

Empathy and intersubjectivity in group psychotherapy. Pain sharing and mirror neurons.

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Abstract

The author's main hypothesis is that intersubjectivity is at the base of the establishment and preservation of the small therapy group, which is also the place where intersubjectivity disorders can appear and be properly dealt with. What is favoured, is a prelogical and automatic conception of intersubjectivity, in continuation with the theory of mirror neurons, that well describes the pain sharing phenomena in small groups. The author thus tries to evaluate the congruency of present neurophysiological models with the Bionian field theory. Instead of conceiving the group as a whole, the antinomy group/individual is overcome by suggesting a multidimensional synchronous space vision, inspired by Matte Blanco's model. After a close review of the main conception of intersubjectivity – Stern, *Psychology of Self*, Kaës – the author attempts to trace back the rationales of empathetic perception and intersubjectivity to the mould of the present phenomenological turning point of psychoanalysis. Merleau-Ponty's chiasmatic-empathetic conception is seen as the true precursor of field theory, in line with the present neurophysiological ideas and with the here-and-now and protomental Bionian conceptions.

Keywords: intersubjectivity, empathy, mirror neurons, Merleau-Ponty, field theory

Introduction

Intersubjectivity and empathy are a hard challenge for clinical practice and small group theory, especially for analysts with a Bionian background, to which I belong. They work with a model of group-as-a-whole and a concept of field 'transformational and self-organizational', which is somehow superordinate to relational aspects (Riolo, 1986; Rugi, 2000). However, one of the basic functions of the therapeutic group is the empathetic listening of pain in a setting that facilitates its sharing and mentalization. Thus, some questions follow. How can we reconcile individual and group listening? What does sharing pain mean? Is the concept of field compatible with the new neurobiological theories of intersubjectivity?

Fragments

Some scattered fragments could give some idea of the clinical meaning of these questions, and I hope that they will linger as an evocative moment about the group empathetic function. In one of my recent sessions, Ada, who attended the group for four years, says that she wants to go back to live with her parents, in her small hometown. The whole group, including me, is alarmed: we know her shady story, her impossible relationship with her relatives, the incest with her brother, the suicide attempts. Everyone experiences this declaration as a violent attack, a dangerous defection together with a deep ungratefulness. Everyone tries to reply, to convince Ada to change her mind. But she stiffens up, getting in a dramatic fight with the others that has no way out. Suddenly, I realize that the group has identified with the therapeutic project, which prevents an empathetic position. Ada must have her reasons. Maybe we are asking too much of her, and her attack is a sign of extreme pain. I then decide to highlight the positive sides of the matter, saying that Ada made a huge step forward to be able to even think of returning back home to her parents, in the place of her pain. The attacks stop. Ada feels understood, the tension is released and, like after a storm, the group starts working again with new lightness. In one of the following sessions, Ada tells us she is worried because a friend of hers is dying of leukaemia and she does not feel any pain. Mara then tells us that she remembers that when her father-in-law died, her partner's family gathered to eat, without showing any real pain. During the night, she threw up. Ada says she remembers that also in the south of Italy, during the wake for the dead, they eat cake and drink coffee. Coffee to stay awake, and cake to soothe the pain. It is therefore a mistake to judge rites of pain, as they change depending on the geographic areas. We react to pain in many ways, sometimes even fleeing or attacking others, and it is however good to withdraw in front of excessive pain. Pain does not allow any illusions. Ada then recalls that when she was 19, she went to visit a dying friend every day. At that time, she threw herself on pain like moths on light. More than a custom, it was a real duty. Once she did not go, and other people pointed it out to her. At that point, Anna's eyes are glistening and she is about to cry. Everyone participates silently to her pain, towards which she had been in denial herself, up to that moment. Anna then manages to remember that when her mother had a psychotic break and was hospitalized in a closed ward, she could not go to visit her, because it was too painful. During a different session, Mara asks why everything has to go through pain? Birth, growth, even joy. Francesco says that maybe it is not like that. Ada then remembers that for 10 years she felt as in a clamp that crashed her soul, up to the point that she wished for death in order to have some relief. Francesco points out that is what pain is. A kind of pain that does not allow growth, or, like I say, a kind of pain that prevents growth.

The individual/group antinomy

The individual/crowd Freudian conflict is still a central issue in psychoanalytical theory. Group experience has been interpreted as a continuous oscillation between individual and group, between multiplicity and totality. Even if they have been given many different interpretations, they have always maintained some sort of individual/group antinomy. The separation of the group as a multi-psychic apparatus and the group as a whole, does indeed tear apart the psychoanalytic theory of groups (Neri, 1999). Some authors favour the study of the relations between the elements, thus keeping the group centred on a combinatory model, while others privilege a concept of wholeness, which however ends up neglecting the nature of combinatory laws, risking to drift towards mysticism (Rugi, 2003). Moreover, the use of the psychoanalytic model has nourished practice and theory of groups for a long time, but it has also created many problems. Terms like analysis *in* the group, *of* the group and *through* the group, show a difficult filiation from psychoanalytic theory and practice, which goes from a total theoretical continuity, to the mere sharing of principles, though in the progressive quest for specificity. Undoubtedly, Freud's personal characteristics, along with the needs linked to the establishment of psychoanalysis, as well as the intrinsic factors connected to the power plays within psychoanalytic institutions, had a great influence on these aspects. Nevertheless, a contribution was also given by powerful epistemological factors that have always interpreted the world through irreconcilable dichotomies such as individual/society, nature/nurture, Ego/crowd. The Freudian concept of social neurosis, which places individual unhappiness at the basis of human organization, is not exclusively a psychoanalytic heritage. As for the individual/society and subjectivity/otherness dichotomies, philosophy did not follow a much brighter path. Western culture has always been ruled by an individual and solipsistic thought that takes for granted the assumption of a total separation between the Self and the Other. Even economical theories have always claimed that the only thing that triggers individual actions is selfishness, that needs to be kept under control and used for good purposes. The rhetoric of the Other, by idealizing otherness and difference, did not make any actual contributions to the establishment of a society based on mutual respect and development. The idealization of the Other is only the opposite and repairing face of the prevailing individualistic vision. The German phenomenologist Waldenfels (2006) tried to overcome this sterile dichotomy turning towards a ethic and aesthetic of the response, that is in fact based on the bodily dimension of experience. As far as we are concerned as group therapists, the dichotomy individual/group is marked by the setting difference between the *couch* and the *circle*. The standard individual setting has stiffened the psychoanalytic model on the Freudian theory of dreams. When Anzieu (1976) defined group dynamics in a psychoanalytic sense, he could only refer to the group as a dream. Considering the group as the place of desires, made it possible to remove the basic negative aspect which caused the group to be alienating for the individual. The individual/crowd Freudian conflict also influenced the Bionian distinction between narcissism and socialism. The constraints of common sense are at the basis of sociality for Bion, and they represent the price to be paid to

