. Rather than interacting with me, the patient interacted with her news stories, as if they were dominating, sadistic objects in their own right (termed here narrativeobjects). It is asserted that the patient's identification with such deindividualized, abstract states as stand-ins for human objects mitigated a sense of assault from her sadistic historical objects and facilitated her avoidance of engaging with projective-introjective processes in the transference. This type of identification with abstract states is categorized as nonpenetrating (identifications that do not stimulate introjection of aspects of the other) and is based on the following assumption: the less individualized the object of identification, the more schizoid the psychological functioning of the subject. A turning point in the treatment occurred when the patient expressed her fear of my spoken thoughts, which might suddenly and without warning introduce new topics from which she would feel compelled to create sadistic narrative-objects. This made clear my underlying transference role as a passively sadistic object, the patient's historical mother. Such a realization began the transformation of the patient's generic narrativeobjects into an enlivened personal narrative that housed a central historical object—her sadistic mother with whom I was linked in the transference.

Keywords: identification, narrative, sadomasochism, schizoid, obsessional, internalization

But the reason is the story. The telling is for me the life-affirming moment, the incantation to ward off my obsolescence. . . . As we have discussed, we often run out of time in our sessions—perhaps we do not probe as deeply as we should—because I take so much time telling my story. But I

Contemporary Psychoanalysis, Vol. 49, No. 4. ISSN 0010-7530 © 2013 William Alanson White Institute, New York, NY. All rights reserved. need to do this. It reassures me that I am alive. This is probably also why I need to write to you, why I am constantly thinking about writing to you. . . . Moreover you are not just an audience. Or maybe I should say you are an identifiable audience. . . . I should tell you that I worked on this letter off and on for four or five days, writing in my head as I walked, consulting my sources. It has been an enormous pleasure for me, absorbing, containing, life-affirming in itself, it wards off some of my more destructive impulses; it has filled an enormous void.

These words are taken from a letter written to me by a young male patient, a successful and intelligent attorney, who struggled relentlessly with impulsive acting-out and chronic feelings of emptiness. His impulses took the form of seductive behavior with women and multiple affairs in risky circumstances, which resulted in the break-up of his marriage and potential damage to his career. He was confused by his self-destructive impulses, and we both knew that—despite this manic approach to living—he was a worthwhile, passionate person with much to give. This valuable core of his identity remained, for the most part, underutilized, protected as if utterly fragile.

Because he knew that I too saw his passionate and generous core self, the young man felt close to me and longed for more of this. Although there were moments during sessions when he sought such closeness and warmth, for the most part his preferred mode of communication during sessions was to tell me stories, most specifically repetitive stories about his risky conquests with women. To me these stories seemed like a swirling wall of protection he'd built around himself, a wall that oscillated with his need to feel close to me. As I saw it, the wall stopped him from becoming too dependent on our connection, which he both valued and feared. What I came to think of the young man's "story-running" (his obsessional preoccupation with seduction narratives) also kept the nature of the transference-countertransference at bay. This I sensed as a jarring oscillation between longing and rejection, love and hate. It was as if he lived to craft his story, possibly not (as he thought) to impress me, but rather to protect himself from what he feared in me transferentially (the possibility that I, underneath my apparent lack of judgment, was a lifequelling limit-setter—a version of his own mother whom he longed for, yet feared). The young man's constant stories were not only a defense, they were his company, his "people." They also formed a generic storyline that reflected his desire to win love from me. These seduction narratives could, in and of themselves, be seen as replacements for human objects (termed here *narrative-objects*) for this young man, a way of forming a protective shell around him, yet not penetrating him deeply, enclosing him in an obsessive isolation as complete as it was unarticulated.

Narrative-Objects

Late 20th-century cognitive theory places personal narrative at the center of the individual's psychological construction of reality. "[W]e organize our experience and our memory of human happenings mainly in the form of narrative—stories, excuses, myths, reasons for doing and not doing, and so on" (Bruner, 1991, p. 4). Bruner and other theorists of cognitive psychology distinguish narrative necessity (the overarching need for a cohesive narrative in order to communicate effectively) from empirical verification (establishing that aspects of the narrative are factually correct) asserting that our sense of reality is far more compellingly determined by narrative (and memories of personal narratives) than by rational empiricism. Extending from this, narratives, as building blocks of culture, can be seen as receptive containers for people's need to form an identity. Bollas's (1992) discussion of receptive cultural objects (the interaction between human subjectivity and the cultural environment) stems from this concept. According to Bollas, the cultural field is ". . . a field for subjectification" (Jacobson, 1997, p. 113). Narratives, the vitality of subjective experience, and the growth of subjectivity are all deeply intertwined.

In describing the features of narrative, Bruner (1991) cites particularity as a basic characteristic of narratives in constructing reality:

Narratives take as their ostensive reference particular happenings. But this is, as it were, their vehicle rather than their destination. For stories plainly fall into more general types: boy-woos-girl, bully-gets-his-comeuppance, and so on. In this sense the particulars of narratives are tokens of broader types. Where the boy-woos-girl script calls for the giving of a gift, for example, the gift can equally well be flowers, perfume, or even an endless golden thread. Any of these may serve as an appropriate token or emblem of a gift. Particularity achieves its emblematic status by its embeddedness in a story that is in some sense generic. . . . The "suggestiveness" of a story

lies, then, in the emblematic nature of its particulars, its relevance to a more inclusive narrative type. But for all that, a narrative cannot be realized save through particular embodiment. (pp. 6–7)

Thus, narratives, constructs that unfold over time and mimic the concept of linearity in human existence, form basic units of meaning in our perception of reality and our sense of identity. The level of particularity in an individual's remembered narrative can be seen measuring his or her emotional investment in the story of his or her life. From this perspective, perhaps, the more generic and less particular the narrative, the less relevant it is as an indicator of subjectivity.

