Psychoanalysis and the third position: social upheavals and atrocity

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Summary: This paper develops how psychoanalysis can represent a third position in relation to regressive processes on individual, group, and societal levels. A model for rethinking individual and collective traumatization is proposed where relations in dyads, groups, and relation to culture/discourse are developed implying a mediating, potentially socially healing function of psychoanalysis.

Abstract: Many situations are now characterized by breakdown of order and structure leaving people at the peril of unorganized forces (war-machines, human traffickers etc.) with dehumanizing of ordinary people on a mass-scale as consequence, especially in the refugee field. The paper focuses how alienating discourses on "trauma" and societies neglect of traumatized people increases suffering and have grave consequences for coming generations. It is reflected on which ways psychoanalysis may represent a mediating function in relation to regressive processes on individual, group, and societal levels. A conceptualization of a third position from which psychoanalysis can work is developed. The third position is seen as inevitable in psychoanalytic clinical work in that symbolization and working though must be anchored in a common cultural discourse. A model for rethinking traumatization is proposed that develops the conception of the third position in relations to a broader filed and encompasses the subject's relations in a dyadic, bodily-affective relations, in relations to the group and family, and in relation to culture and discourse. This model may lay ground for an understanding of how atrocities, social catastrophes like collective traumatization can be worked through on individual and social levels. Clinical examples are presented to illuminate these processes.

Introduction

We live in a time marked by impending catastrophes: climate change, food crisis, pandemics, wars, political tensions between countries with threats of war and a massive proportion of people displaced from their homes due to war and persecution now around 100 million (UNHCR, 2022). The situation is characterized by extreme uncertainty when writing this (June 2022) especially due to the war on Ukraine. Large groups, nations, ethnicities, sub-groups within a nation are under pressure and anxieties are causing instabilities and group regressions.

Group-anxieties may take basic assumption forms (Bion, 1952, Hopper, 2002) resulting in conspiracy theories where others/strangers are seen as threatening large group identities (Volkan, 1997). Conspiracy theories can function as organizers and rigid containers for these anxieties confusing the distinction between imaginary fears and workable problems. Threat of nuclear war represents a real threat to the existence of human mankind.

The refugee crisis in 2015 provoked conflicts on a mass-level between fear and care where realistic evaluations of what was possible and reasonable broke down and extreme measures were implemented that put large groups in danger with unconcealed violations of international laws and human rights conventions as consequences (Varvin, 2017 & 2019).

We see breakdown of order and structure leaving many people at the peril of unorganized forces (war-machines, human traffickers etc.) and dehumanizing of ordinary people happens on a mass-scale, especially in the refugee field (Varvin, 2017).

I will in this paper discuss in what way psychoanalysis may represent a mediating function in relation to regressive tendencies on individual, group, and societal levels; can psychoanalysis develop a position where anxieties can be contained, understood, and reflected upon thus preventing acting on ideations connected with collective anxieties. Can psychoanalysis in any reasonable way function in such position, a third in relation di-

chotomic and antagonistic ways of functioning seen in mass-regressive situations related to collective traumatization (Bohleber, 2002)?

Psychoanalysis representing a third-party mediator in relation to intrapsychic and interpersonal conflicts and deficits is well-developed in psychoanalysis (Ogden, 1994, Kernberg, 1997, Zwiebel, 2004, Green, 2004). Freud extended this position to cover societal and cultural phenomena, e.g. religion (Freud, 1939), civilisation processes (Freud, 1930 (1929)) and groups' functioning (Freud, 1921). The third will in this paper underline the social and structural dimension and be understood "… as a logical principle grounding and mediating differentiated positions, as a standard defining behavior in terms of tasks and roles, and as a shared code providing the means for human subjects to sustain a common perspective." (Muller, 2007) p. 238). In situations of atrocity, the shared code collapses, and the restoration of the ethical standard inherent in a shared code is a complicated socio-political process also involving working with large groups' unconscious dimensions.

In clinical psychoanalysis, working through can be seen as a process of establishing an external, third position in relation to defensive processes that may be halted or frozen. This position of thirdness has a potential for instigating symbolisation and reflection and is at the core of the work of psychoanalysis (Green, 2004). Working through implies coming to terms with past difficult experiences to be able to go forward, to not being engulfed by unconscious determinations shaped for example by a traumatic past. To achieve this, the painful past must be described, reflected upon and most of all, demonstrating how the past "works" in the present thus laying the ground for future possibilities.

