The presence of the analyst in Lacanian treatment

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Abstract. Transference implies the actualization of the analyst in the analytic encounter. Lacan developed this through the syntagm "the presence of the analyst". However, two completely different presences emerge in the course of his seminars with major implications for the way the treatment is directed. Following Lacan's statement that the transference is constituted by real, symbolic and imaginary dimensions, we will develop how, in terms of Lacan's early work, the analyst's presence represents a phenomenon at the crossroads between the world of signifiers and images. For Lacan during the 1960's and after, the analyst's presence necessarily involves the Real. This means that it points to the moment symbolization has reached it's limits. The clinical implications of Lacan's interpretation of the presence of the analyst that incorporates the Real are manifold and affect psychoanalytic practice with regard to the position and the interventions of the analyst. Specifically, interventions targeted at provoking changes in defenses against experiences of excess or senselessness are discussed and illustrated through case vignettes and a published case. This paper discusses how transference can be considered to be "the navel of the treatment" pointing to the necessity of traumatic material to emerge in relation to the analyst.

> "*It cannot be disputed that controlling the phenomena of transference presents the psychoanalyst with the greatest of difficulties. But it should not be forgotten that it is precisely they that do us the inestimable service of making the patient's hidden and forgotten erotic impulses immediate and manifest. For when all is said and done, it is impossible to destroy anyone* in absentia *or* in effigie" (Freud, 1912, p. 108).

Introduction

Transference is still, more than a century after Freud's "The Dynamics of Transference" (1912a), a central concept for clinicians of most psychoanalytic schools (Almond, 2011; Esman, 1990; Verhaeghe, 2008; Fink, 2007; Harris, 2012). The citation at the top of the page is the final sentence of this fundamental text that has been subjected to many interpretations. In this closing remark, Freud points to the necessity of transference to actualize the obscured and the forgotten, in spite of the difficulties transference inevitably produces in the treatment. Psychoanalytic treatment implies "the imperative to work in the transference" (Almond, 2011). However, *how* analysts deal with transference depends on the conceptualization they have of transference, as theory and praxis are intertwined (Lacan, 1964). Almond (2011, p. 1146) points to the orienting role of theory in the "clinical moment". This means that the theoretical frame an analyst adheres to, is related to the analyst's stance toward the patient. We will examine how the presence of the analyst is developed theoretically in Lacanian psychoanalysis. Furthermore, we will discuss how these developments affect the analyst's interventions. Thus, the central question of this paper is "what does the theoretical development of 'the presence of the analyst' by Lacan imply for the handling of transference today?" We will develop how the presence of the analyst from seminar XI on, points to the importance of the actualization of the

Real, aspects of Being that cannot be grasped via language (Vanheule, 2011, p. 4) in analysis. The analyst's interventions, consequently, are not only aimed at the deciphering of transference or unconscious formations, but at provoking the construction/deconstruction/reconstruction of a defense against an experience of excess or senselessness. We will illustrate these implications with a recently published case study as well as a clinical vignette from our own practice. We focus on clinical work with neurosis in this paper.

The syntagm 'presence of the analyst' is discussed by the French psychoanalyst Jacques Lacan in the seminar, that he held weekly in Paris from 1953 on until shortly before his death in 1981. The seminars were attended by the Paris intelligentsia, not limited to psychoanalysts per se, but also philosophers, artists, students, academics, etc. (Roudinesco, 1999). Lacan discusses 'presence' as it relates to the analytic process at two separate instances with a 10-year interval. It is first brought to the fore in his first seminar on Freud's technical papers and then again in seminar XI. The resurfacing of this term coincides with a change of Lacan's principal perspective on the nature of the analytic experience from the Symbolic, stressing how subjectivity is shaped and expressed discursively, to the Real, pointing to a dimension beyond signification where chance or contingency, uncertainty, shock and senselessness become principal topics. The analyst, then, is no longer solely a symbolic support but also a provocateur, with a highly idiosyncratic style:

> "I am a clown. Take that as an example, and don't imitate me!" (Lacan, 1974. In: Nobus, 2016, p. 37)

The root of Lacan's elaboration of the analyst's presence can be found in Freud's famous remark that "No one can be destroyed in absentia or in effigie" (Freud, 1912, p. 108). Lacan elaborates this Freudian statement starting from the antonym of absentia: presence. The

question 'how is the analyst present?' is answered in different ways throughout the development of his theoretical work. "The presence of the analyst" represents a junction where separate registers are involved and momentarily get tied together. First we will situate the conceptual triad of the Imaginary, the Real and the Symbolic, a crucial compass for Lacanian psychoanalysis. Then, we will outline how the presence of the analyst is situated at the nexus between the registers of the Imaginary (the ego) and the Symbolic (language) in seminar I and between the Symbolic and the Real in seminar XI. We will outline the implications of this shift in Lacan's thinking on transference and what it implies for the analyst's interventions.

The three registers: Imaginary, Real and Symbolic

The dimensions of the Symbolic, the Imaginary and the Real are the basic building blocks of Lacanian psychoanalysis. These registers occupy a central place throughout Lacan's work from the 1950's on. Lacan had set out to re-interpret the central concepts of psychoanalysis through a highly ideographic reading of Freudian concepts, using these three registers as a new conceptual tool[1]. Lacan's emphasis on the dimension of the Symbolic in analytic practice was one his major innovations in psychoanalysis (Vanheule, 2011). The Symbolic is the order of language and the law (Van Haute, 2002) and refers to the fact that our mental life and the analytic process is inherently structured through language (Strubbe & Vanheule, 2014). When Lacan refers to the law he points to the acquisition of culture-specific viewpoints thanks to which we experience the world as lawful and organized. Lacan adopts the notion of signifiers from Saussure to designate the essential building blocks of language. According to Saussure, speech is

[1] The three registers are very much inspired by contemporary prevailing sciences: French structuralism, Kojève's interpretation of Hegelian philosophy, ethnography, anthropology, animal studies and of course, Freudian psychoanalysis.

composed of signifiers and signifieds. The latter are the ideas or representations that speech evokes and thus are the semantic content of speech. Lacan adopts the idea of Saussure that there is no fixed relation between the signifier and the signified and as such, meaning is, in essence, unstable and boils down to convention (Vanheule, 2011, p. 36).

For Lacan, the unconscious is made of the collective of signifiers and stories that a subject has received from significant others, determining the subject's identity, symptoms, dreams, lapses, etc. (Willemsen et al., 2015, p. 777). What Lacan emphasizes through his concept of the Symbolic, is how subjectivity, meaning and the unconscious are dependent upon the mechanisms of language. The core of subjectivity is constituted by otherness: "the unconscious is the discourse of the Other" (Lacan, 1957, p. 10). For Lacan, meaning is not the expression of an interior state, but is constituted from outside, from what he calls the Other; it refers to language as a collection of signifiers and signifieds and to significant others (parents, educators, family, etc.). This dimension of otherness becomes most clear if we consider how subjects are first and foremost born into a web of words. Parents already talk about their desire for a child even long before the actual conception. They talk about the desired life through signifiers that circulate in familial and cultural discourses. The different stories they tell are marked by their history, their desire (and thus also their lack). In the case of the Rat man, for instance, the message of the father that he will become either a great man or a criminal has determining effects in terms of his neurosis (Freud, 1909, p. 205). The psychoanalytic subject exists as a result of an experience of loss (Wilson, 2006). Thinking, representation and desire are possible because of a constitutive lack.[2]

[2] Wilson (2006) clarifies how lack and representation occur simultaneously for Lacan: "Using Freud's theory of the Fort! Da! game as a model, Lacan asserted that the child becomes a desiring subject through speaking the loss it is experiencing. The child's mother is gone; she

The Imaginary is the central register for Lacan during the 1950's. He used the model of the mirror stage, to explain how a sense of psychological unity and identity are attained. Originally, the mirror stage was considered to be a developmental phase, where children from 6 months on, are able to recognize their image in the mirror. This recognition is accompanied by a sensation of jubilation and triumph. The core idea behind Lacan's use of the Imaginary is that this recognition is supported by an image in the outside world. Consequently, self-awareness is misrecognition[3] at root, since we wrongly assume that we 'are' the image. Lacan situates the (Freudian) ego on the axis of the Imaginary. The basic identifications acquired through the mirror image are formative of this ego. Not only is the ego not the master in it's own house, but the house itself is a mirage. In analysis, the Imaginary occurs for instance, when the patient engages in (objectifying) attempts to grasp an image of him/herself (Van Haute, 2002, p. 84): "I am a person that likes structure", "Giving things away is just in my character", "I am a sad person", etc.

