

# Why Bother?: From Indifference to Passion

Desy Safán-Gerard, Ph.D.

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The purpose of this workshop is to examine passion in light of current developments in analytic thinking. I will be touching briefly on André Green's chapter of his book *On Private Madness* (1986) entitled, *Passions and their Vicissitudes*, the only reference to passion in the psychoanalytic literature I was able to find. I will then go over some of the precursors of passion such as attention, noticing and linking, and the development of interest as a more elaborate precursor of passion. I will then be discussing the results of research on the capacity for absorption, a relatively new personality dimension. The main focus of the paper will be in dealing with passionless patients and that means autism and narcissism, and the counter-transference in dealing with these patients. Finally, I will be raising the question as to how and whether it is possible to foster passion in patients and in oneself.

1. History of the concept
2. Precursors of passion
3. Interests
4. The absorption dimension.
5. Passionless patients: autism, narcissism. ct
6. Fostering passion

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1. History of the concept

Early in the history of psychiatry, madness, in league with passion, was exiled from its vocabulary. One was not mad, but suffered from nerves. Madness was also banished from professional jargon. It disappeared from the classification of disorders as a shameful reference, concerned as psychiatry was with having a scientific bearing. Madness and possession

were not scientific notions. During the Middle Ages and the Renaissance madness was embellished with an aura that made a mystery of it, in the religious sense of the term. Something of the order of the divine or the demoniac showed through it. For the mystics there could be no happy passion except the Way of the Cross.

By the beginning of the eighteenth century the concept of Nature begun its task of undermining God and religious passion. With the emergence of modern science in the following century rationalism chased passion from philosophy. Psychiatry was born of this mutation. In psychiatry the eye wishes to be objective, that is to say, without passion.

Today there is little discussion of passion in psychiatry and practically none in psychoanalysis. If psychoanalytic thought did not deem it necessary to attach particular interest to the psychoses early on, the reason was probably that for psychoanalysis it is implicit that all delusions are the fruit of repressed sexual passion. For Freud the state of being in love or of amorous passion represents a short psychosis, a view that has been held by many analysts after him. For Green all the vicissitudes of Eros are seen as tainted with a potential madness. This is in contradiction with what Freud wrote in *Civilizations and its Discontents* (1929) where he held up Eros as our bright best hope against the ravages of Tanatos.

Passion and madness were banished at the same time from the discussion about the neurosis and this is borne out in Freud's theoretical writings and in his case studies. In Freud's case histories amorous passion reappears within the transference. However, Freud was more at ease with the analysis of infantile sexuality, which belonged to a repressed past and with the daydreams connected to it, than with the reality of love or hate in the consulting room; Dora is capable of anything because her feelings of love push her not only to transfer them but to act them out in acts of vengeance. According to Green, to approach unconscious meaning by means of dreams, as Freud did, was to introduce a mediating distance from a potentially dangerous situation. Freud's counter-transference drove him to give a watered-down version of passion.

Perhaps the requests today for re-analysis arise from the lack of attention given to dangerous passions and its relation to the psychotic part of the personality. Green is probably referring to the irrational rages a patient can display toward the analyst or the acting out in the session of an erotic

transference. For Green, it seems essential to re-establish madness in the place where it has to be recognized, for all time: at the heart of human desire, something Freud seldom experienced in the consulting room. For Green, "to take the full force of transference passion is doubtless exhausting but it is the price to be paid by the analyst if the analysis is to succeed. Needless to say, the counter-transference comes to the fore here" (p 241). It is the kind of situation where the analyst might seek supervision or consultations with colleagues. In Green's chapter the word passion is employed in many different senses: affect in general, specific interest in things and life, delusion and madness.

Passion, as I understand it in this paper, is not synonymous with affect. Affect is a quality of aliveness and responsiveness that does not necessarily engage an object and it may be temporary. Passion is an aliveness in response and in relation to an object and it has a sustained quality. <sup>definition</sup> This distinction will become clearer as we discuss the precursors of passion. My intended focus in this paper is in the overcoming of indifference. I want to restrict the meaning of passion to that of directed and sustained interest in an object outside the self.

