

Crisis, Trauma and Subjective Decision

Work-in-Progress 3

Yves Vanderveken

The theme of ICLO-NLS fourth Study-Day¹ is in consonance with that of the NLS Congress which will be held in Geneva on 9-10 May 2015. And I invite everybody to participate in it and, if you can, to be there. You have already perhaps followed the vast preparation that animates the organisation of the Congress everyday on social media, email and the internet, of which Florencia Shanahan is one of the most important anchors. I have already been in several NLS locations preparing and working on this theme, and today it is a matter of me finding yet another different angle from which to approach this topic. It is my continuous *work-in-progress*.

So I thought I should perhaps try to circumscribe, from a psychoanalytical point of view, an opposition that circulates in the preparing works towards the Congress. While it is said that crisis is not a psychoanalytic concept as such, at the same time we have a formula by Jacques-Alain Miller which has been already worked on quite a lot which states that the psychoanalyst is “crisis friendly”². So my question is how can we account for these two poles?

Crisis is a signifier that is ever present in contemporary discourse where it resonates everywhere. But, at the same time, we could say that the notion of crisis accompanies psychoanalysis from its very inception, in a way that is proper to it, and which Freud circumscribed with the name of *trauma*. We could say that trauma is a characterisation of crisis in the psychoanalytical field. We know that the invention of psychoanalysis starts off from the study and the therapy of symptoms, non-medical symptoms, in hysterical subjects, at these moments of crisis. And what Freud discovers, by means of allowing the subject to speak, is that in the origin of these symptoms what we find is the trauma. That is to say, there is a trauma that contributes to the formation of these symptoms. And what is trauma if not a moment of major crisis? A moment of rupture that leaves the subject to cope with the intrusion of something which he cannot account for, something the subject is confronted with and which he cannot face with the subjective reference points he has at his disposal at the time. So the symptom comes as an effect, as a response to this.

But we must emphasise that in the field of psychoanalysis, trauma is a moment of crisis that is absolutely particular. It does not conform to the idea that common discourse or common sense has about what trauma is. The trauma discovered by psychoanalysis is not connected to an event which would intrude within a dimension of causality that would be lineal, in the

¹ Delivered as the introduction to the ICLO-NLS 4th Study-Day, Dublin, 7 March 2015

² http://www.lacan.com/symptom/?page_id=299

sense of 'this event, that effect'. Freud's major discovery is to pose that, in psychoanalysis, trauma as a principle concept is always linked to a double movement, a double event; trauma is always founded on 'two times'.

This is, for instance, what Freud discovers in the case of young Emma's phobia -which Freud also calls *hysterical obsession*. You may know this case which Freud describes in the "Project for a Scientific Psychology"³. What happens to this young girl? She has, we could say, a very simple symptom. She is very fearful of going into shops *alone*. It is a little symptom which is both odd and restrictive, and like we all do, she tells herself that this is 'stupid', it's nonsense. She holds a critical judgement with regard to this symptom. She knows that this is a purely subjective phenomenon and that it is not grounded in a real danger that she might eventually encounter in the shops. But, despite this, she can't help it. Emma has the recurring idea that if she goes into the shops alone, people *might make fun of her in relation to her clothes* and how she is dressed. These subjective ideas are accompanied by very real, very concrete effects in the body such as intense anxiety, sweating and inhibition.

Freud discovers that this symptom is the response to two events and what is essential is that it is the second event that gives the first its traumatic value, retroactively. The first memory that Emma connects with her symptom brings her back to her thirteenth year, that is to say the moment when she reaches puberty. She goes into a shop and she sees two shop assistants who laugh. She rushes out of the shop convinced that they were laughing at the way she was dressed. This event is accompanied by the incongruent idea (incongruent with regards to reality), that she had liked one of the two men when.

