Raiding the inarticulate:

The internal analytic setting and listening beyond countertransference

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The analytic setting exists not only externally but also internally as a structure in the mind of the analyst. The internal analytic setting constitutes an area of the analyst's mind where reality is defined by unconscious symbolic meaning. Clinical examples illustrate how a secure internal setting allows flexibility in the external setting without sacrifice of its analytic quality. The internal setting can help analysts listen inwardly to themselves in a way that is free-floating with regard to their internal processes. This points beyond usual ideas of countertransference. An analytic encounter may stir up elements that belong to the analyst's psyche which, rather than impeding the analysis, can actively enrich it. Seamus Heaney's writings evoke comparisons between listening to poems and listening to patients, and a week in a patient's analysis is described in relation to these themes.

Keywords: analytic frame, analytic setting, clinical technique (internal and external aspects), countertransference, free-floating attention, Heaney, internal analytic setting, listening, poetry, silent session

External and internal aspects of clinical technique

Should analysts be the same with all their patients? Or do they need to be different with different patients? Familiar questions with an obvious answer: Yes and ... yes.

Certain aspects of clinical technique are constant. Analysts always, for example, look for unconscious meaning in a patient's associations, interpret resistance and transference, and seek to maintain analytic neutrality. Other aspects, such as the balance of emphasis between history and the here-and-now, how active or how silent the analyst is, and whether interpretations are focused and specific or openended and allusive, will vary according to an analyst's perception of the patient's needs.

This explanation of why the answer to both questions is 'yes' is couched in terms of external aspects of clinical technique. Here is an alternative account from another perspective.

It is important for an analyst to be authentically himself with every patient. But analysts may also need to show their emotional availability, or deploy the qualities of their analytic identity, in different ways with different patients. This again explains why an analyst is both the same and different with every patient, but in terms of internal aspects of the analyst's technique.

Analysts listen both outwards to the patient and inwardly to themselves. External aspects of clinical technique comprise what an analyst says, or does not say, in response to what he hears from the patient. By internal aspects of technique, I mean the elements that contribute to an analyst's ways of being with a patient, verbally and non-verbally, emotionally and in his bodily presence, in response to what he hears from inside himself.

It is accepted that an analyst's external listening needs to be undirected and free of preconceived aims. Monitoring a patient's material for particular themes would run counter to free-floating attention. As regards internal listening, the situation is more ambiguous. It is with regard to countertransference that one most immediately thinks of analysts needing to listen inwardly to themselves. In the classical view of countertransference, aspects of an analyst's psychic make-up are affected by the encounter with a patient in ways that unconsciously obstruct the analyst's understanding. To stop the analysis being impeded, the analyst needs to become conscious of this. From the 1950s onwards, the idea developed that countertransference may also arise when aspects of the patient's psychic experience are unconsciously transmitted to the analyst. Becoming aware of this can help the analyst make sense of the analytic interaction. However, if analysts try to be watchful that their own responses should not hinder the analysis, or to sense whether what they are feeling emanates from the patient, the result may be a self-monitoring inward listening for something, as opposed to just listening to whatever there is to be heard (Chodorow, 2003). Analysts in this case are treating themselves in just the way that they try not to treat the patient. It may be possible, on the other hand, for analysts to arrive at an inward listening that is genuinely free-floating in relation to their own internal processes. This is the analyst as analytic listener to herself. Such listening, free of focus, open and willing to be vulnerable to whatever the analyst hears emerging within herself, needs the containment of a certain kind of internal space.

The internal analytic setting

The notion of the analytic setting is fundamental to psychoanalysis. If we enter a theatre, a place of worship or a children's playground, we cross a boundary which tells us that the reality we are going to meet on the inside works differently from the reality outside. The analytic dialogue needs a similar enclosure to denote that what happens inside it will have a different status, and be considered from a different viewpoint, from what happens outside. Patients can discover that, however overwhelmed they may become by their emotions, or however outrageous, extreme and irrational the things they find themselves saying, they do not have to censor or inhibit this because the analytic setting safely separates the experience from the rest of their lives.

The setting also provides a framework for clinical technique. Just as the patient is free within it to be different from normal, so is the analyst. He need not answer questions. He need not speak at all. What he says when he does speak might appear by ordinary standards strange, illogical, perhaps sometimes a bit crazy. The analyst is free to be like this because for him as well as the patient the analytic setting delineates a space in which the expectations of everyday reality are suspended.

The external structure of the setting is familiar: consulting room, couch, chair; sessions beginning and ending on time; fees and their payment; a pattern of holidays. But the analytic setting also exists internally as a structure in the analyst's mind. The concept of the internal analytic setting, or internal analytic framework, has become central to my thinking over the last several years. It is hardly present, however, in the literature. A search of the PEP-CD database for the phrases 'internal (psycho) analytic setting' (or 'framework') and 'internal setting' (or 'framework'), used in the sense I have in mind, yields two brief mentions (O'Shaughnessy, 1990, p. 194; Linna, 2002, p. 34). The idea does not seem to have been articulated and developed, at least in English, as a specific concept.