The Imaginary not only structures our self-experience but also how others are perceived. In the Imaginary register, others are experienced as similar to oneself. Whereas the Symbolic is characterized by lack, the perpetual movement of the signifier, giving rise to a divided subject that can never coincide with it's self, the Imaginary is characterized by meaning and fullness. It is in this register that objects in the world and others are perceived as distinct and delineated entities. Here, the image of self and other are co-existent and have a reciprocal relation to each other. Imaginary relations are characterized by mutuality, (narcissistic) love and hate/rivalry. For Lacan, analysis needs to counter imaginary tendencies, since in terms of the analytic process they constitute

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desires elsewhere" (p. 405). The dialectic relation between lack and meaning is an important psychoanalytic topic, both in theory as in clinical work (Wilson, 2006).

[3] For this reason, Lacan was highly sceptical of the notion of a "conflict free sphere" or an autonomous ego. He firmly rejected the notion of a subject adapted to reality.

resistance to the movement of the signifier. In focusing on our 'personal' preferences, our 'I', we tend to deny the drive and the fundamentally divided nature of our being a subject.

The Real is the third register put forth by Lacan to grasp what happens in the psychoanalytic experience. Although the meaning of the term also changes throughout his work, it cannot be equated with 'reality'. The Real is an effect of the fact that we are speaking beings. During the early seminars, the Real is that which is outside language and is inassimilable to symbolization (Evans, 1996). The Real thus refers to human experience to the extent that it cannot be articulated through language and discourse, nor turned into an image. It bears likeness to the Freudian drive and refers to a tension that insists at the borderline of the biological and the psychological (Verhaeghe, 2008). One of the ways the Real can manifest clinically is as panic attacks, attesting to an overwhelming drive excitation (Strubbe & Vanheule, 2014). Grotstein (2007) believes that the Lacanian Real is akin to Bion's O: "being just beyond the veil of illusion on our way to the unknown that is immediately near, both inside and out" (p. 123). Both the Real and O are unknown. Furthermore, this register points to aspects of being outside "deterministic certainty" (p. 123). We will return to this central aspect of Lacan's thinking in our discussion of seminar XI.

As humans speak, they lose an immediate, unmediated contact with the Real. The reality is from then on a symbolic reality, mediated by language. The result is a divided subject (fragmented by different signifiers), only experiencing unity via imaginary identifications and relations. Note that the focus in this paper is on Lacan's works from the 1950's until 1964, and hence on aspects of Lacanian theory where the unconscious and otherness are articulated primarily together with the Symbolic. Lacan later developed ideas concerning alterity from the vantage point of the real unconscious and real elements in affects[4],

[4] See for instance Soler (2011).

implying a different elaboration of presence. However, the root of these elaborations can be found in seminar XI, which we will discuss extensively.

Lacan and transference

For Lacan (1953-1954), transference involves the three registers of the Symbolic, the Imaginary and the Real. The transference is polyvalent implying that it is related to the signifier, to images of the other and self, to the body, and to what is beyond representation. Nevertheless, this polyvalence is not in itself perceptible, as we only become aware of transference at certain moments of the analytic process.

For Lacan, it is impossible to think of the analytic relationship as consisting of the encounter between two persons or psychologies[5]. Thus, transference can't be understood simply in relation to what mediates the relation between two subjectivities. At this point Lacan introduces the dimension of "lack" as crucial to our understanding of transference. It is not hard to see how this dynamic of lack relates to analysis. A patient comes to analysis because he/she perceives that something is lacking in his/her life (at least in case of neurosis). The solution to this lack is perceived to lie in the analyst. This is what he coins as "the supposed subject of knowing"[6]. The analyst is held to detain this object (knowledge) that completes the analysand. Put differently, the analyst attains the function of a guarantor, his presence guaranteeing that the result of free association will actually produce something that is meaningful, even though neither analyst nor

[5] Lacan developed an intersubjective take on transference in the early fifties, following Kojève's reading of Hegel. However, in his seminar on transference he states that "the transference alone is an objection to intersubjectivity […] it refutes it, it is its stumbling block" (Lacan, 1967 In: Nobus, 2000, p. 123).

[6] We opted to translate the French "Sujet supposé savoir" in this way. Some authors (e.g. Grigg, 2009) adopt the translation "subject supposed to know". We choose to put the 'supposed' in front since it is both the subject and the knowledge that are supposed to exist somewhere, for Lacan.

analysand knows what it means (Grigg, 2009). Of course, in Lacanian analysis, the analyst does not identify with the position of the supposed subject of knowing, but uses the analyst's status to set in motion the analysand's questioning of what it is that she is suffering from (Lacan, 1960 – 1961). The analyst's desire constitutes an answer to the analysand's aspiration and aims at provoking the exploration of the unconscious. This reduces the supposed subject of knowing to a sort of illusion, albeit a productive and necessary one. This is why Lacan states that the transference is deceptive (Lacan, 1951, p. 184). It is deceptive inasmuch as it is supported by a supposition that puts the analyst in the place of knowledge.

Seminar I: Presence as resistance to the revelation of subjectivity

Lacan (1953-1954) introduces the idea of the presence of the analyst, based on a remark made by Freud in *The Dynamics of Transference*[7] that he describes in a modified version:

"Just when he seems ready to come out with something more authentic, more to the point than he has ever managed to come up with up to then, the subject, in some cases, breaks off, and utters a statement, which might be the following – I am aware all of a sudden of the fact of your presence" (Lacan, 1953- 1954, p. 40).

In this quote, Lacan describes moments in the analytic process where free association is interrupted and a patient expresses an awareness of the analyst consequently. This was the case for Jane, for instance, a young woman struggling with the question of what direction to take in her professional life. She suddenly stops talking about her sad and

[7] "For our experience has shown us –and the fact can be confirmed as often as we please – that if a patient's free associations fail the stoppage can invariably be removed by an assurance that he is being dominated at the moment by an association which is concerned with the doctor himself or with something connected with him. As soon as this explanation is given, the stoppage is removed, or the situation is changed from one in which the associations fail into one in which they are being kept back" (Freud, 1912, p. 101).

depressed mother, who always blamed her daughter for having failed in life. She silently looks at the analyst, then breaks out in laughter. "You really are a serious bunch, you lot". Jane often tries to please the analyst by making "funny" remarks about how analysts behave. However, the analyst does not respond in laughter. In one session, Jane recounts how her parents always said she was "an artist". The analyst repeats this statement "you are an artist", because in Jane's particular dialect, the expression "to be an artist" has a connotation of being someone who doesn't take things seriously. It is used in reference to people who act silly. This brings about associations on how Jane always tried to make her mother laugh, so she would feel better. Moreover, she has suffered a severe lack of confidence, because her parents were very dismissive of her creative nature. In fact, Jane actually consulted because her creative career (as an "artist") was at a standstill. At an unconscious level, being inhibited regarding work meant being loyal to her parents. The point we want to make here is how the "funny" remarks she made involving the analyst constituted a moment of interruption of the associations. Moreover, it was through an interpretation at the level of the signifier "artist" that the multiplicity of meanings surrounding her behavior vis-à-vis the analyst emerged. Indeed, when the presence of the analyst comes to the fore in the process of psychoanalysis, one type of Lacanian intervention consists of trying to reintegrate such imaginary standstill in ongoing free-associative speech.

