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**Toward and Away from the Light: Some Thoughts on Seeing in Therapy**

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*The Beginning of an Unexpected Dream*

While taking a brief nap between sessions and at the border of consciousness, or the so-called hypnagogic state, a wild dog figment spiraled into my dozing gaze. With jaw and paws expanding—oddly, I didn’t feel fear but instead insulated desire. The image lacked any obvious relation to my personal life, so I wondered about my patients, focusing on the one I was about to meet with.

After the initial greeting with Jane, I swerved from our protocol, and abruptly informed her I had a question, playfully asking, “What is your favorite wild animal?” Despite the out-of-the-blue nature of my question, Jane cooperated with the fundamental rule and replied, “elephants.” She seemed perplexed by her answer. I was also surprised. The cute character of the animal was misfitting with her blunt nature.

*Seeing in the Future Tense, Countertransference and Reverie*

In Webster’s essay (2023), “I’ll See You There,” the reader learns that the title is a line she wrote down in a note to a patient during a dream. In a session later that week, the line turned out to be what the patient needed for help with his doubt about having committed to analysis. Webster describes this dream event as *“Seeing* in the future tense.” This phrase provides a poetic grammar for clinically sensing the unknowns of the treatment narrative. Importantly, the intervention, “I’ll see you there,” expresses faith in a future time and place of seeing-and-being-seen, that distills out a primal need that patients unconsciously seek from therapy. Though, what constitutes seeing in this case is just as elusive as the expression of its unknown need. Like the child who is mystified by the growing up process, patients crave a concerned parent who doesn’t quite know (see) what their child needs in order to make that next developmental leap, but does have the desire to tunefully wait with them in that frustrating, worrisome and seemingly static zone. When a therapy dyad hits such an area of unclear maturation, and sensitively stays with its tedious rhythms—an unknown nourishment of care may surprisingly emerge.

At the beginning of my training, I was enthusiastic to hear that Hyman Spotnitz, the founder of Modern Psychoanalysis, the school of thought I was studying, had said that the more one practices psychoanalysis, the more psychic one becomes (Claire Ernsberger, Personal Communication, February 5, 2001). Spotnitz’s observation was a fertile placeholder for reflection. It comes across as highly pragmatic yet whimsical and usefully unresearched. Intimately passed down by word of mouth, it brazenly highlights a profession that primarily conducts its empiricism through the subjectivity of relational language. Is it true, isn’t it true? To engage a scientific validation of the hypothesis is to move away from the vulnerable non-rational capacities that allows for the sensory letting go in the first place. This Modern Psychoanalytic oral tale loosely situates within the historical context of Freud’s ambivalence toward dream telepathy (Eshel, 2006; Freud, 1922).

Still, the work of therapy is as serious as a human’s life. The therapist can’t just do any old thing they feel like in a session because it feels like the right way to go. Conversely, rigid adherence to a codified way of practicing, risks missing the unique-aliveness-needs of the patient-therapist dyad. Ultimately, the clinician carefully hones a capacity for working with their own intuitive leaps into intervention within a studied tradition. Many hours of therapy sessions are very ordinary and consist of carefully gathering data at the conscious and unconscious levels, patiently wading through fragile psychic defenses, waiting for the opportune moment to safely and usefully intervene.

According to the Modern Psychoanalytic frame, any interior stimulus that tells the therapist something about a patient would fall under the category of countertransference (Spotnitz, 2004). Even a blatantly subjective reaction can be construed as uniquely simulated by the patient. Originally thought by Freud (1910, Spotnitz, 2004) as a hinderance to objectively understanding the patient, clinical thinkers who succeeded and critiqued Freud, repositioned countertransference as one of the most valuable tools a therapist can use for collecting much-needed unconscious data about their patient. Freud viewed countertransference as an obstacle to overcome, concluding that the countertransference experience is an indication that a therapist is blocked from correctly interpreting the information their unconscious is receiving from a patient.

