

Sylvia Zwettler-Otte (ed.)

The Sphinx and the Riddles of Passion, Love and Sexuality

Contributions by
Stefano Bolognini, Rainer Gross
and Sylvia Zwettler-Otte

Preface by Alain Gibeault



The “countertransferenceless” Sphinx: the narcissistic myth of impenetrability¹

Stefano Bolognini

For a year, I have followed Paolo’s treatment in supervision. Paolo is a 25-year-old, very athletic basketball player who is obsessed with the idea that he has a small penis. This conviction makes it difficult for him to have loving relationships, and he has turned to Dr. S., whom I supervise, for psychoanalytic help after having received useless reassurances from an urologist about the normality of his genitals.

Dr. S. is a communicative woman and a nice one. She is slender and much smaller than Paolo, but he seems to have feared her from the beginning as a big, powerful, dangerous, and mysterious creature, potentially capable of pointing out his weakness and insufficiency – like all women, at any rate. The paradox is that it is precisely this woman, the one of whom he is asking help, who would have the power to confirm his impotence and disgrace.

This self-concept of Paolo’s seems to extend from the sexual to the broader mental area, as though he experiences his personal “penetrance” (= capacity for penetration) as precarious and at the same time dangerous, in every situation.

And his associative process reveals this difficulty, even more so in the form of contents: Paolo interrupts his sentences halfway through, hinting at things but not completing them, as though he were “covering his thinking with sand” before it becomes clearly legible (and thus castrating himself in order not to risk being castrated by the other).

The transference, with its overdetermined inevitability and the recurrent nature of its developments, seems to be an equivalent of the Greek *ANANKE*: one cannot escape from it, despite the precautions the patient tries to adopt in order to flee from it; and the wayfarer must always risk running into the Sphinx.

The difficulty in this case is that Dr. S. is also an attractive woman, objectively speaking, which makes the situation even worse.

In fact, when Paolo enters into treatment, the first regular phase – which lasts for months – involves an obsessive lingering in Dr. S.’s bathroom while he urinates. It is as though he must thereby directly discharge “something” (aggression?

1 An early version of this text was presented at the XXIII. EPF-Conference, London March 2010.

desire?), which he mysteriously feels he does not want to risk bringing into the consulting room.

The Sphinx must not notice “something” dangerous inside of him. One could say, paraphrasing the myth, that perhaps Paolo does not have a clear idea, either in his mind or in his sense of himself, of his own maturational and generational status. That is, he does not know whether he “walks on four feet” like a baby (in the sexual and mental sense); whether he is a *homo erectus (et erigens ...)*, capable of erections, desires, initiatives, and personal thoughts, as at times he comes to feel himself; or whether, in contrast, he will grow old “on three feet” without ever having loved, like the seven unhappy dwarfs of the fairy tale. The dwarfs are destined to die as childish, pregenital old people (excluded from the genital couple of Snow White and the Prince, who are instead destined to experience the fullness of love, even though younger), with their only possibility being that of excavating in the anal mine, seeking idealized diamonds/feces.

Will Paolo always need a third foot/“stick”/parent/supporting object? In short, will he forever be a prisoner of his dependence on the analyst?

The impassive Sphinx awaits Paolo in her studio, and he defends himself in the only way he knows, that is, by hiding, rendering his thoughts and emotions confusing or incomplete, sliding over his words, vaguely referring to “*one who*” or “*someone, for example*”, instead of saying “*I*” – trying, in short, to escape from her.

Sometimes he moves on to a counterattack, placing the effectiveness of the treatment in doubt: identification with the aggressor (a more specific version of the transformation from passive into active) is one of the most archaic defences known. In analysis as in life, it ranges widely into still more specific categories: identification with the “abandoner”, with the “denigrating disqualifier”, with the “excluder”, with the “confuser”, etc.

All in all, there are many ways to put oneself in a safe place, and Paolo tries them all in order to overturn the situation with the fearsome Dr. S. In this he is damagingly skilful, such that I – as the supervisor of the Sphinx – must concern myself with keeping hope alive in her, hope that sooner or later something will change in this analysis, and that this elusive wayfarer could become, with time, a coherent and comprehensible person.

But the hope to do what with him? ... Certainly not to strangle him (“sphincter” and “asphyxiation” have the same lexical root as “sphinx”), or to devour him, but he doesn’t know that.

One thing is sure: the mother, as an absolute, is a mysterious being, full of secrets (and secretions? ...) in which one can lose oneself. She challenges the child’s penetrative immaturity, and this finds a corresponding symbolic element in

the myth of the Sphinx who can be defeated only by intellect, by shrewdness – penetrative equivalents – in contrast to dull stupidity, the equivalent of castration.

Like the mother with regard to sexuality, the Sphinx can decree the “mortal” defeat of Oedipus, if he cannot “penetratively” resolve her enigmas, which according to literary tradition are classically twofold: that which alludes specifically to genitality, reserved for adults and forbidden to children and the elderly; and that relative to the alternation of day with night, which also refers to the two mothers – the solar mother of daytime, conceded to the children, and the lunar, sexual one of night-time, reserved for the father.