Similar reflective processes has been seen as important on group and societal levels exemplified in the work of Alexander and Margareth Mitscherlich on the difficulties of mourning in post-war Germany (Mitscherlich and Mitscherlich, 1967). Working through of past atrocities, has, however, shown to be extremely difficult and often avoided (e.g. in Latin-America, China and former Yugoslavia).

I will reflect on possible ways psychoanalytic insights can be used on societal levels in processes of symbolizing and coming to terms with groups or nations past and present difficulties, thus avoiding regression to basic assumptions and fantasised solutions.

My focus is on how atrocities affect the minds of ordinary people and their group-formations. These violations affect the cores of human existence and have the potential to disturb internal structures of safety, intimate relations, the functioning of families and groups and ultimately society's structure and as a rule, the meaning giving function of culture.

The following example may indicate some aspects:

A middle-aged man from a former Soviet republic said in the first session after the February 24th invasion of Ukraine: "It is the same. They did it in my country. Everything was destroyed, people were killed, even in "safe" evacuation corridors.". He returned time and again to a painful experience reported in fragments. Soldiers came to his house. He had a gun against his head while father was severely beaten and humiliated, and mother raped. The worst part came afterwards when he saw his father crying bitterly. The "fall" of the father and the realization that he had done nothing to protect his parents haunted him ever since - in dreams, in hallucinations and as a totalizing anxiety that followed him everywhere and demanded that he most of the time had to hide in his home.

There was a history before this. He was born just after his parents came back from forced exile within the Soviet system where almost the whole population of his republic was removed under the direst conditions. Most of his family died; killed, starved to death or dying from diseases.

These deportations represented massive destruction of culture, social relations, intimate relations – reaching into coming generations. He had been raised with a priority to build, to restore and to develop - and then it happened again.

Counterforces and reorganizations set in during and after hardships and atrocities, on an individual level, on the group levels and in societies. Resilience is in fact the rule. There are ample

examples of how groups and societies manage to recover, build and make relations work again (Ungar, 2008).

Resilience and depletion

In individuals and in groups one may see a balance between resilient processes and resignation or what may be call depletion. On an individual level, depletion refers to a process in which a traumatized person's struggle against senselessness, non-predictability and hopelessness and thereby gradually withdraws, mentally and socially. If there is no care or help, withdrawal may be prolonged, lead to diminished interactions with the world, disturbance in psychically vital processes - lack of perspectives of life - eventually leading towards diseases and death (Hoppe, 1968, Eitinger, 1969).

Resilience refers to forces seeking to change, relate, create, and learn and signifies integrative aspects concerned with growth and development and implies a condition of active, creative and transforming dialogues and fantasies about a future (Alayarian, 2007). Resilience is moreover highly dependent on context and is thus a social and collective process (Hauser et al., 2006, Ungar, 2008).

The phenomenology of posttraumatic states is to a large degree characterised by the dynamics between "vitality" and "death", presence and absence, symbolized states of mind and unrepresented or poorly represented mental states.

We see similar processes in traumatised groups and societies. Empirical research has for example shown increased morbidity and mortality in groups of severely traumatised people (Eitinger, 1965, Eitinger, 1971, Askevold, 1980) indicating depletion on a group level. The lack of help, treatment, and support for these groups after World-War II (holocaust survivors, war sailors) demonstrated how lack of resilience was part of a societal process of negligence. Keilson's seminal studiy on sequential traumatisation demonstrated on the other hand, how acceptance and support can be crucial for resilient outcome (Keilson and Sarpathie, 1979).

Resilience is characterised by the capacity to learn from experience (Hauser, 1999) both on individual and group levels (Ungar, 2012). Resilience implies thus establishing a third position in a social interactive process from which it is possible to have an outside perspective and reflect, resonating with psychoanalytic conceptions of the third.

A central question in this connection is how traumatisation is understood and how resilient processes may be promoted in traumatised individuals and groups.