Spotnitz’s innovations are primarily built on disputing Freud’s assumption, with Spotnitz (2004) going as far to say that psychosis and narcissism (which Freud deemed unsuitable by psychoanalysis) can in fact only be treated through the therapist resolving the resistances that arise in the countertransference as the key leverage point. Spotnitz (2004) analyzes Freud’s (1814, 1924) blind spot to psychosis and narcissism as stemming from Freud’s own hatred of psychosis and narcissism within himself; a hatred that he anaesthetized by smoking many cigars throughout the day.

One sees evidence of this rigidity, when Freud (1929, 1936) writes about the baby’s blissful feeling of the oceanic with the mother, especially since Freud denies this feeling of the oneness as a vehicle for objective contact in the spiritual moment. I hope I don’t sound like a Freud basher. I am not. I greatly admire him and see his human limitations as inspirational. I find it helpful to reflect on Freud’s anxieties regarding countertransference, narcissism, psychosis and the oceanic, when I feel apprehensive about them myself. I wonder if such a hesitation could be essential to the reality check that psychoanalysis offers as a perpetual starting out with and curbing of primitive psychic capacities. In other words, an urgent scientific component to psychotherapy is effectively dosing the immersion into the unconscious depths through a counter-poetry of rational denial.

A full exploration of the Modern Psychoanalytic view of the transference-countertransference and transference resistance-countertransference resistance matrix is beyond the scope of this paper. Though the dynamic germane to this quaternary structure dwells with the patient transferring his earliest feelings and attitudes toward his early mother onto the analyst and the response the analyst has to this situation. Spotnitz’s (1976) countertransference technique center around the idea of induced feelings and can be sketched out in both an active and passive sense. In the active approach, the technique rests on the “therapist’s ability to ‘feel’ the patient’s tendency toward instinctual discharge. The capacity to sense his latent emotions and help him feel them determines whether their relationship is grounded in genuine emotional understanding or is primarily an intellectual exercise.” (p. 29) In the more passive realm, the dyad allows one to consider that “[i]mpulses to action in one individual may arouse similar impulses in another. When their patterns for discharging impulses are similarly organized, they experience the same type of emotions—characterized as induced emotions.” (p.30).

The Modern Psychoanalytic methodology for the beginning stages of a treatment deprioritizes intellectual comprehension of induced feelings and focuses on the silent experiencing of the emotions and more actively channeling these feelings into object-oriented questions, joins or other interventions that give the patient the feeling of being welcomed and accepted as they are (Spotnitz, 2004; Shechter, 2021). Though ego dystonic joins uniquely make room for the negative feelings of the patient’s pre-language attitudes in an intimate way (Spotnitz, 2004). Through the negative narcissistic transference-countertransference construct (Margolis, 1978), early anger can be usefully situated within the patient-therapist dyad. The positive narcissistic version of this dynamic is important to note, though of greater relevance to this paper is a sub-type of countertransference called the anaclitic countertransference (Spotnitz, 2004: Liegner, 2003). These nurturing feelings occur in the analyst over the longer duration of the treatment, and allow for the patient to have a specific dependency experience that the patient needed and did not receive from the parent. The anaclitic feeling in the analyst is the one that was missing in the parent.

While Spotnitz, didn’t use the term reverie per se, he did employ a receptive stance in the last years of his clinical work that expressed the lyricism of its soporific relation. His analysand, supervisee and proponent, Marshall (2008) writes about these experiences in his personal reflections on Spotnitz. Reverie (1962, 1965) is a remarkable term that Bion brings to the psychoanalytic table, its connotations softening the technical edges of countertransference. Working off Klein’s (1946) projective identification, Bion envisaged the emotional fantasy of the mother toward her baby as something more than just a random musing. In fact, these flights of imagination are understood as a reception of the infant’s primitive bodily communications as essential to not only regulation, but development. The fantasy or reverie is an expression of a very primal co-metabolic act that takes place in a burgeoning-psyche-to-maternal-psyche-field.