This article, then, explores the idea that generic, depersonalized narratives may become obsessive focal points for schizoid individuals, serving to diminish the emotional connection to the specificity of their own traumatic memories. Further, the article illustrates how such individuals can conflate generic narratives with human objects, so that the narratives actually become stand-ins for human objects. These generic narratives will be termed here narrative-objects (in distinction from human objects). The narrative-object reflects, in a stylized, generic manner, a deeply imbedded relational pattern from the individual's specific, historical narrative. Yet this generic version is drained of evocative, emotional specificity. The generic narrative can be seen as being constructed from "empty speech," Lacan's (1966) designation for language used by the individual to maintain an estrangement from his or her deepest self. Empty speech is shaped by images of what one feels one should be, as opposed to full speech, which uses language as a set of symbols that powerfully evoke the emotional specificity of the subject. Thus, generic narratives, relying upon empty speech, are drained of subjective communicative meaning. This generic quality creates a distance from the heightened emotional resonance of the individual's historical past. I will attempt to show that identifying with a narrative-object, as if this generic narrative were itself a person, maintains a compromised form of connection to the individual's relational past without evoking too much painful emotion alongside it.

Anna, the patient whose history will form the central illustration of this article, is an obsessional trauma survivor who was deeply identified with sadomasochistic, predator–prey news stories as stand-ins for the sadistic objects from her relational history. This replacement of narrative-forperson can be seen as Anna's schizoid defense, a form of obsessional undoing (Shapiro, 1965). Specifically, Anna denied her own sadomasoch-

istic interpersonal impulses by removing the spontaneous interpersonal element from her relational world, and displacing it onto a repetitive abstraction—a generic narrative. Her unswerving focus on these harrowing news stories, and the sadomasochistic way they imprisoned and tortured her, became the core relationship of her life, limiting the intimacy of her actual relationships with people, and mitigating the full force of her parents' sadism in her internalized object world. Surrounded by her narrative-objects, Anna created a state of impenetrable aloneness in her life and her work with me. As the narrative-objects gradually released their grip on Anna's psyche, this fortress of aloneness was broken and a transference dynamic with me as the historical maternal sadist and Anna as child-victim was finally able to emerge.

The Narrative of Sadomasochism

Sadomasochism can be viewed, essentially, as a narrative. It is a story in which two people hold complementary roles: one dominates and the other submits; one hurts and the other is hurt. Sometimes the players switch roles, but the dynamic itself is unchanging (Benjamin, 2004; Aron, 2006). Whether the sadomasochistic narrative is actively sought through sexuality to actualize fantasies of dominance and submission (Kernberg, 1991; Bader, 1993) or is the outcome of dissociative enactment (Davies & Frawley, 1992), as long as the sadomasochism prevails, it is always an either/or story. The roles are bilateral and complementary: either one is the elicitor of pain, or one is the sufferer of pain. Thus, the narrative of sadomasochism describes a marriage of complementary forces: the need to dominate with the need to submit; the interaction between predator and prey. Psychoanalysts have generated theories to describe the forces that perpetuate this complementary dynamic, based on the concepts of projective identification (Klein, 1946), introjective identification (Ferenczi, 1949), and dissociation (Davies & Frawley, 1992). These processes are based the assumption that the psyche is vulnerable to emotional penetration by the object (through introjection). Such theories diverge from Freud's view that sadomasochism results from guilt over hardwired, socially inappropriate urges (Freud, 1920, 1924).

Sadomasochism is often thought to express itself transferentially through projective identification (Klein, 1946). The masochistic patient is expected to induce sadistic behavior in his or her therapist through the phenomenon of projective identification, the projecting of the patient's sadistic

internalized objects into the analyst. It is asserted that the analyst feels pulled to identify with these objects and behave as the objects have behaved (Racker, 1988; Ogden, 1983). There are other well-known variations on this theme of projective identification in the therapy dyad: for example, the masochistic patient may identify with a sadistic internalized object by continually frustrating the analyst's attempts to help, creating a dynamic in which the analyst identifies with the victim, becoming an enraged, indentured servant in the transference (Joseph, 1971). Bach (2002) conceptualizes sadomasochism as a defensive position that brings a sense of cohesion to individuals who suffered from disregulation in their early relationships. Its centrality to the individual's interpersonal functioning necessitates that it arise in some projected form within the transference. These examples of projective identification within the sadomasochistic transference cannot take place without the subject's capacity to introject aspects of the other.