I hold that present theories of traumatisation may overlook resilient processes and inadvertently support a passive, devitalising approach as the socially determined third position is eclipsed.

On traumatization and symbolization: development of the third position

The imprecise use of the word 'trauma' (trauma as the invading event, something in the mind, something done to victims etc.) hampers our understanding and treatment efforts and indicates an uneasiness in our relations to people exposed to atrocities. It is as if there is something uncanny or alien that has invaded the person. Its use tends to disregard the reorganizing forces that immediately is set in motion in the exposed persons or groups and "trauma" becomes something static in the mind. From a third position, this implies reification and reduction. When used in psychoanalytic discourse, it may alienate the person afflicted. Reflection on traumatization is therefore necessary.

Central is disturbances of symbolization that take place during the processes of traumatization. The different metaphors used, such as "black hole" (Kinston and Cohen, 1986) "psychic vacuum" (Riesenberg-Malcolm, 2004), 'empty circle (Laub, 2000), 'un-represented mental states' (Levine et al., 2013), 'nameless dread' (Bion, 1962) signify counter-transferential difficulties in grasping unsymbolized and deeply anxiety provoking

material. These metaphors are attempts to catch the traumatised inability to symbolize essential parts of self-experience, the experience of self-other relationships and how these disturbances affect the traumatised speech and intentionality in social interactions.

Levine uses the term "the representational imperative" to indicate the essential role that psychic elaborative processes play in emotional regulation and in symbolization of these processes (Levine, 2021). Psychic activity is governed by an inherent pressure to form representations and link them into meaningful, affect laden, coherent narratives. This pressure, the representational imperative, originating from internal sources (drives, memory-transformation) or external sources (e.g., perceptions), exerts a "demand upon the mind" for psychic work. It is this demand upon the mind that is changed (weakened, undermined, attacked) during traumatization. The traumatised mind gradually gives up, abandons, the anchorage of 'the demand' or dissociates this part of the mind to preserve some mental functionality with a loss of a feeling of chronology in which 'past' precedes, and is distinguished from, 'present' and 'future'. In a traumatic condition, the deictic anchorage of time (Bühler, 1934) is undermined, and often "converted" into a disordered, existential time experience. Since deictic anchorage of a person in space and time is basic to the integration of perceptions, feelings and thoughts in symbol-formation, the changes of this anchorage may be far-reaching and experienced as catastrophic. Any sign that bears some reference to signs of the earlier perceived danger is evaluated as a signal of danger and catastrophe. This way of perceiving the environment, based on symmetry, is characterised by imaginary reasoning. At its worst, experience of time is turned into a fragmented experience, disconnected from the framework of biographical time, and a deficiency of one's ability to symbolize feeling-states of the body, of intersubjective experience as well as one's relation to the social/cultural field (Rosenbaum and Varvin, 2007). Under these conditions perceptions and sensations of the body and environment are not even linked by means of imaginary modes of thinking. Instead, they may be said to be of an indexical nature (Peirce, 1984), i.e. immediate,

perceptual, non-symbolic attacks on and intrusions into the mind – a semiotic term having similarities with phenomena described in the terms of 'black hole', 'psychic vacuum', and 'empty circle'.

Parts of the personality may under these circumstances be experienced as empty, hollow with undefined, not-named anxieties constantly appearing. To be able to symbolise traumatic experience, affirmation and confirmation from others and society is paramount. The traumatised needs narratives that can meet the mind's attempts to symbolise traumatic experiences. When these are insufficient, false, or lacking, amply demonstrated in many contexts where groups' traumatisation is denied or neglected, the traumatised person or group become alienated, isolated, and alone with chaotic and extremely painful emotional experiences.

Development of symbolisation and resilience is relational and highly dependent on how the traumatised persons are met. The traumatised attempts to organise a chaotic inner world, and to give meaning to experience is thus dependent on activation of inner resources through relations to others and on pertinent narratives that can help meaning making. That is, the traumatised person needs help to develop a third position from where he can see and reflect on experiences.

The following example may elucidate this process.

Vignette, Mr. A.

A thin and shabbily clothed man around the age of thirty entered the consulting room in a state of extreme anxiety. He immediately searched the room for dangers, looking behind pictures on the wall, under the sofa etc. He sat down, shivering, and looking with wide-open eyes at the analyst. When asked about his situation, he first stuttered: "he killed all my family - the dictator. No one is left". He was living with, friends - never staying long in the same place. He had no residence permit, and thus no civil rights in society.