Specifically, in Seminar I Lacan opposes empty speech (or mediation) to full speech (or revelation). To the extent that something is not revealed in speech, this speech acquires the function of mediation between a subject and an other (Lacan, 1953- 1954, p. 49). Moreover, the other "comes into being in this very mediation" (Lacan, 1953- 1954, p. 48). This thought is 'vintage Lacan'. Jane mocks the analyst, not because she experiences him to be a rather silly creature, but rather as an effect of what she cannot say at that time (the deprecation she

endured from her parents). The other is not some precondition of the analytic experience, but is rather constituted by it. In a more everyday setting, this is similar to how one might resort to small talk in order to avoid touching upon difficult subjects. However, in analysis this conversational pathway is not chosen deliberately. Rather, the awareness of the analyst manifests because something cannot be revealed. Following Lacan, transference arises as an obstacle to free association; it is a moment of resistance within a specific conversational context.

Indeed, the presence of the analyst is realized as a substitute for an authentic expression of the unconscious by the patient. Instead of this "authentic expression" we get a sudden awareness of the presence of the analyst. This transferential moment is consequently related to a moment in discourse that has to be understood in relation to what is about to be said, but isn't. It is a discursive phenomenon related to resistance. As such, it indicates the point where the utterance of something is avoided or deflected.

The other is realized as such by speech, at a time where discourse moves to a point that is hard to say. Full speech is the progressive unfolding of subjectivity in authentic speech. Empty speech is objectifying and puts us at a distance from what really moves us (Van Haute, 2002, p. 48). Later, this is taken up again as imaginary and symbolic aspects of speech and transference[8]. The former being related to a reciprocal relation between equals, to affect and to the conscious features of what is called 'the small other', meaning the concrete other that appears as similar to ourselves (an imaginary partner or mirror image). The symbolic aspects are related to the big Other, to the structuring and often unconscious relations between the subject and linguistic and societal structures. Within this view, transference is an

[8] Lacan develops this through his L-schema that is constituted by 2 axes (imaginary and symbolic). Good introductory and thorough explanations of the L-schema can be found in Willemsen et al. (2015) and Vanheule & Arnaud (2016).

obstacle inasmuch as the analyst is realized as a concrete (small) other, as a counterpart to the analysand's ego. It is the domain of the Imaginary governed by affect, by reciprocity and mutuality between two complementary counterparts, two egos, which are believed to be at the service of ignorance and resistance. The presence of the analyst is manifested at the crossroads between these two functions of speech.

Seminar XI: presence as a manifestation of the unconscious

Whereas in seminar I, Lacan describes presence from the perspective of (imaginary) resistance that obstructs the work of symbolization, Seminar XI embraces a view of the analyst's presence as a manifestation of the unconscious.

Indeed, Lacan takes up the question of the analyst's presence again in seminar XI. In retrospect, this seminar is a turning point, along with the seminar on anxiety the year before, because it sets the stage for a focus on the Real in psychoanalysis. Verhaeghe (2001) describes seminar XI as a "hinge between the Lacan of the signifier and desire and the Lacan of the Real" (p. 72). The shift implies an interest in subjectivity at the limits of the Symbolic (Vanheule, 2011). The focus on the Real brings Lacan to a reinterpretation of some of the classic psychoanalytic concepts: repetition, transference, drive and unconscious. In the opening lesson, Lacan refers to psychoanalysis as a "praxis" (p. 6): "It is the broadest term to designate a concerted human action […] to treat the real by the symbolic". Moreover: "The fact that in doing so he encounters the imaginary to a greater or a lesser degree is only of secondary importance here." Lacan clearly puts the interrelation between the Real and the Symbolic on the agenda. The Imaginary becomes of secondary importance. The ego is now in the background. Whereas Lacan at the outset believed that through the Symbolic, a subject was able to absorb the Real, the Lacan of seminar XI does not grant the Symbolic with these powers. The Real is not a wasteland, waiting to be cultivated, rather it is the insistence of an

excess. Whereas the early Lacan assumed a symbolic determinism (symptoms and the psychoanalytic process are dependent upon the mechanisms of language), he adds an aspect of indeterminism to this, in the guise of an incessantly resurging Real that interrupts the symbolic machine. Key to understanding how Lacan interprets the fundamental psychoanalytic concepts of the unconscious, repetition, transference and the drive is to consider these concepts in relation to the central questions of causality and determination, core themes in seminar XI.

Lacan approaches the interrelation between chance[9] and determinism through the concepts of *tuchè* and *automaton* that he borrows from Aristotle's theory on causality (Verhaeghe, 2002). Automaton refers to the causality we associate with the functioning of machines, determined by strict laws and as such constituting a closed circuit. In terms of the analytic process, it points to the determining effects of language and to the repetition of signifiers. If we associate "freely" the same old stories, words, themes and preoccupations return. One might think of how the signifier "rat" returns numerous times in different guises in the case of the Rat-man, referring to the father's difficulties in choosing who to marry (*Heiraten*), but also pointing to money and of course the ugly rodents from the punishment (Declercq, 2004). However, there is a limit to the Symbolic. Something beyond words that Lacan relates to trauma keeps popping up. It is a missed encounter in that the experience cannot be inscribed through the signifier, while at the same time it insists in mental life, just as is the case for traumatic dreams that are repeated compulsively. This is the 'tuchè' component, the open and living side of repetition beyond words. Over and over

[9] The later Lacan elaborated on the role of chance in life, generally, and in love and the analytic process specifically in the 1970's: "Such are the happenstances that drive us from pillar to post, and from which we shape our destiny, for we are the ones who weave it thus." (Lacan, 1975-1976, p. 142). In this paper, 'chance' and 'contingency' are exchangeable terms. We will not go into later elaborations, where 'contingency' is articulated through the categories of Aristotelean logic.

again, we try to grasp what moves us (through the symbolic), producing a remainder. This leftover pushes us again to speak more to grasp the insisting Real. This process continues constantly: language and its limit are caught up in this circular dance.

The unconscious is related to this undetermined Real:

> "For what the unconscious does is to show us the gap through which neurosis is tied to a real – a real that may well not be determined" (Lacan, 1964 In: Verhaeghe, 2002, p. 130).

This statement reveals how the unconscious is considered against the background of enigma (the Real). The unconscious may very well still be operating with symbolic material, but at its core this constitutes a cover-up for something that is beyond and amidst the realm of the Symbolic. The unconscious of seminar XI is not the unconscious that is a kind of reservoir of repressed elements and unavowed desires or a content that is temporarily unavailable. In seminar XI, Lacan describes how the unconscious is manifested in a flash. It is characterized by a pulsating movement, an alternation between opening and closing. When it manifests, it serves as a starting point for the production of signifiers. It is the undetermined aspect in the signifying chain, the gap that enables the structure to exist. In that sense, the unconscious is pre-ontological. This means that it is not an aspect of psychic reality that is already caught in mental representations. After all, for something to exist for someone, it needs to be taken up in the signifying chain. The unconscious comes into being at the limits of the signifying chain, in a moment of discontinuity. The closing of the unconscious is the interruption of the signifying chain: it refers to the dimension of the Symbolic and the signifier. In seminar XI, the 'presence of the analyst' is understood as a manifestation of the unconscious. If we combine the idea with the unconscious that is marked by a pulsation between opening and closing, this means that this manifests in transference as well. Two seemingly paradoxical statements that describe the relation

between the unconscious and transference in seminar XI, pertain to this link: transference is the closing-up of the unconscious and "the enactment of the reality of the unconscious". The closing-up of the unconscious refers to the interruption in the chain of signifiers: what is halted is the flow of words (Miller (2008 [1995]). This refers to the automaton aspect of repetition: the structured and underlying determination of the signifying chain. "The enactment of the reality of the unconscious" on the other hand, points to tuchè, to a dimension beyond the signifier. What interrupts the working of the signifier is no longer the actualization of the analyst as an imaginary other (as in seminar I), but is related to an aspect of the Real, to non-represented aspects of the drive. The presence of the analyst is then an incarnation of the Real.