Introjection and Identification

Identification, a defense that eradicates the perception of any difference between two separate entities, is a primary perceptual building block toward the individual's capacity to experience love, sharing, and intimacy with the intention to internalize another. Without an implicit (if illusory) belief that it is possible to be fully united with a beloved or desired object, the individual might collapse into a depressive state of schizoid isolation. In general, identification is viewed to take place alongside or in the aftermath of introjection. Yet the implicit goal of identification—to deny separateness—is so basic and powerful that individuals who lack the capacity to introject must find other ways to identify. In other words, the capacity to introject is not a necessary condition for identification to take place. For example, Freud (1900), Lacan (1953), and Green (1986) describe forms of identification that occur without introjection. Freud's hysterical identification is a shallow, unconscious imitation of a desired other. Lacan's imaginary identification is defined as the subject's imaginary merger with a perfected image of him- or herself that alienates the individual from a deeper, internal, and chaotic self. Green's dead mother syndrome describes a situation in which a child identifies with a depressed mother's absence, thereafter living out a state of psychic deadness that defeats the building up of internalized objects in the child's psyche. All three of these forms of identification can be seen as occurring

without the subject being penetrated by the specificity of an individualized object.

Green's concept of the dead mother syndrome creates a radical departure in the discussions of identification because it describes the child who identifies with absence itself—an abstract state—rather than a unitary individual or part of an individual. Identification with an abstract state can be seen as sidestepping the need for introjection because there is no individualized object to demand "entry" into the subject. In prior work (Lewin, 2011) extending from Green's theory, I suggest the category of nonpenetrating identification, a shallow form of imitation that maintains a superficial connection to a threatening object, as opposed to having no connection at all. Nonpenetrating identifications take abstract states, rather than specific historical individuals, as their objects. Thus, schizoid or obsessional trauma survivors, fragile individuals who need to undo or deny their internal feeling states yet still find some way to connect with significant others, may use abstract states (such as generic narratives) as objects of identification. This allows them to protect themselves from more penetrating versions of identification with specific, sadistic objects in their relational history or current circumstances. The less individualized the object, the more schizoid the functioning of the subject.

In contrast, penetrating identifications (Lewin, 2011) include all identifications-with-introjection that eventuate in some form of internalization of some version of an individualized object. This internalization, even when it is painful or frightening, forms the seed of empathy and intimacy in human relationships. Penetrating identifications necessitate a piercing of the psychic boundary between self and other, and create an essential internality in the subject, creating room to absorb the crucial impact of the other. Narcissistic identification (Freud, 1917), projective identification (Klein, 1946), introjective identification (Ferenczi, 1949; Searles, 1970), and subjective identification (Lacan, 1953) can all be said to be examples of penetrating identifications. Penetrating identifications emerge with relational specificity in the transference, causing clear conflicts or enactments between patient and therapist that can then be usefully interpreted within the treatment to help the patient metabolize frightening and unwanted affect, and move toward intimacy with the therapist. Nonpenetrating identifications, on the other hand, focus on abstract states or less individualized versions of the object (i.e., absence itself or a narrative-object). Nonpenetrating identifications neutralize interpersonal conflict and enactment within the transference. I propose

here that narrative identification can be categorized as a nonpenetrating identification.

Illustrating Narrative-Identification

In sadomasochistic narrative-identification, the generic narrative is itself the sadistic object (the "aggressor") and the subject's psyche is itself the passive victim of this narrative-object, reflecting a predator-prey process. In this sense, the generic narrative-object (a basic story of sadomasochism) becomes the key "other" in the subject's life. Specific memories, including specific individuals in the patient's relational history, are blurred and crowded out by narrative-objects.

Narrative-identification can thus slow down or even halt processes toward internalization in the therapy dyad. This happens because potential transference templates, fueled by projective identifications that construct the patient and therapist into historical relational configurations, are hazy and suppressed by the force of the patient's panicked obsession and identification with generic narratives.

In order to provide a model for the manifestation of narrative-identification in the transference with a schizoid trauma survivor—a brief initial illustration—may be helpful. This abstract, unlike the case illustration of Anna to follow later, is a snapshot of narrative-identification in a treatment.

Brief Example of Narrative Identification: Treatment Abstract

A male patient who had, on several occasions in early childhood, witnessed his father threatening kill to his mother, sought treatment for alcoholism. The patient never discussed this particular aspect of his history, concentrating instead on the punishing rigors of his addiction to alcohol and marijuana. When drinking, the patient was greatly troubled by obsessive generic narratives of executions and torture as punishment for unarticulated sins. He made it clear, whenever I got him to think, that he would drink and then disappear into a "binge" of obsessional storyrunning about executions and torture. This entrapped us in a rigid and emotionally constricted pattern of sadomasochism, in which I viewed myself as the aggressor who caused him to have self-torturing thoughts. Yet as we began to focus more intensively upon the nature of his storyrunning (for example, the patient finally revealed that during storyrunning he would hit himself, spit at himself in the mirror, and choke himself), the patient grew ready to engage with the personal narrative that

was beneath his narrative-objects: the violent, potentially homicidal scenes he had witnessed between his parents at age 5. Acknowledging this history allowed us to locate a deeper version of the sadomasochistic transference: it became clear that in the transference I was him as a child (forced to witness his violence toward himself in the mirror), just as he had been forced to witness his father's violence (the father's threat to "execute" his mother).

Deconstructing this patient's narrative-objects enabled us to approach the deeper truth of his detailed history, and also helped us to recognize an essential transference dynamic. Ultimately, it became clear that, during the time in the treatment when much narrative-identification was taking place, the patient was using identification with depersonalized, generic narratives about executions to define himself. In this way, he warded off the disturbing reality of his historical objects and the way he was tortured by having been forced to witness terrifying violence as a young child.