A reverie of a reverie: Unstructured body sensations of loneliness are conveyed through the baby crying. They are met with the mother picking her baby up, sympathetically cooing an inquiry, smiling in resonation with the baby’s openness, which in turn opens a play of eyes and questioning sounds about the feeling states between them. If there is a visual fantasy, perhaps it is that of a starkly dark desolate space enclosing a slow-motion explosion of light; and within the felt empathic realm, a kind of counter-receptive shape of grey darkness soothing through merging neural tones. An invitation from the mother’s need for contact with her baby’s need for contact with the mother. Further reciprocities: Unnamable vibrations—aromas permeate, stabilizing silences. Call it an interoceptive climate that dreams in the reciprocal pressures of the baby’s emotional desire, all contributing to the mother’s feeding-structuring communications—even the sudden blank quiet that emerges in response to the confusion of loneliness.

Bion called the infant’s unstructured impulses/unformed sensory impressions beta elements, and construed the mother psycho-metabolizing them into alpha-elements as making building blocks for thought and overall psychic growth. The mother digesting and feeding them back as refined unconscious content to the infant, translates to the relationship between analyst-as-mother and patient-as-baby. I would say that the primal nature of relating this way is not that much different at all between therapist and patient, though formally housed within the ritual culture of an adult psychoanalysis. Perhaps zero different in emotional moments, just a needed veil to convince the adult patient that they are not a child. Of course, the development of embarrassment, shame, guilt interferes with the patient surrendering their world to be so intimately digested by a new caring figure.

Dependent as the body is on sleep, Bion emphasized that alpha elements store psychic experience so that the beta material becomes ready for dreaming. It is through the other that we can truly sleep.

*Jane and the Wolf*

Jane is a partnered gay woman in her late twenties; athletic and very competitive about her business in the decorative arts. She has striking crimson-dyed hair parted to the side and moves with the mechanically graceful movement of a soldier. In response to my inquiry about her favorite wild animal, Jane explained she liked elephants because they were family-oriented. I joined in by sharing my positive feelings about elephants, pointing out their loyalty as showed in nature documentaries. The fun of this mutual elephant love ran its course, and passed into one of those intolerable silences that defy concentration. As I was attempting to wrap my mind around this black-out tension, Jane began talking about the time she petted a wolf. Her words seemed to emerge as though out of an incredulous darkness. The moment before had been so intolerably quiet.

The contrast of elephant and wolf also dazed me. I noted the layering of my disbelief. The association to the pre-session dream-reverie was uncanny; her telling of the story felt like a consciously spoken link. Before I congratulated myself too much, I refocused around the idea that I was working with a patient who has a considerable problem with rage. I listened attentively to Jane’s story of meeting a wolf as a teenager when on a rehabilitative wilderness trip to Alaska. She was told by the wolf’s owner to remember she was dealing with a potentially dangerous animal and was advised not to make any fast or sudden movements. Jane observed that the wolf’s teeth were sizeable, oddly rounded and very sharp. The impression she stimulated was again dream-like in a phantasmagoric yet clarifying way. She remembered feeling “just what it could do,” feeling its nose pressing through her hands, the sharp tip of one tooth grazing her palm. I asked what was meant by “just what it could do.” She slowly uttered that she was well aware of how things could change in the flash of an eye. I echoed, “flash of an eye.” Jane then began to speak about the mixed densities of bristly and soft fur she stroked on the wolf’s back. “The fur,” I asked. “Yes,” she said, “each time I stroked down its neck and back, I felt a vibration come up through its strong *body.* I remember now a very intense whimpering by the wolf. I was awed by the combination of power and vulnerability. The fur was rough and cozy on my fingers.” At the word *body*, I sensed a feeling of pleasure as a kind of expansive vibratory energy, at once filling and subtle. Up until this moment, our sessions had been mostly consumed by the venting of her intense anxieties over control and power in her daily interactions.