The idea of the internal setting took shape in my mind through a seminar for newly qualified analysts which Jonathan Sklar, a colleague in the British Psychoanalytical Society, and I ran for some 10 years during the 1990s (Sklar and Parsons, 2000). We aimed to help analysts consider how their analytic identities might develop in the period following qualification. Discussion ranged from practical questions, like getting referrals and running a practice, to more internal aspects of how one evolves into being a psychoanalyst. We noticed repeatedly how the former were linked to the latter. Apparently external issues—how to tell senior colleagues that one had an analytic vacancy, whether it was time yet to have one's own consulting room—turned out again and again to depend on, or rather to reflect, where someone had got to internally in the development of their identity as an analyst. A member of the seminar said, for example: 'I have realized that one reason I haven't any analytic patients is that I have never asked anyone to refer them to me. I have never really thought of myself as being able to have an analytic practice. When I realized that, I could begin to see how there might be space in my mind for an analytic patient.'

There is external work in letting it be known that one has a vacancy for analytic patients, and another sort of work in developing that as an internal truth about oneself. The material reality of the new analyst's consulting room also has a powerful symbolic meaning. The most evocative analytic space one has known so far is the room of the analyst on whose couch one has lain for hundreds of hours. That was shaped by another analytic mind. Now it is time to shape a space of one's own. Large practicalities about finance and property dealings or rearranging the home, apparently minor details about doorbells and couch covers, questions of how to let patients in and who opens the door when they leave—all these issues would evoke a particular kind of anxious joy in the seminar, because the external event represented a major development in the internal realization of an analytic identity. Even with an already established consulting room, there was a deepening awareness of how it stood for an internal space that was becoming more available for analytic work.

Unpublished papers by Marie Bridge (1997, 2006) and John Churcher (2005) should be mentioned. Bridge wrote the earlier of her papers as a candidate while she was in supervision with me. The idea was probably germinating around that time. In Spanish Mariam Alizade (2002, pp. 107–20) has written on the internal setting, and references in the PEP-CD database also suggest that the concept may have been more fully explored in that language [Speziale-Bagliacca (1991) referring to Grinberg (1981); Torras de Beà (1990) reviewing Coderch (1987); Zac de Goldstein (1995) reviewing Torras de Beà (1991)].

The internal analytic setting is a psychic arena in which reality is defined by such concepts as symbolism, fantasy, transference and unconscious meaning. These operate throughout the mind, of course. The point about the analyst's internal setting is that, within it, they are what constitute reality. Just as the external setting defines and protects a spatiotemporal arena in which patient and analyst can conduct the work of analysis, so the internal setting defines and protects an area of the analyst's mind where whatever happens, including what happens to the external setting, can be considered from a psychoanalytic viewpoint. The external setting may be breached from the outside if, for example, the builders next door start hammering or someone accidentally enters the room; or from the inside if the patient acts out in certain ways or the analyst does something to disrupt it. But if the analyst's internal setting remains intact, infringements of the external setting can still be thought about in terms of their analytic significance and brought within the analysis.

If a woman in analysis has a baby she will be ready, some time after the birth, to come back to her sessions; but she may not be able to arrange childcare, or may not want to leave the baby. What about coming to her sessions and bringing the baby with her? This was discussed at a meeting of French and British analysts in 2005, and some French analysts said they could never permit it. They thought the presence of the real baby would make it impossible to give reality to the patient's fantasies about the baby and its symbolic meaning for her. The analytic setting's function of protecting the symbolic realm against the intrusion of reality would have been destroyed, and so the analytic work could not continue.

This response rests on a perception of the analytic framework in external terms only. The real baby has, after all, been coming to the sessions already, inside the mother. The relation between outside and inside is as central to psychoanalysis as to breathing. When the analyst has in his mind the psychic structure that I call an internal analytic framework, then whatever happens in the external setting, including the presence of an actual baby outside the mother, can still be considered in terms of its unconscious, symbolic meaning. The baby's presence in the session then becomes full of analytic potential.

A woman who was in analysis with me had very little sense of herself as a person. A time came when she wanted to bring her dog to her sessions. It had a chronic health problem which she said meant it should not be left alone for too long, and the person who normally looked after it was away. So could she bring the dog? After all, it was not a big one. I might have taken the position that this was an attempt to disrupt the analysis and said she must make other arrangements. But part of my theory of clinical technique is that sessions are there for patients to discover how they can use them, and I simply said it was up to her. She brought the dog, lay on the couch and settled it down on her tummy. It was easy to see, and to interpret, that this small creature, peacefully asleep in that position, represented our baby inside her: an idea that she would otherwise have found extraordinarily difficult to allow into consciousness. One day the dog did not seem very well, and halfway through the session it was sick on the carpet. To have a dog being sick in the consulting room might seem like a pretty thorough breach of the analytic setting. But the patient and I cleared up the mess together, and I said I thought that at this moment the dog might

represent an aspect of herself, usually shut away out of sight, which felt angry and hostile towards me and would be glad to mess up my room.

