

INITIAL CONSULTATIONS WITH THE PSYCHOANALYST: an encounter with oneself?

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As a child, I loved being told stories.

For a long time now, patients have told me their stories and the twists they take in which they get lost or lose themselves.

Between these two moments, my encounter with a psychoanalyst and with my own story... the need to speak, to be listened to, to find meaning and truth in my words. The desire that emerges time and again in many initial consultations.

How can we explain what we do when we perform psychoanalysis? In a society that attempts, in this day and age, to make suffering and psychological illness disappear, exploiting therapeutic solutions, the opportunity presents itself—paradoxically—to rethink the “tools of our trade”. The methods developed by Freud over a century ago have not changed: the listening; the ethics as well as the emergence, paradoxes and effects of transference. How do we explain this? In what way can we communicate the basis of the encounter between the person who comes to speak of their damaging suffering with the psychoanalyst who listens to them?

It was during the Summer Seminar offered by the Espace Analytique (Paris) in September of 2006 that I had the idea of “opening the door of my office” to give an account, before my colleagues, of my psychoanalytic practice.

In 1962, before the British Psycho-Analytical Society, Winnicott began his presentation on “The Aims of Psycho-Analytical Treatment” with these words with which I personally identify:

“In doing psycho-analysis I aim at:

Keeping alive

Keeping well

Keeping awake

I aim at being myself and behaving myself.”¹

¹ Originally cited from Winnicott, D. W. (1962): “Les visées du traitement psychanalytique” in *Processus de maturation chez l'enfant*, Paris, Editions Payot, 1970, p. [English translation cited from Winnicott, D. W. (1962): “The Aims of Psycho-Analytical Treatment” in *The Maturation Processes and the Facilitating Environment*, London, Karnac Books, 1984, p. 166. Translator’s Note.]

Transposing his notion of the “good enough mother”, Winnicott argued that the analyst works with who he himself is, in a framework guaranteed by an ethics. And not only when it comes to guiding an analytic cure but in all treatments adapted to the situation of the patients that come to see us.

Let us focus briefly on the initial moment: the request for a consultation...

At first, it is merely a voice heard over the phone. Anxious, tense, reserved, restrained, often charged with emotion. Words that, at times, request more than a meeting and can catch us off guard. There are those who seek to be calmed: it is their first time and they want to know what it will be like, how long the first session will last and even how much it will cost them. Occasionally someone may still be asking themselves if they have made the right decision, whether it is a good moment for a consultation. And it is precisely a consultation that is being requested and expected. Like something that has already been lived through in different doctors' offices...

For others, it is suffering in words waiting to be listened to, heard on the other end of the phone line that for the first time, connects the analyst and future analysand. They have known for a long time now that they should see someone and today they have finally taken that step.

Where children are concerned, it is often more complicated. It is not unusual that a father or mother wants to immediately explain the reasons they are worried. Mothers ask themselves if the presence of the father is necessary or if they can bring along little sister or brother because they don't have anyone to leave them with... There are parents that prefer to come alone first to avoid looking bad in front of a child they can no longer control or to speak of dark secrets, silenced for too long.

In a private practice, the analyst inevitably experiences this first contact by phone: a voice, words and a way of requesting an appointment that summon up all kinds of impressions, images, feelings. Experience teaches us either to not reply to or to interrupt excessive speaking in order to suggest a date, a starting point for an encounter that may or may not take place. Given that, as we well know, arranging an appointment with an analyst does not necessarily mean keeping the appointment; there are requests to change the date, cancellations, forgotten appointments, no-shows or even that second phone call to check... that one has not gotten the hour wrong...

Then the day arrives for the first meeting... the first eye contact... the handshake; new impressions replace the old and remain in the memory of both patient and analyst... With Cyrille (4 and a half years old), Marie (24), Victor (35) and Anne-Lise (17 months), I

now invite them to come in the door of my office located on the ground floor of an old house. Four steps up, two desks and, in the back, a small waiting room. In the office for children: bright colours, chairs, baskets with toys, pillows, two different-sized tables with markers, pens and plasticine. In the other office, adults are sometimes surprised when they see that my chair and that of the patient are placed on opposite sides of a heater.

I – Chronicle of a Meeting Foretold

When Cyrille comes in I say to myself, "At last, here he is!" Looking down at him from the top of the steps at the entryway, he seems very small to me for a four and a half year old. Very lively, with an unfaltering gaze and not at all fazed, Cyrille agrees without difficulty to seeing me alone first. He begins to speak immediately and with great determination but I understand almost nothing of what he tells me. I hear a kind of language, a mash in which vowels and consonants are mixed, the words themselves are not articulated and the sentences don't make much sense. Cyrille gives the impression of having a large vocabulary but the message is not clear. I manage to understand only that "he loves fighting" and that he fights all the time. He shows me with his body how he fights but the words seem to be lost in combat...

