

AAGP Melbourne Conference
Open Day Saturday 18 November 2023
Venue: 18 Erin Street, Richmond

- 8.45am** Registration
- 9.00am** Welcome
Acknowledgement to country
Christine Vickers
- 9.05am** **Judith Pickering**
Transformations in O: without memory, desire and understanding in group work
(See attached for further information and prereading)
Discussion and questions
Chair - Paul Coombe
- 10.35am** Morning tea provided
- 11.00am** **Rob Gordon**
The Social Dimension of Acute Traumatic Injury *(See attached for further information)*
Discussion and questions
Chair - Christine Vickers
- 12.30pm** Lunch provided
- 1.15pm** Group discussion
Co-Chairs – Christine Vickers and Paul Coombe
- 2.15pm** End of day

Cost: \$175 (including catering)

Book via trybooking :
<https://www.trybooking.com/CMGGZ>

Transformations in O: without memory, desire and understanding in group work

Dr Judith Pickering

Negative epistemology is an intrinsic aspect of psychotherapeutic methodology, whether with individuals, couples, families, or groups. Bion's contribution to such negative epistemology includes his writings on the K link, the psychoanalytic application of Keats' concept of negative capability, Henri Poincaré's selected fact and the analytic discipline of eschewing memory, desire, understanding and sense impressions. Bion here is directly drawing on *The Ascent of Mount Carmel* by St John of the Cross.

We will turn our attention to focus on Bion's O, the sign he used to denote 'ultimate reality, absolute truth, the godhead, the infinite, the thing-in-itself' (Bion, 1970, p. 26). Although O is ultimately unknowable and inconceivable it is, for Bion, also a deeply personal and interpersonal domain of reality, the heart of what it means to be human, the core of the psychoanalytic encounter, the meaning of life. The O of ultimate truth is also the O of the personal truth incarnated in every true analytic session: whether in a group of individual setting.

Bion also examined the relationship between the mystic and the group. The mystic is one who experiences direct revelations of ultimate reality, of O. When the mystic then attempts to communicate such revelations to a given group, does the group have the capacity to contain the mystic and the revelation? Or does a group find such revelation inherently frightening, disruptive, threatening? Bion delineates three such group reactions as commensal, symbiotic and parasitic.

The paper invites participants to consider how they as group analysts may apply given elements of Bion's negative epistemology in group work.

Prereading adobe link from Dr. Judith Pickering's book - **The Search for Meaning in Psychotherapy**, chapter 15

<https://acrobat.adobe.com/link/review?uri=urn:aaid:scds:US:8d3e48ce-b11a-345b-b0ec-7c2226ab1aba>



Dr. Judith Pickering is a Psychoanalytic Psychotherapist, Training Analyst, Couple and Family Therapist in Sydney, Australia. She is author of *Being in Love: Therapeutic Pathways Through Psychological Obstacles to Love* (Routledge, 2008); *The Search for Meaning in Psychotherapy: Spiritual Practice, the Apophatic Way and Bion* (Routledge, 2019) which won the 2020 American Board & Academy of Psychoanalysis clinical book award; *Transformation in Love: Bion and the Couple*, London (Routledge, forthcoming); and co-editor of *Recycling Madness: the Clinical Writings of Giles Clark* (Routledge, forthcoming) as well as numerous clinical papers. She is a member of The Couple and Family Psychotherapy Association of Australasia, the British Society of Couple Psychotherapists and Counsellors, the International Association of Couple and Family Psychoanalysis, The International Association for Analytical Psychology, The Australian and New Zealand Association of Jungian Analysts and The Australian and New Zealand Association of Psychotherapists. She lectures and teaches widely in Australia, USA and Europe and is on the editorial Board of the *Journal of Analytical Psychology*, London and *Couple and Family Psychoanalysis*, London.

The Social Dimension of Acute Traumatic Injury

Rob Gordon, PhD

Diagnoses of trauma and posttraumatic stress are common, especially in relation to complex, longstanding psychological problems which introduce so-called Type 2 or Complex Trauma involving repeated episodes of trauma often in the context of emotional neglect. On this basis Freud identified two fundamental features of traumatic injury which he initially formulated in the Project for a Scientific Psychology (1895) and later elaborated at various stages of his career most notably in *Beyond the Pleasure Principle* (1920). His work with the analysis of childhood trauma provided him with the material to understand the defining features of a traumatic experience as first that it introduced an “excess of excitation” which damaged the psychic apparatus; the second was that the experience defied representation in terms of previous experience. Trauma was a psychic and somatic disruption. These features have been reaffirmed in contemporary neuro-psychiatric understanding of trauma.

Work with recent traumatic experiences in people who experience extreme events in the midst of their lives brings to the surface other aspects of traumatic injury. The presentation will draw on some 40 years of work with people who have been involved in natural disasters, criminal events and accidents which threatened their lives and caused severed posttraumatic reactions. Personal intrapsychic features of the injuries are obvious, intense and demand attention, but preserving a group or social perspective quickly reveals that there are social and relational injuries that are inherent to the trauma. However, contemporary bias towards an individual-centric point of view overlooks them or explain them away as “interactional consequences” of the personal injury.

Yet careful listening to traumatised individuals reveals their experience of the social injury becomes central to their posttraumatic suffering. The most extreme example of this social injury is in those people who experience they are about to die and prepare for the reality but, in the event, do not die. This situation leads to a predictable and highly structured pattern of injury to their social being, which means their whole existence as a node in a matrix or relationships within a culture and history. The continuity and attachment of their life is disrupted, and if not alleviated easily results in long term change in their life trajectory, loss of relationships, belonging, identity, and predisposing to chronic PTSD.

Working with these cases over years has provoked thinking and theorising from group and individual psychoanalytic perspectives to understand the phenomena and develop a methodology to treat the injuries. The principles of this body of theory will be presented together with illustrative cases of people who taught me how to help them after the most terrible events of their lives.

An important part of the recovery from such events is to ensure their family and community have a common understanding of the range of effects of the event on everyone involved so that recovery support can continue connect. To this end, it has been necessary to develop a method of working with community groups affected by trauma, to bridge the gulf between them and reactivate the bonds of common identity and support between them.



Rob Gordon is a clinical psychologist and psychoanalytic group psychotherapist who has been a consultant to the Victorian Emergency Recovery arrangements since 1989 and has consulted throughout Australia and New Zealand with Red Cross and State Governments. He has been involved in bushfires, floods, windstorms, and earthquakes, the Queen Street and Port Arthur Shootings, Bali Bombings and East Asian Tsunami as well as many smaller criminal events. He inaugurated and was Clinical Director of a staff trauma support service for the Victoria Dept of Human Services for 18 years and provides regular group interventions for staff groups in human services who have experienced traumatic events. He has treated many people from these events in psychotherapy as well as having brief interventions with individuals and groups in relation to their traumatic experiences when visiting their communities.