This piece of work depended on there being in my mind an internal setting secure enough to give me confidence that whatever having the dog in the room might lead to could still be part of the analysis. The patient might have protested at my interpretation, saying she had not made the dog sick, she could not have known it was going to happen, and so on. In fact she did not, but seemed relieved that a way had appeared for us to talk about her aggressive feelings towards me. Part of the work of analysis is to help patients develop their own internal arena for analytic self-understanding, and the fact that this woman did not retreat into the rational defences that were easily available to her indicates that this was beginning to happen.

These examples illustrate how the internal analytic setting operates, and also the strength of the concept in making possible considerable flexibility in the external setting without any sacrifice of its analytic quality.

The significance of the idea appears clearly in historical retrospect. Ferenczi struggled for lack of it. He needed the idea of an internal framework in order to make sense, and keep control, of how he was trying to help his very disturbed patients. If the concept had been available to him he might have been saved a lot of difficulty. In Little's (1985) account of her analysis with Winnicott, she describes Winnicott acting in ways that transgress a conventional perception of the analytic framework. He held her head while she supposedly relived the terror of her own birth experience; and he doubled the length of her sessions without increasing the fee. I have considered elsewhere (Parsons, 2002) why Winnicott may have acted like this, and have suggested that, given the somewhat restricted view of the analytic process that was prevalent at the time, Winnicott may have been pushing at the limits of the external framework in an attempt to expand his internal sense of what a psychoanalytic process could encompass. That is to say, his Ferenczi-like experiments with regard to the external setting may reflect efforts to develop his sense of the internal analytic setting.

The external setting, as I have said, constitutes a space protected against the assumptions, expectations and judgements of ordinary reality. Patient and analyst are free within it to be however they find they need to be, and this sets up a different reality in which analytic understanding can emerge. The internal setting constitutes a psychic space which is correspondingly protected, so that within it the analyst can maintain his own psychoanalytic reality. This depends on the analyst finding freedom in this area of his mind, just like the analytic couple in the external setting, to be however he finds himself internally needing to be.

There is more to this than the analyst's ability to free associate. That is a freedom *to* do something. The internal analytic setting involves freedom *from* considerations that operate elsewhere in the analyst's mind. Absolute inner freedom is an ideal not likely to be achieved. But it is still a radical demand to say that in this area of an analyst's mind he needs to work towards it.

This freedom of self-experience within the internal analytic setting is the basis for that kind of inwardly directed listening which I described earlier as the analyst's being an analytic listener to herself. We may grasp more fully and clearly what this means by looking at another situation where, attending to something outside ourselves, we hear more of it by listening to what it does inside us.

A poet listens

As we try to understand a poem, there comes a point when we cannot get any further by going on studying the words on the page. We can only reach more deeply into the poem by allowing the poem into ourselves and seeing what then happens inside us. Seamus Heaney (2002, pp. 33–5) has described his encounter with T. S. Eliot's *The Waste Land* (1923). At first he advanced on it with commentaries and all the resources of his university library. But this did not help much. Then in some of Eliot's own writing about poetry he saw 'a poet's intelligence exercising itself in the activity of listening'. This freed him. Instead of studying *The Waste Land* for its meaning, he began simply to listen to it, to make himself, as he puts it, 'an echochamber for the poem's sounds'. Heaney says,

I began to construe from its undulant cadences and dissolvings and reinings-in a mimetic principle which matched or perhaps even overwhelmed any possible meaning that might be derived from the story ... In the heft and largesse of the poem's music, I thought I divined an aural equivalent of the larger transcendental reality ... The breath of life was in the body of sound. (2002, pp. 34–5)

This sort of experience leads Heaney to distinguish between abstracting meaning and hearing it (p. 28). Clinically, also, whether analysts *abstract* meaning *from* their patients' material or *hear* meaning *in* what they say is an important distinction. Interpretations which abstract a patient's meaning run the same risk as academic commentaries on poetry: the risk of appropriating meaning to themselves while the breath of life in the original is lost. Because reality in the internal analytic setting is defined by unconscious meaning, it is within the internal setting that an analyst can best simply hear meaning without needing to abstract it.

When this paper was originally presented, the following poem by Seamus Heaney (1996) was projected on a screen before I began reading the paper. This allowed the audience time to see the poem, and relate to it, as a text.

The Rain Stick

Upend the rain stick and what happens next Is a music that you never would have known To listen for. In a cactus stalk

Downpour, sluice-rush, spillage and backwash Come flowing through. You stand there like a pipe Being played by water, you shake it again lightly

And diminuendo runs through all its scales Like a gutter stopping trickling. And now here comes A sprinkle of drops out of the freshened leaves.

Then subtle little wets off grass and daisies; Then glitter-drizzle, almost-breaths of air. Upend the stick again. What happens next Is undiminished for having happened once, Twice, ten, a thousand times before. Who cares if all the music that transpires

Is the fall of grit or dry seeds through a cactus? You are like a rich man entering heaven Through the ear of a raindrop. Listen now again.