The Concept of Narrative-Objects: Conventional and Deconstructed Views of the Object in Psychoanalytic Literature

The psychoanalytic object is a perpetual counterpoint to the subject, or the conscious self. Although the self is invariably a human being, the psychoanalytic object is defined along a continuum that can be seen as moving from "human being" toward ever more abstract, less individualized, evocations of that human being. For example, we move from specific, individualized "objects" in the Freudian (Freud, 1917) sense, toward part-objects in the Kleinian sense (Klein, 1952), and toward bizarre objects in the Bionian (Bion, 1962) sense. As the object grows more abstract and less individualized, we tend to see more primitive, schizoid modes of psychological functioning in the subject. Freud's (1917, p. 249) concept of narcissistic identification describes the object as a psychical representation of a specific, longed-for person that is internalized to stave off painful feelings of loss. This internalization is paradoxical, a vehicle for either pathology or healthy development. Freud's description is the first account in psychoanalytic thinking of an internalized object referring specifically to a person, the object of the subject's desire (Ogden, 1983). Klein (1952) deconstructs this concept of object-as-an-individual with her discussion of part-objects. The infant, who obviously functions on a primitive psychological level, identifies parts-as-whole and relates to these parts as if they were whole objects or people. Winnicott (1969) also creates a more

abstract, less individualized definition of the object in his specification of subjective object (whose function is to be available for manipulation by the subject's omnipotent fantasy world) versus the object (whose function it is to survive destruction by the subject as it moves beyond the reach of the subject's omnipotent fantasy). "It is Winnicott, with his appreciation of dialectics and paradox, who seemed to fathom the importance of the imaginary nature of the object" (Grotstein, 1997, p. 51). This sense of the object as imaginary in nature also lends itself to Kohut's concept of the selfobject (Kohut & Wolf, 1978), an object that is felt to be a part of the self, under the control of the self, used for purposes of mirroring or idealization. Writers on intersubjectivity have also deconstructed the original concept of the internalized object-as-person. Benjamin (2004) and Aron (2006) elaborate on the concept of thirdness, a oneness and alignment between mother and infant that forms an object in its own right within relationships. These more abstract and less individualized versions of the object refer to a developmental continuum. The younger the self, the more primitive the psychological functioning of the self, and therefore the less individualized the object.

Less individualized versions of the object not only indicate the primitive functioning of the early self, but also, in circumstances of pathology, schizoid functioning. For example, Fairbairn (1944) focuses on schizoid pathology and divides the object into three allegorical roles (exciting object, rejecting object, and ideal object). Bion's (1956) bizarre object is also an abstract, deindividualized concept of the human being, and is key in the functioning of psychotic individuals. Bizarre objects are composed of fragmented "pieces" of the self that fuse with inanimate objects and are conceptualized by Bion, as it were, as psychic bombs—potently powerful splitters and shatterers of personality. The psychotic individual forms relationships with these bizarre objects.

All of these deconstructed views of the original Freudian object, whether they indicate primitive or pathological functions, are more abstract, less individualized, metaphors for the emotional force of a person or aspect of a person. As previously stated, the work of Green (1988) creates a more radical departure: the idea that one can identify with an abstract state (in his theory, with pure absence) as if it were a person, and yet without the specificity of a person, the loss of whom necessitates introjection vis-à-vis Freud's (1917) concept of narcissistic identification. Narrative-objects (objects of narrative-identification) can also be seen as

abstract states—generic narratives that only obliquely represent a person—rather than specific, more-or-less individualized images that represent a person or part of a person. Identifications with abstract states, the loss of which therefore cannot be deeply mourned, avoid the intense emotional demand of human objects and are consequently not internalized as specific objects.

Identification and Symmetry

Any psychoanalytic discussion of the object requires a complementary discussion of identification, because identification unites object with subject. Identification with abstract-states-as-objects, as initiated by Green's (1988) concept of the dead mother syndrome (identification with pure absence itself) is less pervasively discussed than identification with moreor-less individualized objects. Abstract states, or, as suggested here, generic narratives, can be seen as "thoughts" which are experienced as "things." The equation of symbolic thoughts with concrete things, aside from being a potential indicator of psychotic thinking, is also viewed as a normal, developmental phenomenon in many psychoanalytic theories—notably Segal's (1957) concept of symbolic equation, Bion's (1962) concept of beta-elements, and Matte Blanco's (1986) concept of symmetrical logic. These three theories can be applied to the differential between narrative-objects and human objects.

Segal (1957) asserts that symbolic equation (the equating of symbols with the actual concrete things they symbolize) belongs to the paranoid-schizoid realm of perception. The individual's capacity to think symbolically, on the other hand, suggests that he or she has achieved the depressive position. "In the depressive position the object is given up and mourned and the symbol is set up in the inner world—an internal object to begin with, representing the object, but not to be equated with it" (Segal, 1978, p. 316). From this perspective, narrative identification is a symbolic equation, conflating a concrete thing (generic narrative-objects) and a symbolic one (a personal, emotionally evocative narrative).

Matte Blanco's (1986) concept of the workings of symmetrical logic asserts that, at the deeper levels of unconscious experience, one is more likely to employ symmetrical logic (logic that renders all things identical, including symbolic thought and concrete things). The denial of separateness inherent in identification can be seen as conforming to symmetrical

logic, making two things, disparate to conscious perception, into the same thing unconsciously. From this perspective, a narrative-object stems from the equation of two different things: a narrative and a person.