However, this event is not sufficient to account for the persistence of this symptom later in the life of this young woman; she no longer dresses in the same fashion and she is older. Thus, at this point we cannot really see very clearly what is traumatic in this first memory. By encouraging further associations what emerges is a memory from when she was eight years old. When she was a child of eight, in the shop where she used to go to buy sweets, she tells of the shop assistant twice making a move to touch her *through her clothes*. The way in which she tells this is very important. What is remarkable is the fact that this event did not prevent her from going back to the shop. So we could say that this initial, traumatic and real event is not subjectively experienced as traumatic at that point. What appears is a certain culpability, a certain sense of guilt, related to the fact of having found some pleasure in having been "appreciated" by someone. It is only in the second moment, when she is thirteen, that the event which took place when she was eight becomes traumatic and it is at this point that this event delivers its sexual charge and sexual signification which it did not carry at the time when it happened. What connects both events or both scenes are two traits. One is the *laugh* of the shop assistant which awakens the memory of the facial expression that the original sales assistant in the sweetshop had; and the other is the fact of

³ Freud, S., "Project for a Scientific Psychology", SE, Vol I, pp 353-356.

being *alone*, because, in fact, when she is with someone she has no problem going into shops.

The reason I come back to this, one of Freud's first cases, is to emphasise the singular value of the trauma in the neurotic symptom. In fact, for Emma, the moment of crisis occurs when she is thirteen but in a way that is disconnected from the real event to which this symptom is connected. It is at this moment that Freud can isolate the main trait of the neurotic symptom: what he calls 'substitution' or even its 'overdetermination'. That is to say that the symptom is never connected to just one cause. From the very beginning the symptom is captured in a whole network of connections. Substitution means that an event, A, conceals or masks or is linked to an event, B. In the case of Emma the event is retroactively connected to another event which conceals the cause. So we can say that the charge of excess, of disgust and of the repressed sexual abuse, linked themselves afterwards to another event which renders the cause unrecognisable. The charge of anxiety was transferred from one to the other because there were three discrete elements, three signifiers, which repeated themselves: the laughing, the clothes and being alone. We must highlight here that in the second event, it is the sexual dimension that Emma is confronted with which she experiences. It is this actualisation that reactivates the traumatic value of sexuality, as an encounter with something "coming from outside", produced when she was eight, but without, at that point, producing the effects that will arise at thirteen, when she has become pubescent.

So, the symptom is the response that is created in order for the subject to assimilate something that, at the time of this encounter, was impossible to assimilate in the subjective economy and which overwhelms his or her capacity of symbolic reabsorption. It is what allows for a compromise. We could say that the symptom is a necessary response, a creation effect which is necessary to overcome this moment of crisis in the encounter with an unchained real - in this case, for this young woman, the sexual encounter.

The constitution of the symptom as a response to this point of traumatic encounter, to the moment of subjective crisis, according to a logic that has two times implies, as a consequence, that there is no linearity between cause and effect. In fact there is, rather, a rupture in the chain of causality, as we can see in the triggering of the hysterical obsession in Emma. This hysterical obsession is in fact triggered through an event which only has a link to the previous event in relation to the substitution in the signifying metonymy; there is no connection except for these signifying traits that connect the two.

This is also what explains the profound singularity of each traumatic event. An event only takes a traumatic signification within subjective unconsciousness coordinates that cannot be compared to anybody else's. This is in complete opposition to the idea that *such event produces such trauma*.

This is very well demonstrated in a small volume that perhaps some of you may know which is entitled '*Quick Therapeutic Effects*'⁴, in which you will find the case of a subject who was one of the victims of the bombings at the train station in Madrid. This woman, who was not herself seriously injured, found herself in the midst of the explosions and their effects on others. So what we have here is the irruption of a pure real: a moment of crisis that could not be more real. What Jacques-Alain Miller remarks in relation to this case is that when this person goes back to her analysis, immediately she begins to tell her dreams and nightmares and that, from the very beginning, free association recommences. What Miller emphasises is that this teaches us two things. On the one hand, that the work of the unconscious is immediately trying to veil, to cover up this real again by means of meaning or sense. The work of the unconscious is activated in order to recover a certain homeostasis there. But also what this case proves is that from the very beginning, the actual real event is taken up within very singular subjective coordinates by the subject. From the very beginning this real event, which we could consider an objective event, is taken up in the subject's signifying chains in connection with very singular elements of her own history. What is demonstrated there is that there is something at work in order to place this event is a series of signifying elements and all of this work aims at trying to reabsorb or assimilate this pure real which has no meaning whatsoever – it's a bomb that has exploded.