His mother had already been to see me the previous year for her older son. At that time, the mother was not able to talk to me about Cyrille yet but his brother had done so, expressing all of his anger towards his "intolerable" little brother, a "thief" who didn't respect anyone or anything. Everyone was powerless when it came to Cyrille and he dreamed of killing him or shutting him up in jail. The outburst of the brother had been a good example of the daily crises that exhausted the mother. In the end, he had said that he did not want to return. I had felt that in bringing her older son, the mother was buying herself time... that she could not yet talk about Cyrille. I had therefore suggested that she return alone and she did. She then spoke to me of her difficulties in being a mother, of separating from the father of her children and coming to terms with her work. Her older son had calmed down at my suggestion and had felt better. As if he had passed the torch on to the analyst and was very relieved...

A year later, around the same time, the mother calls me again. This time it is for Cyrille who has made life impossible with his aggression. It was only when the situation became unbearable for her that she could at last bring her second son to see me, the son-symptom of a symbiotic relationship to which the older son had reacted the year before.

In front of Cyrille, the mother speaks to me of his difficulties with language; his progress in speech therapy; his problematic aggression that appeared as soon as he began

kindergarten and how he had been hospitalized, soon after, because of a strong pain in his hip. The medical specialist diagnosed him with spondylitis, an inflammation of the joints in the spine, which had no apparent cause and was treated with antibiotics. Cyrille was in a cast for a long time and stopped going to kindergarten.

While his mother talks about him, Cyrille makes a drawing that he shows me. "It is a space ship with two fires", he explains. He adds that it would be necessary to have "two buckets of water to put out the fire". He also talks about "putting out" bad words. Then he makes a cake out of plasticine, cuts it into pieces and tells me the cake cannot grow. Afterwards, he "flattens" a box of Band-Aids by sitting on it and ends up putting the flattened box on my head. A first symbolization and an acting out, through transference, of the dead end in which he finds himself with his mother; impasse that prevents him from growing and entering into human language.

I suggest a second session but he does not want to return. His mother wants his father to accompany him and finally, Cyrille comes back with him without any problem. But the father seems bothered and has nothing to say.

"Cyrille's problems will disappear in time... just like they did with his brother"... He doesn't see what he could say to me... He has come only to please Cyrille's mother... I try several approaches in vain; the situation becomes tedious; I am tempted to abandon the whole thing, realizing that I cannot extricate myself from what is happening. Cyrille is making a drawing: he colours it, cuts it out and gives it to his father. "It's for you. It's a fish," he says. For someone who wasn't able to take the plunge... this fish couldn't be better! At this point, with short sentences followed by silences, the father begins to speak. "It's true that things are not always easy with Cyrille... he can't get his friends to accept him... yes, he was hospitalized a few months after starting kindergarten... but in the end, he managed his stay quite well... he put up with his cast surprisingly well, he was very brave..." The father's face lights up and I feel that he is now speaking for himself: "for several months, he was at the centre of everything at home... perhaps his brother felt left out".

The mother hadn't mentioned this. Listening to the father, I realize that this was around the same time that the mother requested help for the older brother. I tell the father this and end the session. I feel empty, with the impression of a situation that has not moved forward. My desire as analyst is being put to the test.

The next day, by phone, the mother tells me, surprised, the incomprehensible answer Cyrille gave her when she asked him what I had said: **"she did not have a mouth; she gave her mouth to someone who didn't have one"**.

I can't believe it! I did not have a mouth and had given it to someone who didn't have

one! Cyrille, the fighter who spoke without articulating, had found the words to communicate, through this image, how an analyst works when listening is not enough. When, without realizing it, the analyst ends up without a mouth and “gives their mouth” in order to provide access to words and inaccessible places. Writing this history, I told myself that this meeting could also have been entitled: chronicle of an abandoned place... that of the father.

II – Words of Suffering, Waiting for Someone to Listen

On the phone, Marie tells me that she isn't calling for someone else but rather for herself; the type of call –“I found you in the phone book”—that I've learned to mistrust. Something I could not define, however, convinced me to agree to see her. Upon meeting, I did not recognize her but she told me later that we had seen each other before and that she hadn't called me by chance. She knew who I was. She had attended one of my courses but we had never talked, she explained.

Marie is a pretty young woman, 24 years old, cheerful and pleasant. When she sits down, I sense she is tense but determined to talk. She should have done this some time ago, she tells me. She asks herself where to begin and decides to start “with the most difficult”, something that “weighs her down”... a traumatic event in her mother's life, kept secret for a long time, that her mother herself recently revealed to her without entirely spelling things out. It had left her without a voice and completely revolted. However, in some way she had already known, she says. In front of her mother, she could not even react. But the questions piled up in her head. She now understands the permanent maternal preoccupation for her and her sister. The relationship between her and her mother had always been symbiotic and had become stifling.