Repetition occurs when a missed, traumatic encounter (beyond the pleasure principle) is integrated within the network of signifiers (following the pleasure principle) (Nobus, 2000). From then on, signifying repetition is distinguished from transference (Miller, 1995). That is to say, the essence of transference is not the signifying repetition characteristic of the symbolic (automaton):

« […] the dimension that is always eluded when transference is at issue, namely, that transference isn't simply that which reproduces and repeats a situation, an action, an attitude or an old trauma» (Lacan, 1962 - 1963, p. 128).

Transference does not merely amount to the repetition of a certain stance toward an infantile love object in the here and now of the analytic encounter. The Freudian scheme of the Oedipus complex does not suffice to situate the analyst within the transference. With this loosening of the relation between transference and repetition, Lacan points to the essentially creative function of transference, to the possibility of the analytic encounter to bring forth something new. The contingency of the encounter with the analyst is put to work in the

analytic experience, transforming it in necessity (Dolar, 1993). It is precisely toward the point of enigma that the analyst has to direct the treatment. The treatment doesn't aim to clarify how the present is obscured by the shadows of past love, but rather to confront the patient with the Real that is at stake: the desire of the Other. For Lacan, the desire of the Other is essentially enigmatic. A subject can to a certain extent frame the Other through symbolic and imaginary representations, but there always remains an unexplained remainder to the Other's involvement in the subject. It is in this zone of interpretation that the subject makes a choice, through the fundamental fantasy, as to what it is that the Other wants. In hysteria the subject, for instance, fantasizes about how she is what the Other is lacking. The fantasy is marked by an aspiration to the completion of the Other. The separation of transference and (signifying) repetition entails that transference is not connected to a determined point, residing in the history of the subject, but rather to enigma. Whereas before, if one makes transference dependent on repetition, transference could be 'deciphered', reduced to its roots in the patient's history, now it rests on an indeterminate encounter. Of course, both aspects are at play in analysis, but its structure is an alternation between determination and indeterminateness.

Lacan links this aspect of the 'tuchè' to transference:

"The relation of the Real that is to be found in the transference was expressed by Freud when he declared that nothing can be apprehended in effigie, in absentia – and yet is not the transference given to us as effigy and as relation to absence? We can succeed in unraveling this ambiguity of the reality involved in the transference only on the basis of the function of the real in repetition" (Lacan , 1964, p. 54).

This very dense quote, points to three possible figures of transference with different implications for how the treatment is directed (Silvestre

,1987). We will first discuss the analyst as effigy (imaginary), then as a relation to absence (symbolic) to conclude with the analyst as Real.

The original use of the term "in effigie" by Freud probably refers to a certain practice whereby a crude representation of someone is used as a focus for contempt or ridicule and often hung up or burnt in public[10]. Hence, the phrase "to burn or hang in effigy". A contemporary example would be to burn a photograph of a political leader as a form of protest. If Freud states that it doesn't suffice to destroy someone "in effigie", we could translate this as meaning that it doesn't suffice that the analyst is there merely in an imaginary guise. Transference would then be a decoy, where the analyst is but the support of the patient's imaginary projections, a pure illusion. However, if this were the case, it is hard to imagine how analysis could lead to modifications in symptoms or in the patient's subjective position. This is akin to the Freudian version of transference, wherein analysis would, by implication, amount to some sort of correction of a wrong attribution ("It's not me you are angry at, but your mother/father/brother/sister/uncle…"). The corollary of this theoretical position would be the dark-clothed and silent analyst acting as a 'blank screen'.

A second approach can be found in how Lacan interprets the presence of the analyst in seminar I. As discussed earlier, the presence of the analyst can be seen as that which substitutes for the unsaid, when the associations stop, as we exemplified through the vignette about Jane. The moment that the presence of the analyst is actualized is meaningful: it is indicative of repression. The analyst's presence is not the shadow of a former love, but a discursive phenomenon. Here, the analyst tries to steer the patient away from associations regarding his person, by pointing to the signifiers used at moments the analyst is addressed as (just) another person. Thus the focus is on the text (the

[10] http://dictionary.reference.com/browse/effigy

Symbolic) not the perception of the analyst (the Imaginary). This way, the patient can eventually completely articulate (full speech) what was left out.

In these interpretations, the analyst is absent. He just lends his persona to the projections made by the patient. Furthermore, in as much as he is present, it is but as an effigy, an image representing someone (else). In both cases the analyst has to somehow lose his identity in order for the work to progress (either by untying a false connection or by attending to the signifier). Still, there is a third feasible approach of transference: "The analyst is neither an absence nor an effigy but a presence, a body, real" (Silvestre, 1987, p. 59).

The implications of incorporating the Real in transference are manifold. We will outline how the real presence of the analyst points to the element of surprise (cfr. tuchè) in the analytic encounter. Clinically significant episodes in analysis are related to these contingent moments of interaction that can provoke important further analytic work. We will briefly compare the similar concept of 'enactment' to the Lacanian approach to these moments.

Lacan's work at the time of seminar XI anticipated a lot of contemporary ideas and concerns about how the analyst becomes present in the course of the analytic process. First of all, it points to the importance of the "here and now"[11] manifestation of transference that is obviously implied by the term presence. Second, the analyst impacts the treatment through her presence, not solely through absenting herself as a person (imaginary). Lacan expressed this through the 'desire of the analyst', as opposed to the notion of countertransference.

[11] Transference and trauma open up interesting avenues for reflection on the temporality of the psychoanalytic process. We will address the clinical aspects, but interesting theoretical elaborations on these topics can be found in Johnston (2005) and Bistoen (2016).

The real analyst: a strange and clownish character

From the perspective of Lacan in seminar XI, the analyst can become a real presence. It is a presence differing from the supposed subject of knowing (symbolic) and the analyst as a person or a familiar (mirror) image (imaginary). What is the nature of this presence?

As real, transference manifests in its aspect of immediacy: it is the here and now of the encounter that is at the forefront, based on a contingent element. This contingency is made possible because of the indeterminate, open atmosphere of the analytic session -cfr. Lacan's 'gardez-vous de comprendre' or Bion's 'abandon memory and desire'[12] (Grotstein, 2007, p. 2). The presence of the analyst as Real, from a Lacanian perspective, does indeed refer to the possibility of the transferential bond to introduce novelty. Poland (1992), similarly, describes how transference is "an original creation" (p. 189). Poland emphasizes how the past is shaped by the present, attesting to a special temporality in psychoanalysis.

The analyst as Real appears as an enigmatic presence. She manifests in the here and now, immediate, without a possibility of interpreting her in terms of patterns or historical schemes. The presence of the analyst as Real is thus the point where the radical otherness of the Other becomes actualized. For Lacan, the Other is fundamentally unknowable. If we meet the Other's radical otherness, this provokes anxiety, horror even. This confrontation revolves around the question "What does the Other want from me?". The fundamental fantasy, for Lacan, is the (unconscious) interpretation of the desire of the Other, a defensive attempt to answer this question (Verhaeghe, 2008). The Other can never be fully known, comprehended or localized. The

[12] Of course, Lacan stressed the necessity of the analyst's desire to get the analytic process going. However, we don't consider Bion's use of 'desire' here to indicate that the analyst should be aloof, but rather as indicating an attitude of receptiveness, beyond understanding and narrative constructions (opening up a space for the unconscious to emerge).

fundamental fantasy, for Lacan, serves the function of allowing us to nevertheless orient ourselves in relation to this Other.

