

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE
ANALYTICAL SESSION

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THERAPIST IN THE ANALYTIC SESSION^{1, 2}

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Abstract

The main purpose of this article is to reflect the presence of the analyst in the session when he is not capable of containing his own anxiety and narcissism, which can obstruct the possibility of knowledge. For this, I will use the concepts of empathy, reverie and link.

I will utilize clinical segments from two distinct group sessions that took place at the ambulatory of the Mental Health sector of the pediatrics department at UNIFESP. Both segments reveal my distance from what was truly taking place in the session, as I attempted to respond to my narcissistic demand.

In the first segment, I show my experience in a turbulent situation, in which the course of projective identification was inverted. In the second segment, the patient and I were able to contain our frustration and resume the possibility of thought.

Keywords: Analyst, Anxiety, Link, Narcissism, Therapist

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² I use transcripts from sessions conducted under the supervision of Dr. Mary Lise Moyses Silveira and Dr. Marcilio Sandoval Silveira, in the Mental Health sector of the department of general paediatrics of the Federal University of Sao Paulo (UNIFESP), coordinated by Prof. Dr. Rudolf Wechsler

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

Prologue

“We are subjects not because of our foundations, but because of the possibility that we can become something different from our foundations without losing ourselves” (Bonder, 2008: 173)

Wadi Rum, Jordan, 2000. Adail, an attentive Bedouin that we met at the small and only shop in the village offered himself to be our guide in the desert. We accepted and scheduled the outing for the next morning. It seemed more authentic than the tourist-trap outings held by the young men that waited for tourists in lined-up jeeps. Later, Adail met us at the small guesthouse, the only one in the village, and invited us to his home. So we went!

The living room took up most of his house and it was sparsely furnished except for the concrete bench that was covered with small cushions and was wrapped around three of the walls. It was a large room that preserved the feel of a tent. The Bedouin are accustomed to living in huge tents designed for welcoming people who are on their way, on pilgrimages.

Adail explained that he left the desert and moved to the village because he felt insecure living in the desert alone with his still small children. There were few families left in the desert and he could no longer count on others in the event of an emergency. The Bedouin that live in the desert keep enough distance so that they can preserve their privacy and the visual communication that allows them to feel secure. Adail had plenty of privacy, but he no longer had the visual communication.

Communication in the desert is unique. Because they are distant from each other, the Bedouin speak loudly, but more importantly than the tone of voice they use is the paused rhythm of their speech and the stretched pronunciation of each syllable. It is this stretching of syllables that facilitates comprehension.

One of the more audible rituals of the Bedouin is the way they prepare their coffee. The grains are placed in a container and they become soluble as they are beaten rhythmically. The purpose of this ritual is to produce a sound that carries a specific melody so that if somebody, a pilgrim, happens to be passing by in the middle of the night, he will recognize the sound and feel welcome to join the Bedouin in his tent for some coffee and to talk far into the night.

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

I was reminded of these stories, without being able to clearly distinguish what was real and what was fantasy, as I read the book “Tirando os sapatos” (in English, “Taking off your Shoes”) by Nilton Bonder. In this book, the author reflects on his experiences as a participant in a project aimed at following the spiritual-tourist trail named “Abraham’s route”.

People of several different nationalities and belief systems had been invited by Harvard University to trail the path that, according to the bible, Abraham followed when God summoned him to leave the land of his ancestors and walk toward the promised land, thus beginning today’s monotheistic religions.

Bonder has some interesting ideas on this topic that I will describe in the following paragraphs along with my own considerations.

When Abram hears God’s call, he leaves the land of his ancestors to follow the only deity to the Promised Land. However, Abraham did not know where this Promised Land was. Thus, his destiny was the voyage. It was an end in itself, rather than a means to an end. According to Bonder, the goal wasn’t the land but rather, the leaving home and being a pilgrim. Abraham leaves the land of his parents, leaves the reality that he knows to build something that is still unknown. One way to look at this is that the route is the construction of knowledge. This biblical passage is known as “Lech lecha”, which are God’s words to Abraham and that mean both “go for yourself” and “go by yourself”. Being a pilgrim is about going for oneself, following a path. And going for oneself is about seeking something beyond one’s parents’ house. It is about building beyond that which is already known. But to go for oneself, one must go by oneself, in the same way that to go by oneself it is necessary also to go for oneself.

