THE ANALYST’S GENEROUS INVOLVEMENT:
Recognition and the “Tension of Tenderness”
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“[T]here is now a widespread appreciation of how dangerous it is to love and hate with abandon an other who is hiding and posturing noninvolvement.”

--Stephen A. Mitchell, Relationality

INTRODUCTION: THE “TENSION OF TENDERNES”

This paper explores generosity as an innate property of our being human. I argue, as Darwin (1871/2004) also recognized, that generous, or other-regarding, motivations are as necessary for evolutionary survival as conflict. Generosity, or caring involvement—or, in Sullivan’s terms, the “tension of tenderness”—is also required for a good-enough developmental legacy. None of us arrives at adulthood enjoying groundedness in a robust self unless an instinct for generosity was among the belongings of some important caregiver. There is an essential analogy at the heart of therapeutic action in a psychotherapy or psychoanalysis. Therapeutic action requires the “generous” involvement of the therapist. I will elaborate, and define, what various forms generous involvement may take within the frame of therapeutic or analytic process, along with its less salutary look-alikes.

For now, I will begin by emphasizing that, as analysts or therapists, we possess a capacity for generous involvement simply by virtue of our being human, with our existence embedded in a relational context. Hence, generosity belongs to the composition of our therapeutic instrument—that is, the person we are as we engage with our


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patients. Thus, if generous involvement goes missing, we would do well technically to read it as a signal to ask ourselves when, why, and how we have disconnected from a caring relatedness with our patient.

In a previous paper (Pizer, 2008) I related how my grandfather, who ran a newsstand in New York City, taught me, through embodiment and action, the essentials of an analytic process. Educated to the sixth grade, Grandpa had a way of being that opened my heart to the essential meaning of the spirit of generosity.

In that paper I described three unforgettable and transforming incidents that, for me, became a metaphor for basic elements of analytic process. The first occurred during a rare visit to our apartment by my maternal aunt and uncle, who brought my grandparents for tea. The conversation quickly curdled into the recurrent fight between my mother and her sister, escalating to a scenario in which my mother yelled at everyone present. Pained by this familiar emotional violence, I quietly left the living room and took refuge in the kitchen, and closed the door to muffle the shrieking. A few minutes later, my grandfather opened the kitchen door, entered, closed the door behind him, and silently sat down with me at the table. No words. No commentary on the scene in the living room. The lesson I derived from this experience, as described in my earlier paper, was the power of affective sharing, or communion. Essentially, Grandpa entered in as witness to my lonely
sadness, wordlessly communicating through his embodied presence, “I’m with you.” This moment captures for me the essential function of the analyst’s offering the patient in pain an affectively resonant witnessing presence.

The second incident, years later, occurred during the summer I stayed with my grandparents prior to my going off to college. One evening, my grandfather noticed my reading a “Playboy” magazine I had borrowed from his newsstand, and he recognized immediately that instead of gazing at the naked foldout I was looking at tweed jackets in the “Fall Fashion Forecast for Men on Campus.” I learned from my grandmother the next morning that my grandfather had joined her in their bedroom and said, “Stuart is afraid that he will go off to Harvard without the right clothes and feel ashamed. I won’t let that happen to him.” Following Grandpa’s instructions, my grandmother took me to a shop on Fifth Avenue and had me fully outfitted with suit, tweed jacket, shirts and ties. This experience shocked me into awareness that it is actually possible for a person to recognize what is going on inside another person, and to respond with “appropriate action” (Sullivan), and thereby provide for a recognized need. The profound impact of this experience taught me the second lesson that I now apply to understanding the essentials of analytic process: Just as Grandpa’s witnessing and recognition were not matters of indifference to him (he figuratively and also literally gave me all he had!), I believe that the analyst’s recognition of
the patient’s need carries with it an internal tug toward offering some relevant provision.

