

## PSYCHOANALYTIC ACTIVISM

### *Historical Perspective and Subjective Conundrums*

Mary-Joan Gerson, PhD

*New York University*

The history of psychoanalytic activism is summarized, providing a backdrop to Nguyen's account of her work with victims of torture and trauma. Several themes in her paper are examined, including: (a) the question of rendering the victim as human; (b) her observation that those suffering severe trauma deny mortality; and (c) the issue of constructing the narrative of trauma with regard to the emphasis on heroism and resilience, the accessibility of reported experience, and the limitations of recognition on the part of the witness. Lastly, the reported personal meaning of her work is discussed.

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Leanh Nguyen's paper (2012) stirs the heart and electrifies the mind. My goal as a discussant is to keep that electrical current active, while I channel some of its energy into questions I find embedded in her text. First, I'd like to locate Nguyen's voice in a long history of psychoanalytic activism, a tradition that is not sufficiently honored by our profession.

Altman (2010) has provided comprehensive documentation of psychoanalytic activism, beginning with Freud's concern about extending psychoanalytic treatment to poor and underserved individuals, which led to a movement between the two World Wars of establishing free clinics throughout Europe. Beginning in the 1920s, members of the Frankfurt School including Erich Fromm, Norman Brown, Herbert Marcuse, and others, engaged in a Marxist and dialectic critique of psychoanalysis. They were soon followed by Fromm who viewed character and conflict as shaped by economic forces. In the wake of the Nazi scourge, psychoanalysis was transplanted to the United States and became a treatment for the educated and relatively affluent. There were many reasons for this right turn, including new definitions of analyzability under the strong influence of ego psychology as well as the press of a capitalist ethic. A striking exception to the elitist turn in psychoanalysis was the work of Harry Stack Sullivan, who in the last year of his life

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Correspondence concerning this article should be addressed to Mary-Joan Gerson, PhD, A.B.P.P., 80 Central Park West, Suite C, New York, NY 10023. E-mail: [mjg5@nyu.edu](mailto:mjg5@nyu.edu)

participated in three international meetings, including a UNESCO Tensions Project whose mission was to examine the psychological causes of nationalistic aggression (Perry, 1982).

In the 1960s, the community mental health movement was launched in the United States, and it engaged many psychoanalysts. Altman (2010) noted that budgetary concerns ultimately strangled an approach that deemphasized symptoms, but rather focused on prevention and consultation. I worked at a community mental health center in the 1970s and remember grieving that the initial cut funding for an incredibly low-budget, well-attended, weekly gathering of patients with long-term psychosis, followed by a reduction in consultative services, such as the community clergy group I was leading. The irrationality of these administrative decisions was more destabilizing than any clinical challenge I faced.

I do think that there are inherent constraints to psychoanalytic activism. Many analysts feel emotionally taxed and even drained by the work, and they are not interested in undertaking commitments that involve exposure to more psychic pain. Second, others feel that all of our work is essentially beneficial and restorative to the social fabric. Third, our mandate is to connect to patients of all political persuasions (even those sometimes infuriating to us), and this effort can lead to a subjective sense of dividing our political and clinical identities. I find it inspiring that, in the face of these and all the other personal constraints, many psychoanalysts are involved in activism projects today and this involvement seems to be growing. Here I mention several as exemplars: Deborah Luepnitz's (2002) work with the homeless in shelters; Nina Thomas's (2011) international efforts in Haiti and Palestine; Jane Darwin and Ken Reich's (2006) creation of the SOFAR Project (Sex Offender Families Against Registration); and Altman's (2010) efforts in the inner city. Recently, I and another faculty member at the New York University Postdoctoral Program in Psychotherapy and Psychoanalysis surveyed our community to document pro bono and activism efforts, and we were immensely impressed with the number of people involved in social justice projects, such as working with asylum-seekers, terminally ill patients, and underserved children.

My own psychoanalytic-activist work has been as a consultant to the staff of two nongovernmental agencies: Day One, which tracks adolescent partner abuse, and The American Jewish World Service, an organization with a wide reach in global programming, including, for example, refugee displacement, child sexual and physical abuse prevention programs, and assistance in acute, often tribal conflict. I will refer to my own experience as I turn to the power of Nguyen's paper.