Bonder speaks to us about the vulnerability and the sense of security that we may find along the way. He also clearly states that threats are not present along the way. They are not in the unknown which leaves us unprotected. Rather, threats are in the vulnerability generated by our deeply rooted foundations, which do not allow us to reflect and that become confounded with our very identity. “The greatest vulnerability, however, is in our foundations, in the most basic beliefs that we carry in our identity that if questioned or deconstructed can result in the loss of our reference point and of our psychological balance” (Bonder, 2008: 23).

On the other hand, security is in the interaction, in the bonds forged with others. Every traveler needs hospitality in order to survive. “There are many levels of

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

hospitality, from the most basic to the most warm and welcoming. However, without hospitality there is no voyage, there is no life” (Bonder, 2008: 40).

Furthermore, the foundations that we carry within our identity are threatening to us, because they may not allow our interaction, and without interactions, we do not embrace hospitality when we need it. Without hospitality we do not travel and we do not trace our path – we cannot go to ourselves.

Down the road we always find the traveler and the host. And in order to continue on his/her way, the traveler must trust that he/she will find the host along the way.

For Bonder, the host is the main beneficiary in welcoming a traveler, since while offering shelter, nourishment and advice, the host can expect to receive hope and spiritual adventure in return.

We might say that the host also receives resources that expand his or her mental life. These resources are based on (and at the same time allow) the extent to which the host truly welcomes the other. According to Bonder, by truly welcoming the other, the host must leave his/her routine and in that exit, find internal values that until then were unknown. In a certain way, to be a host is to build a path; it is to go to oneself – Lech Lecha.

To truly be with the other, is not to try to meet one’s own expectations, but rather, the needs of the other. Bonder writes: “Being a host is not about controlling the other, but rather, about giving. This act of giving is not about what you wish to give. The category of the things you want to give doesn’t fit into the greatness of generosity, but it is a mere extension of your wants.” And he adds that offering the other what one thinks is good according to one’s own opinions is not generosity but rather, commerce. “... being generous is not giving what you want, but what the other wants.” (Bonder, 2008:127).

Bonder reminds us that this very authentic generosity is close to allowing oneself to be robbed from. It is also necessary to be alert so that one will not feel “violated” when giving something that one is not truly willing to give. For the host, being with the other is to be detached from the foundations. In the same way, the pilgrim must detach himself from his foundations in order to allow him to be welcome, and to continue on his way.

Bonder brings up a Chassidic maxim in mentioning that one’s identity cannot be hooked to (dependent on) another – they cannot be fused together; otherwise there

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

would be no exchange, no identity. “If I am me because you are you, and you are you because you are you, then I am me and you are you and we can talk.” (Bonder, 2008:183).

Introduction

According to Sara Ferro (2003) the currently used psychoanalytical models, among which I point out the Psychoanalysis of Links Configurations, consider the analyst as a real person to be an important factor in the psychoanalytic process. This author confronts both models: in the *single person model of psychoanalysis*, the analyst remains neutral with the minimum amount of counter-transference. The work occurs in the analysis of the patient’s transference and resistances. On the other hand, the link model considers the establishment of a relational space in which counter-transference becomes an important ally for understanding the analytical situation.

In the link model, one not only interprets transference, but also, interpretations occur in the transference. The possibility of psychic development happens within the relationship and depends on the analyst and the analysed. Transference and counter-transference compose a dynamic and dialectic unit and it is up to the analyst to create conditions of empathy and reverie.

“... patient and analyst interact and conditions of containing, holding and empathy are created, in which it is now possible to establish a relational space aiming at an original construct; the phenomena of transference and counter-transference are a dynamic and dialectic unity; counter-transference is a component whose function is to aid understanding as to what is taking place in the analytic situation.” (Sara Ferro, 2003).

Considering that psychological development takes place within the relationship, it is now necessary to introduce the reader to the analysts’ conditions of empathy and reverie.

Empathy

For Caper (1994), Bion’s concept of “isolation within an intimate relationship” is evidence of the occurrence of psychoanalysis, of the analytic fact. According to this

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

author, Bion suggests that each member realizes their role in the relationship, hence the isolation, and the fact that it happens in the contact between separate individuals accounts for the intimacy. For Nava (2005), in order for one to be conscious of oneself, it is also necessary for there to be a secondary representation of an object (the other). And in order to be conscious of the other, there is also the need for a secondary representation, which implies in the capacity of seeing through the other's perspective.

In order to be with the other, we – analyst and analysand – have to frustrate our desires of being fused together, of not being alone. We have to feel alone, estranged from and different from the other, however allowing ourselves to perceive reality through both perspectives – our own and the other's.