Jane is new to therapy. We have been working together for approximately one year and this is her first go at the talking cure. My general approach to beginning a treatment aligns with the Modern Psychoanalytic method of welcoming the patient through a basic holding. I only deviate from “following the contact of,” asking “object-oriented questions” and “joining with” the patient, if I have a feeling that clearly opposes the neutral stance and indicates otherwise. The premise of this approach is based on the idea that interpretation will not help a patient if their ego is not strong enough to make use of it. Even the slightest communication that calls attention to the patient’s ego and how they are feeling in the moment is approached cautiously, if at all. The relationship builds on the concrete surfaces of concrete subjects. The feeling of the superficial is paradoxically strengthening at the deepest levels of primitive ego development, helping the patient to develop a progressively more sophisticated palette for psyche. Still, patient communications are made at the pre-verbal level and create feelings in the therapist that are vital pieces of information in and of themselves. The connotation of feeling here is in the sense of a countertransference intuition, in this case, in association with or immediately stemming from the pre-session dream reverie of the wild dog. The seemingly out-of-the-blue question about a favorite wild animal was distilled from the hours of careful resonation with Jane’s need for a highly controlled emotional experience with me. A feeling that she trusted me and was ready for a slightly deeper therapy.

Having been raised by a relapsing addict mother in a culture of repetitive trauma, Jane had developed an unflinching intellectual defense for reflecting on herself and others. I both resonated with and away from a kind of playful thinking game with her. In the few moments following the dog reverie before her session, I was distinctly drawn to Jung’s (1971) construct of the shadow. Then during the actual session and in the moment of resonating animal bodies, I felt a call to offer some basic psychoanalytic theory.

I asked Jane if she had heard of the shadow. She said she had, but fathomed it as being a kind of evil housed in the other. I acknowledged that viewpoint, and told her that Jung had a very specific idea of the shadow. For Jung, the shadow represented a forbidden part of ourselves. I also let Jane know, that many people who I have worked with who suffered early experiences with an abusive addict parent, harbor a lot of rage. She grunted in affirmation. I wondered aloud if the wolf might be telling us something about all this. Jane was enthusiastic about the prospect. She immediately told me she had *forgotten* to report that her father visited two months earlier. A flood of overstimulating mini-stories came forth. Her father telling stories of his own mother coming on to him when he was a child. Her father driving erratically on the freeway when they went out to dinner. Her father tantruming and crying when he didn’t get his way. In contrast, she reported that she was happy that he met her new and first puppy. I remarked that it sounded like her father was emotionally like a toddler. She chuckled and drew sharp parallels that resonated at the gut level. Jane shifted her head on the couch, rage beaming from her eyes, and shouted loudly that her father, treated her this way for her entire childhood. “No wonder I blow up at work,” she exclaimed, tears streaming down her cheeks. As she detailed more memories, I felt the power of her rage vibrating in the room, minus the usual anxiety. An impassioned conversational tone carried a new ease as she went through all the ways she is critical of her girlfriend and employees, to her girlfriend asking why she never treats strangers so meanly. I joked that strangers aren’t stuck with her. We both had a hearty laugh.

When Jane sat up from the couch, I noticed her color was brighter, almost sparkling, her eyes clear, her face relaxed like I had never seen. I asked about her state, and she said she felt great, super energized. We said our good byes, and I quietly wondered if the wolf had been integrating to her on a fundamental level of digesting trauma into growth. Had recalling the memory impression of the vibrating fur in the presence of the whimper, let her experience her rage in a feeding and reassuring way. One of the first things I observed about Jane was the kind of psychic tightness that comes along with having a dangerously unpredictable and overstimulating parent. A new optimism was coming through her. The feeling inside me was extraordinary. I enjoyed its flow but held it in check. I wondered what would come next. Was this uncertainty resonant with Jane’s early experience? Even so, one never knows the next turn, twist. I allowed myself the nourishing glow of a solid session while steadied in the possibility of future scenes.