be in harmony with one another. The oscillation between narcissism and socialism maintains a feeling of ‘pain and fright’, which continuously permeates the group bond (Gaburri and Ambrosiano, 2003). When Bion described the depersonalization of the individual who comes in contact with the group emotional life, he only saw the regressive aspect of the need of intersubjectivity. Probably, the claim to conceive the group as-a-whole corresponds to the fantasy of treating the group as an individual, consistently with the psychoanalytic method. The same claim brought Kaës (1994) to fictitious practices, as that of putting the patients back to back, instead of in a circle, facing each other. Nevertheless, the group *is neither an individual, nor a crowd, but a set of people bound in a complex intersubjective relationship*.

Empathy and intersubjectivity

Nowadays, the concepts of intersubjectivity and empathy are so articulated and complex, that, without the necessary process of differentiation of their several functions, they can be mistaken for one another. Daniel Stern (2005) points out how the term ‘empathy’ assumed multiple and even antithetical meanings in psychoanalysis, and that it is often used to enclose many facets of the concept of intersubjectivity. Instead, he reckons that the concept of intersubjectivity denotes the fundamental human process from which empathy descends, in its various meanings. According to Tronik (2008), we can distinguish a *primary intersubjectivity*, automatic and not conscious, which is also present in newborn children, from a *secondary intersubjectivity*, which implies the conscious understanding of the other’s state. Instead, with the term empathy we refer to a more evolved function which also features the paradoxical awareness of the difference between the state of the Self and the state of the Other. Empathy is therefore different from *liking*, which implies automatic likeability, but it is also different from *emotional contagion*, since empathy preserves the awareness of the Self-Other differentiation. Beebe (2003) distinguishes different *kinds of intersubjectivity*, discriminating between adult intersubjective theories and the ones derived from *Infant Research*. The former usually refers to the verbal and explicit domain, while the latter refer to nonverbal/implicit sequences. This differentiation is crucial for groups, where the implicit, phenomenic-perceptual aspect prevails. Actually, intersubjective studies focus more on the mother-baby dyad and on adult psychotherapy than on group therapy, where, as the group is often perceived as a whole (Stern, 2004), intersubjectivity is usually considered too complex. Stern (2005), however, pointed out that intersubjectivity provides some fundamental elements to the understanding of groups. It promotes group formation, it enhances its functioning and strengthens its cohesion. Other authors argue that intersubjectivity and empathy are closely related to mentalization, which is the ability to think about oneself and others in terms of implicit and explicit mental states

(Fonagy et al., 2002). It is also worth mentioning that intersubjectivity and empathy have been systematically analysed from many different perspectives. In particular, it is hard to think that psychoanalysis could deal with such concepts without referring to the recent notions and discoveries of neuroscience and phenomenology. According to such discoveries, intersubjectivity and empathy overlap in the mirroring phenomenon and lie on the same neuronal mechanisms of embodied simulation.

Mirror neurons and pain sharing

The theory of mirror neurons envisages a neural system in which resonance, emotional harmony, and the understanding of mental states are crucial aspects, providing an elegant and reliable model of empathy and intersubjectivity. Some authors hypothesize that the mirror neurons system can also evolve with experience, well beyond early mother-child interactions, opening new perspectives to analyse mental disorders and therapy (Iacoboni, 2008). According to this theory, everything seems to happen ‘as if’ we could feel the feelings and emotions that the other sends us through a ‘simulation mechanism’. Gallese (2005) defines it an ‘embodied’ simulation, since it happens at a neuronal level and it uses a pre-existing body model. While classic cognitivism traces back the understanding of others to abstract representations mediated by the theory of mind and common sense, the theory of mirror neurons acknowledges a direct and automatic comprehension of the sense of others’ actions, emotions, and feelings. This theory hypothesizes the existence of a shared interpersonal space of meanings, which is based on the interaction between the multimodal experiential knowledge we get through our living body and the knowledge we get from other people’s experience. In other words, the theory of mirror neurons grounds the basis of intersubjectivity on a pre-verbal and pre-rational primary condition, originating from common neural mechanisms. As a matter of fact, mirror neurons feature the property of responding both when we perform a goal-directed action, and when we observe another individual carrying out a similar action. There is an activation of those motor circuits, which located in non-visual brain areas, that are activated when we perform an action ourselves, even if the action itself is inhibited. The perception of an action is therefore equivalent to an internal simulation in which the observer enters in the other’s world through a direct and unconscious motor simulation process. Observed actions and emotions are hence simulated in order to be understood. This process does not use mental representations, but it is hardwired into the body, and it is at the basis of empathy, of imitation, and of the ability to understand the other. Therefore, empathetic feelings find their neurophysiological basis in mirror neurons and in embodied simulation, and they cannot be considered as a mere intuition. The theory of mirror neurons is based on neurophysiological studies, but it seems to have very interesting implications also for

psychiatry and psychotherapy. It is important for our purposes because it demonstrates that when we observe a person and we try to identify his or her affective state, the other person's emotion is built, experienced, and understood directly through an embodied simulation producing a physical state shared by the observer. This process is also active when we observe an image evoking gestures, movements, intentions, physical feelings, and emotions, or when we observe a work of art where we detect the traces of the artist's gesture, as in Fontana's cuts (Gallese, 2007). The main role of mirror neurons seems to allow the understanding of others' emotions and intentions and to aesthetically participate to the external world, thus facilitating social behaviour. Therefore, empathy is not the result of an inference process, but the establishment of a direct correspondence between an observed feeling and the same feeling experienced through the unconscious and automatic mechanisms of embodied simulation. Moreover, the empathetic response can be modulated by several factors, such as moral judgment. Hence, the essential ground for intersubjectivity is neither the knowledge of an lexicon of shared concepts, nor the adequate functioning of inferences, but the immediate perception of other people's physical qualities. Intersubjectivity is not ruled by a disembodied mind, but by our behaviour and body. The phenomenon of intercorporeity, inherently perceptual, triggers a flesh-to-flesh resonance, and it is at the basis of sociality. This phenomenon is particularly evident with pain, a personal experience that our brain treats as a shared experience. As a matter of fact, our brain produces a complete simulation of painful experiences observed in other people through facial expressions, posture, and gestures, which also include the motor component. However, an empathetic response can also be elicited in absence of direct emotional signs, like facial expressions. Indeed, a mere presentation of arbitrary signs indicating that another person is feeling pain, is sufficient to activate the affective areas involved in pain (Iacoboni, 2008).