Nava (2005) bases her thoughts on Kohut's concept of empathy, who argued that empathy is the capacity to feel, seeking in one's own experiences the experiences of the other. However, such feeling must be attenuated and must not lead to confusion between oneself and the other.

The goal of empathy in the analytical process is the analyst's understanding of his/her analysed person or group, and the return of something sufficiently metabolized so that it can be thought through by the analysand and group, alleviating their anguish.

In order to understand empathy according to this perspective, it is first necessary to understand Bion's ideas of "Reverie". This concept refers to the empathic look and the ability to endure anxiety that is offered to the other by the mother, the analyst, or whoever promotes "reverie".

Reverie

Fernandes (2003) discussion on Bion's ideas of thinking about thought the author point out two mechanisms of the psyche. The first refers to the constant oscillation between the schizo-paranoid and the depressive positions, in that they "vary between disintegration and integration, between disorder and order, a dynamic that can be illustrated by $PEP \rightleftharpoons PD$ " (Fernandes, 2003:134).

According to Camargo (2000: 97), the "concept of containing is related to the desire described by Melanie Klein as projective identification". The author further states that for Bion, projective identification disposes of an unbearable mental state, projecting this state onto an external object. In addition to relief, this has at least two more

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

objectives: 1) Controlling the object and/or 2) Causing in the object a mental state that is similar to one's own, as a form of communication.

For Ferro (2003), the analyst must have sufficient emotional preparedness so that he/she can receive the projective identifications, think about them and return them to the analysand already *literate*, by transforming the beta elements into alpha elements.

Thus, projective identification requires cooperation on the part of the object so that he or she can contain this mental state (beta element) and transform it, through the alpha function into alpha element. By returning the already metabolized content to the analysis patient or to the group, the analyst enables (or facilitates) the emergence of thought. "Successful realistic identification depends not only on the mental state of the projector, but also on the mental state of the object" (Della Nina, 2002:268).

It is the analyst's job to be continent, promoting the analysis patient's tolerance to frustration. According to Bion, "Inability to tolerate frustration can obstruct the development of thought and a capacity to think (Bion [1962], 1984:113). Still according to Bion:

"If the capacity for toleration of frustration is sufficient, the "no breast" inside becomes a thought and an apparatus for "thinking" it develops(...) A capacity for tolerating frustration thus enables the psyche to develop thought as a means by which the frustration that is tolerated is itself made more tolerable" (BION [1962], 1987: 112).

According to Della Nina (2002), Bion argues that containment is the capacity for affect and the capability of transforming affects into symbolic elements. This transformation is related to the ability of maternal reverie, in which the function α (alfa) is present (Lam, 2008).

The goals of the alpha function are to 1) transform a raw sensory element (beta element) into an element that is psychologically meaningful and 2) transform unbearable states of the soul into bearable ones (Camargo, 2000:99). "Reverie refers to the maternal attempt to provide containment, which enables the understanding of the baby's world, in order to support its loss of omnipotence."

For Cavallari and Moscheta (2007), it is through reverie that the analysand improves his or her capacity for integrating love and hate, and for tolerating ambiguity.

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

As we consider that reverie depends not only on the one that projects it, but also on the one that receives it and offers continence, and on how this is established, it is now necessary to present the concept of links.

Links

I share with Tabak de Bianchedi (1999) the idea that links are the emotional communication between two minds. Tabak de Bianchedi adds to this that the most important point is not the objects but rather, the bridge, or what takes place when two minds are in contact. The emotional bond may also take place between distinct aspects of one's personality, or distinct aspects of the self – from childhood, adolescence, infancy, adulthood, etc.

Fernandes (2003) also shares this idea, stating that: “The link is the relational structure in which an “emotional experience” takes place between two or more people or between parts of one person. It can be intra-subjective, inter-subjective or trans-subjective” (Fernandes, 2003:44).

Still according to Tabak de Bianchedi:

“As a prototype of the knowledge bond, a dual relationship was proposed that is genetically tied to the baby and its feelings and also to the mind of the mother or of a close person who is able to understand them. It is a comprehensive-emotional bond between the baby's feelings and the mother's response of understanding and decoding them and acting – better or worse, adequately or not. This primary relationship between the mind of the mother and that of the baby is the prototype of the link of knowledge” (TABAK DE BIANCHEDI, 1999)

Thus, the link of knowledge (K) is related to Reverie.