The difference with Poland's view where unconscious fantasy bridges past and present, is that from a Lacanian point of view the fantasy is constructed as an interpretation of a moment of 'tuchè' that is in itself nonsensical. So even if we agree that the present shapes the past via the encounter with the analyst, this is not based on a latent point of determination (such as unconscious fantasies), but rather through a structural point of indetermination (cfr. 'tuchè') that the work of analysis encounters inevitably. Both the actualization of the fundamental fantasy as well as the construction of a historical narrative are secondary to this encounter. For example, such fantasy actualizes, in how an obsessional patient often treats free association: she meticulously keeps on talking in order to avoid surprising interventions by the analyst. From a Lacanian point of view transference also carries an aspect that is pre-historical and post-historical. The Real (analyst as tuchè) provokes both a defense as well a further elaboration through the signifier. This entails that the analyst destabilizes significations and incessantly provokes a restructuring of symbolic and imaginary material.

A moment in a treatment conducted by the second author exemplifies how this Real aspect of transference is actualized through a contingent encounter with an aspect of the analyst that does not fit the established (symbolic and imaginary) framework of transference. Ethel is a woman in her forties. She decides to consult an analyst, after hearing one of his lectures. The beginning of the analysis reveals that this way of choosing her analyst is in line with an overall tendency to be infatuated with 'knowledgeable people'. She has a deep regard for intellectuals. The transference is characterized by an idealization, based on the signs indicating the analyst as 'knowledgeable' (the lecture, being a university professor and published author). Ethel is very much

surprised that such an important person, as she perceives her analyst to be, even has the time to take her on as an analysand. However, one moment in the treatment shakes Ethel to the core. Upon showing Ethel out of his office, the analyst sees a spider on the doorstep and immediately crushes it with his foot. Ethel is flabbergasted and disgusted by this gesture. She cannot reconcile this aspect of the analyst with the image she has of him. Moreover, she entertains a deep respect for all life, and always asks her children to treat animals with kindness. She would first capture them before setting them free in the garden. The brutality the analyst manifests by his act is discordant both with her transferential 'understanding' of him, as well as her own ideals. It reveals the moment the analyst cannot be represented; he is (literally) unthinkable. In search of knowledge, she encounters death, destruction and an opaque enjoyment. In subsequent sessions, she associates this moment with her husband, whom for the first time is described as a 'cruel man', since he kills spiders too. This brings about a discourse about her marital problems, a topic that hadn't been touched upon before.

Ethel approaches the analyst through the coordinates that can be understood (and to a certain extent disentangled) in the context of her life history, revolving around the signifier 'knowledgeable'. Nevertheless, this aspect of transference can constitute a hindrance for the work of free association, inasmuch as a patient is too heavily attached to the image of the analyst as a respectable figure.

The crushing of the spider can hardly be considered a classical intervention, in that it was never deliberated in advance to have an effect on the patient. Moreover, the analyst's behavior is not verbal in nature. It is not a play on signifiers, a construction or an interpretation. Nevertheless, the effects on transference and the treatment process in general are profound. A contingent encounter with the analyst as Real, destabilizes symbolic and imaginary constructions marked by a

fixation on and infatuation with the image of the analyst and ideals of knowledge. This provokes a further elaboration of the unspeakable (rather than uncovering a hidden truth). The literature is rife with similar 'incidents' in or around the cure that prove to be very impactful. Poland (1992) provides an example where he hands over the phone in a spur-of-the-moment fashion to a patient because he cannot understand what the (Italian) interlocutor on the other side of the line is saying and he knows his patient to be fluent in Italian. This moment of complete contingence or 'tuchè' (Poland himself acknowledges that it was a behavior out of the ordinary for himself as well) has a profound impact on the treatment.

We described these events as 'contingent' or 'tuchè' because of the element of surprise that characterize them (on both sides of the couch). Indeed, to systematically look for ways to anguish or upset patients would amount to sadism on the analyst's side (as it would imply that some sort of libidinal satisfaction is operative in a systematic way of handling transference). From our perspective, these moments are not the acting out of unconscious meanings, but rather pure contingencies that are inscribed into a narrative only afterwards.

The unexpected that appears this way can have an anguishing quality. However, it is also here that we would situate the analyst as a clownish character. If Lacan says "don't imitate me", it points to moments and interventions on the analyst's side that can't be scripted or calculated in advance, neither can they be mirrored from another analyst as if they were readymade techniques. Moreover, the analyst can thus provoke something new, from a more comical angle. This often leaves the analysand wondering about what kind of species the analyst is. Grotstein (2007, p. 33) beautifully describes how Bion had a dry sense of humor, but was also a Zen master to him. He was in the dark about the intentions of Bion, but the strange interventions hit a spot:

"Often when Bion spoke I did not understand much of what he was saying –and he said a lot- but I did seem to resonate with it preconsciously. It always had an effect." (Grotstein, 2007, p. 33).

If the analyst to a certain extent embodies what may be Real to a person, that is: unpredictable, impossible or shocking, this allows the traumatic experience to be worked over within the transference (Laurent, 2011 in Strubbe & Vanheule, 2014). This amounts to what we could somewhat paradoxically name 'a therapeutic traumatization'. Of course, it is not the traumatization per se that is responsible for the therapeutic effects, but how the transference provides access to a different kind of material, namely the way a subject responds to the Real. It is the Lacanian version of the transference neurosis: the actualization of the Real in treatment opens up the possibility of a reorganization of psychic material via the Symbolic and the Imaginary[13].

The vignette above is similar to clinical moments that are described as 'enactments' in the literature (Hirsch, 1998). However, in contrast to enactments, their relevance does not necessarily derive from an unconscious (re)action of the analyst to the patient. The Lacanian analyst will emphasize the opportunity this provides for the construction of a Symbolic framework to keep the Real at bay. The Lacanian analyst prompts the patient to "strive to put into words what he has never said before" (Fink 2007, p. 81). It is not assumed that the meaning of the event already exists in the analyst (unconsciously).

[13] The Real does not appear in the same way in psychosis or perversion. Transference in psychosis is best described as dual (Verhaeghe, 2008), because the Symbolic is not operative. Analytic work with psychotic patients rests on their creativity and the ability of the clinician to avoid incarnating a whimsical and almighty Other. However, this topic is beyond the scope of this paper.

The desire of the analyst: the real motor

What does including the Real in transference imply for the handling of transference by the analyst? Lacan does not seek an answer to this question via the concept of countertransference as many of his contemporaries had done (e.g. Lucia Tower whose 1956 paper Lacan discusses in seminar X in admiration), but rather puts the "desire of the analyst" at the forefront as a motor force in the treatment.

'Desire' is a central concept in Lacan's work. To understand it's role in transference, we have to look at the relational model that underpins the analytic encounter for Lacan[14]. At the outset, desire was conceptualized as the desire for recognition (by the other). This implies that there exists a rapport between two desires, following the logic of intersubjectivity. However, from seminar VIII on, Lacan emphasized the disparity in transference. Transference entails asymmetry because of the supposed subject of knowing (cfr. supra). Moreover, he radically rejected the idea of an inherent, prescribed relation between desiring beings. This leads up to the idea, expressed throughout seminar XX, that "there is no sexual relation", meaning that between two desiring beings, there is no prescribed or natural harmony. We deal with the Other's desire via the screen of the fundamental fantasy[15]. This fantasy, that is largely unconscious points to "the lasting relation that was originally constructed between the subject and the Other on the basis of repeated exchanges at the level of desire and lack" (Verhaeghe, 2008, p. 227). Since there is no symmetrical rapport between desires, countertransference cannot be equated with the response to the patient's transference, as if they were complementary. Renik (1993) and McLaughlin (1981) reject the term countertransference for similar reasons.