*Going Towards and Away from the Light*

Freud’s (1895/2000) suggestive line that the goal of psychoanalysis is to go from hysterical misery to common unhappiness sets a restless standard for psychoanalytic sanity. I was introduced to the line by Spalding Gray (Broomfield, 1992), delivered through the theatrically brilliant hysterics in his monologue, *Monster in a Box*. After Gray’s suicide, Freud’s goal reregistered as a highly urgent variable through which to monitor expectations around creative anxiety in terms of accepting common unhappiness. Gray’s final depression seems to have been triggered by a disfigurement to his beautiful face caused by a car accident—of course, trailing back to his depressive mother who also committed suicide. I wondered about the beauty of art and self as a protection against the inadequacy of being human, of feeling helplessly guilty to the parent who cannot be saved—and how art loses beauty in the mirror of undifferentiated ugliness. Worse yet, being uncertainly ordinary inside the shadow of neglect. Or even worse, just plain ordinary or plainly plain in time and space that is indifferent.

Before one sinks into the overly sedate moods of an Edward Hopper painting as the definitory tone of everyday melancholy, they can stop off *in between* and focus on the relief that is temporarily released when transitioning from self-aggrandizing anxiety to the ordinary. A significant move from Freud’s pleasure to his reality principle or what Klein frames as the all-good/all-bad vision of life (the paranoid-schizoid position) and then a mental development into a vision of things imbued with an ambivalent mix of emotions (depressive position) (Klein, 1935, 1946, 1997). This maturation is difficult for everybody. Just observe all varieties of popular culture that behold the overwhelm of the parent’s out-of-control feeling when managing a toddler tantruming because they are not getting their way. The world feels like its ending as the little one is faced with the limits of their omnipotence over the ecstasies of the symbiotic realm. They emerge ordinary for the first time. (Winnicott, 1990, 2005).

The work of this maturation is really never ending as one learns throughout life that their original fantasies about life are far more limited than they had hoped. Before disintegration into exploding rage or enclosure in imploding hopelessness, one can get help. Like the primitive mother, the analyst can be present through their psychic antenna and catch the aggression at the frequency of reverie and play back a revised version in therapeutic song. If all goes well, an improvisational tool that parses out little notes of some good and little notes of some bad equalize the psyche—an acceptance of the shifts that slide from experiencing more good in one moment, to more bad in the next—then a blend of this and now a mixing into that, etc. An attitude of open-ended flexibility toward apprehending the nuances of experience, allowing one to do something with their psyche other than drown in anxiety. One can commit to a partner who returns to a frog after the second kiss without feeling persecuted that they are going to destroy romantic destiny*.* One can embrace a job that doesn’t feed all the excitement one feels owed from what they missed out on in childhood. The middle ground opens. A reasonable place to live can be accepted instead of a rock star palace. One can socialize just to get out of their head and nourish in the company of a living-breathing other.

If there is an image par excellence that expresses why a person would go to therapy, it likely has something to do with a shining light giving off a feeling of hope. Going to therapy is a movement towards the light. But going into the light can also analogize to death/crossing over; but also to rebirth through the opening of the birth canal. Perhaps, this imagistic model of psychoanalytic sanity then illustrates being available to liminal moments of meaning and their creative use—even when this means feeling frustrated, even badly so, hopeless.

Webster (2023) investigates Merleau-Ponty after coming upon his name as a minor reference in the writings of Lacan (1998). Merleau-Ponty “the philosopher of sensuous embodiment” was obsessed with Cezanne. The French painter calmed Merleau-Ponty, taking us “straight to the objects—to their viscous vibrating immediacy—that otherwise remains isolated by our individual consciousness.” Pardon the association: I think of my mother. Not just for the sake of it, but regarding Freud’s concern that the therapist can help a patient no farther than their own complexes/resistances. My mother was an artist. The faint luminescence of her light-slate pencils outlining the psychic reality of my childhood. Webster links artists and psychoanalysts in an emotional diagram that locates the searched-for-object in a field very personal, vulnerable field. In *Cogitations,* Bion (2018) has a schema in which he traces two lines of transformation from his O (or unknowable infinite reality)—one pathway budding into a pictorial image and the other growing into an ideogram or the pre-cursor for letters, words.