Tabak de Bianchedi (1999) also clarifies the importance of emotional links in the present, as something that is constantly in transformation and permanently new. The bond may change even within a single analytical session, and each time it changes, it is re-created.

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

According to the single person theory of psychoanalysis, the relationships (transferences) within an analytical session are referred to as a repetition of repressed past feelings. However, I agree with Tabak de Bianchedi (1999) who prefers to think of these relationships as complete personalities, with more primitive or more mature aspects, but always specified in the present emotional link, with an expectation of further development in the future.

The therapist's narcissism

The ability to contain one's own anxiety enables the establishment of the link +K (knowledge), in which state it is possible to think of and tolerate doubt. If analysts are not open to the unexpected and the unknown, they may destroy the possibility of knowledge and promote guilt and the moral superiority of ignorance, since they may feel as if their own narcissism was being attacked.

“occasional superegoic functioning of the analyst, when he is not capable of containing his own anxieties, which in turn, are a result of his lack of knowledge of what is taking place in the analytic situation, therefore resulting in the failure of his therapeutic capabilities and, still worse, in the possibility of severe damage to the mental capacities of the patient, who would maintain a superego of pathological traits, the outcome of which could be a devastating inversion of projective identifications.” (Ferro, 2003)

When doubt is not tolerated, the analyst desires to respond to his/her demand for knowledge, loses the ability to think and may attack the link with the analysis patient and the group.

Clinical Material

I will utilize clinical segments from two distinct group sessions that took place at the ambulatory of the Mental Health sector of the paediatrics department at UNIFESP. These group sessions are one-hour long in duration, take place weekly, and occur simultaneously to the parents' group in a neighbouring room. These group sessions are preceded by yet another group session, composed of therapists, mothers and children,

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

with is 15 minutes in duration and has allowed us to observe how the relationship between mother and child occurs *in loco*.

Both segments reveal my distance from what was truly taking place in the session, as I attempted to respond to my narcissistic demand, that is, my desire to understand what was taking place in order to feel like a good analyst and protect myself from the unknown.

In the first segment, I show my experience in a turbulent situation, in which the group had to protect itself from my attack on the link of knowledge, and take care of me. As explained by Sara Ferro (2003), the course of projective identification was inverted. In the second segment, as I attempted to understand what was taking place, I distanced myself as a whole person. Nonetheless, the patient and I were able to contain our frustration and resume the possibility of thought. I was thus able to return to my role as analyst.

Clinical Segment 1

The first segment of clinical material is from a session that took place in 2005, when sessions were held at the Paediatrics outpatient unit, within the hospital complex. The walls were made of single layers of wood and the patients seen by several different specialties waited in the hallways. There was a great deal of external interference.

The group was composed of seven children between the ages of seven and eleven, and this day, four children were present, three boys (ages seven, ten and eleven) and a girl (age nine). The parents (mainly mothers) were seen simultaneously by two therapists in a parents group.

The children's names are fictitious.

Segment

Ariel approaches his chair to Fernando's.

Someone knocks on the door and Ariel gets up and opens it. A woman looking to set up an appointment looks at me. I make a signal for her not to come in. I go to the door and ask her to wait about 15 minutes because I was in the middle of a session.

The children continue to draw.

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

Ivo – I didn't understand what that woman said

Carla – She (the woman who knocked on the door) wanted to talk to me, but I said no because I was with you.

Then I think that perhaps he was referring to the therapist of the parents group, who is not Brazilian and has a foreign accent.

Ivo – Do you have children?

Carla – Do I have children?

All – Do you have children?

Carla – No.

Ivo – No???

Fernando – But are you married?

Carla – It seems like you are very curious about me. If I am married, if I have children. If I can take care of you.

Ivo – Here, we are your children.

Carla – What does it mean to be somebody's child?

Mara - It's like this: When somebody asks if you're married, you answer by asking: "what do you think?" Because teenagers are curious.

Ariel gets up and goes to the art folder from previous sessions. Fernando follows him.

Mara – Teenagers like knowing things and need to talk.

Carla – They want to know what Mommy and Daddy do.

Ivo – On their honeymoon

Ivo walks toward Ariel and Fernando who was both looking at Ivo's drawing (a big sun).

Mara – Teenagers want to talk, talking here and there. Seeing what happens in the bedroom. Seeing from up above. Teenagers are just like children.

Fernando – I don't draw suns, I only drew them in kindergarten. I like to draw people.

Ariel – Me too. I don't draw suns.

Ivo – The sun stands out on the page.

Fernando – Do you have a mother?