The central message of Nguyen's paper is her conviction that when our work embraces individuals suffering from extreme trauma, our psychoanalytic ideology and methodology are essentially activist. She says, "We save lives by helping these patients to reclaim their willingness to be human. And we also perform a civic service in showing society what it means to be human" (p. 317). She identifies two implicit activist positions. The first she describes as: ". . . the implicit pledge of our profession is that each life counts, each story needs to be found and retold, and each telling matters infinitely and effects profound ripples in the world—and in our psychic individual selves" (p. 317). But she also identifies another activist stance: "My covert agenda is to tell people *about* trauma; to show them the costs of torture; to expose the feats and ruins of 'survivorship' and, subliminally, to mitigate the collective dissociation by rendering the human being underneath the 'torture survivor'" (p. 309).

Let me take up the second of these positions. I think that one of the universally disturbing aspects of contemporary life is the media-based accessibility of what we would in fact consensually regard as human and nonhuman behavior. Perhaps I believe there is

less ambiguity about abuses that signify dehumanization than Nguyen does. Indeed, I am riveted by the obverse dilemma of how we can incorporate into our notion of the human, the intentionality of the perpetrator. A Sullivanian colleague believes that this is an issue of group contagion—any behavior can be sanctioned in what becomes a “normative context.” Others have posited the concept of subspeciation, that in the moment of attack, the victim is viewed as utterly “other,” or have pointed to warfare’s chaotic dissolution of cultural norms, which inflames and releases psychopathology in vulnerable individuals. Grand (2000) has hypothesized that “evil is an attempt to answer the riddle of catastrophic loneliness” (p. 5).

I want to raise a question about Nguyen’s resistance to a narrative thread focused on resilience. She states:

The representation of what happens after torture or war mostly follows the plot line of normalcy—traumatic blow—devastation—recovery. It employs the tropes of “hero,” “victim” or “survivor,” which puts us all comfortingly in the genre of a tragedy or an epic. They gratify the spectator—consumer with the illusion of meaning and absolve her of the responsibility of staying “unsettled.” (see LaCapra, 2001, p. 9) (p. 311)

Several years ago, I went to an agonizing photographic show called “Children of Bad Memories” by Jonathan Torgovnik (2009), which featured huge cibachrome portraits of women raped in Rwanda standing next to the child borne of the rape. Each photograph was documented with a testimonial statement (Torgovnik, 2009). One woman openly expressed her dislike of her offspring. However, others expressed their need to triumph over dehumanization, not to sink into it. I was, as I always am, struck by the difference in these journeys. I do not think this is denial or avoidance, but rather it is an expression of my psychological awe at the choice of triumph, the mysteries of character structure. If we could understand the origin of this difference, it would help us understand even more about the human condition, and is this not what we are after as psychoanalysts?

A small point: I think it is crucial for us to retain certain humility about our particular theoretical or clinical contribution, however passionate our engagement. Nguyen notes that “The activism is in *making* judges, witnesses and the authorities recognize the human being and in making it possible for them to not turn their gaze away from the human life that lies in their hands . . .” (p. 313). I agree that we psychoanalysts are uniquely trained to articulate the individual psyche. However, I also believe that the lawyers and doctors who work with torture survivors care deeply about human life, and I worry about privileging our own ideology and subjectivity, which ultimately restricts possibilities for collaboration. I would like to highlight some points that Nguyen makes in her paper, which struck me as particularly enriching to the literature on trauma. She says:

In the deadening space that these patients exist, language and life are not allowed to move back and forth between me (the witness, the living) and the patient (the haunted, living dead). Mortality—which comes to us in the little moments of being penetrated and disconnected; in meaning being made, re-made, and un-made; in *speaking* to each another; in the flow of people loving us and leaving us—is evaded by these patients as they insulate themselves from life and keep their experiences un-spoken, un-hyphen transmitted. And there is no longer living, but merely existing. (p. 313)

She brought to my mind Becker’s *The Denial of Death* (1973), in which he wrote that “The irony of man’s condition is that the deepest need is to be free of the anxiety of death and annihilation; but it is life itself which awakens it, and so we must shrink from being

fully alive” (p. 66). From a more sanguine perspective, Strenger (2009) has described creative work in midlife as a unique amalgam of both ensuring and denying mortality. But what I found most evocative was Nguyen’s statement that in the resignation to “I am just existing” that her clients have erased mortality, and with it the creativity or Eriksonian generativity that a sense of mortality renders. I would not have associated the experience of being dehumanized with the denial of mortality.