Paolo, in life and in analysis, feels like an anxious child who wanders about the house at night when he should be staying silent and good in his little child’s bed, and instead is crazed by a desire that cannot be expressed, one that risks exposing him to derision as much as to rejection and condemnation. And Dr. S. will surely confirm this terrible reality.

It is of no use for her to remain impassive, that Dr. S! ...

It is clear that she scorns him and is ready to deride him (as though he were a fanciful little mouse in the presence of a giantess) and at the same time to condemn him (as though he were an obvious pig in comparison to a morally irreproachable person).

The object of desire, the Ideal Ego and Super Ego are all there, all three together, condensed into a single figure that scrutinizes him slyly from behind the couch.

He feels exactly like that: like a little mouse and a pig at the same time, but he doesn’t even know this very well because he is completely taken up by making himself untraceable, not to be found, both to her and to himself, clouding the waters.

The young Freud, writing from Paris, sends letters to Martha that are full of idealizing, narcissistic enthusiasm (physiologically normal for his age), lavished in equal parts – as happens to all those in love – on both himself and on the object (Martha), at times with a not-so-innocent, maniacal shade to them:

“The bit of cocaine I have just taken is making me talkative, my little woman”.

[Letter of February 2, 1886 p. 201; *Letters of Sigmund Freud, 1873-1939*]

There is the matter of his gaining acknowledgment and of overcoming his rivals in fantasy (in this letter, Nothnagel and Charcot himself), to whom Freud compares himself, denying and at the same time giving representation to his ambitions:

“There was a time when I was all ambition and eager to learn, when day after day I felt aggrieved that nature had not, in one of her benevolent moods, stamped my face with that mark of genius which now and again she bestows on men. Now

for a long time I have known that I am not a genius and cannot understand how I ever could have wanted to be one. I am not even very gifted."

[p. 202, same letter]

Actually, Amalie Freud had well equipped her little Sigi with regard to his key narcissistic resources (even if Freud's interpretation that the riddle of the Sphinx is about where siblings come from constitutes evidence that his having rivals reduced his narcissistic capital). Certainly, she had equipped him better than the patient Paolo's mother had done with her son, judging from what Dr. S. and I were coming to understand.

However, even the young Freud, like all men, must give himself courage in order to confront the verdict of the "**TYCHE**" (a feminine entity).

The reinforcing resort to cocaine, confirmed in the letter in which he also speaks of Fleischl (his friend who will die of cocaine abuse), seems to be an unwitting referent even in the peculiar sentence in which he compares himself to the Sphinx semi-covered in sand:

"But the stuff simply enveloped me, as the sand does the Sphinx, and soon only my nostrils would show above the mass of paper."

[p. ix, Sigmund Freud, *Life and Work*, Vol. 1: *The Young Freud, 1856-1900*, London: Hogarth, by Ernest Jones]
[Letter to Martha Bernays of April 28, 1885]

This brings to mind the way in which the current generalized boom in the use of cocaine expresses the motivation put forward by many users: to strengthen their performance sexually as much as professionally. These consumers believe they insatiably want to obtain "something more", while, more times than not, they are – without knowing it – fleeing from the anxiety of "*being something less.*"

The Sphinx is always there, impassive and ruthless, ready to "kill" the unprepared wayfarer and his penis/genius, and Oedipus/Freud must adapt to the performative standards of an idealized "father of the night"/Charcot; otherwise, the Sphinx's commiserating laugh at his insufficient mind/penis will destroy him.

Paolo must still work a lot, in analysis, to reach the fertile and calm territories of genitality, where love and pleasure can be experienced by two separate and sufficiently complete persons, two "great equals" (not "one great and the other little"), in the absence of winners and losers, with the freedom of feeling, sharing, and appreciating reciprocal desire as one of life's riches.

What do I say to the Sphinx during our supervision?

Well, I don't say anything very brilliant neither "genial", in fact, but I think I say things that make sense and are useful.

Along the lines of: she will have to have patience with this Oedipus who is only barely narcissistically equipped and thus still evasive; and it will be necessary to help him a little at a time in representing his fantasies and fears, in session and out, with her and with others, working them through together.

Besides, the Sphinx, too, has her fears, even though Oedipus doesn't know it. If, after some years of training, she doesn't present a well-elaborated, final clinical report, the gods will not admit her to the Olympus of the IPA, and this is no small danger!

Perhaps this contributes to making her a little impatient at times, since Paolo's performances reflect a perspective on her qualifying performance; we talk about it, and this helps "hold" the situation, broadening her already very sound capacities of containment and of working through with a colleague.

But there is a more subtle and profound problem in the background, for all analysts: the Sphinx, who is "big", who "hangs over" the ignorant wayfarer, who "knows", who is made up of a complex and elusive nature, the Sphinx could feel herself very protected by this essential difference.

In ancient Greece, to be gods or demigods offered incomparable advantages; and the intermediate figures, too, like monsters and heroes, enjoyed notable power and privileges with respect to the common mortal.