Discussion

In this segment, we see a moment in which I am confronted with a lack of understanding of what is happening. This occurs because I try to satisfy my narcissism – being a "good" analyst, who understands what takes place in the session and contributes with excellent interventions, in particular, interpretations.

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

When Ivo says he doesn't understand what "that woman said", I think of two people: the person who knocked on the door and later, the psychologist from the parents' group (that, not being from Brazil, has a foreign accent). In doing so, I lost the present moment: Ivo was actually denouncing that in the group, we couldn't understand what was going on.

Thus, distant from the present, when they asked whether I had children, it seemed to me to be an absurd question. I didn't know how it had come about and, while looking for explanations, I ended up not knowing how to respond. I now think that they wanted to know if I had empathy for their mothers and for them – if I could understand what they felt and thought, without becoming confused with them. Solely through empathy, I could take care of them, offering resources by metabolizing their anxiety (α function).

I repeat their question: "do you have children?" back to them. I was trying to gain time to organize my thoughts, but I felt as if I had no way out and not having a better answer, I said "no".

Although this question could have had a negative or a positive answer, they are surprised by my "no" (or perhaps by the impact I felt?). By responding, I somehow placed myself as more present in the session, revealing myself as a person.

The children noticed that I was strongly impacted by and had trouble reacting to the question. They wanted to know whether I could understand them and I revealed my intimacy: I am also a person that loses "control". I can also be taken aback and do not always know what to do with my feelings.

While I looked for "grand interpretations", in order to satisfy my narcissism, thinking and knowledge could not be present. I shared my intimacy with the group: the turbulence within me due to me not knowing. But I maintained my superegoic function and what took place was the inversion of the course of projective identifications. As stated by Ferro (2003), since I was not open to the unknown, I promoted guilt, and therefore I destroyed the possibility of knowledge.

The group had to find a way to recompose and organize itself, and to understand what was taking place. However, in this particular moment, they could not count on their analyst to do so.

Two children, Ariel and Fernando, walked away to the other side of the room. Thus, they generously offered the two children that remained close to me (Ivo and

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

Mara) to continue to investigate what had happened through conversation. Ariel and Fernando looked for an answer in the experiences of previous sessions, by retrieving the art material that was stored away in a folder. The group showed me how it articulates itself in order to deal with anxiety. In this case, the anxiety of realizing that the therapist also has a mental world and that like them, she also is susceptible to emotional turbulence. Moreover, they also needed to acknowledge what had happened, in order to reduce their feelings of guilt.

By saying “Here we are your children”, there is an attempt of reparation, of repairing the disorder caused by the investigation. This reveals a psychological structure that recognizes its capacity to contain disorder and take care of the other.

The two children who have physically distanced themselves observe the drawing (a big sun), from the child that supposedly began this disorder by asking whether I had children. They discussed whether they were teenagers or children. “I don’t draw suns; I only drew them in kindergarten”. Is drawing suns only for children? Is being curious only for children? They seem to believe that the disorder was caused by childish aspects and that these shouldn’t be present. However, as Mara said: “Teenagers are just like children” and “They like knowing things and they need to talk”.

Clinical Segment 2

The second segment of clinical material is from a session that took place in 2009, when our patient sessions of the Mental Health Sector took place in a specifically designated facility with better infra-structure.

This group was composed of 5 children between the ages of 7 and 9 and on this day, two children were present, a 9 year old boy and an 8 year old girl. The children’s names are fictitious.

Segment

Eduardo plays with a toy airplane and cars and Daniela watches him. In his game, the boy creates confrontational situations, saying several times that the toy car died, the airplane died, the action figures died, etc.

After several attempts by the therapists of understanding what was going on...

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

Eduardo pretends he is cutting off an action figure's head.

Carla: Could it be that I am without a head?

Eduardo: A *headless mule*³.

Carla: Oh! I don't have a head...

Daniela: That's what I was going to say, a headless mule!

Daniela to Carla: Now you're starting to get the idea.

Discussion

Several times I tried to understand what was going on in the session; however I was not sufficiently present. As I tried to understand (head), I distanced myself from feeling and from the possibility of being with them (body).

For a head without a body, there is a body without a head!

Thus, I was physically present but my psyche was at the service of my demand – the desire to understand, to be a good analyst – my narcissism. Being psychologically distanced from the group, I couldn't provide the link +K. I couldn't have empathy or reverie.

The children were able to denounce me for not being with them and, like a mule, I was sterile, I couldn't be creative or even understand what was taking place in the session. Like a *headless mule*, I caused fear – a ghost – that paralysed and thwarted the group's development.