From a certain point of view, we could say that these are two opposite examples. The first one, Emma, is a case that shows how the traumatic event is always taken up in a signification that is absolutely personal. On the other hand, the second example of the attacks shows how, from the very beginning, a pure real is reabsorbed into the personal significations of subjectivity. So we can see that these moments of subjective crisis are the consequence of moments of rupture in somebody's subjective configuration, absolutely singular, and how at the same time, this calls for a work of reweaving of the subject's signifying tissue with regard to this lawless real that has been met.

The analyses that Lacan makes of Little Hans and Hamlet allow us to take a step further, a supplementary step, and to orient ourselves towards the structural dimension of trauma. This means that, in fact, there is a traumatic encounter for each of us and that what we call moments of subjective crisis are, indeed, reactivations of this. They are reactivations of a structural point which is traumatic for every speaking being.

Let us examine Hamlet, of whom Lacan says is not a clinical case but that we nevertheless have there the "neurotic desire in every instant of its incidence"⁵. Undoubtedly, Hamlet goes through a moment of subjective crisis when his admired father dies. But what Lacan insists on and what he demonstrates is that what really makes Hamlet suffer, what actually plunges Hamlet into despair is, in fact, the encounter with his mother's desire. The "desire

⁴ La conversation de Barcelone, *Effets thérapeutiques rapides en psychanalyse* [juin 2005], Agalma, coll. Le Paon, 2005.

⁵ Lacan, J., *The Seminar Book VI, Desire and its Interpretation*, lesson of 18 March 1959. Unpublished.

of the mother"⁶ is revealed in its whole dimension -as something detached from the bond with the father, something outside of the law of the father-, once the father disappears. As you know she is sleeping with the main suspect of Hamlet's father's death and Shakespeare does not conceal the erotic exchanges. It is the encounter with this "unchained" feminine desire in the mother –"unchained" or "triggered" in the sense that it no longer responds to the law, it exceeds her position as mother in the relationship with the father and makes of her a woman whose desire exceeds that of 'towards' or 'regulated' by the father-, it is Hamlet's encounter with this desire that plunges him into total despair.

Lacan actually makes fun of this scene where Hamlet beseeches his mother to calm down and to toe the line, of Hamlet's appeal: "Refrain tonight, take the path of morality..."⁷ We can say that it is the encounter with the feminine dimension of the desire of the Other, outside the phallic law, which provokes a crisis for Hamlet, the son, as it does for every neurotic. It is at this point that Lacan situates the true death of the father and it is in relation to that point that Hamlet, through his grief, through his work of mourning, is called upon for a reconstruction, "a massive intervention in relation to the whole of the symbolic game"⁸ – everything has to be reconstructed and for Hamlet this means passing through a moment of desubjectivisation. We can say this is a moment of crisis that we encounter, structurally. The mother is a woman. For the obsessional subject this is, particularly, his trauma.

This is not without a connection to the phobia of Little Hans to which Lacan devotes an entire Seminar⁹. For Little Hans it is also less a matter of the desire *for* his mother¹⁰ -what has been retained from the vulgarisation of the Oedipus complex-, it is not about him being attached to his mother, but about being confronted with the desire *of* her mother, which Hans' father cannot 'master'. Also, in this case, it is the encounter with the feminine dimension of the desire of the Other, what Jacques-Alain Miller calls the "the mother's knickers"¹¹, it is this which leaves this little boy completely without resources (with regards to the "father's lack [*carence du père*]¹²), confronted with a panic point, as Lacan will say later¹³, a panic point where something needs to be rewoven, a new signification that the paternal signification cannot cover up completely, cannot fill up. It is this point that the phobic object comes to signify, in its various strands, of which the essential trait is the famous *krawall*.

⁶ Ibid

⁷ Ibid

⁸ Lacan, J., The Seminar Book VI, *Desire and its Interpretation*, lesson of 22 April 1959. Unpublished.