Intersubjectivity, mirroring theory and group

Stern (2004) tried to redefine intersubjectivity in groups in light of the theory of *mirroring*. He thinks of intersubjectivity as a basic motivational system, which is able to read others' feelings and to define, maintain or re-establish our own sense of identity and cohesion. The intersubjective orientation of the self in the individuals, families and groups, is a priority which can activate behavioural dynamics. When such orientation is not achieved, a basic anxiety is developed, triggering either coping strategies or even defence mechanisms. The intersubjective system regulates the *belonging-isolation* dichotomy, which *ranges from* the poles of cosmic solitude to mental processes of transparency, fusion, and self annihilation. It is different from the attachment system, which mediates the relationship between the poles of *distance* and *curiosity-exploration*. While attachment tends to promote physical proximity and

group bonds, intersubjectivity enhances intimacy. It is actually possible that people showing strong attachment issues, lack psychological openness or intimacy. However, the two systems work synergically; intersubjectivity creates the conditions for the development of attachment. In our culture, the search for intimacy is the crucial element of every relationship, and it is based on the ability to resonate with others' actions, in some kind of *mimesis* with others' behaviour: "Affective expressions reveal our thoughts and our experiences. The same is true for others people's gestures and movements: we can feel ourselves move that way. We feel it in our body and we perceive it in our mind, together. We can even perceive the experience of a whole group of people. Our nervous system is made to 'connect to' that of other human beings, so we can experience others as if we were under their own skin". (Stern, 2004).

The intersubjective relationship is therefore based on a 'recursive and reiterative' interpretation of a given context, where contact, reciprocal gaze, sharing and immersion in a perceptual and aesthetic common field, are essential elements. Moreover, Lichtemberg (2005) emphasizes how our motivational system, which is grounded on neurobiological bases and originates from shared experiences during the neonatal period, is expressed and clearly visible through our behaviour. A small group is thus the ideal place to observe not only these intersubjective dynamics, but also their difficulties and obstacles. The face-to-face arrangement of the circular setting of the therapeutic group, regulates times, ways, and rhythms of being together. It moderates emotional exchanges, involving responsiveness, circularity, and reciprocity. It seems to be the place where intersubjectivity disorders more easily emerge, but also the place where intersubjectivity can be effectively modulated and encouraged. An interpersonal tuning and the presence of inadequate and/or contradictory responses, are important phenomena for the genesis of borderline personality organization and for the development of the Self. These experiences are intrinsically sensorial, emotional and traumatic, and are associated with the pleasure/pain control system. Therefore, they are maintained as implicit memories and they constitute the first psycho-physiological nucleus of the Self (Mancia, 1989). Implicit memory, which is neither conscious nor verbalisable, automatically determines our behaviour, and, in the long run, it influences our intersubjective abilities. Implicit memory is expressed through preverbal behaviour and emotions, and understood through empathy.

Intersubjectivity and group theory: René Kaës and the post-Koutians

Group theory received the concepts of empathy and intersubjectivity with delay. This happened also because psychoanalytic movements, more inclined to challenging diasporas and institutional conflicts than to a dialog with basic research, tend to auto-referentiality. However, the highly significant models of intersubjectivity proposed

by neurosciences and phenomenology call for a reflection upon this concept and they risk to make irrelevant the psychoanalytic disputes. Kaës (2007) accurately understood the problem. He considers intersubjectivity to be a central point of his theory, putting the focus back on the face-to-face setting. His concept of intersubjectivity, however, abstracts from any kind of behavioural interactions, and it excludes the use of empathy: “When I talk about intersubjectivity, I am not referring to those behavioural interactions between individuals who communicate their feelings through empathy, I am referring to experience and to the psychic reality space that is created by subjects’ relations as subjects of the unconscious”. According to Kaës, intersubjectivity is the dynamic structure of the psychic space between two or more subjects, created and held together by their structuring or alienating reciprocal subjections. He claims that a part of the subject is ‘outside the subject’, that his unconscious formations are moved, exported and stored in psychic places that the group establishes and that subjects use. Hence, the unconscious is not entirely contained within the boundaries of an individual’s psychic space, but it is also in the psychic space of the bond, the intersubjective space. Kaës is therefore interested in the unconscious dimension of intersubjectivity, and he willingly avoid any phenomenological references so to avoid any kind of interactionism. He focuses his attention on the cornerstone mechanisms of the unconscious, repressions, denials, delusions, unconscious desires, and prohibitions. This way, his concept of intersubjectivity is liable to remain anchored to a conception of the unconscious centred on repressions, which badly fits with the current theories of implicit memory and of the causes of neurobiological intersubjectivity – which are more likely to be linked to intercorporeity and to superficial relational patterns. Moreover, it seems difficult to separate the concept of intersubjectivity from that of conscience: even if it is not always a reflexive conscience, intersubjectivity refers to a subjective experience, consciously experienced in the present moment (Stern 2005). The way that Psychology of the Self defined the concept of intersubjectivity is even more interesting. Kohut was against group psychotherapy because he feared the leader’s excessive power and the group lesser empathetic abilities. The work of post-Kohutians has however proved these concerns to be groundless. Harwood, Shapiro, and Paparo pointed out the great importance of intersubjectivity and empathy in therapeutic groups (Harwood and Pines 1998). These authors’ intersubjectivity concept appears to be centred on the subjects’ point of view and on the understanding of subjective experience of each individual in the group. The group leader priority task becomes that of protecting and developing the goals and the expressions of each group member’s authentic self, in front of the pressures applied by the group-as-a-whole. This understanding is essential when a narcissistic wound is opened or a lack of connection appears, because of a misunderstanding or a lack of response towards the needs a patient feels subjectively. In these cases, the wounded member can perceive the relation with the therapeutic group as a repetition of frustrating and traumatic behaviours with the primary group. Intersubjectivity is thus the result of the union of the subjectivities of all the group members and the therapist. Those moments

when bonds are broken, are of great importance in the therapeutic process. They always have to be reintegrated where the original fracture happened. Thus, in group psychotherapy prevails the attitude of preserving the autonomy and the rights of each person, paying constant attention to each person's story and to his or her current experience in the group. The wholeness of the group is instead traced back to the concept of the Self of the group, which incorporates the project, the ambitions, and the ideals of a specific therapeutic community. In this view, the concept of empathy itself is identified with the empathy for the project – with the group as project. This model implies a great attention to the group composition, and it envisages the exclusion of people who are incapable of empathy. The group process remains focused on individual experience, inasmuch as some authors refuse any group interpretation or comment for fear of alienating people in an undifferentiated system. The point of view of Kaës and of the post-Kohutians have the great merit of having reopened the debate of intersubjectivity within the group. However, their perspectives do not take into account the recent research acquisitions of neurobiology and phenomenology. In fact, the former keeps a classical psychoanalytic position, while the latter holds an individualistic view which does not contemplate the group dimension.