The concepts of symmetrical logic and symbolic equation are in Bion's (1963) discussion of beta-elements. A beta-element stems from "the earliest matrix from which thoughts can be supposed to arise. It partakes of the quality of inanimate object and psychic object without any form of distinction between the two. Thoughts are things, things are thoughts; and they have personality" (p. 22). From this perspective, narrative-objects are beta elements: they do not symbolize a past personal narrative. They are themselves equated with historic, human objects from the past, as if they were internalized objects.

From the perspective of these three theories, the deeper the unconscious level (or the more psychologically primitive or schizoid the personality), the more likely it is that symbolic thoughts will be equalized with concrete things. In the case presentation that directly follows, Anna's concrete narrative-objects (news stories) were equated with interpersonal symbols (internalized historical objects).

Case Illustration

Anna is a surgeon in her late 40s. She lives with her wife and their daughter. Despite her history of sadistic parental abuse, Anna's external world did not bear outward scars of her traumatic past. She did not seek out sadomasochistic enactments in current relationships, nor did she find herself in retraumatizing situations. Her family life was peaceful. Yet beneath the surface Anna felt distant, detached, and sometimes hostile and contemptuous toward her spouse, whom she viewed to be controlling and out of sync. These cold feelings of resentment and contempt oscillated with loving feelings of gratitude and tenderness, keeping Anna stuck in an ambivalent position within the relationship. Anna was unwilling to express or work on her negative feelings, because she considered her wife's kindness and competence a blessing in view of the multiple abuses of her childhood (to be described shortly). Anna insulated herself within the marriage in solitary activities (martial arts classes, guitar playing). She was very close to her daughter, yet did not take on the more difficult aspects of parenting, which required parental frustration tolerance (e.g., boundary setting, discipline).

Gentle and sophisticated, yet also physically commanding and athletic,

Anna gave the appearance of floating through life in a trance. She manifested clear symptoms of PTSD—detachment, sense of foreshortened future, difficulty feeling loved or loving. Adding to her detachment within her marriage was her complete lack of interest in sex with her wife. Although this caused a sense of unease in the relationship, both women were aware that Anna's history of paternal molestation had muted and even shut down her sexuality. When she and her wife did have sexual encounters, Anna would put aside her dislike and pretend to be involved. She had no real idea how convincing this was, and she and her wife did not speak of it much. As with other aspects of her marriage, Anna would not even begin to consider discussing the sex issue with her wife, as it would have made her feel cruel, ashamed, and exposed.

The most obvious trauma of Anna's early life was her sadistically abusive father. Physically, verbally, and sexually abused by him, Anna described herself as living in mortal terror of her father for most of her childhood, suffering repeated humiliations and beatings at his hands. He beat her while he was naked, he threatened to kill her (and once pointed a gun at her), he came into her room at night and lay on top of her, he constantly told her she was stupid and ugly. Anna described her mother as loving and protective, yet with flashes of cruelty and insecurity. Anna usually became detached and unwilling to engage when I attempted to get a fuller picture of her mother. It seemed to me that her idealization was masking other, perhaps darker aspects of the relationship with her mother, but it was clear that Anna was not at a point where it was possible to discuss this without the onset of dissociative symptoms.

Despite a generally unshakable sense of composure and calm that reigned in the treatment (conveyed in Anna's detached, gentle manner, and soft, well-modulated voice), there were rare moments when Anna came to life; that is, when Anna discussed her father. Anna's descriptions of her father provoked an intense yet impotent rage. During such moments Anna would be moan the fact that her father was dead, because she would now never be able to take her revenge on him. These moments were acutely frustrating and painful for me as well, as if the fire of her rage could spread easily to me, causing us both to helplessly suffer impotent rage at this man who seemed to have taken such delight in humiliating Anna.

Although far from dissociated when she spoke about her wish for revenge, Anna still managed to keep her sense of torment severely in check, never getting "messy" by crying or raising her voice. Her prodigious con-

tainment of this internal storm of suffering and rage within felt impenetrable, and I found myself echoing her self-containment in my own affect, as if there were no room to be another way. This also contributed to a sense of the treatment being a mournful, stylized, Victorian tableau, one in which we were both externally transfixed in positions of composure, yet internally battered by agitating emotion.

Anna was fascinated by the details of her parents' early lives and spoke of this often, with the tone of one narrating a film. Her parents, an international couple, met and married in Germany in the aftermath of World War II. Anna's father was an African-American Army officer and her mother, a native German. Anna's descriptions of her mother conjured up romantic visions of Marlene Dietrich, an impression that her mother put much effort into conveying. Yet Anna also knew that her mother's real nature was neither romantic, nor ethereal. Her mother had, in fact, been highly promiscuous through two marriages and verbally abusive to her children, particularly the daughters from both unions. Anna's parents eventually moved to the United States, several years after Anna was born.

The paternal abuse began when Anna was 7, and lasted through most of high school. Although many of Anna's stories involved cruelty on the part of her mother as well, Anna did not seem to acknowledge this cruelty as abuse, and passionately loved her mother. In encouraging Anna to explore other than idealizing feelings toward her mother, it struck me that I was invoking a wrathful, bitter ghost who threatened us both from the ether and who frightened me. Anna's mother's role in the childhood abuse remained vague yet disturbing. The mother was described as a passive spectator of the abuse, protecting Anna's father from exposure by covering Anna's bruised face with make-up on school-day mornings. The mother seemed, in other words, to be in the role of the parent whose sadism is passive (Davies & Frawley, 1994). Anna was unable to explore this dynamic deeply, and instead focused on her father's behavior. It was at such moments that my sense of feeling threatened by Anna's mother's "ghost" was at its most acute.