The third incident happened when I was a graduate student on vacation in the Florida Keys with my aunt and uncle and grandparents. Grandma secretly conscripted me into driving my grandfather somewhere, anywhere, to get him away from my aunt’s relentless shaming of him for his lack of education or “cultivated” interests. I drove north to take Grandpa to see the Everglades, all the way silently, and sullenly, resenting that I was once again coerced into accommodating my family’s primitive emotional functioning. I tried to hide the rage I was barely containing by limiting conversation to a minimum. But I remained locked into feeling sorry for myself. As we approached the Everglades, Grandpa asked me to pull over at a farm stand. Returning with a paper bag, he reached it across to me so I could see the nectarines inside, and said, “Want one?” No lesson could be more powerful than that, or more relevant to analytic process. Grandpa’s simple, direct, unspoken embodied gesture told me that he well understood the nuanced layers of my private experiencing, that he accepted me as I was, even as he saw me as I was, inclusive of my dark side, and yet in the face of my alienating mood he could still offer me both a gift and a clear challenge that held us both in respect and declared our relationship. Natural, affectively compelling, and state shifting—and I received Grandpa’s gift of a nectarine as the offering of a
transformational intersubjective interpretation, one that adjusted our relational state in that moment (see Aron, 1996).

Grandpa’s spontaneous and unselfconscious lessons informed my writing (Pizer, 1998) about what the analyst’s presence may offer in the face of the nonnegotiable: containment, acceptance, and recognition. And I proposed that all of us, as analysts, would do well to carry something like Grandpa’s spirit into our therapeutic relationships, infusing our clinical subjectivity with what I then conceptualized as “generous mentalization.” Now I am not satisfied with the term “generous mentalization.” It too much implies that its foundations could not appear developmentally until a theory of mind came online. And now the term also strikes me as too much implying a conscious process, or a cultivated virtue. What I hope to capture in this paper is a more preconscious, automatic, spontaneously enacted and, indeed, elementally motivated relational feature of our human involvement with the Other. When the baby in the high chair reaches out his spoon for Mama to have a taste, his gesture reflects something fundamental and intrinsic to human connection.

Harry Stack Sullivan (1953) provided a compelling metaphor for the affective tug of analytic recognition in his concept of the “tension of tenderness.” In Sullivan’s interpersonal theory, in which the Self is constituted through the responses of others, we each come to recognize
our own specific needs through what he called "appropriate action in the service of the need." I am reminded of the analytic patient Emanuel Ghent described, who had not recognized that she was shivering with cold until he got up from his chair and brought her a blanket. Sullivan begins with the basic needs, like oxygen and nourishment. Sullivan writes: "The alternation of need and satisfaction gives rise to experience or, if you will, is experience—needless to say, in the prototaxic mode." Sullivan defines the "prototaxic" mode as "the rough basis of memory... the crudest—shall I say—the simplest, the earliest, and possibly the most abundant mode of experience" (p. 29). Perhaps the prototaxic mode comes close to what Loewald referred to as a "primal density," a oneness of the joined infant-mother matrix prior to differentiation. This leads Sullivan to state a theorem:

"The observed activity of the infant arising from the tension of needs induces tension in the mothering one, which tension is experienced as tenderness and as an impulsion to activities toward the relief of the infant’s needs" (p. 39). Sullivan is specific in emphasizing that tenderness is very different from "love." And he proceeds with a very significant elaboration:

"The manifest activity by the mothering one toward the relief of the infant’s needs will presently be experienced by the infant as the undergoing of tender behavior; and these needs, the relaxation of which require cooperation of
another, thereon take on the character of a general need for tenderness” (p. 40).
And, although this generic need for tenderness is, for Sullivan, a derivative of “disequilibrium arising in the physicochemical universe inside and outside the infant,” these generic needs “nonetheless... all require cooperation from another,” leading Sullivan to assert, “thus, the need for tenderness is ingrained from the very beginning of things as an interpersonal need.” And, in this primal density, via the empathic linkage between infant and mother, “the complementary need of the mothering one is a need to manifest appropriate activity, which may be called a general need to give tenderness, or to behave tenderly” (p. 41).

Is this not Sullivan’s particular language for what we know as the evolutionary necessity of attachment behavior linked to a caregiving system developed and activated in unison (see Bowlby, 1969)? Or Winnicott’s declaration, “There is no such thing as a baby,” and his notion of a mother’s post-natal “temporary illness,” or “primary maternal preoccupation”? In a 1992 paper, echoing Winnicott, I posited a state later in life, and relocated to a clinical context, that I called “primary analytic preoccupation.”