Bion's intersubjective soul

The research based on the Bionian approach, focused on the analysis of group thinking, on *reverie*, on transformational aspects, and on the proliferation of basic assumptions. Such analysis provided substantial contributions to clinical practice and to the psychoanalytic theory of groups, but also caused a few misunderstandings. The oneiric view, lacking memory and desire, excludes sensorial and empirical elements from the analysis. Such view promotes a mystical interpretation of Bion's work, which is hardly in accord with the desperate quest for truth and consistency with reality that he has, paradoxically, always pursued. The transformational approach, in its extreme positions, favours instead a hermeneutic and narrative interpretation of psychoanalysis, which weakens the concepts of irreducibility and catastrophe that are at the basis of Bion's thought. A view of the global field that matches its narrative transformations, excludes the dramatic and irreducible aspects of the beta element, which is consequently reduced to a simple sensorial element (Ferro, 1999). This position opens the door to an omnipotent drift of thought which loses contact with reality, especially with the reality of trauma and pain, which is often difficult to report (Rugi, 2002). We must admit that few authors adequately valued the great attention that Bion devoted to neurobiological studies, to the problems of observation, to the use of senses, to the importance of pain analysis. This latter aspect is of great relevance since the attention to actual pain is the very basis to empathetic attitude. As

Basile (2005) said: “the central drive of the Bionian man is not desire, as it was in the Freudian tradition, but is a titanic struggle against pain”. Moreover, Bion’s theory has a deeply relational structure. As in Freud, the “absence of the object” lays at the basis of the development of thinking, but in Bion, the quality of the relation with the absent object becomes crucial. The *alpha function* is then relational since its own origin (Rugi, 1998). Such “absence” is tolerable only when there is enough reverie to allow the development of the alpha function and when the feeling of frustration do not turn itself into panic or ‘nameless terror’ (Bion, 1962). Starting from the primitive relation between the newborn and breast, Bion develops his projective identification model, in which two or more interacting minds are bond through a reciprocal emotional involvement and a primitive emotional exchange. Bion’s model is thus founded on a real intersubjective exchange rather than on an omnipotent fantasy, as in Klein. Consistently, Gallese, Migone, and Eagle (2006), following the embodied simulation hypothesis, hypothesize that projective identification is part of those same automatic mechanisms that modulate empathetic resonance. However, the mirroring model concerns any relation in which there is an automatic induction of what the other is experiencing. By contrast, the concept of projective identification, remains linked to the extinction of primitive death anxiety, while the communicative function only plays a subordinate role. In this sense, it is a distinctively psychoanalytic concept which describes specific clinical phenomena. The mirror neurons theory can maybe make it less mysterious and justify its pivotal function between field theory and link theory, but the communication of emotions remains a more general issue that cannot exclusively be ascribed to an elective mechanism of severe pathologies. Empathy goes through emotion and its expressive movement. A human being is indeed a semiotic entity which can communicate through signals and signs (Peirce 1931-35, Salomonsson 2007). These signals and signs can vary according to the context, but they maintain those invariants that allows us to recognize of the expression of pain and joy in our own kind. It is therefore unlikely that emotions always and exclusively go through projective identification, which seems rather activated in traumatic situations (Cimino and Correale, 2005). As poets have always known – and psychologists have known since Darwin – emotions are transmitted through facial expressions, posture, gestures, voice timbre, and, most of all, through the gaze. It is through the gaze that the bond is maintained, at least in the group. A patient who does not speak, is not necessarily absent from the group, but someone with a blank look surely has his or her mind somewhere else. If we do not notice our patients’ mental escape, we risk of losing them, leaving them alone with their pain. I do not mean that crowding patients is necessary at all times, but we have to make them understand that we bear them in mind, even in their temporary need to withdraw. Sometimes, at the right moment, a simple remark, like ‘where have you been until now’, is sufficient to recreate a contact and to open an unexpected communication channel. However, Bion’s intersubjective vocation is more complex. Differently from Freud, Bion did not believe in introspection, as he did not believe in using his own countertransference. He observed that it is not possible to have a direct relationship

with oneself without the intervention of some sort of physical or mental midwife: “It seems as if we need to be able to ‘bounce off’ another person, to have something which could reflect back what we say before it becomes understandable” (Bion, 1984). This quote could come directly from the mirror neurons theory, which Bion could not know, just like Poe and Merleau-Ponty. Even so, their works demonstrate how they knew what we can define as the clinical and human outcome of this theory. The Bionian model appears closer to intersubjective theory than generally acknowledged. Grotstein (2007) admits that “it comes as a surprise to many that Bion was one of the founders of intersubjectivity”. Nevertheless, the container/contained and the communicative projective identification models, which also take the receiving pole of emotional exchange into account, are at the very basis of intersubjectivity. Moreover, we cannot forget that in order to represent the emotional experience, Bion (1962) used a notation system which was based on the concept of relationship. An emotional experience which is torn from a relationship was inconceivable to him. Bion was not just a mystical thinker. We have to remember that he defined his theory as an observation theory which favoured the use of perception and senses. Unfortunately, in this site it would be too complex to linger over his ambivalence on this matter. “I don't think that we can afford to ignore what our senses tell us, because the facts are very few anyway” (Bion 1983). In his last years, Bion (2005) was obsessed with the problem of how to see the ‘invisible’, of how to hear, to see, to smell, to feel emotionally what the patient is trying to communicate. He questioned himself about how an emotion is transmitted from one body to another or from one mind to another, and what we have to see to become aware of a patient's pain, in his or her body-mind. Anyone working with groups knows that basic assumptions are observable phenomena, automatic behaviours, absolutely evident in group movements. The ‘protomental system’ is after all closely related to body processes (Bion, 1961). Psychoanalysis, with Bion, moves away from the Freudian model and it becomes a deeply emotional experience, which can be even traumatic, in which the understanding of pain, the use of the senses, and empathetic perception become essential. Hence, the problem is to have a method that allows us to work on the relationship between reality and subject, in that emotional field in which the experience of bonding takes place. In this sense, the Bionian model is deeply intersubjective, and the group is the place where the expression of emotions, gestures, and aesthetical perception must be re-assessed.

