

# **The Missing Boundary: a Report on “Photolanguage” Experiences**

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## **Abstract**

Purpose of this article is to elaborate on the “Photolanguage” psychotherapeutic group technique and to report the results obtained during a set of experiences made in National Sanitary Service Institutions. Before the actual analysis of these results it is necessary to introduce a series of general considerations about the institutional context, about the patients cured within this context and about the technique itself.

**Key Words:** Photolanguage, institutional contest, meeting, separation.

## **On the Institutional Context**

Every psychotherapeutic technique needs a setting, which can be defined by its exterior and interior characteristics. S. Freud, after having initially found his setting by following the need to create the right environment to induce hypnosis, later defined the analytical setting as a dream-like environment. As Freud's goal was to explore the inner workings of the psyche, when he discovered that the dream could open the way to the subconscious mind (whence he thought psychic disorders originated), he organized his setting to recreate as closely as possible the dreaming state. Taking these considerations into account, the setting was to reduce to the minimum all the external influences (creating space and time stability) and create a situation of “sensory deprivation” to emulate the conditions under which dreaming occurs (hence the soft light, the bed, and the therapist behind it). The technique itself likewise revolved around the concept of dream. Free association could reveal the workings of the primary thought, which is the language of dreams, while the therapist had to keep a “free-floating attention” (as part of the inner setting, ie the therapist's mental and emotional state, which we will not further explore in this article). In short, every aspect of the setting was aimed at recreating the dreaming state. This type of setting is the same that it's used today in both individual and group analytic psychotherapy. The only difference between the group therapy and the individual one lays in the sensory deprivation. In the group setting the sensory deprivation is definitely missing and, on the contrary, the circle of people observing each other generates an hyper-stimulation of the senses.

When the psychotherapeutic group is formed in an Institution, it's important to take into account the environmental factors (as they partially define the external setting), and the Institution's expectations as they will modify the therapist internal setting and hence the therapy's final results.

The relationship between the psychotherapeutic situation and the institutional context

can be pictured, as A. Correale suggests, as a Gestalt image, in which the background and the human figure can both assume the central role, depending on the observer. Only by considering both point of views it is possible to obtain the whole picture.

It is therefore important to remember that therapies within Institutions unfold inside a double box: the setting box determined by the specific therapeutic procedure and the institutional box. The groups are to be treated similarly as they are cured both within the psychotherapeutic group and within the institutional group, of which the therapist is a member. Thus is explained the importance of relations between the psychotherapeutic group and the staff of the Institution.

### **On Patients**

The technique was tested on patients affected by psychotic disorders and drug addicted patients. The loss of boundaries experienced by psychotic patients has always been responded to by the use of the “straitjacket”, an artificial boundary, an extreme and cold holding embrace imposed by society – a picture still engraved in collective imagination. But it also means a loss of boundaries between the Self and the Other, a loss of perception of one's own interior skin. Thus, the term “missing boundary” when applied to psychotics identifies the absence of a boundary of identity and reality.

For drug-addicts boundaries are missing between pleasure and sorrow, in the difficulty to separate pleasure from horror and pain. The boundary that is then missing here applies to the perception of the Self.

### **On the technique**

According to “Photolanguage” the setting should be a democratic environment, meaning that the therapists participate as peers to the patients, bringing their photographs and psychiatric material and by sharing the boundaries. Rules are hence carried out through a model which is representative of the experience and deprived of persecutory elements. The maternal skin is experienced through the photographic medium and the context of the setting, and hence identified in the skin of the group.

The main feature of the Photolanguage technique is the use of photographs as the exclusive mean through which communication occurs. The technique directly connects to the senses and the body thus becoming the keeper of an inseparable bond with affection. It therefore becomes a natural forge of new thought connections whose creation is the goal of the therapeutic procedure of elaboration. (De Maria, Romeo Cungi, 2004).