At this point in the paper I spoke the poem aloud, the screen being blank. I wanted the audience to experience the difference between relating to the poem as a text, and being an echo-chamber for its sounds as they allowed it inside themselves. The reader might find it interesting now, before continuing, to read the poem aloud.

The heavy, evenly weighted sibilance of 'Downpour, sluice-rush, spillage and backwash' pours tangibly through the speaking mouth as it does through the rainstick. This quietens to 'a gutter stopping trickling'. The words create in sound the fading of drips into silence which they describe. The lightness that follows, of 'a sprinkle of drops' and 'almost-breaths of air', is, literally, breathtaking. A crucial phrase is 'You stand there like a pipe/Being played by water ...'. At that moment, 'you' become the rain-stick: a pipe with these amazing sounds running through you—the sounds of the poem. And the poem was made by the poet listening to the amazing sounds that were running through himself. He is the rain-stick and, when we hear inside us the poem which is the rain-stick, we become the rain-stick.

It is a shock then to stumble over the abrupt, throwaway question: 'Who cares ... ?' The poem's delight in the play of sound seems almost aggressively dismissed. Liquidity turns to harshness in 'the fall of grit or dry seeds through a cactus'. The beauty of the surface yields to a deeper meaning. The 'music that transpires' offers a way of 'entering heaven/Through the ear of a raindrop'. The biblical echo is significant. What is reached through the eye of a needle is something ultimately valuable, but only to be found by giving up the riches one is used to depending on. It is with this in mind that we are invited to 'listen now again'. This is a poem about listening which embodies, and makes happen, its own multiplicity of listenings.

Clinical implications

What does it involve for an analyst to listen to a patient in this way? Heaney's comments on poetic technique have a lot to say to psychoanalysts. His idiosyncratic use of the term 'technique', though, should be noted. Heaney sets 'technique' against 'craft', rather like Klauber (1981, p. 114) discussing the 'craft' and the 'art' of analysis. 'Craft', in Heaney's terms, is more or less what I have called the external aspect of technique, while 'technique', for him, is closer to what I mean by its internal aspect. With this caution, here is what he says:

Craft is what you can learn from other verse. Craft is the skill of making ... It can be deployed without reference to the feelings or the self ... Learning the craft is learning to turn the windlass at the well of poetry. Usually you begin by dropping the bucket half way down the shaft and winding up a taking of air. You are miming the real thing until one day the chain draws unexpectedly tight and you have dipped into waters that will continue to entice you back. You'll have broken the skin on the pool of yourself ...

At that point it becomes appropriate to speak of technique rather than craft. Technique, as I would define it, involves not only a poet's way with words, his management of metre, rhythm and verbal texture; it involves also a definition of his stance towards life, a definition of his own reality. It involves a discovery of ways to go out of his normal cognitive bounds and raid the inarticulate: a dynamic alertness that mediates between the origins of feeling in memory and experience and the formal ploys that express these in a work of art. (2002, p. 19)

Analysts need a similar psychic availability to themselves, in order to mediate between the origins of feeling in memory and experience and the interpretations that express these in the clinical setting. In the security of an analyst's internal setting this raiding of the inarticulate can become possible.

What might all this mean in the consulting room?

Mr W is in his fifties and at the time of the sessions I shall describe had been in five-times-weekly analysis with me for about a year. He is single and has no children. His sexual relationships have always been with women. In his late teens, however, he fell in love with a young man of similar age. The two were friendly but his love was not reciprocated and no emotional or physical relationship developed. This remains for him the most powerful and passionate emotional experience of his life. Since then he has had several relationships with women which have lasted for some years. They have been sexual, but without great physical attraction or excitement on his part. He does not get erections easily and sometimes avoids intercourse because of this. What he does enjoy is for a woman to spank him on the bottom, not so hard as to cause pain but so that he feels humiliated.

A significant childhood recollection, with the character of a screen memory, is of waking his parents in the night. They stood with him between them, and his mother crossly told his father to spank him. His father, who was not angry, did so, but gently so that it did not hurt.

In material terms he has been adequately but not strikingly successful. He has felt rather adrift since selling the business he had built up. He is lonely, and unhappy in particular at not finding a sexually and emotionally satisfying relationship. What also brought him to see me was the wish for a sense of direction. He was afraid of his life feeling empty and pointless, without any meaning to it.

A week from Mr W's analysis

Thursday

He said that sitting outside in my waiting room he had noticed the smoke alarm. He thought this was funny, and wondered if I had put it there in case one of my patients might set fire to the place. He would not like to do that. I said the thought seemed to be in his mind that he could.

Later in the session he said the end of the holiday meant phoning the plumber to mend a leak, and the plumber would certainly not come, so he would want to boil him in the bath, or take a big knife and cut his belly open. 'That would be very pleasurable.' I said that wanting to do such a thing could well go with wanting to set my place on fire. He explained that he had thought of some other patient becoming psychotic and doing that, but not himself.