My mother was a still-life painter. When I was a child, she worked primarily in oils on Masonite, but also silverpoint, lithographs. She tediously arranged colorful objects on carefully ruffled tablecloths, then spent countless hours first penciling a carefully measured under-drawing of the image on a surface, followed by innumerable days of painstakingly coloring in the outlines with oil paint. In her case, muting the vibration of visual immediacy within a geometric encasing. A light shined but it was highly restrained, just like her. My mother the original object and her circadian rhythm of pursuing the still life of the object.

When I was an adolescent and bragged to her about my discovery of the Greenwich Village art gallery, *The Psychedelic Solution*, she counter-bragged about a revelation she had at ten-years-old that she called “The Clarity of Light.” It seemed an almost white light revelation of aesthetics that overcame her, in which all the world ordered in luminescent perfection. A vision that was light years away from the chaos of her poor Jewish Brownsville upbringing. I imagined it as a pyramid of light that both projected into and out of my mother’s eyes that showed her a deeper beauty of the world, the internal nourishment that her psychotic mother was unable to give her being unconsciously deposited in the light before her. Just out of reach, yet within the range of her paintbrushes touch.

When I was beginning to embrace psychoanalysis, I made a t-shirt with the text *Psychoanalysis is Funky* accompanied by a high-contrast image of Freud. The shirt was inspired by the lyrics, “If you will suck my soul/I will lick your funky emotions” that George Clinton wrote for Funkadelic’s first album (1970). Clinton’s construction viscerally illustrates Spotnitz’s (1976) idea of “reciprocal induction” or the interplay of emotions that occurs between analyst and patient. While the song is implicitly sexual in nature, if one takes on a psychoanalytic consciousness, the aesthetic climate feels overall nourishingly psychosexual. The subtly spoken nature that begins the song suggests a therapeutic holding and the ecstatic conclusion conveys a mental transformation of psychic experience over the instant gratification of biological pleasure. The de-centering of the theatricalization of sex emotion isolates a therapeutic kernel, revealing the symbiotic relation of breastfeeding as a symbiosis of psyche-feeding, one that emotionally enlivens through mutuality and structures sensory experience as letting go into psychic unknowns.

*Seeing/Looking Away – Remembering/Forgetting*

My mother’s world was far too dangerous for her to be aware that she and others had emotional insides, let alone the primitive needs for the other that came along with that. Some trauma asks us to see more than we can bear—more than we should have to. Though other trauma is so painful, it is so entirely unseeable that the psyche is willing to perform its own vanishing rather than perceive. The polarizing pressures of having seen too much and too little, sets therapy up as a task that can be seduced into the extreme of either fashion of seeing too much or not at all. One needs to negotiate the tides, so to speak, and roll with variable directions of sight and psychic blindness in order to achieve integrative moments that touch something that feels healthy.

Seeing too much from being made to feel way too much too young, may be a psychic trauma of the worst kind. The type in which the newborn is left alone too long and its bodily tensions that were designed to simply fuel the messenger of a cry for the mother builds into unanswered shattering agonies. This is the type of crazy-newborn-seeing that Klein writes of so well and perhaps the adult mind needs to frame as gothic fiction in order to survive reading about the unspeakable psychic splits that can be visited upon the innocence of new human life. Where do these hallucinatory terrors go in adult imagination? Perhaps they inspire love of horror movies, a drive for war, the wishes of the surgeon—even the aesthetic omnipotence of the artist. Depending, the result may be a solid adaption. Though in psychosis, there is a crack in the ego and the nightmares spill through and meet what appears to be the blank screen of external reality with the howling insides of unprocessed memory. Such a fracture line is likely found in the periphery of every successful adaption, no matter how vaguely present it seems.

It occurs to me that one of the first tasks of therapy is simply an effort of inviting the patient to voluntarily go to wakeful-sleep in that special kind of psychoanalytic way. Not hypnosis yet not not that. One looks for the thread that links to a feeling in the patient that dreaming is good, and even more delicious, if done through an oceanic bond with the therapist.