An instinctual tug toward tenderness, or a spirit of generosity, in response to a recognized state of need in the Other is an inherent feature of our functioning attachment system. Or, as Trevarthan (2009) conjectures, perhaps we
come into the world wired to seek community, relational embeddedness, or “we-ness.” Perhaps Loewald’s notion of a primal density, while metaphoric, points to the facts of our inborn nature.

**EMPATHY AND THE ROOTS OF GENEROSITY: ATTACHMENT AND “WE-NESS”**

The internal tug of the “tension of tenderness” as described by Sullivan, even the empathic linkage to the other’s “tension of need” or “need for tenderness,” the embodied pull toward an analyst’s involvement and generous provision, may in part be grounded in our irreducible primordial oneness with the other at this earliest, deepest level. To borrow from Pogo, “We have met the other, and they is us!” Or, as Mitchell (2000) puts it:

“For Loewald (1971a), we *are* our objects, and our objects are us. The distinction between drives and objects is a developmentally later, secondary process superimposition upon the primal density in which self and other are not yet sorted out” (p. 40).

In his own framework, Freud indicates his struggle to sort out connection and separation in the intensities of an analytic relationship. As he entrusted in writing to Binswanger (see Orange, 2011, pp. 77-78):

“One must, therefore, always recognize one’s counter-transference and overcome it, for not till then is one free
oneself. To give someone too little because one loves him too much is unfair to the patient” [italics added].

Why does the analyst’s generous involvement with the “other” matter? Hollway (2006), writing on a related concept, “The Capacity to Care,” writes: “The capacity to care matters because, without it, society would not survive. Neither would individuals survive, except perhaps as heartless and soulless psychopaths, existing physically in a world made terrifying by a lack of trust born out of and reproduced by failure of care” (p. 129). Indeed, Adam Phillips and Barbara Taylor (2009), in a tract “On Kindness,” point out, “Even Charles Darwin, that darling of modern individualists, strongly rejected the view of mankind as primarily selfish, arguing for the existence of other-regarding instincts as powerful as self-regarding ones” (p. 97). In this short treatise, they offer some assertions about kindness that strike me as pertaining to generous involvement in an analytic context. They write “It is kind to be able to bear conflict, in oneself and others; it is kind, to oneself and others, to forgo magic and sentimentality for reality. It is kind to see individuals as they are, rather than how we might want them to be; it is kind to care for people just as we find them” (p. 93).

If kindness is inherent to our human nature, and essential to our communal and evolutionary survival, Phillips and Taylor also remind us of some of what kindness is not: “Not a temptation to sacrifice ourselves, but to
include ourselves with others. Not a temptation to renounce or ignore the aggressive aspects of ourselves, but to see kindness as being in solidarity with human need, and with the very paradoxical sense of powerlessness and power that human need induces” (p. 114). These qualifiers, and more, as we shall see, are relevant to the framework of the analyst’s generous involvement, the manifesting of the “tension of tenderness” while struggling with the rigors and conflicts of the analytic relationship and process.

THE ANALYST’S GENEROUS INVOLVEMENT

What more, specifically, can be said about what the analyst’s generous involvement is, and is not? Corpt (2011) asserts, “By clinical generosity, I do not mean lax attention to the frame or sloppy guidelines of practice, but rather, a serious, and, at times, even unsettling re-evaluation and openness to amending any and all aspects of analytic practice in light of the patient’s forward edge strivings” (p. 5). She sees this as “holding open a horizon of possibility” that still holds in mind both self and other. Corpt also ventures a list of features of what she calls “clinical generosity.”

Corpt’s list resonates with what I have written about “containment, acceptance, and recognition” (see Pizer, 1998; 2005) as dimensions of generous analytic involvement, as I will briefly elaborate here. By containment I mean a welcoming of the patient’s multiplicity of states and feelings held in an abiding negotiated relationship. By
acceptance I mean the analyst’s disciplined and willing receptiveness to the patient’s feelings as well as the feelings evoked in the analyst while with the patient. The analyst sustains a tenacious struggle within himself to bear the patient’s rage, hopelessness, dread, or anguish, thus conveying a fundamental human respect, a willingness to feel pain, confusion, self-doubt, and so on, in the service of an emergent process of negotiation. And certainly the analyst’s generous involvement may take the form of venturing a difficult confrontation of the patient that is likely to evoke painful consequences and the strain of a mutually challenging and stressful working through, which the analyst may feel inclined to spare himself. Indeed, generous involvement may well entail the analyst’s surmounting feelings of frustration, anger, even antipathy evoked in relating to a patient who pushes his buttons.