⁹ Lacan, J., *Le Séminaire, livre IV, La relation d'objet* [1956-1957], text established by Jacques-Alain Miller, Paris, Seuil, coll. Champ freudien, 1994.

¹⁰ Lacan, J., The Seminar Book VI, *Desire and its Interpretation*, lesson of 18 March 1959.

¹¹ Lacan, J., *Le Séminaire, livre IV, La relation d'objet*, op. cit., lesson of 5 June 1957

¹² Ibid

¹³ Lacan, J., The Seminar Book VI, *Desire and its Interpretation*, lesson of 10 December 1958.

This *other desire*, which escapes the control and the law of this desire, Lacan will at the end of his teaching localise it, for Hans, in his own organ¹⁴. So evidently, we have, on the one hand the encounter with the desire of the Other which provokes the moment of crisis but, on the other hand and at the end of his teaching, Lacan goes on to say that this encounter with the desire of the Other, was encountered by Little Hans in his own body. At the time of the encounter with his first erections, this part of the body suddenly becomes uncontrollable, starts to live its own life, not at all under the control of the body; this is why Lacan says that phallic jouissance is "outside the body"¹⁵. It is the encounter with this *other* jouissance, which inhabits one's own body without being reabsorbed in it, which will be the trigger, according to Lacan, of the moment of subjective crisis that Little Hans goes through. His phobia will be the treatment, the *attempt at cure* for this hole encountered in knowledge. An *attempt at cure*, as Freud had already qualified delusion in psychosis, and which we can expand to symptom and fantasy. On purpose, I am putting together these three terms, *symptom*, *fantasy* and *delusion*, in continuity. Even if there are some differences of course, all three of them are there to cover and treat this hole in the symbolic.

Trauma, being at the same time the encounter of the body with the signifier and with the outside-of-the-law [*hors-loi*] of sexuality, has a structural dimension for the speaking being. This is what Lacan manages to reformulate with this later analysis of Hans' phobia. For each speaking being, by the very fact that he speaks and that speaking is what denaturalises instinct, there is structurally an encounter with jouissance which is never the jouissance that should be. This is what Lacan's sentence: 'There is no sexual rapport / relation' means. Here we have the fundamental crisis. This jouissance presents itself always as an excess or unsatisfying, too much or too little, carrying disgust or not, present always when it should not be and absent when it should there. This is always encountered within singular coordinates for each subject. In this sense, the moment of subjective crisis, the trauma, is always second, or in any case, the traumatic events have always a singular connection with the initial trauma of being born into language, which repetition commemorates. The traumatic events or bad encounters redouble this initial trauma and only take their meaning from the mark that the signifiers have left in a contingent manner on the singular being of each of us, and which determine us in our own traits. It is these determinations, all of which are at the same time signifying marks carrying an *other* jouissance, that an analysis aims at isolating and circumscribing.

The moments of subjective crisis are those moments when the veil of the fantasy is torn back. Because, in the end, what is the fantasy? It is your own system of personal signification about the world that you have constructed. It is your own way of reading the world. Moments of crisis are precisely moments where this 'reading system' fails and

¹⁴ Lacan, J., Geneva Lecture on the Symptom (1975), trans. R Grigg, in *Analysis No 1*, Melbourne Centre for Psychoanalytic Research, 1989, pp 7-26

¹⁵ Lacan, J., *Autres Ecrits*, Paris, Seuil, 2001, back cover.

encounters a point that cannot be assimilated and which renders the function of the symptom inoperative. It is a reactivation of this moment of traumatic encounter which leaves the subject without resources and which calls upon the subject for a work of reconstruction, of reweaving, of reinvention. These are moments where the taking up of a position and the making of a decision is necessary.

From the perspective outlined above, all speaking beings are situated on the same side with regards to this point. This is what, at the end of his teaching, Lacan is going to call 'generalised foreclosure'. For every speaking being there is a hole in knowledge in relation to sexuality: a *troumatisme*, for everybody. It is a hole about which and around which everybody has built a signification, that is to say, a delusion.