His speech was difficult to understand as he stuttered and lost words. Asked if he got any food, he became bewildered, and said friends gave him food from time to time. The analyst then asked what food he liked from his home country, and if he could remember his mother's cooking. He then reluctantly started to talk about the food his mother cooked for him, and started crying. He turned into another person, breathing more deeply, relaxing in his body, and obviously feeling safer. This lasted for some time, before once again becoming tense with wide-open, anxious eyes.

The process of symbolisation was distorted to the extent that thoughts could not be given a temporally meaningful place in an autobiographical narrative. The temporal fragmentation allowed the emotions of anxiety, aggression and depression, to dominate, and to a certain extent destroy the effort of meaning-making (Bruner, 1990) and symbol-formation. He was immersed in chaotic anxieties without ability to think/reflect. The meeting with the other, the psychoanalyst, became frightening and was felt as complicated, confusing and as an immersion in a power struggle. When memories, not only of the food, but also of the earlier safe relation with an empathic other emerged, his symbolising function was restored for a short time. A coherent emotional reminiscence eased his anxiety. But he also tried to give a narrative context to his experience, although haltingly: "he killed all my family - the dictator. No one is left". For a while, a third position was co-created by the patient and the analyst, making it possible to think.

It is crucial that these attempts at giving meaning to experience are met not only by the analyst but also from society and culture. The rejection of his status as refugee, implied for him a massive denial of the reality of what had happened to him.

To help symbolising and support restorative processes in traumatised individuals and groups, an extended understanding of traumatisation may be necessary.

Further development of the understanding of traumatization

In the following I will briefly describe a model that can serve as a framework for the development of our thinking on traumatisation (Rosenbaum and Varvin, 2007, Varvin and Rosenbaum, 2011). In agreement with the view that social trauma and its after-effects are linked with the individual's relation to others and the social context, three dimensions of interaction can be identified:

A. The body-world dimension:

This dimension concerns the individual's relation to the other on a dyadic bodily-affective level. This is the level of emotional bodily-mediated regulation of affective states. Within this dimension, important nonverbal emotional regulatory processes occur between self and others, and there is a self-soothing reliance based on trusting internalised object relations.

Emotional withdrawal will diminish the possibility to use others in the process of activation inner empathic relation and through this modulate negative affect and the person may thus be unable to symbolize sensations, and subjective experiencing as such. With Mr. A, some capacity to symbolise was restored through empathic presence and interventions by the analyst in the context of co-creation of a third position.

Affective self-regulatory processes and interpersonal regulatory interactions are central for maintaining subjectively experienced safety (Schore, 2003). This pertains especially to the regulation of negative or unpleasant arousal, which depends on safe early attachment relationships and good enough early containment by mother/caregiver. These relationships, in turn, are dependent on a growth-promoting cultural and social context, including family and social network support. Moreover, what on a social psychological level is identified as the urge to create emotional bonds, is contingent on a belief shared by the participants in a dyad or a group that emotions can be regulated at this level, that is, the creation of a "shared code providing the

means for human subjects to sustain a common perspective" (Muller 2007, p 235).

B. The subject-group dimension. This is the dimension of identity formation where one finds one's identity as member of a matrix: family, group, and community. It is a "membership" based on the capacity to experience oneself as both belonging to and separate from the group. One is both ordinary (like the others in the group) and unique/special (different from the others). The group functions both as a safety background, an arena for intimate emotional relationships, but also as source of knowledge on what one is and what one should/could be. In close/intimate groups (family), one learns from others and acquires the ability to empathize and take the other's perspective.

A malfunctioning group-identity structure creates a poor background for the desire to change, to relate, and reflect. In societies where the family and the related larger grouping (e.g., clan, tribe) are the most important organising units of society, and where belonging to such a group is of fundamental importance both for personal and social identity, disturbances in this dimension may have grave disorganising effects.