And, finally, the fundamental quality of therapeutic recognition is that the analyst is registering the imprint of a patient’s state even while striving to preserve personal integrity and equilibrium. In these three primal modes—containment, acceptance, and recognition—the analyst faces a patient’s nonnegotiable position and implicitly says, “I am with you.”

As important as a functional delineation of what the analyst’s generous involvement may include is recognition of what “generous involvement” is not. Here is a partial, and not exhaustive list:
The analyst’s generous involvement with the “other” is NOT:
1. Compassion, which is a feeling with; generous involvement entails a moving toward the feeling, being a witness who is not a bystander.
2. Furor sanandi (Freud’s term for a “rage to cure,” which became the criticism of Ferenczi’s ventures into more active techniques).
4. Tolerance of being abused.
5. Boundary, or frame, crossings with a narcissistic “largesse.”
6. Impulsive or compulsive bestowal of “gifts,” whether they be material, or seductive idealizations, or disclosures out of the analyst’s own urgency.
7. Grandiose presumption that “my love is healing.”
8. Calculated “corrective emotional experience.”
10. A denial of the analyst’s moments of angry feelings toward the patient or an avoidance of feeling conflict.
11. Noblesse oblige, a condescending exercise of power or charity, or self-congratulatory “philanthropy.”
12. An act of “extractive introjection” (Bollas, 1987) that declares, “All goodness and love comes from me.”
13. Disrespect for the patient’s autonomy and agency.
14. The analyst’s passively obliging the patient, a “false self” act of compliance, or pathological accommodation; or
the analyst’s passive acceptance or complicity in a “false self” act of compliance by the patient.

15. Finally, it is not an unreflective, defensive appropriation of the position of “good person,” leaving the patient no alternative to a totalistic position of shame at being both an indebted beneficiary and the only “bad person” in the room (see Davies, 2004).

Perhaps we need to remind ourselves that all these traps and corruptions of “generosity” await us in process, and part of our analytic skill is to notice ourselves thus slipping. We need to remain alert to these dynamics that masquerade as generous caring but accompany our defensive avoidance of feeling our own personal suffering.

**A RELATIONAL CONVERSATION WITH LEVINAS’ SUFFERING “OTHER”**

At this point, I will introduce the radical ideas of Emmanuel Levinas, whose philosophy has attracted the recent interest of psychoanalysts (see Poland, 2000; Margulies, 2000; Marcus, 2007), in order to propose a relational counterpoint from within our psychoanalytic discourse field, while respecting the differences in Levinas’ context of philosophical (ontological and ethical) discourse. I locate in generous analytic involvement some resonance with his assumption of our obligatory subjugation of self to the needs of the other. “To recognize the Other is to recognize a hunger. To recognize the Other is to give” (Levinas, 1969, p. 75; see also Goodman, 2010, 2012). But Levinas’ notion of obligation is and is not my idea of generosity. A
French POW during World War II, who lost many relatives to the Holocaust, a philosopher and Talmudic scholar, Levinas turned kindness, caring, and generosity on their head. For Levinas, kindness is not a privilege, not even a choice, and certainly is not extended from above. Radical in his positions, Levinas offers a challenge to our presumptions regarding autonomy, intentionality, choice, ownership of our separate subjectivity, and generosity. His message is humbling, however we subscribe to its specifics and complexities.