This technique was invented in France in 1965 by two psychologists who intuitively proposed the use of photography as a communication catalyst among a group of adolescents. Then later, some 15 years ago, Claudine Vacheret elaborated a methodology for a group technique to be used for formative or psychotherapeutic purposes (**cf** Bibliography).

## **Preliminary Considerations**

We are driven by the idea of suffering and absence of relations, of contacts and maternal reverie, in short of the elements capable of creating a “matrix of the Self”, which is necessary to transform beta elements into alpha elements. The boundary therefore lays in the thinkable, in the conceivable. The institutional context can either be able to actively support these experiences or not, and that depends on whether it's able to act as a catalytic element and stimulate the psychic capabilities of the individual. We are specifically interested in considering how a psychotherapeutic technique, conducted by a group of operators (in our case the operators are part of the same staff tasked with the cure of the patients), can alter the psychic boundaries differently damaged by psychosis and drug addiction.

In other words, what happens to the “missing boundaries” when the curing group more directly and “personally” interacts with patients within a specific setting?

## **Sessions Review**

The participants to the first examined group are patients of a mental Institution affected by psychosis. We examine the last session of a year-spanning series. The subject, “We talk about the shared experience with a photograph”, was meant to stimulate the group into reflecting about their concluding journey. The session starts with a photo of some children playing some ability game. This picture brings forth all the aspects of group participation. But as the pleasant aspects of the group game emerge, so does a definitely less pleasing understanding of how confronting other people often rings of undertones of intra-psychic and inter-personal conflicts. The second presented picture features an empty bench – here the group is represented as feasible space, perhaps a potential space. The illusion of symbiosis is therefore relaxed and this representation of the group allows to perceive diversities and to experience the Self as a separated entity, hence perceiving solitude and the existence of a boundary. The possibility of progressively modifying the distance kept from the contact experience becomes now feasible. The element of duality and multiplicity becomes representable. But although an open space delineates a thinkable potential element (like a distance from the Other allows a conceivable and possible relationship), on another hand the perception of a void brings forth a feeling of falling. The group is then confronted with the fear of falling by a picture of free falling parachutists. The possibility of crossing the emptiness without fearing death is presented to the group by picturing the parachutists holding hands together. By association, the group is led to formulating comments and picturing images full of multiplicities and diversifications. On the edges of this group representation lays a single patient, whose thoughts seem to be blocked by the fear of emptiness, showing a photograph of a stone mask. Behind this mask, as he hints, is concealed his real Self. The group acknowledges his difficulty as a manifestation of a common characteristic, of the necessity of holding on to possible boundaries, imposed by the fragility of the vital nucleus – threatened by

diversification and development. When a member of the group suffers and feels the need to quit, the others are presented with the opportunity to confront their own limits. If these are reconsidered within a shared affective ambient, they do not present themselves as persecutory elements but as newfound boundaries of the Self.

The next picture, in which some workers are moving wood boards together, for they are perhaps building a house, underlines the hard work required to create bonds, but at the same time shows the warmth generated by the pleasure of building something together. The theme of construction is further explored in the next picture, which shows a house yet to be completed.

The last photograph, showing a young woman with an empathic face, could well represent the status of the group, for which suffering is a tangible limit to what is shareable but is also a common denominator that helps the formations of bonds, on the foundations of which is possible to build something together.

The same theme animates the last of another series of “Photolanguage” sessions, concurrent to the previous, to which the community operators of the same mental Institution participated as patients.