The post-Bionian perspective

The authors of the post-Bionian era, have not shown particular scientific interest for intersubjectivity and empathy in the group. Neri's study (2002) on pain sharing, as well as Corrao's work (1986) on ‘psicokenosi’ and ‘koinodinia’, are two rare exceptions. These papers recognize the importance of pain and the need of an empathetic harmony in the group, but they appear to detach from Bion's concept of group as they stand alone with their clear perspective. As Corrao says, the remote

origin of the group arises from experiencing tragic events and from people passing away, more than from a collective dream. Furthermore, Corrao also emphasizes the importance of intersubjectivity and empathy. He hypothesizes the idea of some kind of ‘simulation’ of the patient’s experience as a happy theatrical pretence preceding the embodied simulation (Corrao, 1993). In his paper *Theory and procedure of the event*¹ (1985), which is a seminal introduction to the theory of the field, Corrao does not hesitate to put the focus of analytical interest on the observation of events and on the perceptual depth of corporeity: “The essential point is the percipient event, meaning the event at the time of observation, the event made of our corporeal life within the duration of the present”. Corrao (1993) revises Pichon Rivière’s idea of a continuous confrontation between intrasubjectivity and intersubjectivity, and he revisits the spatial metaphor of the cross, where the vertical axis is the individual dimension, and the horizontal axis is the group context. This spatial metaphor, however, cannot entirely picture the real complexity of intersubjectivity in the group. I remember that once, in one of the last sessions before the holidays, some of the patients showed the tendency to idealize the individualistic narcissistic position, pointing out that they felt really well on their own and that they did not need anybody else. Others, on the contrary, idealized the warmth of a united group. The solution came out when Anita pointed out that actually, within the group, she felt like a sphere that overlapped with other spheres: she was herself, but the others were inside her, and she was inside them. She gave a surprising geometrical metaphor of the mental space of the group in which everybody felt present. Gino, who had a good physics background, pointed out that it was not only about mental space, but also about physical space, where there are three dimensions which allow multiple objects to be represented in the same space. Therefore, we can suppose that in a small group the group/individual antinomy tends to disappear in favour of a multidimensional experience, similarly to the one that Matte Blanco (1985) describes for dreams. Group experience could be intended not as a fluctuation between individual and groupal, between multiplicity and totality, but as the possibility to experience a spatial (and mental) dimension which is multidimensional, in which one feels permeated by multiplicity, and totality is perceived as an intrapsychic experience of the spatial configuration that is taking place (Rugi, 2003). The issue does not concern the choice between the group as a multi-psyche mechanism and the group as a totality; the group is both things together. The circular space in the group, triggering mirroring mechanisms, circularity and tuning, contributes to the creation of a shared and multidimensional mental space, which can however go back to being a sum of separate spaces, or which could also completely collapse, explode or gather, like chemical substances. The first transformation, which is at the basis of the group, is in fact the creation of its spatial configuration. When it comes into being in the shape of a circle, space and time actually bend to introduce multiplicity and infinity as possible experiences. The fact that several individuals gather according to a circular

¹ N.d.T. Original title: *Teoria e prassi dell’evento* (Italian only).

spatial configuration, introduces a complex structure in the mechanism of emotional bonds that Corrao (1995) defines as 'polylogic' and 'polythymòs', as multi-personal production of the attribution of meaning and of the emotional bond experience. Each person's identity becomes functional to that of the group, and the continuous state coexists with the discreet state, while relationships are not external to the individual anymore, but they are inside the system. Thus, finiteness coexists with infinity, which is the experience of infinity in progress. Corrao defines it as the experience of 'togetherness', whereas I call it 'the *experience of Pi*' because of its immediate representability (Rugi, 2003). The mathematical constant Pi is a transcendental number which expresses the ratio of a circle to its diameter, which is infinite, just like the relationship between an individual and a group. The value of circumference, the whole, is always more than the sum of the sides of any inscribed polygon, just like the group is always something more than the sum of its elements. The group-circle is the place of where bonds are created, the space where it is possible to have multiple representations, but also the geometrical area that introduces the infinity to us and us to the infinity. It would be interesting to think of this experience as the convergence with the Bionian 'O', intended both as infinity and as a reality. In fact, in the group-circle the presence of reality is impending. Everybody is deep into reality, which appears, first of all, through sensory perception and intercorporeity. Even before words, it is the presence of our bodies that is manifest. Patients can tell us what they are feeling, thinking or wishing, but before they even tell us, they reveal it directly through their behaviour, their gestures, their facial expressions, their body language, and then their language. This is where the expression of pain lies; empathy and intersubjectivity come into play as a means of tuning in with others, based on intercorporeity.

Intercorporeity and surface phenomena

The face-to-face setting, the circular arrangement of patients and the immersion of the therapist into the group field, are key elements of group therapy. Such dimensions grant somatic sensations, visual perception and body language a new and establishing value in the process of attribution of meaning. This aspect has been observed by several authors. Rouchy (1998) underlines the importance of the somatic value of posture, smell and breathing rhythm in the imagery of the body. He also emphasizes the importance of perceiving emotions through subliminal signals, which, according to him, are mostly culturally grounded. Fusini Doddoli (1981) highlights the intense emotional exchange which takes place in group analysis and the emergence of a visually-based way of thinking. Correale focuses his attention on the importance of touch and kinaesthesia in spatial perception. In my experience, group settings imply some sort of sensorial immersion, mostly related to vision, where gestures, gazes, and even words are full of emotional expressivity. Such expressivity, which precedes, accompanies and pursues verbal language, deserves the greatest attention. In fact,