Levinas’ (1969) ethical message begins with our encounter with the “other,” a “stranger,” who is not an abstraction but the specificity of a face, in our face. This unfathomable “face,” strange and transcendent, is infinitely beyond our categories, representations, and ideas. Startled awake by this face, we confront Infinity beyond our ken. “The way in which other presents himself, exceeding the idea of the other in me, we here call face” (Levinas, 1969, p. 50). As Orange (2011) writes, “The other (Autrui, the human other) presents me with an infinite demand for protection and care. The face says, ‘You shall not kill…. You shall not allow me to die alone’.” (p. 46). Or, for that matter, to suffer alone. And, as Orange further comments, “the response must be ‘Me voici’ (me here)” (p.47). For Levinas (1985), paradoxically, “here I am” is an obligatory answer of a call from the Infinite Other, inherently the Divine, that is also our coming into
being through responsiveness. And, as Orange comments, “I am indeed my brother’s keeper, and there is no escape” (p. 47). Levinas contends that the “face” of the other preexists us, looms above us, obliterating all question of our making, or having, a choice. No escape, no choice, except a protective recourse to familiar self-isolating defensiveness, complacent totalizing constructs, schizoid disconnection, a perpetuated experiential slumber. Indeed, for Levinas, our very subjectivity comes awake and into focus through our subjection, perhaps even subjugation, to meeting the face of the other with inexhaustible responsibility. Hospitality (both small and large, beginning with opening a door for a stranger) and provision are incumbent upon us. There is no charity (ego) and no “quid pro quo.” We expect nothing in return. Asked whether the other, the stranger, bears the reciprocal innate responsibility toward us, our face, Levinas (1985) replied, “That is his affair” (p. 98).

Levinas does not extoll a masochistic submission to misuse by the other. Although the suffering other faces us with an infinite demand, indeed a demand that honors our own useful suffering, Levinas (1998) does not advocate our useless or passive suffering or tolerance of abuse or senseless brutalization, declaring all useless suffering to be “meaningless,” “for nothing,” and “precisely an evil” (p. 92). But he certainly puts a different spin on recognition and an inherent tug to respond to need.
How might we absorb the radical position of Levinas within a concept of the analyst’s generous involvement with the “other” in clinical process, and the “tension of tenderness” within us that accompanies our recognition of the patient’s need, affect, or state? Perhaps my message here is in essential harmony with Levinas’ understanding that hospitality and responsibility are ethically obligatory and that generosity is elemental—although, whereas I think of generosity as instinctual, grounded in attachment, I believe Levinas would reject instinct in favor of a subjectivity open to interruption, surrender, and awakening by an encounter with the Other. I may locate the interhuman origins of the analyst’s generous involvement in the primal density and empathic linkages of our beginnings, and Levinas may locate responsibility as pre-existing our beginnings, but we concur that to recognize is to give.

I turn to the moment when my grandfather reached the bag of nectarines toward me, saying, “Want one?” I do believe this was an act of hospitality in the Levinasian sense. But here is where I would like to introduce a counterpoint. I also think Grandpa was embodying another aspect of “recognition” in the best analytic sense, a gesture with his own particular tonality of “me here” in service to your suffering. I think Grandpa was effectively saying to me, “I see you,” even “I see what’s going on”—but not “I’ve got you pegged” or “I’ve got your number,” and certainly not “I’ll be slave to your mood.” This message
seems to me to introduce an aspect of recognition that can include something like challenge—but not confrontation, or collision, and certainly not denigration. It is like a gentler challenge that extends an opening for shifting my state, perhaps even grasping another perspective on myself at that moment with him—an invitation to join his reaching with a bag of nectarines with a reaching of my own, toward a self-reflective state shift that permits “being with.”

Grandpa was asking nothing of me, no quid pro quo as in, ”Now maybe you’ll be less crabby company.” But perhaps Grandpa was master of a different form of hospitality, not incompatible with Levinas (consistent with “That is his affair!”), offering the other, without presumptions of reciprocity, a particularly relational form of responsiveness that may not only serve the suffering other (as in, “This is me here for you”) but also may serve usefully the suffering “we”! Perhaps we can locate here a dimension of the non-masochistic “one-for-the-other” when the self (of the analyst) and the other, at moments, might both be served by “one-for-the-we,” holding in mind that the analytic “we” is in the service of a mission to attend usefully to the suffering of the Other.

And generous involvement, on the part of a grandfather or an analyst, may represent the “tension of tenderness” expressed in recognition of the state, or need, of the relationship. Neither a self-involvement nor exclusively an involvement with the “other,” this response tends to the
relatedness of self and other—a step toward meeting the needs of both, without compromise. And it seems to me, from a relational perspective, that therapeutic action is grounded in the analytic relationship, in its mutual affective involvement, its struggles, and its negotiations and adjustments; and individual healing, of patient and analyst alike, moves forward with the healing relationship. The analytic credo is remarkably Levinasian in its ethics. As Poland (2000), writes: "The capacity to appreciate the self and the capacity to appreciate the other do not simply go hand in hand: they are the same unitary phenomenon of growth seen from different angles" (pp. 29-30, italics in original). And, invoking Levinas, Poland succinctly writes, "In the analyst’s regard [witnessing the face of the Other], looking and caring and separateness [interpretation] are one" (p. 32). Regarding Grandpa’s gesture of hospitality toward our ongoing relationship, with a bag of nectarines, as analogous to an interpretation, I recall Aron (1992) stating, "Interpretation is the principal process by which analysts position and reposition themselves interpersonally in relation to their patients" (p. 504).