The first discussion revolves around money as a bearer of possibilities. From various comments emerge an utilitarian consideration of money and work. The relation between the exterior and the interior of the individual is not explored, and there is a common tendency to take distances and objectify. The group debates on what they are doing and what they had done in the past; they analyze the quality of the instruments previously used in their work environment, and manifest some curiosity towards the “Photolanguage” technique (for it is the currently used instrument) although comparing it to a machine. It seems like there is a need to set a boundary made of cold instruments, deprived of any affective attachment (money, machinery, etc). It could be a defensive boundary against what Gaddini calls the “integration anxiety”. When the group is invited to concentrate on external and alien pictures, aggressiveness rises. A picture of a kitchen, as a place where many ingredients are mixed, creates a temporary openness allowing to begin to metabolize emotions and restart the affective circulation. The same picture gets however immediately vilified and attacked, showing a certain degree of fear towards the possibility of sharing. Emotions connected to roles permeate the group and some refer to the kitchen as a realm of directors, the place where to weave communicative and affective threads. Someone even goes as far as to elaborate on the risks of relationships. When the group is presented with a photograph of a spider web, it becomes apparent that the “directors' kitchen” is not considered a peaceful place by everyone. Many elaborate on the web and someone underlines the risk of getting caught in the communicative and affective web of the group, while others debate about the spider's need to create traps and snares for his own survival. But that consideration does not tone down the persecutory feeling and the anxiety that permeate the group, both derived by the persecution associated with directors. This is the most difficult moment

for the group and the intensity of the anxiety is still tangible even when reviewing the material of that last session. The last photograph shows a mask which, by association with the masks used in Greek theater, seems to assume the role of a protective, yet communicative, element. It is apparent that within this group of operators, a sample of the current state of the institutional field, the main thread features a constant alternation between contacting and distancing, as the group continuously struggles to define a boundary for relations.

We continue our sessions analysis by examining two other experiences. These are not concurrent in time but consecutive, and they were made with the same group within another sanitary institution, this one devoted to the treatment of drug addicts.

The first session we chose to examine declines the theme of the **meeting**, and the question “Let's talk about how we feel tonight” contrasts with the **separation** theme, examined in the next session and already introduced by the previous groups. The first photograph again pictures three workers moving wooden boards. The proposer of that photo says: “Here comes the actual work” and another member of the group asserts that perhaps working together may be easier. The group again considers how hard work can be, even if the goal of the workers is seen as the construction of a bright house. But from newly cut wooden boards many things may come. They represent raw (not recycled) material which can therefore open new possibilities. With hard work hence comes, represented by the imagery of new materials, the possibility of a new group, a rebirth, which can become a new Self-Object if actively shared through affection. The next photograph pictures an unfinished yet bright house. It is then followed by the image of a dive and of the air bubbles rising back to the surface – representing how escaping and breathing again is possible. The claustrophobic connotations of a previous symbiotic contact is now reconsidered through the concept of emersion. One of the patients remembers when he as a child risked drowning – the claustrophobic feeling is back, and so is the fear of death. It seems like a conflict exists between a search for a fusion and the fear of contact, or rather fear of intimacy, a boundary that is lost with drug addiction. By association comes the consideration that inside the uterus the fetus does not breath. It's a situation of total dependency, and that can create a persecutory and terrifying image. This difficulty to gain independence is further explored by another patient. He elaborates on how only train drivers know how to operate trains on railroads without needing any signs or indications. This seems like a way to express the relation between the clear direction of directors and the psychic loss of all direction within the group. A dive, if one is aware of not being able to proceed alone, can therefore allow to perceive dependency, the boundaries of the Self, and at the same time the conflict arising by the need of someone else.

It is now possible to leave a timeless dimension and explore the psychic group dimensions. The next picture, showing a teacher in what the group perceives as an Islamic school, a potential school of terrorists, brings forth an aggressive terror in the