By being able to share with me the fact that they felt lonely, scarred and without my empathy and reverie, this condition was inverted. I began to "get the idea", and a new bond was formed, the link +K, that allowed us to think about how it is to be in a group in which the analyst doesn't understand.

This short segment demonstrated how bonds change throughout a session and how they are related to present feelings.

³ Character from Brazilian folklore that instead of a head has a strong flame, which has great destructive power. During the night, this character haunts the villages and destroys everything in its path

ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE ANALYTICAL SESSION

Conclusion

The analyst must contain to his or her own feelings, since analytic work is no longer something that should be done *to* the patient (single person model), but as something that takes place *between* analyst and patient (relational model). The presence of the analyst, with his/her emotional resources, empathy and counter-transference are important resources for the group's analytic process. The analyst must be fully present – head and body.

We may consider that the analyst is a pilgrim in his/her journey and also, the host. As a traveller, he/she brings the hope for renewal and at the same time, relies on the other to be housed, fed and guided. As a host, the analyst must allow him or herself to step away from day-to-day activities and be touched by values that are within but are still unknown. That is what will give him/her the confidence to truly be with the other. Being present in the session is to give the other what he/she needs, without fearing the results. It is necessary not to be rooted in the foundations that carry vulnerability and instead, allow the interaction.

Besides being the host of the analysed people and the group, the analyst is also his/her own host. Being an analyst and being with the other is to be a pilgrim and a host. It is to go to oneself and for oneself. As God says to Abraham: Lech Lecha!

Bibliographical References

- BION, W. R. ([1962] 1987). "A theory of thinking", ed. Maresfield Library in *Second thoughts*, pp. 110-116, London.
- BONDER, N. *Tirando os sapatos: o caminho de Abraão, um caminho para o outro*. Rio de Janeiro, Rocco, 2008.
- CAMARGO, C. N. M. (2000) "Transferência – Continência – Holding – Rêverie", Boletim Formação em Psicanálise, n 2, São Paulo: pp. 95-102.
- CAPER, R. ([1994] 1996). "O que é fato clínico?" *Livro Anual de Psicanálise Tomo X*, ed. Escuta, São Paulo: pp. 11-21.
- CAVALLARI, M. L. R. e MOSCHETA, M. S. (2007) "Reflexões a respeito da identificação projetiva na grupoterapia psicanalítica". *Revista da SPAGESP*, nº 1, Ribeirão Preto.

**ON THE PRESENCE AND ANGUISH OF THE THERAPIST IN THE
ANALYTICAL SESSION**

DELLA NINA, M. (2002) "Holding e continência em Winnicott: sua relação com o campo empático de interação". *Alter – Jornal de Estudos Psicanalíticos*, nº 2, Brasília: pp. 257-275.

FERNANDES, W. J. (2003) "O processo Comunicativo Vincular e a Psicanálise dos Vínculos". Ed. Artmed In FERNANDES, W. F.; SVARTMAN, B.; FERNANDES, B. *Grupos e configurações Vinculares*, pp. 43-55. Porto Alegre

FERNANDES, W. J. (2003) "Crescimento Mental e Modelos no Processo Grupal. As dificuldades da Comunicação" Ed. Artmed In FERNANDES, W. F.; SVARTMAN, B.; FERNANDES, B. *Grupos e configurações Vinculares*, pp. 129-143. Porto Alegre.

FERRO, S. A (2003) *Grupanálise como Instrumento de "Cura Analítica". Algumas Considerações Sobre os Modelos Psicanalíticos e a Técnica Grupanalítica*. In: <<http://www.grupanalise.pt/ga/pdfs/revistaonline1.pdf>>. Website accessed on Nov., 02, 2009.

LAM, C. (2010) "Holding e Rêverie: Postura do Coordenador de Grupo de Reflexão com educadoras em um abrigo". *Vínculo – Revista do Nesme*. No prelo.

NAVA, Ana Sofia. (2005) "Empatia e grupanalise: uma abordagem integradora". *Revista da SPAGESP*, nº.2, Ribeirão Preto, pp.01-18

TABAK de BIANCHEDI, E. "La perspectiva vincular em psicanálisis". In: <http://www.psi.uba.ar/biblioteca/bvs/aappg/revistas_digitalizadas/1999_2/1-MESA%20REDONDA%20Bianchedi,%20Sternbach,%20Winograd.pdf>.

Website accessed on Nov. 02, 2009.

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