C. The subject-discourse dimension, signifies the subject's relationship to culture in the broadest sense: myths, philosophies, ideologies, ethics, morals, folklore, poetry, literature, jurisdiction and other forms of social discourses. Discourse is in principle written, temporalised and memorized signs of a living culture. These signs are not particularly stable over long periods, but are stable enough to produce converging and diverging myths, narratives, ideologies and paradigms of beliefs and argumentation, "a shared code"

The subject's modes of relating to the differences and divergences, and the expression of social passions based on "higher principles", are part and parcel of the subject-discourse dimension.

Included in this dimension is also the subject's experience of being grounded in time: linear time, experiential/deictic time (seeing the present in relation to past and future), and existential time (associative, dreaming).

This dimension consequently transforms the group-mind, enabling the subject to step outside of the group while still remaining a part of a cultural movement. It thus represents a regulatory principle and a dimension that structures meaning in the other dimensions.

We can see the functions of these dimensions as an extended conceptualization of the third dimension. The relation to discourse/culture is of overriding importance in that it structures and gives meaning in the other dimensions by establishing "a shared code". The intimate dyadic relation, for example mother and infant, being mostly non-verbal, is highly dependent on a well-functioning group/family structure, which again is dependent on a reasonably stable cultural meaning-giving function in groups and societies.

The three dimensions must be seen as interrelated and as a whole, , i.e. all of them functioning at the same time. The intimate relation between mother/caregiver and infant needs a group/family that not only can give support but give direction and meaning to the feeding and caring for the infant. This counts for all developmental stages. The family/group exists in cultural context where traditions and meaning are transmitted both orally and through texts. This is aptly focused by the proverb: "It takes a village to raise a child".

When groups and ethnicities are attacked through persecution and genocides, disturbances in all three dimensions follows.

The idea of the third position in psychoanalysis is most developed in relation to the dyad (Ogden, 1989). I will, however, underline that it always already is anchored in the subject-discourse dimension, as a preposition for establishing meaning to experience on dyadic, triadic levels, integrate past experiences and wisdom in an ongoing lived experience that indicates hope and future possibilities.

Traumatization and change

Working through implies reorganisation of meaning and opening of mental spaces and in the broader cultural/social context, opening fields of possibilities. Traumatisation tends to close possibilities with fixations to frozen images in the mind and attempts to reorganise the mind by getting rid of internal bad objects for example by projection. Attempts to find new meaning regularly fails with recurrence of anxiety-laden sensations, as was seen with Mr A: activation of an empathic inner object relation, temporarily restored thirdness and some organisation in his mind (Laub and Podell, 1995).

Such situations in therapy are crucial in that the presence of an empathic relation is felt at the same time as what is lost becomes painfully present. In such moments, the person experiences nachträglich the implications of losses and earlier traumatisation. One may say that psychoanalysis, by giving meaning to the traumatic experience from a third position, anchors the subject in a cultural dimension where the realisation and symbolisation of what has happened may open future possibilities. The nachträglich moment in a therapeutic or any reorganising process point thus both backwards and forwards (Larsen and Rosenbaum, in press).

Ms B realised in such a moment the implications of having lost her child. She came for therapy because of relational problems. The theme of loss had been touched upon several times but avoided until a key session where it suddenly appeared after a break in the therapy. She realised, as she said, that "now, my child would have been 13 years old". She had been imprisoned and maltreated in her home country belonging to a persecuted minority, and her child died shortly after birth under dire circumstances. Her life after this had been a struggle with a dominant guilt and posttraumatic symptoms and depressions. The realisation of what she had lost was kept isolated by being a chronic helper, trying to pay her "debts". Unconsciously she identified with her child and before the key-sessions she dreamt

being suffocated with no help. In the session, the analyst became identified in the transference as the helpless mother. In a dramatic sequence, she then remembered how she, alone with her sick child, had to endure seeing the child being suffocated to death by some respiratory disorder, as in her dreams where she felt suffocated. This nachträglich experience of her loss set in motion a forward movement where she with her analyst had to work through the implications of what had happened and to choose a forward path for her life. The development of this nachträglich experience in a symbolic-cultural dimension became a turning point and changed decisively her life.

This was contingent with the co-establishment of a third, reflective position where the dyadic interaction with the analyst and the implied triadic/Oedipal relations could be given meaning through working through of her present relation both in exile and to her family in her homeland.