Unfortunately, or fortunately, there are just so many tension-ridden-priorities to talk about and resolve in the present moment, that the connections back to the original shocks get conveniently washed away. There is just too much to remember about right now! The drama of present-need cares little for infantile origins in its crisis to live a real (accomplished) life. So much of therapy is talking, talking—talking to remember the week. Remembering just what happened because it was too much and maybe one missed something key or one just needs to feel the light touch of psychic hands pushing up from under the ever-worrying sense that they might fall.

Reality demands its own practical version of forgetting. We remember to forget. And forget to remember. And maybe it’s for the best, because the past can be just too painful and scary. For many therapies, origins are way out of vogue. I remember being overjoyed when I learned in my early thirties that I could look away. I didn’t have to watch the news and I could still be me. I could close my eyes during an upsetting moment in a movie and open them when I wanted. I could stop listening to a story if it was too much. All manner and variation of boundaries. Trauma is caused by internal sensory flooding says Freud, so what good was going to come from choosing to be conscious of more than what I could psychically process. In Genesis, God creates the world from the formless void. First the oceanic, then the light, then light separates from dark. With new beginnings come boundaries, or perhaps it’s the other way around. It’s the boundary of starting over that allows for one to begin again.

Another key welcoming fact about psychoanalysis for me was Freud’s love of ancient artifacts and myth. As a kid I loved to play Dungeons and Dragons and after I saw *Raiders of the Lost Ark* (1981)*,* I wanted to be an archeologist. I would dig in my Brooklyn backyard and find archaic looking things, an old coin here, a relevant piece of broken glass with writing on it there. But still, the antecedents of archeological desire ached. I wasn’t finding what I was looking for. The first Indiana Jones movie all too clearly shows the risks of finding, when the ark of the covenant is opened amidst a gathering of Nazis at the end of the movie. Jones’ rival, Rene Emile Belloq, who is a mercenary archeologist, unseals the sacred container. Indie is tied to a pole with his co-heroine Marion Ravenwood who he loudly advises to close her eyes as he does the same. Avenging spirits are released from the ark and melt the faces of all those who look into theirs. As well, a fiery electric bolt shoots out of the ark into Belloq which then fragments through him and incinerates the remaining matrix of Nazis. When the murderous God storm is over the only survivors are Jones and Ravenwood. By not looking, they survive. You see or don’t see: By not being awake together, they dream.

The above scene dovetails nicely with a Midrashic story that was essential to a Talmud lecture I attended at a synagogue years ago. Moses’ brother, Aaron had two sons, Nadab and Abihu, who are killed by God with fire because they enter the Holy of Holies, the resting place of the ark and where God is said to reside in the ancient temple of Jerusalem. More than just entering, they bring man-made fire to the altar which is insulting to the heavenly fire which God creates to consume the sacrifices. The lesson seems to be reflected in the Jones movie. God is more than just unseeable, to directly see God without invitation is to burn out of human form. In this sense, God stands in as a center molten point of psyche, the unbridled energetic substance of impulses that need psycho-metabolic mitigation by the other’s reverie in order to be survived.

Webster (2023) writes how Lacan was critical of his friend Merleau-Ponty for wanting to be enveloped by the mother’s primitive body. I can sympathize, rather identify with Merleau-Ponty’s quest to know this sanctuary of maternal form through the study of art. Webster cites Merleau-Ponty’s descriptions of Cezanne’s paintings in which he saw a luminescent center revealed from within that conveys an actual material substance of the painting. During my early analytic training, I grew interested in the Kabbalah, in particular *The Bahir* (Kaplan, 1989) which further elaborates how God created the world out of language. *The Bahir* closely examines the world-making work of the Hebrew letters. Inspired by these texts, I started painting ideographic-pictographic reveries that took the letters back into their imaginary centers of pre-language.