He described having some toast in a café beneath his flat. It was more the image of it going into his mouth than the taste which pleased him. I asked if he knew what it was about the image that pleased him. He said it was to do with the toast being partly inside and partly outside him. Then he wondered if he was usurping my job, making his own interpretation to push me off my pedestal. I said I thought he might indeed want to do that.

Friday

He seemed to settle himself not just down on to the couch but into it, and was silent. After some time it crossed my mind that he might stay silent throughout the session. I once broke a silence after about 40 minutes and the next day he told me how disappointed he was. The silence continued. Dreamlike images came to me: someone playing with glove puppets; someone trying to knock down a wall with a hammer. But I did not find myself wanting to break down his silence, nor did I feel manipulated. I wondered if his silence was an attempt to break through to something.

I knew I must not move suddenly or noisily, in a way that could suggest irritation or frustration. But I also knew that absolute quiet was not called for. Sometimes in a prolonged silence one knows that any movement whatever may disturb the utter stillness that a patient needs. This was not like that. Mr W shifted on the couch from time to time with natural easy movements. I did the same in my chair. Not by conscious decision—I just let it happen when I felt like it, so that he could know I was comfortable. After a while it seemed as though our bodies were responding to each other in a kind of slow dialogue. I had the thought: two men whose bodies are moving together in response to each other? It seemed something homosexual was happening between us, but it did not feel erotic. I thought of the Three essays (Freud, 1905) and how Freud broadened the understanding of what sexuality means. Was I experiencing something with this man that was sexual in a wider sense?

And so this Friday session ended, without either of us having said a word.

Monday

He said he wanted to talk to me and also wanted not to. Friday had felt good. Because I did not say anything, he did not feel he had to give me anything. There is stuff in him, he said, that is horrible, aggressive and smells bad. He wants to put it outside himself but thinks that I will not want it. He pictured himself with something brown and foul-smelling in his hand. He wanted to give it to me but that felt impossible. He mentioned the session where I broke the silence near the end. I recalled how angry and disappointed he had been. He seemed surprised and pleased that I remembered.

The rest of the session was occupied with whether I could accept the horrible stuff inside him. He talked about his shit with a striking lack of embarrassment. This could have seemed provocative, but in fact it did not. It felt as though he were talking about something in a way that was real for him. There is an obvious narcissism about him, and while he was saying how disgusting his shit was the underlying idealization of it was also clear. But for the most part I felt I existed not in order to be

erased by a monologue, but as somebody with whom he was trying to communicate in whatever way he could.

Tuesday

He began, 'So I see a big wave coming towards me. There is spray coming off the top of it. And now I see a fish in the wave, a big fish facing forwards with its head just coming out of the wave'. I do not know if this is a fantasy, an illusion he is conjuring from my window blind and the foliage outside, or whether I am being told a dream. He is expecting that I will listen without needing to have it explained what I am listening to. That is to say he is trusting me to accept whatever he is giving me.

He talked about seeing a man come out of the house as he arrived. Was it another patient? Are they in competition with each other for me? Is the spray of the wave my sperm and do they both want it? This felt stereotyped and artificial. I thought he was escaping from difficult real feelings about the other man into a competition to produce interpretations, as with the toast on Thursday.

Then he began to wonder if the man could be my son. Mr W was interested in this idea for a while, dropped it, fell silent, and then said he wanted to have the feeling of me coming into him from behind in a way that would be gentle and caressing. With the screen memory about waking his parents in mind, I said I thought he was thinking of the sexual intercourse that had produced my son, and he wanted to stop that by thinking I would have intercourse with him instead.

He showed that he understood this interpretation by explaining it to me. He said, 'So you mean that there is somebody that you have sex with, and I do not want this third person to be there. I want you just for myself. And that is why I want you to come into me from behind'. He had understood me all right, but as he went on his talk felt like a monologue to which I could only be a passive listener.

Wednesday

He started by saying there was 'a current' coming from behind him. A draught of air? A current of feeling? I did not know. Then he mentioned a dream in which someone in front of him had a rucksack, and there was an enormous rabbit on top of the rucksack. He wanted it to come closer so he could cuddle it.

He thinks that what he wants from me is like the current he felt, to have the caring softness of a man coming into him from behind. This would feel undemanding and accepting. He mentioned the incident I referred to as a screen memory, then began constructing an idea about his being jealous of something between his parents and wanting it for himself. It felt as though he were trying to recreate my interpretation from yesterday.

I said I was not sure what he really had in mind when he talked about a man's softness coming into him from behind. He said it was something gentle, caressing, maybe like a massage. It would come into him all over, through the feeling of his skin. It was not a penis coming into his bottom. That would hurt and feel aggressive. This would be like a baker, kneading dough low down on both cheeks of his bottom, and maybe in the middle as well. It might also go in the direction of his being gently spanked. It was clearly myself that he was imagining doing this to him. Again he was

talking noticeably without embarrassment, about something which evidently felt to him uncomplicated and straightforwardly lovely.