[14] We believe that neither a one-person nor a two-person psychology adequately describe this model. In Lacanian analysis the 'person' is considered as an exponent of the Imaginary. Desire and lack are the principal focii.

The desire of the analyst is first of all a desire that is related to analytic work per se. In that sense, for Lacanian analysts, the desire of the analyst is a function that is incarnated in the analyst. It is not to be confused, however, with their personal desires as they relate to the patient. In fact, inasmuch as these manifest themselves (vaguely as unease or in a more elaborated countertransference impasse), the analyst resolves these first of all in her own analysis or control sessions (supervision). The desire of the analyst is sustained in relation to these spaces outside of the consulting room. This doesn't mean that Lacanian analysts strive towards a posture of aloofness: they too experience anxiety, joy, excitement, interest, disgust, … vis-à-vis their analysands. However, these countertransferential affects and experiences are taken as a cue to work through in the analyst's analysis or control sessions. As such, countertransference is considered as a potential obstacle to the continuation of the analysand's work. That is why Lacan stated that the analyst should "pay with his person" (Lacan, 1958, p. 490). Lacanian analysts will not express their experiences with regard to their analysands, nor will they explain why they act and speak the way they do. Fink (2007) considers this to be one of the reasons that Lacanian analysis will remain at odds with Anglo-saxon inspired psychoanalysis. We believe that it is important to explore moments of surprise (or enactments) after they have taken place by inviting patients to elaborate further on them. However, the analyst's contribution will not be explored mutually with the patient but in a space outside of the consulting room.

Wilson (2013) convincingly demonstrates how certain countertransferential impasses can be traced back to how the analyst's desire for a particular experience of analytic progress is frustrated. In order to interpret the stalemate, one has to resort to the analyst's desire, as obviously the analyst's presence in the consulting room attests to her desire to engage in the analytic process. That the analyst operates with desire, also means that she keeps a spirit of being open to

surprise, of maximizing the possibility that the analytic hour is indeed an encounter. In that sense, the desire of the analyst is the underlying principle that guarantees the possibility of an encounter with the Real within the framework of an analysis.

Transference has to be understood as a complex relation between absence and presence. Wilson (2006, p. 403) identifies 'biases within our theory toward presence and plenitude'. We could say the opposite is the case regarding the early Lacan, who mostly stressed how the analyst should avoid an imaginary or 'dual' relation (Wilson, 2003), by incarnating an absence (not providing meaning, not responding from the role where the analyst is put in, abstinence or being the 'dummy' ; Lacan, 1958, p. 492). By avoiding the Imaginary, the analyst can be addressed as a representative of the symbolic order (the Other). Nevertheless, testimonies as that of Jean Clavreul in the documentary "Quartier Lacan" [Weiss, 2001] teach us how Lacan himself radically departed from a completely abstinent position: when Clavreul was at the psychiatric hospital, Lacan visited him multiple times to continue the analysis. The desire of the analyst is manifest here: it is a desire for the analytic work to continue. It doesn't suffice to merely assume the position of listener for this, but often requires a more active (even directive) intervention. To operate with desire thus refers to an active invitation and endurance on the side of the analyst. Besides, it also refers to the ability of the analyst to contain anxiety in the face of the horror the patient is struggling with. Roudinesco (1999) recounts how Lacan dared to take on patients that were manifestly suicidal, whereas his contemporaries often refused to take on these patients.

Presence in the case of Mr. P (Leuzinger-Bohleber, 2015)

The case of mr. P is an illustration of how the Real in transference impacts treatment, regardless of the psychoanalytic school or current of

the analyst. Moreover, this analytic process exemplifies how dealing with the Real in transference strongly requires a desiring analyst, willing to encounter the horror that intrudes on this patient.

Leuzinger-Bohleber (2015) demonstrates the importance of "the reactivation of the trauma in the analytic relationship" (p. 96), accompanied by helplessness and anxiety in analytic work (with depressive patients having a history of traumatic experiences) through the case of Mr. P, a man in his 50s having been in intensive psychoanalytic treatment spanning several years. However, Leuzinger-Bohleber puts the emphasis on the aid a restored trust in the "helping object" might provide.

Mr. P comes to analysis after a series of attempts at an array of different treatment modalities. The author emphasizes an episode early in Mr. P's life, a "severe separation trauma" at the age of 4, where he was separated for a few weeks from his parents, without any contact. Mr. P consults with a series of complaints that do not represent a "classic psychoanalytic symptom". What stands out, besides a chronically depressed mood, is the primordially 'real' (in a Lacanian sense) nature of the symptomatology: pain in the body, eating disorder, suicidal tendencies and sleep disorder. Mr. P seems to function in a mode of permanent crisis, attesting to the overwhelming presence of the Real in his functioning and the lack of symbolic and imaginary means to counter them. Leuzinger-Bohleber reports that Mr. P dreams about "a badly injured man lying by the side of the road – his intestines are hanging out and everything is drenched of blood" (p. 612). The man in the dream is in a helpless situation, saying "Why is nobody coming to my aid?" Eventually, "a woman hands him the lid of a cooking pot –which he is meant to place over the wound". The dream is connected to "the danger of a re-traumatization in the analytic relationship" (p. 625) by the author. The dream reported by the author undoubtedly expresses a quality of anxiety (Real). However,

it also shows an interesting attempt at treating the fragmenting of the body via an object (the cooking lid) offered by "the woman". We interpret this dream as an expression of how through transference (the woman in the dream referring to the female analyst) Mr. P is able to treat the Real threat posed by the disintegration of the body. The lid is an element that covers up what is all too present here (the intestines/the inner body). In a more classic analytic setting, symbolic formations (e.g. dreams) would be deciphered. Nevertheless, in this case it is not so much the appeal to signification or meaning that is at the forefront of the analytic process. This is also evident from the way this patient handles the interpretations delivered by the analyst:

> "When, after five months of treatment, I cautiously indicated a likeness between his unbearable chronic widespread pain and his life-threatening illness in the home, Mr. P fiercely dismissed this with the words: "Now, don't you start with this nonsense. Even previous therapists would repeatedly try to palm me off with the idea that the depression had something to do with the stay at the home. This is just absurd." (p. 625)

Mr. P insists that his symptoms have a physical cause and subjects himself to numerous medical examinations. When the analyst offers Mr. P an interpretation where she connects the symptom to an aspect of Mr. P's life history, he refuses a possible link between the two. It does not at all provoke a symbolic elaboration, as he turns to an intensified appeal to medical discourse as a frame of reference to understand his complaints. This phase of treatment seems to have been marked by the sustained attempts at constructing a representation of the body in the transference, rather than providing insight or exploring meaning. The Real that manifests in the analytic process is, in our view generic and central to all analytic work.

Mr. P's analyst struggled to come to terms with the difficulties posed by the treatment: "the processing of the traumatization, by contrast, confronted both the analysand as well as the analyst with the limits of the bearable" (p. 626). The following fragment nevertheless shows how it is the desire of the analyst to work with this patient, demonstrated by the phone calls made (representing a departure from the classical analytic frame), that gets the treatment going again:

> "In the third year of treatment, Mr P reacted intensely to the separation from the analyst. During a holiday break, he underwent a disputed medical operation (an operation on his nose), without discussing this with me. Following the operation, he found himself in a terrible state, and he was unable to work for the following two months due to massive headaches and chronic widespread pain, threatening circulatory failure and panic. He also cancelled the analytic sessions after the operation by email without giving any details or reason. Finally, I became concerned at such long interruptions; I decided to call him and thus found out about his serious physical and psychic state. Through several crisis intervention discussions via telephone, I was finally able to help him to emerge from the 'black hole'" (p. 626).