When I touched the brush to the canvas, I sought a kind of oceanic-meditative contact with the primitive mother’s body as it symbolically lives deep in the unconscious from before or rather as language formed. Here, the brush stroke was less of a technical maneuver to create a visual effect and more of a preverbal comprehension of the infant regaining intimacy with the warmth of the mother’s presence gone too soon. I had to see if I could learn something more about the actions involved with my mother’s incapacity to be and speak in emotionally generous ways with me. The colors I used were in resonance with Merlau-Ponty’s perception of Cezanne’s illumination of the painting's potential corporeality. I recognized the nature of light emerging from the darkened shadows of Rembrandt’s portraits and Van Goh’s soul-blazes, as all saying something about how light transmits from the unknowable center of infinity. Could I find where my mother got trapped? I sought to unravel my internal mother representation as it had been encoded by a still life painter who attempted to freeze the vibratory nature of light/life in the fantasy of a real still object. Freud and Klein streamed through my mind as I made these paintings. Perhaps, this art was an independent study just as germane to my analytic training as any other facet. The healing nature of the creative experience was/is real. But so was the lack. Not an ultimate lack, but a bit-by-bit repair to the wounded infantile hungers and deprivations of personality, that illusion of achieving mother’s touch and reverie through symbolic equivalent. A revelation of nourishment received also stands as a marker of limitation. The symbolic mother’s body both can and can’t be known.

*Conclusion*

Eigen (2020) works with a Schneerson idea that says God makes the world anew in each moment. The Talmud asserts that anyone who saves a single life has saved an entire world. Maybe these are all assertions that reference deep healing capacities embedded in this world; something of what happens when one is enveloped by states of psychoanalytic reverie. One can have the feeling that an entire world (in the plural) is saved, not just the patient’s but also the therapist’s, the world they make together, and the new world that will go on influencing others in known and unknown ways. Bion (1962) poignantly names a “capacity for maternal reverie” and its implication that some babies suffer the agonies of their worlds being imploded by psychic tensions due to the object’s absence or incapacity. Those who still can cry enough with their psyches can come to therapy and see if their therapist can be receptive to the mysteries of their unprocessed tensions, feelings, needs, loneliness, rage, whatever it is. In the end, the success of reverie is rather ordinary in its simple function of helping a patient to grow up. All the world is saved so one can return to the next practical step of life which would have been impossible without a little help from the analyst.

The following session when Jane began her session, I could immediately sense a new strength in her voice, vibration, ego. Something was just more solid in her. Less straining against the ever-powerful persecutor inside that threatens to annihilate her sense of value with a single criticism. Jane announced she had decided not to renew her lease on her studio space. It needed many repairs and was just too small and her company was growing and she saw no point in arguing with her landlord. While I usually urge patients to discuss such major decisions over the course of sessions, I sensed that Jane’s feeling to do this was a product of solid therapeutic growth and any further consideration would only be undermining. Also, she reported the realization that there were many upsetting things in her past that she plain avoided talking to me about and now felt silly for why she did so. Jane realized that she worried that if she spoke about them, it would be like she was actually summoning back their nightmarish occurrence. While the memories still seemed daunting, they also seemed faceable with a therapist. I thought Jane was right to worry about the power of remembering but took her attitude as demonstrating a strengthened feeling for herself.

There are instances of case consultation that I will leave out my reverie experiences or at least the dream nature of them—or just dream very little in session. I have found it causes too much dissonance and renders the work useless. Reverie is but one tool in my work with my patients and it’s not right for everyone. Some therapies are more like Mondrian paintings and stay at the two-dimensional surface of psyche, exploring the cause and effects of daily life, how things are put together and what gets in the way of building desirable ends. Even here, there is a type of reverie, it’s just more of a consciously logical one. One of questioning, where has the dream gone?

*Epilogue: Call to Reverie*

Depths, depths, go to the depths. Let sleep take you all the way down. Stay awake and put your psychic scuba gear on. Take me all the way down to the graphic novel of your dream-self, but paint it in syllables that breathe underwater. Paint it bigger than images, paint it more meaningful than words. Use your central nervous system like a paintbrush, your desire like its palette—let the unconscious be the wet colors. Paint, paint my psyche with yours. Paint with your symptoms until your soul is a blank canvas, glimmering with myths in the dark. Be the symbol that shimmers. Be wakeful body depths. Be the sleeping light.

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