He said he had wanted to have this feeling with Peter (the boy he was in love with in his late teens) and it felt terrible when that relationship did not happen. He has the feeling a bit with his present girlfriend. She is small and frail and he can wrap himself right round her. He likes spanking her. I said I thought that, when he is wrapped round her or spanking her, he does not really know whether it is a small frail woman or a boy like Peter that he is doing it with. He agreed, and said his dream would be for me to sit beside him and show him diapositives to illustrate a better alternative. His background makes it easy for him to use the technical 'diapositives' instead of the everyday 'slides'; but the word was still striking.

For this to be his 'dream' reminded me of the dream about the big rabbit, and I wondered if he wanted to say more about it. He said the rabbit was frightening because it was so big. He talked about a friend's daughter who keeps a pet rabbit in a cage. He used to tease her saying he liked the taste of rabbit and he would cook the rabbit and eat it. It emerged that this was 10 years ago when the friend's daughter was 7. She is now 17 and the rabbit is still alive and still in the cage. Her brother, the son of Mr W's friend, had just got married. I found this a very moving association. He wants to get close to the furry animal and stroke it, but it is frighteningly big, so it has to be imprisoned in a cage and threatened in an orally sadistic way. The rabbit seems to be a confused representation of the genitals and the breast. And years later it is still being kept in the cage. But the marriage of the son does seem to show hope for an alternative.

I commented on the word 'diapositive' in his other 'dream', saying I thought he believed there is something repulsive, very negative, about a woman's body and especially about putting his penis into whatever is inside there. And he wants me to help him see it differently, so that a woman's body could become something positive for him. He responded by recalling the day he got off the couch and sat opposite me. He had thought at one time that I was going to sleep, but then realized I was going inside myself to try to feel more of what he was talking about.

Discussion

His association about the rabbit and my subsequent intervention illustrate what I take from Heaney about the difference between abstracting meaning and hearing it. If I had made an interpretation beginning 'I think the rabbit stands for ...' or 'What you are talking about is ...', I would have been *abstracting* meaning *from* the patient's material in a way that could have distanced me from him. Likewise, in the first session, I might have said explicitly that the unreliable plumber, whom he needed at the end of the holiday and would torture for not being there, represented myself. Instead of abstracting his meaning into such interpretations, I preferred to talk about his disgust for a woman's body and his hope that I could help him change that, and to make the comment that torturing the plumber and setting fire to my room belonged together. These interventions were based on meaning that I *heard in* his associations, and I hoped they might keep us more in contact with each other in an interpretative dialogue.

I think a touchstone of psychoanalytic activity is whether it can be sensed that patient and analyst between them are generating fresh meaning: whether they are engaged, that is, in an analytic conversation, or only a series of intersecting monologues. In this respect there is an interesting difference between Monday when Mr W went on about whether I could accept his shit, and Tuesday when he took up my interpretation about his wish to stop the intercourse that had produced my son.

What he did with my interpretation on Tuesday was to abstract the meaning and appropriate it into a commentary on what I had said. He demonstrated his understanding but nothing fresh transpired between us. The Wednesday session reveals why. Its material was almost totally pre-oedipal, and full of anxiety about contact with an indeterminate sort of genital. My interpretation on Tuesday had been misjudged. It followed his saying he wanted me to come into him from behind, and I thought I was addressing his anxiety about one sort of genital intercourse (parental) and his wish to substitute a different sort (passive homosexual with me as his father). But Mr W had no notion, at that moment, of any sort of genital intercourse. He had not, in fact, been able to hear meaning at all in the interpretation. He deciphered it all right. But deciphering is not hearing: it is abstracting. I intended my interpretation as part of a dialogue between us. But for him it was an empty monologue. He could only respond with a monologue of his own.

His talk about his shit on Monday looked, on the face of it, more like a monologue than what happened on Tuesday. In fact, we were in dialogue, even though I was mostly silent. He and I could both hear meaning in what he said, without having to abstract from it. I hardly needed to interpret because he made use of my listening presence in a way that let him go on generating fresh meaning for both of us.

The significance of the silent session also becomes clear. I sensed the alternating movement of our bodies and thought at first that I must be involved in a homosexual interaction. But it did not feel erotic. I thought of Freud's extension of the meaning of sexuality and, sure enough, in the light of Wednesday's session we can see that on Friday Mr W was in a state of pre-genital and preverbal regression. The mutual responsiveness of our bodies was not that of two men, but of mother and infant.

My capacity to handle this session as I did, and think about what might be happening, depended very much on my internal analytic setting. Here there was an area of my mind in which I could presume that I must be having intercourse with a man, and expect that I should find that erotic. Despite the rest of my mind not operating by such a reality, it could hold sway in this part. Because I could expect, in my internal analytic setting, to feel homosexually aroused, I was able to be surprised that I was not. This put me on the track of what was actually taking place instead.