## 2. Precursors of passion

A group of patients seem to have problems in attending, noticing and linking. Taylor (2006) considers attending, noticing and linking to be functions of consciousness. I see them also as precursors of passion. These difficulties in attending, noticing and linking are associated with a profoundly passive position at some deep or early level of the personality. Patients experiencing these difficulties are not able to be independent initiators of action. Their lack of response seems to have arisen in infancy or childhood because of some emotional failing in the primary object. They have had to disengage an infantile part of the personality and resort to other routes to deal with potentially intolerable or impossible states of mind.

In the treatment of more obviously damaged and fragmented patients the analyst may need a lively and alert predictive sense to anticipate the future significance of certain cues. The development of the patient's potential growth depends on the analyst's sensitivity and alertness to their presence in the patients. In other words, the analyst needs to be particularly alert to the smallest signs of attention, noticing and linking in the patient and he needs to champion and support these developments. In fact, the analyst needs to be

attentive to what is incipient rather than pointing to what is already obvious. In Attention and Interpretation (1970) Bion adopted the term pre-monition in describing forewarnings of emotions about to develop. For him the analyst needs to be an advance scout of attention whose function is to recognize what is anticipatory. The effects of these constant dynamic movements of consciousness can be observed in the link between the analyst and the analysand as they make for connection or disconnection, fluency or awkwardness between them.

Taylor offers an account of the treatment of a very damaged patient who lived as a derelict and whom he only saw every other week for some years. Initially and for the first 3 years the patient sat on a chair far from the analyst, was unable to keep eye contact and the interactions were stilted. Taylor was responsive to any signs of attention, noticing and linking. Eventually eye contact was sustained and the patient began to notice objects in the office. Taylor supported these signs by responding immediately to their appearance.

Noticing, attending, linking - begin to appear in the patient in the later stages of an analysis and especially during termination. Patients begin to notice paintings and objects in the consulting room they had been oblivious to for sometimes a very long time. These precursors of passion are signs of mental health and an improved capacity to relate to objects in the external world.

### 3. Interests

Neither traditional psychoanalytic theory nor psychoanalytic ego psychology account for the development and significance of having interests. In a lucid and comprehensive chapter Morris Eagle (1981) draws from a variety of different sources, eg. physiological, experimental, anecdotal and sociological in explaining an aspect of personality of particular importance to psychoanalytic theory. He attempts to understand those behaviors pertaining to the development of an interest in objects and the psychological significance and functions of such interests. Eagle's claims are that interests are best understood as object relational phenomena and that they play a central role in maintaining personality intactness and integrity, particularly in extreme circumstances. He draws on evidence from autobiographical accounts, animal investigations, epidemiological studies, clinical impressions and studies of infant behavior.

As it is ordinarily used “interest” conveys the qualities of cognitive and affective involvement with an object, of modulated pleasure, and of the capacity of the object in which one is interested to hold one’s attention. Individuals can have a wide versus a narrow range of interests, deep and intense versus shallow and superficial interests.

The concept in psychoanalytic theory most germane to an understanding of the development of interests is sublimation. Sublimation results from “the instinct directing itself toward an aim other than and remote from that of sexual satisfaction” (Freud, 1914/1957, p 94). Interests are the product of the diversion of sexual aims to “higher” pursuits. The capacity to develop cultural interests depends on one’s ability to sublimate or “neutralize” sexual energy.

However, a formulation of interests in terms of the concept of sublimation does not adequately take account their development and psychological function. Eagle argues that interests are most meaningfully understood as object relations that involve cognitive and affective links to objects in the world and serve some of the same psychological functions served by more traditionally viewed object relations. Observations regarding the importance of “having something to live for” point to recent epidemiological studies supporting the informal observation that the survivor in a long relationship in which one of the partners has recently died is more susceptible to death and to illness than others of his or her age group. However, the “something to live for” sustaining role can also be played by other objects as well as by abiding interests and values. There are many autobiographical accounts of people under the dire conditions of imprisonment and concentration camps that show the role of interests and values in increasing the likelihood of survival and in maintaining psychological integrity.

Lack of interest is a negative prognostic indicator in a therapeutic situation. On the other hand, a creative talent or gift, and the intense interest that can accompany it, often can serve to sustain people with considerable pathology. Without this center of creative interests, such people would decompensate. Of course, this does to imply that only persons with a creative talent or gift have a chance in life. Whether or not, as an adult, one has acquired abiding interests is not a casual or peripheral aspect of an individual’s behavior, but a central feature of personality.