Can this type of nachträglich realisation function on social/collective levels? Mitscherlich's work on the Germans' inability to mourn demonstrated how a psychoanalytic intervention on a collective level can help mourning, a difficult process on an individual as well as social level., which takes generations.

Conclusion

Psychoanalysis has its origin and main function as a treatment. The transference-countertransference dynamics of a therapeutic dyad is, however, embedded in a context determined by rules of the setting, contract, ethics, law, and the local cultural meaning of a therapeutic relationship. The analyst must both be embedded in the emotional relationship to the patient and represent a third position through his/hers reflective function (Kernberg, 1997). It is this thirdness that makes interpretation possible (Green, 2004).

In relation to the model presented earlier, psychoanalytic work on a dyadic level is always contextualised by all three dimensions: body- world, subject-group and subject-discourse/culture. These three dimensions function as a whole,

even if the patient primarily functions on a deficit-imaginary level. For the imaginary to be symbolised, the analyst must thus make interpretation from a third position.

The question here is whether psychoanalysis may represent the third position on a collective level and have a function that addresses the deeper layer of the social unconscious (Hopper, 2002) and open space for working through of the effects of among others collective traumatisation. One precondition is that atrocities are inscribed in the collective memory. This is a collective process where official recognition and affirmation is needed, but also where cogent narratives are produced by the cultural community: writers, artists, historians, sociologists and others. Psychoanalysis may in this context contribute to a structuring third position where development from dyadic power relations are opened, enabling mutual recognition (Muller, 1999) In Freud's words: "If willingness to engage in war is an effect

of the destructive instinct, the most obvious plan will be to bring Eros, its antagonist, into play against it. Anything that encourages the growth of emotional ties between men must operate against war (Freud, 1933, p. 211).

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References

ALAYARIAN, A. 2007. Trauma, resilience, and creativity. In: ALAYARIAN, A. (ed.) Resilience, suffering and creativity. London: Karnac.

ASKEVOLD, F. 1980. The war sailor syndrome. Danish Medical Bulletin, 27, 220-224.

BION, W. 1952. Group Dynamics: A Re-View. International Journal of Psycho-Analysis, 33, 235-247.

BION, W. R. 1962. Learning from Experience., London, Heinemann.

BOHLEBER, W. 2002. Kollektive Phantasmen, Destruktivität und Terrorismus. Psyche, 56, 699-720.

BRUNER, J. 1990. Acts of meaning, Cambridge, Harvard University Press.

BÜHLER, K. 1934. Sprachteorie, Jena, Gustav Fischer Verlag.

EITINGER, L. 1965. Concentration camp survivors in Norway and Israel. Israel Journal of Medical Science, 1, 883-895.
EITINGER, L. 1969. Psychosomatic problems in concentration camp survivors. Journal of Psychosomatic Research, 13, 183-189.
EITINGER, L. 1971. Organic and psychosomatic aftereffects of conentration camp imprisonment. International Psychiatry Clinic, 8, 205-215.
FREUD, S. 1921. Mass psychology and ego analysis. Standard Edition. London: Institute of Psychoanalysis.
FREUD, S. 1930 (1929). Civilization and its Discontents. In: STRACHEY, J. (ed.) The Standard Edition of the Complete Psychological Works of Sigmund Freud, Volume XXI. London: The Hogarth Press and the Institute of Psycho-analysis, London.
FREUD, S. 1933. Why war? The Standard Edition of the Complete Psychological Works of Sigmund Freud vol XXII ed.: The Hogarth Press and The Institute of Psychoanalysis.
FREUD, S. 1939. Der Mann Moses und die Monotheistischen Religion: Drei Abhandlungen. Sigmund Freud Studienausgabe. Bd IX. Frankfurt am Main: S. Fischer Verlag.
GREEN, A. 2004. Thirdness and psychoanalytic concepts. Psychoanalytic Quarterly, 73, 99-135.
HAUSER, S. 1999. Understanding resilient Outcomes: Adolescent Lives Across Time and Generations. Journal of Research on Adolescence, 9, 1-24.
HAUSER, S., ALLEN, J. P. & GOLDEN, E. 2006. Out of the woods. Tales of resilient teens., Cambridge, Massachusetts, London, England, Harward University Press.
HOPPE, K. D. 1968. Re-somatization of affects in survivors of persecution. Int Journal Psychoanal, 49, 324-326.
HOPPER, E. 2002. The social unconscious: selected papers, London, Jessica Kingsley Publishers.
KEILSON, H. & SARPATHIE, R. 1979. Sequentieller Traumatisierung bei Kindern, Stuttgart, Ferdinand Enke.
KERNBERG, O. F. 1997. The nature of interpretation: intersubjectivity and the third position. The American journal of Psychoanalysis, 57, 297-312.
KINSTON, W. & COHEN, J. 1986. Primal Repression: Clinical and Theoretical Aspects. Int J Psychoanalysis, 67, 235-242.
LARSEN, E. D. & ROSENBAUM, B. in press. Nachträglichkeit and Psychoanalytic Creativity. Scandinavian Review of Psychoanalysis.
LAUB, D. & PODELL, D. 1995. Art and trauma. Int.J Psychoanal., 76, 991-1005.
LEVINE, H. B. 2021. Trauma, process and representation. Int J Psychoanalysis, 102.
LEVINE, H. B., REED, G. B. & SCARFONE, D. 2013. Unrepresented States and the Construction of Meaning: Clinical and Theoretical Contributions, London, Karnac.
MITSCHERLICH, A. & MITSCHERLICH, M. 1967. Die Unfähigkeit zu Trauern: Grundlagen Kollektiven Verhaltens, Munchen, Piper.
MULLER, J. P. 1999. Consultation from the thrid position. The American lournal of Psychoanalysis, 59, 113-118.