THE CHALLENGES OF GENEROUS INVOLVEMENT: NATHAN

Nathan was a world-class academic in his field, the kind of theorist, researcher, and contributor who spends half his time on a plane traveling to conferences where he is usually a plenary speaker, if not the keynote. I don’t know for sure, but it is plausible to me that his name has
come up in considerations of the Nobel Prize. He has not won this award, perhaps consistent with his having, for all his significance in his field, repeatedly fallen short of full and complete application of himself in the refinement or completion of his projects.

What competed for his time and attention were a set of compulsive repetitions that could occupy a considerable portion of his day. Engaging daily in a regime of intense exercise, plus medication, in the effort to control his serious lipid disorder, he would nevertheless search town for the most bargain lunch at one of the fast food franchises, and consider it a triumph to save 23 cents while eating foods on his forbidden list. He "shopped" at bargain basements, painstakingly switching the price labels on sales items so that whatever item he brought to the register bore the deepest sale cut in price. Another secret triumph. On his travels by plane to and from conferences, he would steal the head sets. And, over the years, he had engaged in many affairs.

I first met him, many years ago, after his wife had found out about some of his affairs, and they consulted me together with the question of whether she could ever forgive him or trust him enough to remain in their marriage of 35 years. And what could Nathan change that might offer his wife something to go on for healing? She agreed to give him some time under the condition that he commit himself to an individual therapy with me. That being said, Nathan had, in
his 62 years, been through several therapies, and analyses, and he and his wife shared doubt and skepticism that any therapy now would manage to crack the impenetrable nut of his destructive entitlement. His wife did not know about the other array of compulsions in Nathan’s secret life, but she knew that she could not live with fearing more affairs.

Nathan began to see me twice weekly. A wiry man, from years of exercise, with a face that looked like Robert De Niro in a perpetual state of annoyance, Nathan was a daunting elder for me to face in therapy. I knew the stakes, and committed myself to offering all I could as a therapist.

Nathan seemed to have no difficulty talking in therapy, but he was not quite talking to me. At least, I found it difficult in the first weeks to find my way into engaging any dialogue with him. I felt imposed on by him to sit still and receive his verbal barrage without interruption. I ventured telling him that he seemed to need to upload a lot of information into me before he might feel that I could think along with him about his life. Maybe in the fourth session, Nathan told me he loved to drive alone to New York, because he was free to stop on the highway at McDonald’s and order whatever he wanted. “And no one sees me,” he declared. Immediately I found myself saying, “Including you.” He shot me a quick look, and then he proceeded with his narrative, leaving me with the sense that he would just
barely let that one pass. I silently wondered, “Where is his superego?”

One session, about a month into our meeting together, stands out significantly. He began by telling me that walking to my office through Harvard Square some “young Turk” had jaywalked, crossing his path. He had felt the impulse to yell, “Get out of my way,” and to punctuate it with a shove. He managed to refrain. On that theme, he began to tell me what a tough kid he had been. He said he had long since learned that this resulted from his family situation. An only child, he was the focus of his mother’s boundariless encroachments along with her histrionic shrieking fits. His father, meanwhile, would sit quietly in his chair, reading, leaving Nathan with the feeling that his father was abandoning him to handle this woman himself.

So, said Nathan, he had become a ruffian. He had killed squirrels. He had thrown a rock at the back of a girl’s head as she sat on a park bench. He told me of these things with what struck me as a combination of matter-of-fact information and bragging. He declared that he felt entitled to his outlets, then and now, by virtue of the abusive maternal relationship. He emphasized one incident: At about age 9, he had been standing around with a few guys and began to dare them to pull a fire alarm. They all shrank back. He pulled the alarm, and they all fled. He just stood there, frozen. And, indeed, fire trucks soon arrived. A fireman, in full regalia, stepped down from the
truck and loomed over him. Nathan reports that the fireman and he stood still for an endless moment, during which Nathan, transfixed, dreaded that the fireman would deliver him into the hands of his mother. Then the fireman said, “You shouldn’t be doing things like that,” and got back on the truck. Nathan just stood there on the sidewalk as they drove away.