facial expressions, body movements, gestures and even postures, can confirm or contradict the elements of narration, either amplifying or weakening them. Global expressivity finds its strength in the gaze, which expresses, explores, discovers and reveals emotions all at the same time. Like everybody else in the group, the therapist experiences this sensorial immersion with all his or her sensory potentials, both the conscious and the unconscious ones, and with all his or her senses. Gaze is the primary tool to get the essence of emotional expressivity and to feel the coming-and-going from the internal to the external world and the circularity of the relationship in the *hic et nunc*. Eye contact allows us to detect even the smallest emotional reaction of other group participants, and it also allows others to detect our reactions. Sometimes, the most relevant aspect of a long narration is just the strange and unexpected emotional reaction observable in the listener's gaze. The gaze holds the collective point of view that gathers all the different perspectives in the group. It is the 'Aleph' point, that Borges would describe as the point in space containing all other points. It is the place where all the places on earth meet without mixing up, and where they are seen from all possible points of view. Thus, the gaze is a powerful tool, which allows us to get the simultaneity of events and, at the same time, their plurality of meaning. However, sometimes the gaze should be diverted, instead of imposed, it should be used to caress rather than to penetrate, it should not be persecutory. The pivotal point of Bion's theory, which he already formulates in his work '*Experiences in groups*', is the 'here and now' of the analytical relation, which provides a greater sensitivity to different forms of communication. Lichtemberg (2005) claims that 'the message contains the message', while Boston and colleagues (2007) sustain, quite radically, that psychoanalysis reverses the concepts of surface and depth. According to them, psychoanalysis put abstraction before interaction, and the symbolic/semantic level before the emotional/interactive one. Such replacement implies that what is observed in relational transactions equals what is on the surface, while the idea of depth is confined to abstract verbal interpretations which are far from experienced reality. Nevertheless, the elements of the interactive process like gestures, vocalizations, silence, and rhythm, are the very foundation of implicit deep knowledge, which modulates our way of being and of interacting with others. Communication, mutual understanding and the attribution of meaning are firstly based on the very phenomenon of inter-subjectivity, rather than on cognitive processing. This process of emotional and pre-categorical interpersonal tuning is carried by inter-corporeity, defined by Tronik as states of connection. Attribution of meaning becomes a shared interpersonal process, or even a co-creation because it is a continuous progression that does not require any pre-established meanings. It derives from those interactive processes and emotional exchanges between child and caregiver, which can be investigated both at a phenomenological level and at neuro-anatomical and neurophysiological level, by means of neuroimaging techniques. Even if it is not like Peirce's man-as-sign, it is quite close to it. Even if it is true that the man is becoming transparent, his vitreous, glassy essence is not based on words, as Peirce claimed, but rather on a neutrally based emotional resonance. This

resonance makes us all alike, allowing everybody to share emotional states and meanings. This is particularly true for pain. Although recognizing and receiving patients' pain is a essential moment in the psychoanalytic relationship, psychoanalytic theory and practice have underestimated its importance. Assuming the position of 'losing sight', psychoanalysis seems to have ignored the semiotics of pain, which is very much based on empathetic perception. Empathy, which allows us to experience others' emotions 'as if' they were our own, is a process founded on perceptual modalities. Psychoanalysis, however, has often underestimated the importance of the expressive aspects of the message, putting instead more emphasis on a supposed latent content, which is linked to something else, like repressed desires or child fantasies. The metaphysical assumption that there is always some hidden meaning behind the manifest content of a message, is still a central concept. A less dogmatic and more scientific approach, should necessarily focus on the insightful analysis of the expressivity of language and signs in general.

Connections

For some authors, the roots of intersubjectivism trace back to *postmodern*, that movement which started in the sixties-seventies as an architecture style, and soon influenced the fields of art and philosophy (Eagle, 2000). Such a multifaceted movement has been difficult to define. The most common interpretation of this complex and ill-defined movement, is the philosophical one made by Vattimo (1985). His vision is based on Nietzsche's notion of the dissolution of the concepts of truth and foundation, in the Heideggerian assertion of the epochal character of Being, and on the crisis of the Hegelian concept of history as progressive development. These assumptions, which is rather oriented towards the origins, deny the reductionist perspective of Modern as *Novum*, which is typical of the artistic avant-garde. Nietzsche's philosophy of morning is not oriented towards the origin and the foundation anymore. This vision reappraises the richness of concrete reality and the value of proximity. It also highlights the thought of wandering, which merges truth and falseness, reducing the world to a tale, in which the escape from metaphysics loses its characteristic critical unmasking. The similarity between some of the aspects of the postmodern movement and some of the current psychoanalytic views, causes the crisis of the "core of the traditional theory" founded on the illuminist vision of psychoanalysis. According to this traditional vision, learning some hidden or repressed truth, causes the identification of the self-illumination with the therapeutic process (Searle, 1998). In Marzi and colleagues' radical criticisms (2004), the renunciation of the possibility of understanding the truth in the other's mind is interpreted as the loss of any possibility to gain an objective knowledge in psychoanalysis. These authors combine artistic and psychoanalytic postmodern movements in a heavily decadent framework, in a epistemological and clinical *pastiche*. In their opinion, "the other's mind loses its statute of definite and

differentiated object of knowledge in order to assume the role of an everchanging object, which is continuously re-narrated and redefined from interpretative constructions". Postmodern assumptions would therefore lead to the loss of the private dimensions of the Self, centred on appearance and objectivity of knowledge, which traces back to "something which is socially built through language". Actually, epistemology and science have long since stopped pursuing objective knowledge, and the Enlightenment metaphor does not enlighten psychoanalysis anymore than the rationalistic paradigm of Enlightenment. The fact that intersubjective knowledge is mystified with a linguistic construction, creates several doubts about the type of criticism they moved to the postmodern movement. The very appropriateness of the use of philosophical categories to define the new course of psychoanalysis, is also a matter of debate. Freud's reluctance to use philosophy, is evidence of his prudence and his epistemological coherence, without which there is the risk of confusing different levels of conceptualization. On the one hand, the concepts of intersubjectivity and empathy have a strong philosophical connotation indeed. On the other hand, neurobiological research can influence philosophical thinking, as it already happened with other scientific discoveries. As Gallese points out, the mirror neuron theory is very coherent with Merleau-Ponty's phenomenology. However, the relation between science and philosophy is actually so complex, that all views, like Lyotard's (1979), which sees philosophy as an attempt to legitimate the 'rules of the game', do not seem convincing. Usually, science and philosophy follow separate paths. Science does not seek his legitimacy, but it seeks concordances and synergies. The individuation of a common neurophysiological basis for intersubjective phenomena, has nothing to do with the pursuit of some philosophical foundation, nor with the great tales of modern times, their end, or Nietzsche's Death of God. Mirror neurons are not a vision of the world, nor an ideology. They are not a metaphor, as someone claimed, but they can help us understanding how metaphors work. In this sense, mirror neurons are closer to a fact than to a philosophical concept. Even if facts are backed up by theory, we have to keep in mind that we are dealing with different levels of abstraction, and that we cannot compare a physiological process with a vision of the world. Obviously, mirror neurons are 'mute', and as such, they need to be included in a theoretical framework; this is not because they have to be legitimated, but so they can acquire some meaning. Current neurophysiological and psychoanalytic research, is more oriented towards the thought of Kant, rather than Nietzsche's or Heidegger's. In Kant's mind, to think means to interact, in the most straightforward way, with things and structures belonging to the real and natural world. Along this line, which could start with Aristotle, we meet Merleau-Ponty's phenomenology and Wittgenstein's linguistic games as forms of life. Such philosophical positions are characterized by a strong criticism towards metaphysics and by a rapprochement with phenomena and things as they are experienced. The loss of objectivity is not a catastrophe, as feared by postmodern critics, nor it forces psychoanalysis to nihilist positions. It rather forces us to reconsider ourselves as a responsible and integrating part of the learning process. The renunciation of

objectivity as neutral and de-contextualized knowledge, does not imply that our assumptions on the mind of the other lose their value of truth or falseness. It simply means that we are involved in it. This is what Bion states in *Transformations* (1965):

“In psycho-analysis, any O not common to analyst and analysand alike, and not available therefore for transformation by both, may be ignored as irrelevant to psycho-analysis. Any O not common to both is incapable of psycho-analytic investigation; any appearance to the contrary depends on a failure to understand the nature of psychoanalytic interpretation”.