Certainly, Dr. S. has not decided on her own to be the Sphinx. If she tried, however, to blatantly deny this attribution of "dangerous" Sphinx-like intentions and characteristics brought about by the patient – either directly through her behaviour (for example, in acting "like a friend", "democratically"), or by making explicit declarations – she would not gain anything on a therapeutic level; for the patient, reassured on a conscious level that the Sphinx doesn't exist, would remain exactly the same as before (that is, terrorized) in his internal world.

Dr. S. must resign herself to *being* the Sphinx, at least for a certain time – the time necessary for mentalization and analytic elaboration of the real fantasy.

The problem is a different one and relates to the essential difference between projection and projective identification.

Paolo does not limit himself to projecting onto Dr. S. (like onto other women) a fantasized Sphinx-like profile, changing his own perception of the object: he makes the object truly *feel* that way! He sets in motion an experience, that is – not a casual one, but an intricately configured one, that can pervade all or part of the other, who in turn may or may not notice this.

If he does not notice it, the recipient unwittingly "becomes" the projectively identified character and forgets about himself, loses his own self.

Why is this important?

Because *the analyst who, inside himself, “becomes” the patient’s idealized/ persecuted object, and who does not notice this, can be deeply gratified by being credited with a great deal of power, even with great “terribleness” that on the one hand transmits omnipotence and on the other makes him lose contact with his own self.*

This is not happening to Dr. S., who has a healthy sense of proportion as well as a healthy sense of humour, but I know that every analyst is tempted at some point during his professional career to indulge in letting himself go in an omnipotent fantasy, precisely when he is stimulated in this way by the patient’s strong projective identifications.

What I would like to emphasize, in that insidious process, is particularly the second part of it, its consequences for the analyst’s contact with *him-/herself*.

If the projective identification that is partially communicated becomes pervasive, and if it succeeds, the analyst loses contact with him-/herself.

An indicator of that can be that he/she no longer humbly accepts the idea that – in part, and in different proportions – the same abnormalities of the patient have been and are present in the analyst as well.

It is interesting to note that Freud’s greatest discoveries, starting from the dream, stemmed from self-analysis. That is, it is really through the perception of his own complexity and his own internal difficulties that Freud was capable of comprehending and describing the human psyche more deeply than others. Cocaine has nothing to do with it! ... Freud’s “scientific genitivity,” not the “phallic” or “non-castrated” type, was better expressed (to the point of genius) when his honesty in contacting the self was integrated with natural phallic tendencies, which granted him a useful penetrative energy, but which had also been mitigated and balanced by his internal contact with affects and fears, just as with hopes and ambitions.

In the end, it is really through the maintenance of an articulated drive complexity, and of an affective complexity, that a truly adult man can maintain his “penetration” (capacity for penetration) without falling into the “**HYBRIS**” of incest.

Yet even today, the fantasy of “hyper-capacity for penetration” and, simultaneously, of the analyst’s “scientific” impenetrability, in order to achieve the same superiority with the patient that the Sphinx had with mortal wayfarers – can subtly tempt the analyst.

One can illude to using theoretical tools, for example, that are so secure as to be able to manage the treatment in an intellectualized way, on the basis of metapsychological plans alone, *passpartout*, and with a systematizing vision “from

on high,” which avoids elaborative contact with the countertransference experience.

In a certain sense, the analyst-“Sphinx,” who poses questions only to the other and never to him-/herself (in addition), produces the exact opposite of co-thinking and the intersychic.

Alternatively – at the opposite end of the spectrum, and in an unbalanced reaction to a Sphinx-like stance – the analyst can welcome the pervasiveness of certain patients without any clarification of it, leading the analyst to “fall into” an identification (the true, unconscious, and substitutive one) and to lose his own identity, as happens when the concordant countertransference or the complementary one replaces the analyst’s self, rather than providing him with a partial and circumscribed experience on which to reflect.

What we can work through today, better than it was possible at one time, in both ourselves and our students – thanks to the experiences and reflections of those who preceded us – is the capacity to maintain a sufficiently correct technical stance, open and neutral (in the sense of suspension), without losing internal contact with “what it is in ourselves that resonates” when we establish a deep connection with another human being and his or her problems.

It is evident that, on a theoretical level, we need not concern ourselves with “democratically” denying to the patient our inevitable external resemblance to the Sphinx; the patient’s unconscious would not believe us anyway, at least for a certain period of the analysis. Our intentionally presenting ourselves as benevolent, in contrast to the Sphinx, would have exactly the same effect as the reassurances of the urologist to the patient Paolo regarding the normality of his genitals.

Instead, it will be the long, shared analytic work that progressively makes the patient see the meaning and function of the analyst’s neutral suspension, with the aims of listening, exploration, and knowledge.

We must take maximal care of our internal relationship with our Self, in order to place a “whole” analyst at the service of the analysis, one who is capable of resonating with the patient’s most pervasive problems, without being replaced by them, thus furthering the goal of the greatest understanding.

In a certain sense, then, we aim for “the outer Sphinx,” as long as it is useful to the analytic work, but never the “inner Sphinx,” if not in the sense of exploratory suspension.

All in all, I think that what characterizes a true analyst may be the capacity for suspension without losing contact with one’s own complete and complex humanity.

References

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Translated by Gina Atkinson