Let us say that it is the modality of response to this hole, to this structural point, which can determine a difference in terms of psychological structure such as neurosis or psychosis. However, even though this is a distinction which one has to take into account, it is not so operative. There used to be classic, standard modes of response to this hole, which were transmitted by tradition. There were ways of doing, ways of behaving, which were transmitted and constituted the paths of laws. They were standard solutions. This is why Lacan includes them more on the side of feeble-mindedness [*débilité*]. Something of this 'out-of-law' was regulated by the symbolic and by the law of the Father; that is what tradition is. Only these traditions have been shattered or perhaps, to put it differently, that the nature of semblance of these traditions has been revealed and, therefore, devalued. This is due to the effects of science, of capitalism and globalisation which sweep tradition away; but also, due to psychoanalysis¹⁶; to bring back these constructions to their status of semblances with regards to the real is one of psychoanalysis' great gestures.

As a result of this, at the social level, it is the whole world that considers itself in crisis. The crisis in the symbolic and in the imaginary, leaves us more as a prey of this point of real outside of the law, closer to the drive and the surplus-jouissance. What we encounter are new forms of phenomena which call for new arrangements in times when the ideals no longer operate. On the one hand a consequence of this is the ferocious return of tradition. However it must be said that when ideals and the symbolic held things together, that did not provoke less deaths. We need only think of communism and Nazism. But this was nevertheless in 'blocks'. Today what is expressed is a much more delocalised, fragmented, disjointed death drive.

One last point. You can find this very well condensed in a recent text by Sophie Marret-Maleval¹⁷. In this short text, she puts forward how there is an approach to the symptom, which is the one that I have just developed here. It is the symptom understood as the response, the invention that comes to calm, to temper this encounter with the real outside

¹⁶ Miller, J-A, "A Fantasy", *Lacanian Praxis* 1, May 2005, pp 7-16

¹⁷ Slashes 21, "The Symptom and Crisis", <http://www.nlscongress.org/wp-content/archivos/sla21.png>

of law. But, at the same time and by that very fact, the symptom is that which is in direct contact with this real.

She reminds us that Lacan calls "a symptom everything that comes from the real and the real is everything that does not work out"¹⁸. So this opens up a different conception of 'moments of crisis'. Up until now we have seen moments of crisis as something that needs to be reabsorbed, reassimilated, in its dimension of therapeutic treatment. But the emergence of a moment of crisis is also a *sign* of the real, which calls for a response from the subject. To go back to the title of our *Study-Day* today, it is a moment which calls for a *decision* from the subject, a decision by the subject to confront himself with, to respond to this point of real by means of something other than what Lacan calls feeble-mindedness. In other words, it calls for a response that would not be to misrecognise and cover up the real, but one that would rather lead the subject to orient himself or herself by it in order to decide. From this, I could say that an analysis, when it is taken to a certain point, can undoubtedly lead to an increase of freedom with regard to the straitjacket of the fantasy; but it also implies that the subject is more and more confronted with what Lacan calls 'the forced choice'. The forced choice which is mine, which does not exist except from that mark inscribed in my own being, but which indicates, when this signal emerges, that I cannot flee and a response is required.

The moment of crisis emerges there as that moment which we can no longer authorise ourselves to avoid, the sign that there is a real at play. This is what Lacan meant when defining what the only ethics of psychoanalysis is, when saying: 'not to give ground on one's desire'. And this is also what Jacques-Alain Miller referred to in a formula that made waves: 'Do your duty'¹⁹. Evidently, this is not a 'do your duty' connected to imposed and superegoic ideals, but to that which each one –for oneself- can no longer afford to avoid.

Transcribed and edited by *Tom Ryan* from the simultaneous translation by *Florencia F.C. Shanahan*

¹⁸ Jacques LACAN, "Freud Forever. An Interview with *Panorama*", in *Hurly-Burly*, Issue 12, 2015, p. 19. com/mensuel/428/jacques-lacan-il-ne-peut-pas-y-avoir-crise-psychanalyse-18-06-2014-25207

¹⁹ Miller, J.-A., "From symptom to fantasy and back", Course *The Lacanian Orientation*, delivered at the University of Paris VIII, Lesson of 19th January 1983.