MULLER, J. P. 2007. A View From Riggs: Treatment Resistance and Patient Authority–IV: Why the Pair Needs the Third. Journal of The American Academy of Psychoanalysis and Dynamic Psychiatry, 35, 221-241.
OGDEN, T. H. 1989. On the Concept of an Autistic-Contiguous Position. Int. J. Psychoanal.,, 70, 127-140.
OGDEN, T. H. 1994. The Analytic Third: Working with Intersubjective Clinical Facts. Int.J.Psycho-Anal.,, 75, 3-19.
PEIRCE, C. S. 1984. Writings of Charles S Peirce. A chronological edition, vol.2. , Bloomington, Indiana University Press.
RIESENBERG-MALCOLM, R. 2004. Bedeutsames Vergessen: Eine klinische Untersuchung. Jahrbuch der Psychoanalyse 48, 9-26.
ROSENBAUM, B. & VARVIN, S. 2007. The influence of extreme traumatisation on body, mind and social relations. Int J of Psychoanal, 88, 1527-1542.
SCHORE, A. 2003. Affect Dysregulation & Disorders of the Self, New York & London, W.W. Norton & Company.
UNGAR, M. 2008. Resilience across cultures. British Journal of Social Work, 38, 218-235.
UNGAR, M. E. 2012. The Social Ecology of resilience. A Handbook of Theory and Practice, New York, Dordrecht, Heidelberg, London, Springer Verlag.
UNHCR. 2022. UNHCR Refugee agency [Online]. https://www.unhcr.org/: UNHCR. [Accessed 27.06.2022 2022].
VARVIN, S. 2017. Our Relations to Refugees: Between Compassion and Dehumanization. The American journal of psychoanalysis, 77, 1-19.
VARVIN, S. 2019. Psychoanalysis and the situation of refugees: a human rights perpsective. In: MONTAGNA, P. & HARRIS, A. (eds.) Psychoanalysis, Law, and Society. London and New York: Routledge.
VARVIN, S. & ROSENBAUM, B. 2011. Severely traumatized patients' attempts at reorganizing their relations to others in psychotherapy: An enunciation analysis In: FREEDMAN, N. & HURVICH, M., WARD, R. (eds.) Another kind of evidence. Studies on Internalization, Annihilation Anxiety, and Progressive Symbolization in the Psychoanalytic Process. London: Karnac.
VOLKAN, V. 1997. Bloodlines., New York, Farrar, Straus and Giroux.
ZWIEBEL, R. 2004. The thrid position: refelections about the internal analytic working process. Psychoanalytic Quarterly, LXXIII, 215-265.