The current turning point in psychoanalysis is based on the crisis of western metaphysics, which, in the philosophical field, had a long incubation period, and that only later on involved neuroscience and psychoanalysis, sweeping away Freud's meta-psychology. This turning point, which is postmodern, or, as I prefer to call it, phenomenological, has deep implications for psychotherapy in general, and for group psychotherapy in particular. Firstly, there is a recovery of *evidence*, which is the reality of phenomena and people in their individuality and in their ways of acting within an interpersonal relationship. Secondly, there is a deep reevaluation of emotional life, sensory experience and empathy, which are related to the dimension of “being called in (or even observed) and to answer for something (which is not far from being responsible for something)” (Boella, 2006). Finally, there is a reevaluation of the world of appearances, in which everything has its own way of being discovered and of transcending its own appearance. The phenomenological position is based on the principles of evidence and transcendence and it basically implies an attitude of trust towards things and persons which are accepted in the way they are offered. All of this needs the passage from a culture of suspect, which derives from western metaphysics since Plato's mistrust for images and senses, to a culture of respect. Like philosophy, psychoanalysis kept a radical mistrust on the sensible world and its manifestation, and, more in general, on common sense, such that psychoanalysis itself supported the culture of suspect and in which also Freud took part (Ricoeur, 1965). In his reevaluation of phenomenology, De Monticelli (2003) considers respect as the founding element of moral knowledge and the threshold of ethics, because it implies value and dignity of a person as such. Respect in psychotherapy implies more listening and acceptance, than explaining and interpreting, more empathy than neutrality, more moments of gathering and conscience expansion, than frustration and distance. The very construction of meaning is brought back to the world of the visible, or, more appropriately, to the world of *aesthesis*, sensoriality and images, rather than to the world of meta-psychology (Borutti, 2006). As for the issue of pain, we have to refer to Wittgenstein's late work. The philosopher from Wien attributed the emergence of pain and ‘absolute suffering’ to the problem of ‘mechanization’, intended as the depersonalization of the western man. When he tried to make it up to what he thought were the ‘severe mistakes’ in the *Tractatus*, he focused for a long time on the scream as a primitive expression of pain. Without screams, language would be just a private phenomenon. A scream cannot lie, while language can!

However, Wittgenstein (1953) did know that “is not so simple to represent the pain of the other according to the model of one’s own pain: I should represent, based on the pain that I feel, pain that I do not feel”. These are the basis on which Wittgenstein built his criticism on western metaphysics and on psychoanalysis. He developed a pessimistic idea of language, highlighting his gestural and physiognomic dimension which allows a better understanding of affections, emotions and feelings which are incorporated into language itself. According to the late Wittgenstein (1980), “the content of experience is the private object, the sensory datum, the object [Gegenstand] which I can immediately grasp through the eye or the ear”. Therefore, the content of an experience is based on its “specific expression” and the separation between substance and form disappears. Even thinking and linguistic gestures are generated from those multiple connections linking new expressions with other aspects of life and with our environment. The cause of the unification of cultural and social perspectives is not a set of universal rules, but it is the unique, individual, inexplicable expressivity which originates from every new linguistic gesture. Sources of these connections are the pathos, the experienced atmosphere of meaning, the rhythm and the gestural dimension of words. Verbal expression contains an autonomous, immanent meaning, which is deeper and more original than any explanation or reason. Moreover, meanings, affections and emotions are not translated into language, they are already incorporated in it. The expressivist conception of the late Wittgenstein presents language in all its importance as a global medium, where affections, scents of passion, rhythms, tones, inflections, and body-language, contribute to the construction of word meaning. Such expressivity is caught in its immediateness and it does not need either to be translated, nor to be associated to something else (Gargani, 2008). The immediate understanding “through the eye and the ear” echoes the phenomenological approach and it is consistent with the recent developments of neuroscience in which intersubjectivity is at the very basis of communication (Stanghellini, 2006). Such intersubjectivity permeates those interpersonal tuning processes based on intercorporeity. Relational experiences are primarily founded on the ability of “feeling” the other through sensory, emotional and empathetic perception in which the resonance between bodies and affective tuning comes to life. In such process, *the ability of sharing the experience of pain* is a central and enigmatic experience. Religion and philosophy have always claimed that the ability of not being indifferent to peoples’ suffering is the real foundation of every ethical concept and the natural glue that holds every society together. The experience of pain in ancient Greece is first and foremost defined as *pathos*, like suffering, which is immediately identifiable as pain. Greek pathos is a mix of empathy and compassion. Within the great tradition of pity, as well as in the philosophy of Hume and Rousseau, pain appears as a basic experience in the passage from the Ego to others. For Schopenhauer it was the very means to reach the deeper meaning of Being. However, it is through phenomenology that this assumption reaches its highest point, when the focus is moved from Being to objects and phenomena as they appear and to how we experience them. In agreement with the Aristotelian view,