Where, topographically, does the internal setting live in the analyst's mind? When the patient I mentioned earlier wanted to bring her dog, my decision to accept as part of the analysis whatever that might lead to was a conscious use of my internal analytic setting. As regards the session just discussed, I had to realize retrospectively that I had been inhabiting my internal setting. In the session itself my use of it was preconscious. Like much of an analyst's theoretical repertoire, the internal setting moves between preconscious and conscious, operating most of the time preconsciously but accessible to conscious awareness when this becomes necessary.

Beyond countertransference

Near the beginning of this paper I reviewed the familiar development of the concept of countertransference, and introduced the internal analytic setting as being the kind of inward space that is needed for the analyst to be truly an analytic listener to herself. In the evolution from the classical view of countertransference to the post-1950 understanding of it, there are two shifts involved. One is from seeing countertransference only as an impediment to seeing it also as potentially useful for the analysis. The other concerns its origin. In the earlier view, it derives from the analyst's psychic structure, and in the later from what is happening in the patient. This second shift in viewpoint, regarding whose psyche countertransference originates from, has received less emphasis than the shift from its being a hindrance to a help. But separating out like this the component elements of the revision allows a new possibility to emerge. If countertransference may originate from the analyst's psyche and hinder the analysis, or from that of the patient and be able to help it, might the analysis also evoke elements belonging to the analyst's psyche which can benefit the analysis?

This differs from either of the first two instances in a significant respect. Those both imply that something has to be made conscious in order that the analytic work may proceed. The new possibility that I am raising does not involve a demand on the analyst either to surmount an obstacle in himself, or to recognize a projective identification, in order to get the analysis back on track. The idea that unconscious aspects of the analyst's psyche stirred up by the analytic encounter may not impede the analysis but bring fresh creativity into it takes us beyond the usual conception of countertransference.

Psychoanalytic writing has tended to represent the unconscious as a sort of black box with unknown things inside it. Some of these things—wishes, thoughts, anxieties, fantasies—sometimes get out of the box into the light where they become visible, i.e. conscious. Freud's use of spatial metaphor is largely responsible for this picture, so it is important to remember that he spoke of the *system* unconscious. Systems are not containers, with objects that are inside or outside them. They are conceptual structures with functions, potentials and limitations. We may ask: Can this family system contain the confusion of these children? Can the democratic system contain the demands of fundamentalism? But we know that the functional capacity of a system is what we are talking about. Bion's concept of container and contained is a case in point. He makes explicit use of the metaphor, and makes it equally explicit that he is referring to a function of a mother's, or analyst's, mind.

So evoking unconscious aspects of the analyst's psyche does not necessarily mean bringing into the light of consciousness previously repressed mental content. The analytic situation may also evoke capacities, and functions, in an analyst's psyche, of which he was not previously aware. This depends on an availability in the analyst, an openness to the potential for this to happen. Analytic encounters will vary in how evocative they are in this way. But, if an analyst is internally available to be touched at whatever deep level in himself a particular analysis can connect

with, then his sense of his own psychic capacity may be enlarged by the analytic encounter, to the benefit and enrichment of the analysis.

My work with Mr W illustrates how an analyst may be moved to listen analytically to himself, beyond the countertransference, in a way that can enlarge his own psychic capacities and enrich the analysis at the same time.

I have been sitting behind the couch for 25 years, so I am fairly well along in my working life as an analyst. This patient gives me a sense of how much that is fascinating there is yet for me to discover about psychoanalysis, and how far my analytic capacities have still to develop. I find myself thinking, 'If I had another 25 years, where might I get to then, in understanding all this?!' But I am not going to have another 25 years. So this analysis faces me with recognizing how much I shall never understand about psychoanalysis. It is not required countertransferentially, to keep this particular analysis on track, that I should contemplate my inescapable losses, failures and, finally, my death. Accepting these and finding a capacity to face them is a necessary psychic function for all human beings. But Mr W's analysis does make me more conscious of the need to discover this capacity in myself.

It must be to the benefit of any analysis if an analyst is prompted by the work to recognize more fully his own humanity. But, beyond the general truth of this, the self-analytic reflections which this analysis stirs up in me also relate more specifically to Mr W's condition. The most meaningful emotional experience of his life was some 25 years ago. He has never found that depth of feeling again. He has not found in heterosexual relationships anything to come near the passion and emotional significance to him of his feelings for Peter; nor could he establish a homosexual identity that might have let him fulfil those feelings with a different man. The emptiness of his sexuality is tragic. And he has not found a way of realizing his uniqueness as an individual in any other area of life. Nothing contributes meaning to his life in the way that psychoanalysis, for example, has done to mine for the last 25 years. And here he is, over half his life gone and wondering how to bear the rest of it. He has expressed fears of his life feeling empty and pointless. But the sense of loss and curtailment, and the sorrow at not having been able to be who he might have been, do not make their way fully into words. I comprehend them more, as yet, through the psychic work on my own situation that this analysis provokes in me.