This state of affairs—Anna's trance-inducing calm (occasionally broken by dives into impotent suffering and rage when discussing her father), as well as her passionate devotion to her mother—created the emotional atmosphere of a Victorian tableau in the treatment, covering the underlying transference dynamics with a romantic gauze. Significantly, Anna avoided discussion of her own marriage during sessions,

despite the fact that her wife was increasingly troubled by Anna's distance and remove.

As Anna became more involved in the treatment and we engaged in greater depth with her history of abuse, Anna gave me access to a dimension in her psyche that simultaneously revealed her to me and yet protected her from me. This was a private and central dimension: her preoccupation with news stories. Anna began to speak about her narrative-objects, generic stories of sadistic abuse and captivity. And only during these moments of description, did her composure dissolve into emotional rawness. Anna was obsessed by stories of abduction and rape or torture of innocent victims. She usually came across these stories in the news, and sometimes they arose in her mind as sudden fantasies in response to mundane things she observed in her environment.

On one occasion, for example, Anna arrived for her session to tell me that she had noticed a dog on a leash in the front yard of one of the impoverished residences near the hospital where she worked. Seeing this dog led to a torrent of invasive fantasies relating to the dog's wretched life. Anna imagined it being beaten by its owner, starved, and humiliated. Describing her experience in the moment, she was agonized and gripped by this abstract narrative of her own creation; her psyche was defenseless against its insistent presence. And along with her expressive description I, for the first time, had the distinct sense that she was also torturing me with the narrative by forcing me to see, along with her, awful images of captivity and destruction of innocence. My suggestion that the dog might represent Anna within her own childhood did not resonate: Anna gave me a somewhat blank, only half-comprehending stare. The story of the dog both connected us and at the same time came between us. Her involvement with her narrative rendered my attempt to get her to see herself within the story ineffective.

It was at this point that news stories began to take on a life of their own in the treatment, crowding out our prior focus upon the child, Anna, as her parents' victim. As Anna spoke of her news stories more and more, her sense of being tortured by the narrative was increasingly palpable. I watched from the sidelines, a helpless onlooker. I felt assaulted by the content of her "stories." I did not want to think about them, and continued to feel that Anna was, in a disowned manner, torturing me by her unwavering obsession. I imagined that she needed to see my horror and disquiet in response to them. Yet I mostly held back from expressing this

sense of Anna's domination of me with the stories: It was as if this dynamic did not fit into the strict narrative construct of our Victorian tableau. Perhaps I thought it would be too ugly, too unhinging, too offensive to Anna's fragility, to broach her transferential sadism.

Despite this sense of mutual captivity, our relationship was growing more intimate. Feeling less alone, Anna was beginning to show signs of coming out of her trance. She was more confident at work, and also more expressive at home. Her shifts caused conflicts in her marriage that were difficult, at times painful, but, nonetheless enlivening to the relationship. Yet these strides did not slow the pace of Anna's news stories, or my sense that she was torturing me with them. In fact, Anna's obsession with sadomasochistic narratives seemed more unremitting than ever.

Finally, the most extreme example of this arrived—a horrifying news report involving an Austrian man who had imprisoned his daughter in a secret underground apartment, raping and fathering several children with her, all in secret over many years. Anna talked about this story week upon week. She hunted the Internet for details, and certainly knew more about this case than any other follower of it. Alongside her obsessive collecting of every possible bit of information in the news, Anna imagined the lives of these people: —the woman captive underground, giving birth to babies alone, tortured by the man, her monster-father. Anna lay awake night after night, completely and totally unable to fend off these images, which tore at her heart and mind. Anna's wife felt helpless to comfort her, and I, in every session, was forced to experience these horrifying details along with her.

My increasing sense of Anna's sadism began to chip away at our tableau's somber serenity. Yet I, so influenced by my own narrative of a *fragile Anna, suffering-in-silence*, continued to hold back from making more than the most mild suggestions of this dynamic. Instead, I focused on Anna's identification with the young female victim of the Austrian news story: the daughter, caged, as Anna had been caged, in a torture chamber of her parents' creation, terrified of being left for dead. Although I believed in the usefulness of this focus, Anna did not get deeply involved with it. She could not escape the intense pain evoked by her enslavement to the news story itself. I recognized that basing our focus on Anna's identification with the victim was not helping her find a way out of the thorny brambles of this agonizing narrative. In fact, it may have intensified Anna's need to identify with the story, rather than helping her explore her child self. It was becoming clear that her sadomasochistic

identification with this narrative, this story of enslavement, was even more powerful than her identification with the woman: Anna herself was actually enslaved by the story. I began to suggest that the story had become Anna's entire world, that she was more intimately involved with it than she was with her wife, with her child, her world, or with me. I added that the story was not only Anna's torturer, but also my torturer through Anna. Anna found this to be interesting and such interpretations seemed occasionally to break her trance.