I found her discussion of narrative compelling. What is central to Nguyen’s commitment is an exquisitely patient and attuned attentiveness to the terror of narration. She states:

The narrative desire is corrupted, as speaking would revive the wounding. But without the words, they remain ghosts and aliens; without engaging in the narrative act, they remain haunted, possessed, away and apart from the living; being silent keeps the nightmare muted but without the narrative impulse they remain alienated from the community of humans. Such is the vicious dilemma these patients are caught in. (p. 313)

I think that we psychoanalysts today are privileging nonverbal communication, registering body states and tonal inflection as alternatively valid means of representation. She does emphasize that “The activism lies in the commitment to stay with the unspoken and to metabolize the unbearable so that I can retell the story of the trauma in a tolerable, recognizable, and *usable* form” (p. 14). And, of course, we think of enactment as representing what cannot be said. I wonder how Nguyen uses these other registers in locating and activating the narrative pulse in her torture patients.

Second, Nguyen points out that the fragmentation in narrative must be tolerated by the witness. I know that the young people I worked with at the American Jewish World Service were narratively mute when they returned from their overseas assignments. Actually, they have indicated that my group meetings with them are remarkably helpful because they had considered language inadequate to carry the pain of their empathic and identificatory response, and they had feared that, in attempting to convey it, they too would be erased. However, they also felt silenced by another inhibition that Nguyen does not mention in her paper, and which I post here: These young field workers felt that any narrative rendering of trauma was inherently expropriating and violating of those who had shared their story with them.

Lastly, Nguyen cites the immense responsibility of hearing and absorbing the experience of trauma.

The telling of that otherwise unavailable reality—of how the person comes back to the living after having been nearly erased—is a deep responsibility for society. For, if you get it wrong then the sliver of life that still pulses amid the narrative ruins, and the space for connection and faith that hangs between the living dead and the unknowing are forever lost. (p. 310)

I wonder about the limits of her or of any psychoanalyst deeply grasping hideous experience. Both Sullivan and Donald Winnicott located a private self, the inaccessibility of certain domains of experience to the most penetrating analytic inquiry. When it comes to torture, I think that unknowability is fundamental, partly because of our own annihilating anxiety in the face of it. I have always been struck by Elie Wiesel’s warning:

A plea for the survivors? I know, it seems insane. It is not . . . . Accept the idea that you will never see what they have seen—and go on seeing now, that you will never know the faces that haunt their nights, that you will never hear the cries that rent their sleep. . . . And so I tell you: You who have not experienced their anguish, you who do not speak their language, you who

do not mourn their dead, think before you offend them, before you betray them. Think before you substitute your memory for theirs . . . . (Wiesel, 1978, p. 247)

It is clear that Nguyen deals with unknowability in her work.

The last section of Nguyen's paper focuses on the personal in the political, and it is a delicately rendered testimonial of the personal benefit she has accrued from her work with severely traumatized patients. What I most admired was her comfort with taking from her patients. An adage frequently evoked, certainly within the interpersonal tradition, is that if a treatment has not changed us, it has not really been psychoanalytic treatment. But Nguyen is talking about gratitude. She says, "The work is a coming home that is doubled up within a turning away. But, as I dedicate myself to finding an re-telling their unspeakable and unspoken stories, these patients in turn inevitably bring me to questions that allow me to reach into unvoiced questions about my own life . . ." (p. 315). I have been thinking lately about how much I take from patients; how my current issues about aging and loss are being abetted in my work, and at times I feel notably off-kilter and guilty about this consumption. I think we have talked a lot about mutuality in psychoanalytic treatment and a great deal about envy and rage, but we have not addressed gratitude, that truly hierarchically reversing exchange.

Many of us today feel that psychoanalytic discourse too often devolves into comfortable rhetorical positions, recycling ideas that we curl up with in comfort. We turn to interdisciplinary lenses to refuel our theory, but I think that if we try to psychoanalytically grapple with the most important crises of our era, bending our theory to this purpose, we not only will make a contribution to the human community, but we will also enliven our own scholarly enterprise. And Nguyen's paper is an exemplary springboard to that effort.

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