There is enough evidence to indicate that an interest in objects as well as the development of affectional bonds is not simply a derivative or outgrowth of libidinal energies and aims or a consequence of gratification of other needs, but is a critical independent aspect of development that expresses inborn propensities to establish cognitive and affective links to object in the world. The acquisition of interests is intimately bound up with and is, indeed, an expression of the separation-individuation process. An important later aspect of the processes of differentiation and individuation is the child's participation in what Mahler (1968) aptly calls the "hatching" process, a process in which the child directs interest and attention to the outside world. Separation-individuation not only involves a move away from mother, but toward a new social context of peers and juveniles.

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The role of peers in development has been relatively underemphasized. Infant monkeys separated from each other show the same depression-regression pattern as infants separated from mother (Harlow, 1974). While secure attachment is associated with curiosity, play, and the capacity to explore and become interested in the world, insecure attachment interferes with these activities and capacities. Both mature object relations and autonomous interests require an individuated self relating to and establishing cognitive, affective and value ties to independent objects in the world.

Winnicott has related "transitional phenomena" to the establishment of cultural interests. The transitional object is transitional in the movement from concrete representation to the achievement of a true symbol. Giving external objects the capacity to soothe and comfort permits a freer and safer exploration of and interest in the external world. In the course of development the transitional objects of childhood are given up and "there is a gradual extension of range of interest" (p.232). A process that began with external transitional objects becomes internalized as cultural interests and values. Cultural phenomena reflect both inner and outer reality. Because they are internalized, they are deeply personal and can be carried around.

Difficulties in experiencing deep interests play a prominent part in the symptomatology reported by patients today. Patients report experiencing meaninglessness and emptiness, including lack of meaningful interests, ideals and values, rather than for example simply circumscribed depression or anxiety. Analysts are preoccupied with narcissistic personality disorders while political scientists, literary critics, historians and writers are writing about the "new narcissism" as a widespread cultural phenomenon. A critical

feature is the lack of interest in the object per se. Interest is dictated mainly by the aims of self-enhancement and self-aggrandizement, particularly in narcissistic patients.

An interest in objects is a critical feature of the development of object relations, based on the inborn propensity to establish cognitive and affective links to objects in the world. Current evidence from a wide range of research areas all argue against the proposition that successful interests necessarily represent a sublimation and channeling of presumably more basic instinctual drives. Individuals are capable of interest in activities and objects for their own sake, that is, of being intrinsically motivated. Although the potential for intrinsic motivation is inborn, the development of this capacity is linked to one's developmental history. The quality of adult interests reflects important aspects of the fate of the inborn propensity to establish links to objects.

#### 4 . Absorption dimension

One of the manifestations of passion is the capacity to absorb oneself in something outside the self. As a relatively new dimension of personality absorption is derived from personality research by Tellegen (1992) and Block (2002) based on a 35 year longitudinal study. The psychological disposition to enter into states of absorption appears to coexist with a meaningful and implicative pattern of personality shared by both sexes. It is characterized by openness to aesthetic experiences, breadth of interests and humor, suggesting that absorption is related, in both sexes, to a willingness to destructure conventional and everyday pragmatic modes of cognitive and perceptual processing. Absorption has been linked with imagery ability, synesthesia, fantasy proneness, daydreaming, experiential involvement and alterations in attention. It has been alternatively labeled openness to experience. In females the capacity for absorption is positively correlated with descriptions by observers that conclude that such women  
66 enjoy aesthetic impressions and are aesthetically reactive,  
57 are interesting, arresting persons  
39 think and associate ideas in unusual ways  
46 engage in personal fantasy and daydreams  
3 have a wide range of interests

The observers conclude that in females a capacity for absorption is negatively correlated with the following features:  
7 favors conservative values in a variety of areas

33 calm, relaxed in manner  
97 is unemotional, emotionally bland  
63 judges self and others in conventional terms  
12 tends to be self-defensive

For young men the observers conclude that the capacity for absorption is positively correlated with the following features:

5 behaves in a giving way with others; generous  
35 has warmth, capacity for close relationships; compassionate  
66 enjoys aesthetic impression; aesthetically reactive  
28 tends to arouse liking and acceptance  
21 arouses nurturing feelings in others.