Using Anna's sadistic narrative-objects as an entry point into discussing the sadomasochism in the room began to break the stillness of our Victorian tableau and in some small measure, the iron grip of the news story. It was as if our own relationship was beginning to compete for airtime with Anna's relationship to the story as an object in its own right. I found myself less governed by fear of her fragility. I became more spontaneous and associative during our conversations. During one session, as Anna was describing how her mood and sense of self was subject to jarring and unsettling shifts throughout the day, I thought of the television movie Sybil (Lorimar & Petrie, 1976)—one of the first popularized accounts of the connection between childhood abuse and dissociative identity disorder. Because Anna and I are the same age, I assumed she would have seen Sybil, or at least know of it. Hoping to make the topic of multiple self-states less abstract through this association to a common reference, I mentioned Sybil. Anna didn't know of it, blaming this on the fact that her mother had maintained an atmosphere of prewar Germany in their home, refusing to allow popular American culture to have a central place. (This childhood atmosphere perhaps contributed to the creation of the Victorian ambiance in the treatment). Yet now, as I began to describe Sybil's situation with her abusive mother, Anna stopped me short.

She said, "Please don't tell me. I know I won't be able to stop thinking about it."

With that simple demand, decidedly un-Victorian, much fell into place about me and Anna. I saw, for the first time, how much Anna genuinely feared me. She was now making clear her need to defend against penetration by my thoughts, my words. I saw that I could, with no forethought or specific intent, simply say something and a new, torturing narrative-object could be created, to be thrown into the black hole of cruel narrative-objects in which Anna was always engulfed. Although this had been Anna's automatic defense against taking in my interpretations about her childhood self, the defense was a torturous one, causing her to fear

me and my words—my full speech (Lacan, 1966). To Anna, rather than being her Victorian cosufferer or her victim-witness, I had always been a dangerous person. I was a cruel magician who could, and probably would, in our intimate conversations, instigate a new round of thought-torture at any given moment. With her "Please don't tell me," she was finally letting me know this. In previous years of our work together, Anna might have left her request unvoiced, because she would have assumed I would abuse any knowledge of what she feared. With her request that I stop talking, I recognized the depth, as well as the reciprocal nature, of the sadomasochism within the transference. Anna had finally given me the awareness to perceive that I, in a more frightening and unpredictable way than the narrative-objects, was also her abuser.

I told Anna how important it was that she had been able to tell me this. I said, "The last thing you need is another story of abuse to start you on a new spin of story-running." I explained that my description of Sybil's mother's sadism had been, in a way, a cruel action.

She protested, saying, "But you aren't cruel!"

I responded, "Maybe not on purpose, but I haven't recognized that you are often afraid of what could come out of my mouth."

Anna nodded, and then laughed. "Yes, it's true, now that you mention it."

She said that it made her think of her mother, who, through seemingly casual comments, would "set off" Anna's father on a binge of abuse. We realized that Anna's fear of me, however little she had realized it, was similar to this fear of her mother's words. The part I was playing in the transference landscape, previously obscured by my countertransferential enslavement to my own narrative-object of the fixed Victorian tableau, was becoming clear. I began to see how my own internal object world had mixed with Anna's demure, constricted style, and sense of enslavement to create a narrative-object in the countertransference that concealed the underlying sadomasochism. Even more compellingly, Anna's sadomasochistic narrative-objects had taken center stage. They had crowded in to protect Anna from coming too dangerously close to her own personal suffering. Yet now she had become strong enough to be more connected to me in this way in the transference. I thought about the moments during Anna's recollections of her parents when I felt the fear of her mother's raging "ghost." We realized now that my fear of Anna's mother was the same as Anna's fear of me. My unarticulated sense that Anna was torturing me was a reflection of Anna's unarticulated sense that I was torturing her. This meant that two sadomasochistic relationships were conjointly active: one in which I was Anna as a child and she, her parents, and the other in which I was Anna's mother and she was herself as a child.

Anna's deep and sudden focus on the Austrian news story had played a paradoxical role. It was Anna's way of fending off discovery of the underlying transference, yet it also gave us a key to the way she was using this news story as a narrative-object. Such awareness gave me an oblique entrance into Anna's psychic world and therefore into the transference. Making this connection freed Anna, over the next weeks, to speak much more explicitly about her mother's involvement in the sadomasochism of her childhood home. Anna mentioned that her mother might often point out things to Anna's father that would unleash his anger at Anna. Anna now began to think that perhaps her mother had done this in order to be gratified by watching her husband abuse their daughter. Anna also reeled off other memories that she had kept in abeyance: for example, the fact that Anna's sleep was often disturbed by her parents' sexual encounters in their bedroom just down the hall from hers. She also remembered an incident at church with her parents when they began kissing erotically during the service. Anna spoke of summer vacations with her mother in Europe, where her mother held rendezvous with strangers, exiling Anna from their shared hotel room while she met with her lovers. Anna remembered that when her father was away on business, she would be forced to sleep in bed with her mother, who held Anna in a way that made her know that her mother was sexually stimulated. Finally, Anna spoke of a time when her father had come into her room at night, laying on top of her and stimulating himself. Anna's mother had quickly come in and pulled him off her, but then punished Anna with coldness for weeks afterward, making comments like, "My breasts are nicer than yours."

Anna had not repressed these memories, but they had become vague, de-fanged, and disconnected from affective resonance until we recognized Anna's transferential fear of me as sadistic implanter of narrative-objects. Her mother's actions, the particularly humiliating and exhibitionistic qualities of her mother's sadism, had, up to that point, been absorbed into the generic narrative-objects of sexual humiliation with which Anna had obsessively identified for years. When we finally recognized my role as uncager of narrative-objects, in parallel to her mother's uncaging of Anna's sadistic "father-beast," we were able to enliven the relatedness of the transference, giving Anna a way to work things through and providing

her with a version of her mother in me—a mother with whom she could work toward repair.