Nathan then recounted for me another episode in his childhood that he considered important. He had contracted some childhood illness and needed hospitalization, for a week, in a children’s unit at the time that, according to him, did not permit parental visits. I didn’t know what to make of this, but listened. He said he had felt abandoned and scared. He said he was neglected there. As an illustration, he told me that over his bed dangled an empty light bulb fixture. No nurse or staff had attended to this for days. Curious, he had reached up and stuck his finger in the socket, and been singed.

The session now nearly over, Nathan turned to gather his coat and papers, and began to rise from his chair. “Oh yes,” he said, “I’ll be away next week at a conference. And I intend to have an affair with a colleague I’ve been with before.”

What now! Could I let him leave the room without a comment? (Levinas would say that I am responsible even for
his responsibility. Indeed, I felt that! Would I be like a noninvolved bystander father? Would I be negligent staff, ignoring his exposure to scorching danger? (How might Nathan experience that “I am with him”? I felt a sickening shudder of dread. My immediate “unthought known” was that an affair now would be a disaster. He would lose his marriage, and I doubted that he could survive this loss. Or, as bad, he would keep his secret from his wife, live with her in bad faith, and subvert their relationship, his therapy, his life. (How does my internal tug that cries, “I won’t let that happen to him!” serve this moment?) Do I take a stand, tell him not to? He had barely allowed me to comment on his not watching his own sneak eating at highway stops. I felt sure that a directive from me would make me another “Young Turk” standing offensively in his way. And he would push past me and leave. I knew he was hurling a challenge at me—“OK, what will you do with me now!” In the mere seconds I had before Nathan walked out the door, I struggled with which mistake I should make. Silent abandonment? Antagonizing and alienating interference? I knew that I did not yet, if I ever would, have the authority with him to speak as a voice of conscience. I recognized this moment of his dire need, and his compact and contradictory state of surly isolation and wounded aloneness. We were both in conflict. I was enraged at him.

I thank David Goodman, Ph.D. for this idea (see Levinas, 1985, p. 99), as well as for his generous conversations about Levinas. (Personal communication, June 2012.)
and worried for him at the same time. I felt intensely involved, and checkmated. (And I could not bear to leave him to walk out the door without my finding somehow, for that moment, a “bag of nectarines” to offer.)

And then I heard myself saying, “I wish we had that fireman in here right now.” Nathan remained in his seat. “Why?” he retorted, although now a puzzled look began to enter his face. “Because I wonder what it would be like for you to spend some time with him now.” Nathan gave me a more puzzled look, and left.

When he returned from his trip, Nathan began the next session by saying, “I didn’t have the affair. And I didn’t take the head set from the plane. I figured I’d have to come and tell you.” Relieved, I tried to receive this with a quiet face. Our work was now engaged. As we then moved along, Nathan at times would wryly call me “Jiminy Cricket.” I accepted this diminutive epithet with good humor because Nathan already was struggling with much shame to stay in the work with me, and this seemed to ease his bearing it. Besides, a young cricket may be allowed more freedom to sound off than a “Young Turk.”

After about a year of meeting, Nathan said to me, “You have been exquisitely tolerant of me, and forbearing, and gentle. If you hadn’t been, I would have left long ago. But now, if I’m going to learn anything further, you will have to begin to tell me things about myself.” And,
following his expression of advice, need, and permission, I did.

Feeling tugged inside by the tension of tenderness in our deep affective involvement with what we recognize in the Other, both devoted and conflicted, we are moved to offer what we can of ourselves as therapists and analysts. As I have been defining the analyst’s generous involvement, it is not only an empathic witnessing, a “being with.” It entails a “going forth” from within our selves toward the patient’s need.

I’ll end with this quote from Shakespeare’s “Measure for Measure”:
Thyself and thy belongings
Are not thine own so proper, as to waste
Thyself upon thy virtues, they on thee.
Heaven doth with us as we with torches do,
Not light them for themselves; for if our virtues
Did not go forth of us, ‘twere all alike
As if we had them not.

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