The observers conclude that for young men a capacity for absorption is negatively correlated with the following:

36 is subtly negativistic; undermines and obstructs  
12 tends to be self-defensive  
37 is guileful and deceitful; manipulative  
23 extrapunitive; tends to transfer or project blame

Although there were many other correlations to absorption I have only included those that were significant at the .01 or .05 level of significance. The negative correlations for both men and women give a composite picture of a troubled, neurotic and immature person whereas the opposite is true of the positive correlations. The young women who score low in absorption seem less troubled and hostile than the young men but they nevertheless seem immature and defensive. Both young men and females who score high on the capacity for absorption appear interesting, interested and responsive to the world around them.

## 5. Passionless patients and counter-transference

### Autism

According to Anne Alvarez (1997) who has written extensively on the treatment of autism there are three aspects of the mother equipment which have a particular bearing on her baby's developing sense of identity, on his emotional security and on his cognitive capacities. These three aspects are her ability to give her baby her full attention and to respond appropriately to his initiatives; her ability to keep him in mind while attending to something

else; and her ability to wait quietly and with interest while his own interest is deployed elsewhere. According to Rhode (2001) if these three conditions are met the baby experiences a sense of abundance: a sense of people who are rich in loving relationships and of a world of thought that is rich in exciting possibilities which his parents encourage him to discover. If these three conditions are met by the analyst in the session the patient will respond with the same sense of abundance. One could even argue that these are the conditions that foster the development of passion in the patient. Rhodes gives an account of Anthony, a 6 year old autistic boy whose sense of abundance was tragically negated in terms of the capacity for thought as well as personal relationships.

It is important to note that patients like Anthony can generate powerful counter-transference feelings in their analysts. After Rhode made an attempt to join the boy in a song and was ignored by him she writes, “Anthony completely ignored me in a way that crushed hope” (p130)...“I felt I might as well not have bothered” (p 131). She had to find solace in little signs of contact with respect to a third object and this shared contact acquired tremendous significance. She writes, “It would not even be accurate to say that this had been a moment of shared attention, but it had been a moment in which the two of us had paid attention to the same thing” (p131). Alvarez (1980) has written about the need for the therapist to “reclaim” a child with autism. This was certainly the case with Rhodes’s young patient. She says, “perhaps with him it was less a matter of going in search for someone who needed to be found, and more a matter of holding onto my belief in the memory of someone who had given indications, however fleeting, of being present” (p131).

As I have noted, communication with Anthony first got going in connection with an object ‘out there’, not directly between Rhode and him. It was as though the threesome of joint attention had to be securely established before the child could dare to attempt a direct “you and me” relationship with his therapist. This corresponds to the observation of adult patients. Lombardi (2006) has written about analysands who are driven to analysis primarily by an inability to feel alive. His patient Antonio only felt alive when he gambled. From the start of the analysis the patient tended to keep silent and not to respond to any attempt to stimulate his participation. When asked directly he claimed he felt nothing and thought nothing. However, Lombardi observed Antonio’s extraordinary ability to convey violent hatred which his analyst found it very hard to contain. He noticed that he, Lombardi, tended

to absent himself from emotional feeling which probably was Antonio's solution for managing his hatred, absencing himself mentally. Regarding Antonio's silence and unresponsiveness his analyst didn't give up: "The fact that I did not give in to the blandishments of absence and silence was, I believe, an important element in catalyzing development'(p 2).

When Lombardi's comments were aimed at the transference, they were met with rigidity or they were totally rejected. His patient's reaction seemed more constructive when the analyst spoke of hatred in general and of his propensity to ignore it. In other words, Lombardi was spurring Antonio to observe his way of relating to hatred rather than to emphasize his hatred of him. Like Rhodes with her patient, they were both observing Antonio's hatred. The two of them were observing a third object, the patient's hatred, rather than their relationship to each other. The analyst felt that it didn't matter what they spoke about "the essential thing was keeping the dialogue going in order to develop a relationship and to evolve a way of thinking based on reality and common sense" (p 3). Antonio was by no means indifferent to his analyst's contribution as he persisted in pretending. His tendency toward silence and paralysis returned in massive form with the approach of the first long interruption of analysis.