This moment in the treatment is explained by the author as "directly acting out his early experience of separation" (p. 626). Even though it is beyond doubt that Mr. P can't rely on the Other (concrete other/symbolic means) in certain moments of distress, it is not so much an absence that is on the front, but rather an excess localized in the body. Yet, through the phone calls the analyst enters the scene again, makes herself present, thus opening up a space for analytic work via desire. It is precisely through her active presence that the crisis and the experience of excess can be limited and elaborated symbolically. It is indeed a very existential question that is being

played out in transference: “Does the Other want to lose me?” Be that as it may, we believe that the analysis gets under way again because the analyst, through her actions, answers at the level of desire: I do want to work with you. This understanding of the case puts less emphasis on the element of repetition in transference (playing out the experience of separation).

Discussion

We argued how transference constitutes the “navel of the treatment”. Much as Freud (1900) describes how the interpretation of dreams runs up against a point where the different dream-thoughts can no longer be analyzed: “the spot where it reaches down into the unknown" (p. 525), transference in its real dimension, is the moment the associative work is halted and the analyst appears as real. Analogous to the dream interpretation, this moment presents an aspect of the analytic relation that can’t be analyzed in the classical sense (reducing the manifest content to the latent thoughts). It presents the analyst as an “unknown”. In Lacanian terms, it is no longer a question of finding the roots in the Symbolic of how the analyst is perceived on the imaginary plane, at this point. The unknown is much more radical: the appearance of the analyst shatters the habitual frames the patient adopts to understand others and oneself. The aspect of the Real in transference is reminiscent of Freud’s (1920) discussion of the repetition compulsion in treatment: “But we now come to a new and remarkable fact, namely that the compulsion to repeat also recalls from the past experiences which include no possibility of pleasure, and which can never, even long ago, have brought satisfaction even to instinctual impulses which have since been repressed” (p. 20). Analysts thus serve a function beyond partners in the process of meaning making. Rather, they help to discover the non-sense and contingence that is at the heart of meaning and to find a way of dealing with this

non-sense. In order to reach this, the analyst has to be included in the suffering. We wholly concur with Bird (1972) who advocates that analysis needs to evoke the development of a 'transference neurosis'. This prevents analysis being reduced to "an exploratory art" (p. 280). Transference neurosis, from a Lacanian viewpoint, is the actualization of the unknown, of chance, of non-sense. This necessitates endurance on the side of both analyst and analysand.

The case of Mr. P exemplifies how psychoanalytic work involves different registers of psychic functioning. The case illustrates that the Real in transference is generic, in that it occurs independently from the theoretical current the analyst adheres to. How it occurs, however, is highly singular and depends on each specific encounter between an analyst and a patient. Mr. P starts analysis after a trajectory marked by the inability of different caregivers to address his many symptoms. This is hardly an uncommon starting point, as many analysts are familiar with receiving "hard cases", where therapeutic means seem exhausted. Moreover, what is striking about this case is the predominance of corporeal elements, both in the patients' complaints, as well as in what he perceives to be a solution. Mr. P suffers from sleep disorders, facial neurodermatitis, unbearable pain in his entire body and eating problems. Both before and during the analysis, Mr. P often expects the answers to his bodily disturbances to reside in medical discourse, eventually leading to an "*acting out":* an operation. What is more: he only turns to analysis because his application for a retirement pension gets turned down. The case is marked by an acute sense of helplessness and demoralization. The excessive presence of anxiety related symptomatology contrasts heavily with an almost complete absence of the Other. The author understands this from a historical perspective (the separation at an early age), as an event with a historical truth. From a Lacanian perspective, anxiety is interpreted as a "lack of lack" (Strubbe & Vanheule, p. 244). The Symbolic is seen as the dimension instituting lack, against the overwhelming presence

of the Real. It is not so much the historical events, but the actual inability to regulate distress via the Symbolic that we perceive to be at the root of Mr. P's suffering.

Interestingly, in the course of his analysis, this also seems to creep up on the analyst, demonstrating how sustaining an analytic position requires some form of (psychic) endurance. The excess of free-floating anxiety is central to the suffering of this analysand. What Leuzinger-Bohleber terms 'embodiment' summarizes much of the effects of the analysis: Mr. P is able to connect a part of his life history to the body via transference. The framework of analysis provides a means to elaborate real elements of suffering. This requires an active position in the treatment, where the analyst is "a friend of crisis" (Caroz, 2015, p. 158). The desire of the analyst is operative here in terms of the determination to start and continue the analytic process. The analyst expresses this through the frequency of the treatment. Mr. P had been in different kinds of psychotherapy (and was prescribed different medications), leaving his symptoms largely unaffected. We believe that it is precisely the more laborious process an analysis requires in terms of frequency that enabled for the effects of Mr. P's analysis. We also pointed to the intervention of phoning Mr. P after a prolonged absence as a manifestation of the desire of the analyst to keep the analytic process going with this patient.

Despite their similarity in terms of the actualization of the Real presence of the analyst, the cases of Mr. P and Ethel are different in terms of how transference develops. In Ethel's case, the imaginary dimension is very present at the outset of the treatment. To a certain extent, this leads to a Symbolic elaboration of Ethel's fascination with knowledge. The moment the killing of the spider happens, this framework somewhat falls to pieces. We could hardly turn this intervention into a rule ('in case of stagnation due to excessively positive transference: kill insects'). In that sense, the case also

demonstrates how contingent aspects of the encounter always play a role in the process of analysis. The case of Mr. P is much more complex in terms of the interplay between real and symbolic material. After a few months of treatment, the excessive presence of the Real is interwoven with the Symbolic through dream material. However, the analytic work is repeatedly interrupted by irruptions of emergencies, crisis, forcing the analyst to intervene with desire, not interpretation. Whereas the Real startles, shocks and immobilizes, analysis provides the means to symbolically elaborate these moments in treatment. The moments where the patient stumbles upon the Real, are precisely opportunities to construct a different way of treating the Real.

The Lacanian approach to transference is similar to other modern perspectives where the actuality of transference is emphasized. Incorporating the Real in transference, means that the immediacy of the analytic encounter is of prime importance in the analytic process. Analysis revolves around the development of a transference neurosis (Verhaeghe, 2008; Bird, 1972). Without it, analysis would be reduced to a mere hermeneutic practice, an endless play on words, without any visceral impact. Nevertheless, from a Lacanian perspective, the transference neurosis is constituted by an encounter with the oddity in the analyst. So neither the metaphor of the analyst as a surgeon, nor as a surfer or skier (Renik, 1993) adequately grasps the Lacanian analyst's position. That is why we proposed the analyst as a clown as one incarnation of this real presence: an odd and provoking figure.

The Lacanian analyst supports the analytic process through her desire. This desire is an integral part of treatment, not an interfering factor (Kirshner, 2012). The analyst's desire entails an endurance that is sustained through her own analysis, regular supervision and other forms of collegial reflection on the analytic work. Leuzinger-Bohleber described how she was able to maintain an analytic position through regular supervision. Analytic work is then always articulated in a

triadic structure between analyst, patient and these spaces outside of the dyad. The Lacanian analyst does not interpret transference, nor will she disclose her thoughts, feelings or associations regarding the analysand. Countertransference, if pervasive, is examined in supervision or analysis, so as to avoid imaginary stalemates. Inasmuch as certain emotions or experiences regarding the patient are hindering the progress of the analytic process, they are probably more focused on the person of the analyst than the work of analysis. The analyst's desire is manifest as a sustained invitation to let the work continue.

Considering transference from the perspective of the Lacanian triad of the Symbolic, Imaginary and Real opens up interesting avenues for intervention. Attention for the Real in treatment does not however exclude the work of searching for unconscious knowledge. It merely highlights the treatment as a dialectal interplay between a real destabilization and a symbolic working through of this real event. However, the early sessions of analysis are aimed at getting the flow of associations going. This evidently entails a (re)construction of a subject's history in relation to their suffering, as well as an attention for the specific signifiers that marked a subject's history. This work of symbolization and amplification (Miller, 1995) of meaning provides the context of an encounter with the Real. The navel of the treatment is relevant only in the context of the associative context that supports its emergence. Both processes cannot be considered in isolation. Insight, understanding and personal experiences of love, hatred and fascination (in short: the Imaginary) are present in every analytic context and necessarily so. However, from a Lacanian perspective, these imaginary phenomena do not orient the analytic process.