group, a fear connected with feelings and considerations on poverty and ancient deprivations. The speakers in Hyde Park come to mind, for they represent an expression of free speech. The group wonders if the constructive aspects will prevail on the terroristic ones or whether they already are stronger. The dependency on teaching can be shared and elaborated, so, following this thread, the group comments on a picture of a mother and a child drawing together. Some recall the infantile incredulity to the idea of a perfect family, perceived as unreal. Even though the photograph is in black and white, some are able to imagine color, and that stimulates the discussion. Creativity can pave the way to the overcoming or a confrontation with the theme of truth. Idealistic representations (false Self) and representations of contact and group belonging (maturative dependency) continuously alternate. A photograph picturing a flight of birds points out the tendency of the group to oscillate between the dangers of separation and the hope of forming a migratory group. References to the well-known Hitchcock film put into words the current anxiety. Further references then point to an inner desert, to a conflict arising from the possibility of being and growing. A connection is made to the "Polo delle Libertà" (an Italian political faction), maybe an opening to the possibility of dialectic relation between the patient pole and the director group pole. Patients externalize their desperation and fear while operators manifest hope and extend an invitation to trust them. The alternating of these two vertexes feels like a spinning loom, weaving a new psychic fabric of relations. One of the directors then announces that time is almost over and the remaining photographs will be only shown but not commented upon. The boundary created by the "Photolanguage" allows to express a final thought on this session. It is in the last photograph, a mess hall, a place where people can meet or alternatively remain alone, that the existence of a journey, in which the individual and the group, the Self and the Other coexist, is proposed.

The other session of this group we examine revolved around affective attachment, considered from the perspective of the loss of the object of the attachment. The question was in fact: "What happens when we are separated from a person we love."

The session starts with a dipole. First a picture of an explosion of fireworks represents what happens on the loss of a loved one that was acting as a container, as a skin for the Self, containing all the emotional elements. Then the implosive picture of a child, laying on the sand among some dunes, who seems to be crouching without any energy. It is then followed by a photo of an old astonished man who seems to be intensively reflecting, so the group proposes the possibility of reflecting on pain, hence activating another oscillation – between the rigid defense constituted by not allowing the separation, and the concept of separation as a rebirth, as a new beginning. Then a picture of a belly of a pregnant woman on a black background takes the session to its most significant and profound moment. The extreme search for a contact that could act – through the extreme regressive identification with the fetus – as a boundary of the abyss within the Self, the "black hole", is similar to the continuous yet ineffective sensory

fulfillment of drugs. The last photograph takes the role of a reassembler for what had initially exploded. This recomposition is represented by a group of peers enjoying themselves, indicating how horizontal relations, sources of pleasure without addiction, are a possible nucleus for new boundaries of the Self.

### **Final Remarks**

The therapists group in an institution acts the same role towards the patients they cure and towards the institution that allows and embrace the creation of the group itself, because it makes for a regeneration of bonds and exorcises the fear of the new and of transformations.

Recalling the considerations we made at the beginning, if we consider how the group of patients with psychotic disorders and the community operators group can be symbolized by the empathic woman of the last photo for the patients group and by the mask for the operators group, we can conclude that this type of setting makes for an easy circulation and exchange of person roles and “characters” roles (1).

Using the same analogy for the drug-addicts group, we have on one hand the picture of the mess hall, while on the other the image of the peers, and the comparison of the two leads us to believe in an evolution, or an oscillation, between an oral and an adolescent dimension.

It therefore seems that a setting in which the interaction between staff group and patients group is direct, personal and methodologically organized, reduces the rigidity of the boundaries between sane parties and ill parties, producing an increase in motions towards identification and evolution.

We can also ask ourselves what kind of correlation exists between the missing boundary in our patients, (the cohesive boundary of the Self), and the limits posed by the institutional assets – those explicit and implicit limits we are forced to confront when operating. When an Institution decides to form a new psychotherapeutic group, it breaks a previous boundary – it breaks a representation of some known given cure. It also breaks the subjective individuality of suffering and returns the suffering individual to a group to which he belongs. The definite boundaries created by Photolanguage open the way to a regenerative transformation, which proposes a breaking of limits within the individual and group sustainability. The intermediary object, in fact, allows to modulate the experience under the present emotional capabilities. The institution suffering from a crisis finds his limit and seeks, in the creation of a therapeutic group, a larger boundary that could contain even its most suffering and marginal parts.

- (1) We are here referring to the concept of “character” as it was proposed by J. G. Badaracco, who conceptualized the evolution of psychosis as the evolution of a “character” covering the actual person.

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