Insisting that the patient continues to express what is happening to him in the here and now of the experience meant for Lombardi's "facing my own violent participation in his hatred, which I felt quite tangibly in the form of strong nausea" (p 2) . Perhaps while Antonio absented himself mentally his violent feelings were projected onto his analyst. Lombardi says, " I neither considered nor interpreted his hatred as directed principally at me, but instead understood it as a signal of his approach to sharing an area which until that moment had been dissociated and acted out" (p 3). We could say that the analyst's nausea was his way of sharing the patient's hatred. Lombardi believes that the experience of hatred in the session represented some progress towards the world of emotions and not an attack upon the analytic relationship. The link between this treatment and Rhodes treatment of Anthony (same name) rest in the way they came to deal with the transference. Like Rhodes with Anthony, Lombardi felt his patient could not relate in the you and me fashion of the transference but that he needed to experience his hatred as something that he and his patient could observe together. Encouraging Antonio to be present and to register the experience of temporal limits represented by the approach of a separation was

particularly useful. This was confirmed by the patient's acceptance of a third weekly session.

To recapitulate, what we observe in both Rhode's and Lombardi's patients is that a joint interest between analyst and patient in something outside the self precedes the focus and interest in the you and me of the transference. Even though in Lombardi's patient the concern was his hatred and this is something arising from the patient, both analyst and patient were observing it as something external to him. The emphasis here is in an experience where the patient perhaps follows closely on the analyst's interest and there is an eventual sharing of experience. Only from this kind of sharing there can be an interest in attending, noticing and linking the you and me of the transference. Is there some kind of projective identification operating here? Perhaps the patient projects his own interest in the analyst who is then perceived as having an interest in him.

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Let us go back to Taylor's derelict patient and his counter-transference. At the beginning of the sessions he found himself attending closely but then his attention drifted off. At times the lack of reciprocity in the interchange made Taylor feel "Why bother" and tempted him with giving up trying to keep the contact alive. He writes that at times he felt intellectually 'not up to it'. The compound feelings of connection and loss of connection evoked had an effect which the analyst compared to an emotional roller coaster. O' Shaughnessy, E. (1999) has written about the earliest ruptures in the relationship between self and object. It can be very difficult for a mother to know how to interest an infant who seems not to have developed the approach responses. In a similar way it must be very difficult for the infant when the mother doesn't have the maternal equivalents of the sucking motion to approach the infant, her ability to wait quietly and with interest while the infant's interest is deployed somewhere else, one aspect of the mother's equipment Alvarez (1997) writes about.

Linking is a particular kind of emotionally dynamic relationship between objects in which they are 'affected by each other'. In the interactions between people we talk about a kind of reciprocity of the interchange. After some years Taylor realized that his patient was noticing a painting in the consulting room. This was a new development and marked a shift in the direction of contact with the external world. It also became clear to Taylor that even with such small sign of relatedness the patient was quite aware of impending vacations and breaks in the treatment.

## Narcissism

Another problem for the analyst regarding passionless patients is the relationship with a narcissistic patient even though in his case it is hard to talk about an absence of passion because, as we will see, these patients can be quite emotional and this can be confused with passion because of its intensity. It is rare that these patients develop a true passion other than toward the self or activities that enhance the self.

Two themes run through the writings on clinical narcissism. One theme is narcissism as a defense against adverse object relationships, the other is narcissism as a basic hostility to them. Rosenfeld (1987) distinguishes narcissistic states in which the libidinal aspects predominate and those where the destructive aspect of narcissism predominate. In the latter “death is idealized as a solution to all problems” (pp 106-107). For Segal (1997) there is only destructive narcissism. She refers to narcissism as an anti-object relational force within the personality. Britton (2003) agrees with her but doesn't when it comes to the narcissistic disorders that include within them a range of phenomena, some destructive, some libidinal and some defensive. John Steiner (1987) subsumes all of them under the wider term “pathological organizations”.

If we stay with the anti object aspect of narcissism we can see how difficult it is for an analyst to establish a relationship with such a patient. It took several years for Robert, a patient of mine who didn't want to use the couch, to make eye contact with me. Sitting across the room he talked and talked, interestingly, about his many experiences and observations and it was hard to put a word in edgewise as he would stop me and continue his talking. He did this sometimes by saying angrily, “Wait a minute. I am not finished!” He used humor effectively and seemed to use me simply as an audience that he entertained. I had to cope with my frustration by humoring him back about his paying me money to simply use me as an audience. I remember saying to him, when I finally could, that I felt like a mother with a bottle with milk trying to find his mouth to feed him. This amused him a great deal as he felt successful in thwarting my efforts. Eventually, after several years of this, he began to ask me to repeat my interpretations confessing that he didn't pay attention to what I said. He said he really wanted to hear what I had to say and would close his eyes to help himself concentrate. Sometimes he even asked me to say it twice. It was clear how hard it was for him to listen and

how hard he was trying now. After some years he began to make reference to my interpretations in the following sessions giving evidence of how he was finally using me.