We believe that a Lacanian perspective on transference can enrich the understanding of the process of transference. Moreover, we hope to stimulate the dialogue between different approaches.

References

Almond, R. (2011). Reading Freud's "The Dynamics of Transference" one hundred years later. *Journal of the American Psychoanalytic Association*. 59/6. 1129 – 1156.

Bistoen, G. (2016). *Trauma, Ethics and the Political beyond PTSD. The Dislocations of the Real*. Basingstoke: Palgrave Macmillan.

Bird, B. (1972). Notes on Transference: Universal Phenomenon and Hardest Part of Analysis. *Journal of the American Pscyhoanalytic Association,* 20, 267 – 301.

Caroz (2015). Crisismomenten [Moment of crisis] *iNWiT*, 13, P. 158

Declercq, F. (2004). Lacan 's concept of the real of jouissance: clinical illustrations and implications. *Journal for the psychoanalysis of culture & society,* 9, 237 – 251.

Dolar, M. (1993). Beyond Interpellation. *Qui Parle.* 6. 75-96.

Evans, D. (1996). *An Introductory Dictionary of Lacanian Psychoanalysis.* London/New York: Routledge.

Esman, A.H. (Ed.) (1990). Introduction. *Essential Papers on Transference.* New York/London: New York University Press.

Fink, B. (2007). *Fundamental of Psychoanalytic Technique. A Lacanian Approach for Practitioners.* New York: Norton.

Freud, S. (1900). The interpretation of dreams. SE, 4: 1-338; 5: 339-625.

Freud, S. (1909). Notes Upon a Case of Obsessional Neurosis. SE, 10: 151 – 318.

Freud, S. (1912). The dynamics of transference. SE, 12: 99 – 108.

Freud, S. (1920). Beyond the pleasure principle. SE, 17, 7-64.

Grigg, R. (2009). *Lacan, Language and Philosophy*. New York: State University of New York Press.

Grotstein, J. (2007). *A Beam of Intense Darkness. Wilfred Bion's Legacy to Psychoanalysis.* London: Karnac Books.

Harris, A. (2012) Transference, Countertransference and the Real Relationship. In *Textbook of psychoanalysis (second edition),* ed. O.G. Gabbard, B.E. Litowitz & P. Williams. 255-268. Washington DC: American Psychiatric Press.

Hirsch, I. (1998). The concept of enactment and theoretical convergence. *Psychoanalytic Quarterly,* 67, 78-101.

Johnston, A. (2005). *Time driven: Metapsychology and the Splitting of the Drive.* Evanston: Northwestern University Press.

Kirshner, L.A. (2012). Toward an ethics of psychoanalysis: a critical reading of Lacan's ethics. *Journal of the American Psychoanalytic Association*. 60/6. 1223-1242.

Lacan, J. (1951). Presentation on transference. In *Écrits,* transl. B. Fink. New York: Norton, 2006, pp. 176-185.

Lacan, J. (1953-1954). *The Seminar of Jacques Lacan: Book I. Freud's Papers on Technique.* New York: Norton, 1991.

Lacan, J. (1957). Seminar on the purloined letter. In *Écrits,* transl. B. Fink. New York: Norton, 2006, pp. 6-48.

Lacan, J. (1958). The direction of the treatment and the principles of its powers. In *Écrits,* transl. B. Fink. New York: Norton, 2006, pp. 489 -542.

Lacan, J. (1960 - 1961). *The Seminar of Jacques Lacan: Book VIII. Transference.* Cambridge, Polity Press, 2015.

Lacan, J. (1962-1963). *The Seminar of Jacques Lacan: Book X. Anxiety.* Cambridge: Polity Press, 2014.

Lacan, J. (1964). *The Seminar of Jacques Lacan: Book XI. The Four Fundamental Concepts of Psychoanalysis.* New York: Norton, 1998.

Lacan, J. (1975-1976). *The Seminar of Jacques Lacan: Book XXIII. The Sinthome.* Cambridge: Polity Press, 2016.

Leuzinger-Bohleber, M. (2015). Working with severely traumatized, chronically depressed analysands. *International Journal of Psychoanalysis.* 96. 611 – 636.

McLaughlin, J.T. (1981). Transference, Psychic Reality and Countertransference. *Psychoanalytic Quarterly,* 50, 639-664.

Miller, J.-A. (1995). Le partenaire symptôme. [unpublished seminar].

Miller, J.-A. (2008 [1995]). Overdracht, herhaling en seksueel reële. Een lectuur van Seminarie XI, "Les quatre concepts fondamentaux de la psychanalyse. [Transference, repetition and the sexual real. A reading of Seminar XI]. Inwit, 4, 2008, 65 – 82.

Nobus, D. (2000). *Jacques Lacan and the Freudian Practice of Psychoanalysis.* New York: Routledge.

Nobus, D. (2016). Psychoanalysis as *gai saber*. Toward a new episteme of laughter. In *Lacan, psychoanalysis and comedy.* ed. Gherovici, P. & Steinkoler, M. New York: Cambridge University Press.

Poland, W.S. (1992). Transference: "an original creation". *Psychoanalytic Quarterly,* 61, 185-205.

Renik, O. (1993). Analytic Interaction: Conceptualizing Technique in Light of the Analyst's Irreducible Subjectivity. *Psychoanalytic Quarterly,* 62, 553-571.

Roudinesco, E. (1999). *Jacques Lacan: An Outline of a Life and a History of a System of Thought*

Silvestre, M. (1987). *Demain la Psychanalyse*. Paris: Navarin.

Soler, C. (2011). *Les affects lacaniens.* Paris: Presses Universitaires de France.

Strubbe, G. & Vanheule, S. (2014). The Subject in an Uproar: A Lacanian Perspective on Panic Disorder. *Journal of the American Psychoanalytic Association,* 62, 237- 266.

Van Haute, P. (2002). *Against adaptation. Lacan's Subversion of the Subject*, transl. P. Crowe & M. Vankerk. New York: Other press.

Vanheule, S. (2011). *The subject of psychosis: a Lacanian perspective*. London and New York: Palgrave Macmillan.

Vanheule, S. & Arnaud, G. (2016). Working with symbolic transference: a Lacanian perspective on executive coaching. *Journal Of Applied Behavioral Science,* 52, 296-319.

Verhaeghe, P. (2001) *Beyond Gender. From Subject to Drive.* New York: Other Press.

Verhaeghe, P. (2002). Causality in science and psychoanalysis. In: *Lacan & Science.* ed. Glynos, J. & Stavrakakis, Y. London/New York: Karnac. pp. 119-145.

Verhaeghe, P. (2008). *On being normal and other disorders. A manual for clinical psychodiagnostics.* Transl. S. Jottkandt. London: Karnac Books.

Weiss, E. (2001). *Quartier Lacan* (film). Centre Georges Pompidou, Michklan World Production.

Wilson, M. (2003). The analyst's desire and the problem of narcissistic resistances. *Journal of the American Psychoanalytic Association,* 51, 71-99.

Wilson, M. (2006). "Nothing could be further from the truth": the role of lack in the analytic process. *Journal of the American Psychoanalytic Association,* 54, 397-421.

Wilson, M. (2013). Desire and responsibility: the ethics of countertransference experience. *Psychoanalytic Quarterly,* 82, 435-476.

Willemsen, J., Inslegers, R., Meganck, R., Geerardyn, F., Desmet, M., Vanheule, S. (2015). A metasynthesis of published case studies through Lacan's L-schema: transference in perversion. *International Journal of Psychoanalysis*, 96, 773-795

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