phenomenology returns to experience and to actual things, trying to avoid being trapped in that abstract reflection which is typical of the Platonic tradition, and in the elsewhere of western metaphysics. According to phenomenologists, intersubjectivity takes place through the direct perception of other people's emotional life. The connection between me and the other has its foundation in the possibility of identification with the body of the other through an immediate perceptual bond. It is the concept of "flesh" as body (*Leib*) that places the body right in the centre of the issue of intersubjectivity. Husserl's analysis of this notion (1950) allows the flesh-on-flesh resonance. The idea of flesh as the foundation of intersubjectivity is further analysed by Merleau-Ponty (1964), who claims that intersubjectivity is intercorporeity, and it is based on the concept of *chiasm*. "Things pass into us as well as we into things. By a sort of chiasm, we become the others and we become world" (Merleau-Ponty, 1964). Merleau-Ponty's subject is deep into the nature that flows into him. He does not look out, he has a typically empathetic structure, and the Ego-Other relationship is based on the belonging to a single flesh of the world. The idea of field is revised by Merleau-Ponty, who defines it as chiasm, as co-belonging to that flesh dimension, element of Being, in which subject and object melt, where to perceive and to be perceived intertwine. This is where intercorporeity has its roots, where emotions and feelings play a key role, where we can trace the origins of Bion's protomental system and concept of field. This concept does not associate the new psychoanalysis of empathy to a radical subjectivism, but it grounds psychoanalytic experience in the dimension of the field, where the individual is immediately placed in an interactive interdependency with his physical and social environment. Our body does not give us an intellectualist or objective knowledge of this world, of which it is a part of. Rather, it is a prelogical knowledge, which begins with our diving into Being, in a relationship of empathetic resonance between our internal and external elements. Merleau-Ponty sees metaphysics as a 'naïve ontology', and he reverses the Platonic structure that claims that the sensible world derives from the tangible world. He considers the relationship between sensible and intelligible world as the same relationship that there is between the visible and the invisible, in which there is no radical difference or opposition of characters, but rather a relationship of mutual involvement and exchange of chiasm. The visible and the invisible, the conscious and the unconscious are not ontologically heterogeneous; they mutually overlap. The unconscious is not the absolute opposite of the conscious, it is its overlapping edge or including space. Merleau-Ponty's subject is on the edge of conscious and unconscious, at the borders of these concepts, like a 'zip': "This unconscious is to be sought not at the bottom of ourselves, behind the back of our 'unconscious', but in front of us, as articulations of our field" (pp.180). For Merleau-Ponty, surface is not superficiality: "But what is proper to the visible, we said, to be the surface of an inexhaustible depth" (Merleau-Ponty, 1964 - pp.143). The empathetic experience is an experience of co-belonging to the flesh of the world. Thus, in its phenomenological view, the field dimension and the experience as empathy overlap. This chiasmatic-empathetic view is consistent with the views of revaluation of the senses, of

empathetic communication and corporeity formulated by G. Bateson, F. Varela and J. J. Gibson. The surprising convergence of phenomenology and neuroscience pointed out by Valera (1991), has become a relevant topic with the theory of mirror neurons, which sets the biological basis of intersubjectivity and social cognition. Just like phenomenology, neuroscientific research shows that the foundation of intersubjectivity lies within our own flesh, in the matter we are made of, grounding the basis of social interactions in the *physis*, providing new visions for the comprehension of mental diseases.

To conclude

Quite possibly, the issues I have raised are more than the ones I answered. Therefore, I would like to conclude with the attempt of recreating a stream of thoughts, starting with the issue about the compatibility of the field model with empathy and with the biological theory of intersubjectivity. I remember that Teicholz (1999) points out the difference between interactive, interpersonal and intersubjective, and between mutual regulation and mutual recognition. She suggests that if almost all analysts see themselves in an interactive model and allow some kind of mutual regulation, the concepts of intersubjectivity and mutual recognition imply a certain kind of pre-verbal connection and a process of mutual tuning. Furthermore, Tronik (2008) shows that it is indeed during the precocious child-mother interaction that the processes of development and growth start taking place, thanks to the possibility for the baby to share and expand his or her unconsciousness with his or her mother. Communication, understanding and attribution of meaning, even before being based on cognitive processes, are based on intersubjectivity, which implies an emotional and pre-categorical tuning with others through intercorporeity. Intersubjectivity is hence linked to pre-verbal phenomena, like tuning, empathetic resonance, and the understanding of our own and of others people's emotional states. It is a 'basic' phenomenon which is at the very roots of communication: it is what makes it possible. It is based on direct, automatic and 'embodied' comprehension, which is, paradoxically, more objective because it is continuously monitored thanks to the feedback of expressive adjustments. To rely on empathy and surface phenomena, entails a very low risk for the "analyst to focus only on self-exploration". This would be implicit "in a kind of intersubjectivity and interactionism which is full of self-disclosure, anti-authoritarianism and colloquialness which is dense with empathy (or maybe *empathism*)."

(Marzi et al., 2004). From these observations, it is possible to sense a certain fear of 'polluting' psychoanalysis, the fear that by taking away its 'depth' and 'interpretative power', the concepts of unconscious mind, neutrality, transference and countertransference, can disappear in the 'mist of the field', depriving the clinical experience of its specificity. However, the field model arises indeed from the need to widen the relational point of view, without losing sight of the

historical perspective and of the theoretical sedimentations that preserve the depth and the peculiarities of the analytic experience. The object of analysis preserves or even reacquires its specificity – a person's suffering and unique experience – which, even if only as a 'shadow of the object', pre-exists and resists to the relationship. In this sense, there is no contradiction between empathetic attitude and field theory; on the contrary, one introduces the other. Bion's attention to emotional experiences, pain and empathy, could only lead to the idea of field. It is above all thanks to Bion that we stopped preferring interpretation to containment of split and projected parts of the patient. Ogden himself suggests to refrain from the interpretation of split and painful parts. He states that the therapist has to live with the patient, be with him and feel his emotions. He has to stay with the feelings he generates, without sending them back as interpretations. To favour the phenomena that take place 'here and now' at the expenses of historical and instinctive reality, does not reduce the field to a two-dimensionally flat and auto-referential system. On the contrary, it compels both the patient and the therapist to pay more attention to those phenomena which are internal to the relationship, and to feel the responsibility of a relationship which is in the field and which brings about the echoes and the weight of history and context. Every group therapist understands the importance of circularity, perception, the use of the senses, and corporeity. The circle defines the space of the group in which people can share, it creates a place where the mental life of the group comes into being. The patients can look at each other, and others, like the therapist, can look at them, in a game of circular reflections that sets the spark of that multiple vision establishing the group. People do not look outside, but inside, into a multiple mirror, which not only reflect, but also absorbs, as an efficient container. It creates a multidimensional space in which external, internal, individual and group elements continuously mingle and compenetrates each other, as in the Möbius strip. Mutual reflections multiply a person's image, creating a kind of dizziness that is sometimes depersonalising. However, it is in the other group participants that the subject sees himself, and it is through the others that he finds himself again so he can rebuild his shattered and refracted image. Entering a group can cause depersonalisation issues, but in order to preserve and regain our own sense of identity and cohesion, we need to meet the gaze of the other participants and to feel welcomed. Without a continuous input from an intersubjective structure, human identity dissolves or loses its shape.

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