Discussion

In the first years of my work with Anna, the backdrop for our exploration of her past and her feelings about her parents was a fixed Victorian tableau, almost as if we were members of a two-person play in which the director had told us to keep our emotions in check in order to build tension. This tableau can be viewed as my own form of narrative-identification within the transference/countertransference. In distinction from Anna's sadomasochistic narrative creations, my countertransferential narrativeobject told a tale of demure, bottled-up cosuffering, which connected both to Anna's genteel personal style, her sense of enslavement, and my own internal object world. While it reigned, this generic narrative-object constricted emotional resonance and limited spontaneity. Yet it also provided a container within which Anna could gradually allow me to learn the landscape of her psyche, particularly through the form of her sadomasochistic narrative-objects. Anna began to rely more heavily on her narrative-objects to insulate herself from penetration by my thinking presence. I became more aware of one side of the sadomasochistic transference: Anna's torture of me as witness to her grueling stories of sadism. As the rapidity and intensity of narrative-object reporting continued, this very defense proved crucial to seeing the deeper material: it was through Anna's fear that I would create new narrative-objects that I, too, as a version of her passively sadistic mother, was a torturer.

This effort toward symbolization of the underlying transference happened slowly because Anna's narrative-objects protected her as much as they tortured her, and she clung to their secret importance. Anna's passionate loyalty to her narrative-objects showed that, until she was able to gradually develop intimacy with me, she was trapped in a concrete realm of perception in which there was no difference between a narrative and a person. Her narrative-objects were her abusers, just as her parents had been, and they insulated her from new, potentially reparative, relationships. This helped us to know that Anna was not, as she had come to think, a freed slave. She was still a slave to her abusers—now narrative-objects—entities in their own right that stood in for historical objects. Her nonpenetrating identification with sadomasochistic narrative-objects maintained for her a blurred connection to the threatening and destruc-

tive objects of her past. Discovering this brought us to the deeper level of putting the unformulated trauma of her past into words. These words, of course, formed a narrative, constructed of full speech (Lacan, 1966): Anna's personal narrative of maternal abuse. Moving past Anna's nonpenetrating identification with narrative-objects gave Anna back her own past—a painful but, of course, immensely valuable gift.

As Bion (1963, p. 27) asserts, it is the infant's mother, in a containing relationship with her child, who provides a state of reverie within which the child develops the capacity to think on his or her own. If one views the working through of Anna's narrative-objects as a development from concrete to symbolic modes of thought, the concrete stage of this process is her defensive equation of a narrative with a human object. This equation played a dual role during the sessions: Anna's defense, yet also a connecting point of eventual understanding between us. The next phase of sadomasochistic enactment accompanied our growing mutuality as the narrative-objects became a shared experience within the transference. And, finally, as we put the role of the narrative-objects into words, we arrived together at a Bionian phase of mother/infant containment, in which my reverie transformed beta elements (sadomasochistic narrativeobjects) into an alpha function (symbolization of the role of these narrative-objects), creating a personal narrative of full speech from a generic one of empty speech (Lacan, 1966).

Beta elements can be seen as bits of concrete thinking that clutter up the pathways toward mutuality between patient and analyst. Primitive forms of identification can be seen as pieces of concrete thinking. Whether a narrative-object is viewed as a beta element (Bion, 1962), as an example of symmetrical logic (Matte Blanco, 1986), or symbolic equation (Segal, 1957), all of these theories key into an aspect of primitive thought in which the enormous difference between a personal narrative of full speech and a generic narrative of empty speech is wiped away in order to maintain an illusory sense of safety from the emotional threat of interaction with the other. It is tremendously helpful for the analyst to mentally embrace these concrete states. An example of this occurs when a narrative-object comes to fill in for an actual, historical person as an object of identification. Searles focused on occurrences of primitive identification within the transference in a very active manner, applying an existentially demanding and emotionally rigorous clinical approach to help shift the primitively functioning patient away from an isolating state of autism (Searles, 1970, p. 1) to a healthier state of therapeutic symbiosis (Searles,

1973, p. 248). According to Newirth (2003, p. 90), "the critical reorganization of the relationship from the autistic stage to the stage of therapeutic symbiosis is a function of the analyst's capacity to identify with the patient, which Searles describes as the patient becoming the analyst's whole world."

As Anna and I came to understand her use of generic narratives as substitutes for human-objects, I was able to perceive, from her perspective, the power these narratives held to torture her yet also to "protect" her (specifically from the rigors of a closer, human connection with me in the transference). I understood that, in the concrete realm of experience, we had to use her narrative-objects as bridges rather than obstacles to connection. From that point, I stopped trying to place Anna within the narratives (i.e., I stopped suggesting to her that perhaps she was identifying with specific victims within each narrative), and began to work with the stories-as-a-whole (i.e., as abstract entities: Anna's objects of identification in and of themselves). With a mutually developed understanding of this concrete situation, we used the role of the narrative-objects as portals into Anna's internal world. Processes of projective identification began to replace the narrative-identification: Anna and I began to enact sadomasochistic roles from her personal (as opposed to generic) childhood narrative in the transference. This in turn led to a way to symbolize this transference dynamic through language, reviving Anna's personal narrative to consciousness within a shared, relational context. Thus, we moved through three phases: from nonpenetrating, narrative-identification to penetrating, projective-identification to symbolization when I was finally able to be a containing, internalized presence for Anna in her creation of her own personal narrative, a narrative constructed from full speech.

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