For a long time the sessions focused on the problems at work and on his difficulties in keeping his temper and rages. This had been the cause of his being held back from a position of responsibility even though his performance was outstanding. I thought it would be helpful to give him an opportunity to discover his incipient skills relating to others in a therapy group. He was able to do this in spite of the fact that several times he was so enraged with someone in the group that he stormed out of the room. As of late his work situation has improved a great deal, he has been able to control his temper there, in the group, and in our sessions and he appears far less self-righteous. We spend time discussing the problems in his relationship with his girlfriend of seven years and linking this to the transference. He still has difficulties controlling his temper with her but now they just recognize they had another fight and they don't keep breaking up with the ensuing anguish in both of them.

## 6. Fostering passion

Is it possible to engage with passion in an activity without a secure base to come back to? Studies on attachment show that the toddler will engage in exploratory activities and in play when the mother or the caretaker is close by and that the toddler will interrupt his play to go back to mother for some kind of emotional re-fueling. Others than caretakers may fulfill that role in the adult. The notion that there is somebody there in the background may allow an artist, for example, to engage in hours of art making. A colleague was telling me of a very productive 6 weeks of writing in an isolated place this summer. If he didn't know he would be joining his wife who was now across the country, he would never have been able to immerse himself in his work the way he did. Last Sunday I felt reluctant to work on this paper the whole afternoon without a prospect of seeing anyone the whole day. I made plans to have dinner with a friend for that evening and with that idea I could go to the computer and work steadily for 2 or 3 hours. I knew I would be seeing her and that I had some precious time to work before I did. And I remember the pleasure of many hours in my studio or at the computer when I knew that my husband was nearby reading, writing or watching TV. This is reminiscent of Winnicott's statement regarding the capacity to be alone in the presence of another. We may want to see the capacity to be alone as a

sign of maturity ignoring that perhaps no matter how old and mature we have become we still need the connection to a significant other.

I thought of working on a paper on passion because in the last three years I have noticed that my passion for painting and writing has diminished and wanted to somehow understand that. Of course I have blamed it on the three and a half years of mourning my husband and I thought that I would recover my passion some day when the mourning would be over, if that was possible. But I have come to think that I will still need the presence of another. I spoke for example with a gallery owner about my recent work which she didn't particularly like. She thought my best work was my monoprints and suggested that I try to do that kind of work on canvas. Inspired by our meeting I went to the art store and purchased two stretched canvases to start experimenting. The following day, a lonely Sunday, I forced myself to my studio. With the help of one of Shostakovich pieces, a piano quintet that a dear friend gave me, I was able to work steadily for 3 hours. I believe I found my re-fueling in the love of my composer friend who gave me the Shostakovich CD and the music itself.

*Gallery owner as background object*

We seem to find different ways to bolster our passion by having a background object to support us. My art teacher worked with the radio on and it had to be a station where there were interviews and talking. If the radio was not working he could not paint. A writer I know does his best work at Starbucks where the people around him become the background object. I have written the first draft of my best papers during flights. I experience great comfort in being surrounded by the other passengers and in being catered to.

From a developmental point of view these strategies to find emotional refueling may be indicative of an immature ego where the internalization of a good parental couple has not taken hold in the internal world. This goes along with the notion that the capacity to be alone and to work alone are signs of mental health, a notion that tallies with the American culture where independence and self-reliance are highly valued. One could alternatively argue that the more internalized the parental couple the more the person is able to supply the background object needed for re-fueling. Fairbairn (1952) wrote about a mature dependency rather than independency. For him the idea of independence is fostered by a schizoid fantasy of not needing anyone. Along the same lines Sidney Blatt (1996) has written about the necessity for a healthy integration between autonomy and self-definition and

relatedness. Likewise, the feminists at The Stone Center have emphasized the necessity for balance between independence and reliance on others.

I hope that by now we have come to an understanding about how difficult it is for the analyst to keep the patient's passion alive and how much that demands of the analyst. It brings to mind a poem by poet Pablo Neruda entitled *Who Dies*, that applies well to passion. It concludes by saying: Let's avoid the death in soft installments, remembering always that being alive requires an effort much greater than simply breathing.

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