At 18, her parents had not realized she was anorexic; this wasn't apparent due to her excessive weight at the time. What worried them was her reclusion. She didn't tell them anything. She didn't speak to anyone.

Marie has been talking non-stop for half an hour. She realizes this herself... she was like this when she was little; she used to talk a lot and was very happy but as an adolescent she withdrew into herself and never came out again. Marie wants to work on herself. She has thought about this a lot and knows that she needs to do this to avoid repeating the same story. She has a directness in speaking that she attributes to her Latino background. She still has many more things to say and agrees that we should see each other again.

When Marie leaves, I feel a need for a few moments of emptiness in my head and my body. With her way of speaking, her determination, she has left me with a sense of déjà vu, the impression of something familiar... that reminds me of myself and the first time I saw my

analyst, when I too was full of words that had been long abandoned in suffering.

III – In the Web of Transference from the Very First Meeting...

Victor is a 35 year old man who, as a child, had a genetic disorder and stunted growth. He is wrapped up in “very complex family entanglements” which he wishes to sort out.

He works “in finances” and in his tale of family disagreements full of lawsuits and manipulations, money is always at stake, both for his parents’ and grandparents’ generations as well as for his siblings. The family has divided into two groups, each side defending their own interests. He says that he has put himself in the place of the victim who is also the key figure in this money issue. With his knowledge of the world of finances, Victor has helped win the latest lawsuit. Like a defender of the Law, Victor attacks the other group, the “manipulators” and states with conviction: “we can’t let them win all the time”.

He portrays himself as someone who ends up manipulated by others. He always shows himself in a generous light, willing to help out other family members with their problems. However in the end, he is the one who always comes out losing; the others take advantage of him. He won the last trial but afterwards felt sad and guilty because it cost him his mother’s love; she now speaks badly of him and does not want to see him again. He is lost and does not understand.

His mother “loves money above everything else” he tells me, annoyed. He has always loved his mother and their relationship, “so uncommon between a mother and son”, was until then, very close. Victor has prepared his story meticulously which he relates in a rigorous and controlled manner.

In his 1913 work, “On Beginning the Treatment”, Freud warns analysts of the effects of resistance, when patients prepare their story with care from the first session. “Despite the purest intentions of the patient, resistance plays a role in this intentional preparation and, in fact, the most precious of their revelations escape the analyst.”²

Victor presents the characters one by one as if he is unconsciously separating them, leaving aside his own involvement in the destructive Oedipal ties that bind him to different members of his family. He nevertheless wants to understand what there is behind these stories. He will return; talking about this has been good for him.

When it comes time to pay, he holds out folded up bills that I don’t immediately look

² Originally cited from Freud, S. (1913): “Le début du traitement”, in *La technique psychanalytique*, Paris, P.U.F., 1953, p. [Freud, S. (1913): “On Beginning the Treatment.” *Further Recommendations on the Technique of Psycho-Analysis I*, The Standard Edition of the Complete Psychological Works of Sigmund Freud. James Strachey, Trans. (London: The Hogarth Press, 1958). Vol. XII, (1913) Translator’s Note.]

at. It is only after his departure that I discover he has paid more than agreed upon. At the end of his second session, I tell him this. He is surprised and with his PalmPilot he begins to do a very complicated calculation out loud of the price he should pay for the second session in order to recoup what he is owed, calculation in which he loses me and leaves me feeling at a disadvantage. Without knowing it, I feel on the side of the losers, annoyed, tied up in a mess of money, in the web of transference.

After the fact, the extra pay appears to me as a revelation, a manifestation in the present of the transference of Victor's unconscious desires that repeated through actions, his fantasy of the generous and abused loser. His fantasy came into contact with mine, related to my personal history: being manipulated with money. I felt uncomfortable and annoyed. One of the productive moments in which the analyst –on listening to his patients—confronts something in himself and becomes conscious of it, thanks to the work carried out in his own analysis and observations.

IV – An Encounter with Oneself in a Primary Consultation of Three

Anne-Lise is 17 months old. She arrives in a baby carriage with her mother. She looks at me intensely when I meet her. Her mother is very worried. Anne-Lise rocks back and forth constantly, she tells me. At her preschool they are also worried although they can see she responds to requests by adults. On hearing her mother's words, Anne-Lise begins to rock her body quite strongly. The mother breaks into sobs. It has hardly been five minutes that the two have been here and I feel propelled into a story that will have strong resonance for me...

The mother remembers Anne-Lise's first months "a quiet baby who didn't bother anyone"; the prolonged screams that had scared her twice when returning from vacation; her frequent otitis (inflammation of the ear) that led to an "adenoids" operation. When her otitis was cured, Anne-Lise began to rock... the symptom had simply displaced itself...