This illustrates my earlier description of the analyst as analytic listener to himself. It also shows that this does not mean the analyst is somehow parasitizing the analysis for the purpose of his own self-analysis. Self-analysis there certainly is, but, because it is grounded in the analyst's internal setting for a particular analysis, what results from it for the analyst works to illuminate the analysis as well. Is it possible, in fact, for an analysis to be really life-enhancing for a patient unless it is life-enhancing for the analyst? The intimations of mortality are my own, and facing them is personal work in an area beyond countertransference. But this personal psychic work folds back into the internal setting that exists in my mind for this analysis. This gives Mr W's life a depth and texture for me that lets me hear more in what he says, and helps me know more about his pain; to which, as his analyst, I need to be as alive as I can.

Translations of summary

Vom Unausgesprochenen profitieren: das innere analytische Setting und das Zuhören jenseits der Gegenübertragung. Das analytische Setting existiert nicht nur in der Außenwelt, sondern auch als innere mentale Struktur des Analytikers. Das innere analytische Setting bildet einen Bereich in seinem Denken und Fühlen, in dem Realität durch unbewusste, symbolische Bedeutung definiert wird. Klinische Beispiele illustrieren, dass ein sicheres inneres Setting eine Flexibilität des äußeren Settings ermöglicht, die dessen analytischer Qualität keinen Abbruch tut. Das innere Setting kann Analytikern helfen, den Vorgängen in ihrem eigenen Innern gewissermaßen mit gleichschwebender Aufmerksamkeit zuzuhören. Dies verweist über das geläufige Verständnis der Gegenübertragung hinaus. Eine analytische Begegnung kann Elemente stimulieren, die zur Psyche des Analytikers gehören, aber die Analyse nicht behindern, sondern sie aktiv bereichern. Seamus Heaneys Schriften geben Anlass zu einem Vergleich zwischen dem Zuhören des Analytikers, der seinem Patienten lauscht, und dem Hören gesprochener Gedichte. Im Zusammenhang mit diesen Themen wird eine Woche aus der Analyse eines Patienten beschrieben.

Incursionando en lo inarticulado: el encuadre analítico interno y la escucha más allá de la contratransferencia. El encuadre analítico existe no solo externamente sino también internamente como estructura en la mente del analista. El encuadre analítico interno constituye un área de la mente del analista en que la realidad es definida por el significado inconsciente y simbólico. Ejemplos clínicos ilustran cómo un encuadre interno seguro permite flexibilidad en el encuadre externo sin sacrificar su calidad analítica. El encuadre interno puede ayudar a los analistas a escuchar de manera libre y flotante sus procesos internos. Esto apunta más allá de las ideas usuales acerca de la contratransferencia. Un encuentro analítico puede remover elementos que pertenecen a la psique del analista que, en vez de dificultar el análisis, pueden enriquecerlo activamente. Escritos de Seamus Heaney evocan comparaciones entre escuchar a pacientes y escuchar poemas, y se describe una semana de análisis de un paciente en relación a estos temas.

Défier l'inarticulé : le cadre analytique interne et l'écoute au-delà du contre-transfert. Le cadre analytique n'existe pas seulement comme externe, mais aussi en tant qu'interne, en tant que structure dans l'esprit de l'analyste. Le cadre analytique interne constitue une aire de l'esprit de l'analyste où la réalité est définie par le sens inconscient, symbolique. Des exemples cliniques illustrent comment un cadre interne de sécurité permet au cadre externe une certaine souplesse sans sacrifier la qualité analytique. Le cadre interne peut aider les analystes à écouter à l'intérieur d'eux-mêmes de façon « également flottante » par rapport à leurs processus internes. Cette notion va au-delà des idées courantes sur le contre-transfert. Il est possible qu'une rencontre analytique mobilise des éléments qui appartiennent au psychisme de l'analyste et qui, au lieu d'entraver l'analyse, peuvent l'enrichir activement. L'auteur compare l'écoute des patients et l'écoute de poèmes, rapprochement évoqué par les écrits de Seamus Heaney, et décrit une semaine de l'analyse d'un patient en rapport avec ces thèmes.

Incursioni nell'inespresso: Setting analitico interno e ascolto al di là del controtransfert. Il setting analitico esiste non solo come struttura esterna, ma anche come struttura interna alla mente dell'analista. Il setting analitico interno consiste in un'area della mente dell'analista in cui la realtà è definita dal significato simbolico e inconscio. Esempi clinici illustrano come un setting interno stabile consenta una flessibilità del setting esterno senza che ciò sacrifichi la qualità del lavoro analitico. Il setting interno consente all'analista un ascolto interiore che implica un'attenzione uniformemente sospesa ai propri processi interiori. Ciò oltrepassa il concetto abituale di controtransfert. Un incontro analitico può far emergere elementi che appartengono alla psiche dell'analista, ma che non impediscono l'analisi, bensì la favoriscono attivamente. Dei confronti fra l'ascolto del paziente e l'ascolto del verso poetico sono stati ispirati dall'opera di Seamus Heaney e viene descritta una settimana di un'analisi alla luce di questa tematica.

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