Sitting on pillows on the floor between her mother and me, Anne-Lise distracts herself with toys and continues to rock. The mother continues her story. After a complicated labour and despite the warm presence of her mother-in-law, she strongly felt the absence of her mother, who died when she was 16. On mentioning her mother, she can hardly contain her tears. She has never spoken to her daughters about their grandmother, she tells me. Anne-Lise looks at her mother. I tell her: "Your mother is sad and crying because she doesn't have her mother anymore". Anne-Lise goes towards her mother, hugs her and holds out a toy. Afterwards, she continues to play on her own, rocking every once in a while and singing to

herself.

Her rocking reminds me of a baby rocking itself as a mother would and I tell this to her mother. Moved, she reveals that she rocked her daughter like this during the first months...

I think of Winnicott and with a doll that Anne-Lise had brought and left lying on the floor, I actively engage in the creation of a transitional space between a mother and her daughter who have both lost their mothers. I allow myself to be guided only by Anne-Lise's smile and her reactions and I trust my unconscious. After several minutes, Anne-Lise stops rocking.

The mother now tells me about the first separations from her baby, of several changes in caretaker and preschool, of returning to work under stressful conditions, of the responsibility of caring for two young daughters, given that Anne-Lise has a 3 year old sister. At the end of the session, an association occurs to me: that of a frozen image like when someone presses the pause button on a DVD. I tell this to the mother. Her daughter has perhaps stayed fixated on the image of a maternal scene that she repeats and creates with her own body. We are both moved and surprised.

When I see them again, the change in Anne-Lise is obvious: she greets me, seems happy, does not rock and is very active. Freed from being trapped in the real of her body, Anne-Lise gives free reign to her imagination and settles into the world of language. The "call" function appears, mentioned by Lacan in his Seminar I: *Freud's Papers on Technique*³ when he comments on Dick, Melanie Klein's little patient. Anne-Lise makes demands on her mother and me and establishes communication. Anne-Lise asserts herself. She wants to play, to draw. She speaks to me a lot in her babbling language out of which my own words emerge clearly repeated and assumed by her: "again! let's draw!"

Something has also shifted for the mother who says to me: "in reality I was the one who was on pause", fixated on the frozen image of her dead mother's body and her terror on seeing her. She had never been able to talk about this.

Anne-Lise's problems went away quickly and her mother began analysis work during which she could again happily take care of Anne-Lise who so reminded her of her mother... From one mother to another... Anne-Lise's face was the embodiment of a gaping hole and a roaming anxiety. With Anne-Lise and her mother, I reencountered wounds in my own history, also transmitted from mother to daughter, leaving only scars. It is with these traces

³ Lacan, J. (1953-54): *Le Séminaire livre I, Les écrits techniques de Freud*, chapitre VII, coll. Champ Freudien, Paris, Éditions du Seuil, 1975. [Seminar 1, *Freud's Papers on Technique*, chap. VII].

in me that I was able to trust my unconscious and carry out my role as analyst.

By Way of Conclusion...

The door is once again closed. Cyrille, the fighter with his confused language; Marie and her silent suffering; Victor entangled in his Oedipal ties and Anne-Lise with her mother in mourning for a mother. Four first encounters in which to attempt to carry out what, since Freud, is part of the active listening of the psychoanalyst and what Lacan has returned to the centre of analytic work. The words of a subject in suffering addressed to an Other he supposes understands and knows, leading to the "acting out of the reality of the unconscious"⁴ in the transference dynamic. With each patient this is what the analyst opens himself up to and in each encounter exposes himself to encountering his own fantasies and desires, which come from his particular history and analysis. The desire of bringing the patient the closest possible to his truth in order to access the place of a subject. This can take time, as with Cyrille, or it can come through a revelation of the other and of oneself in the first session, as happened with Victor. It can also lead the analyst to involve himself, body and mind, from the first session in the entanglement of the transferential relationship. This was what had happened to me with Anne-Lise and her mother.

Initial consultations with the analyst: an encounter with oneself? With these clinical histories in mind, one could conclude that the work of the analyst is functional only when the encounter with the patient leads to the recognition of something in himself, recollected, repeated and elaborated in his analysis. However, this is not always the case.

The essential in the encounter with an analyst is the manner of listening and receiving the words of the person who comes with their suffering, the transference, and the accessing of the unconscious. It sometimes happens that the analyst is confronted with a double encounter and with the continuation of his own work on himself.

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⁴ Lacan, J. (1964): *Les quatre concepts fondamentaux de la psychanalyse*, chapitre X, Paris, Editions du Seuil, 1973
[The Four Fundamental Concepts of Psychoanalysis]

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