

## CONCLUSION

As analysts and as writers, we continually seek ways to put words to experience and to communicate our thoughts and feelings. We hope to capture the essence of what makes us human, what makes us unique, and what defines us. Our patients come to us because they, too, are engaged in a struggle to find their voices. When we listen to our patients, we try to understand what lies beneath their words and find our own words to forge a connection with them. Over the course of treatment, patient and analyst develop a shared vocabulary, one that is meaningful and unique to each dyad. As we come to know a patient, we learn to listen in a complex way to words and silence, to breathing, to bodily communications, to shifts in tone and emotion. Like a dreamscape, the therapeutic conversation sometimes takes unexpected images and links them together to form a new picture, which may be incongruous until we gradually begin to see its meaning. In therapy, as in our writing, we treat our words with care, paying attention to their impact and their potential to wound—to the power they have to touch others.

Yet, as Daniel Stern has pointed out, language can be viewed as a “double-edged sword” because although it “makes parts of our known experience more shareable with others . . . [and] permits two people to create mutual experiences of meaning that had been unknown before and could never have existed until fashioned by words,” it can also separate us from others. Stern explains that language “makes some parts of our experience less shareable with ourselves and with others. It drives a wedge between two simultaneous forms of interpersonal experience: as it is lived and as it is verbally represented” (1985, 161).

Stern points out that before the infant develops verbal abilities, the shared understanding between mother and infant, which grows out of multiple experiences of responding and being responded to, creates a feeling of mutual, preverbal attunement. This attunement allows for a sense of absolute union—even though we understand that the attunement actually consists of a perpetual dance of aligning and realigning with the other. With language, however, we introduce the possibility of misunderstanding and miscommunication. This process is similar to that of therapy. Words provide an entryway to our patients’ inner worlds but also demand that we attend to those experiences that cannot be put into words. Thus, we must work to weave together the shared verbal domain with the realm of inner experiences.

Throughout the process of writing this book, we were struck by how storytelling and psychotherapy originate from the same creative wellspring. When we write personal essays, we revisit our past. The act of writing invites us to explore the complicated interplay of our unique history, memory, and current-day feelings. The work of psychodynamic psychotherapy involves understanding the connection between memories and inchoate feelings. Both writing and therapy entail reminiscing through time and memory and offer opportunities to explore our thoughts, wishes, and fears. Each seeks a personal, deeper truth, or what we call a “psychical truth.” We often find that

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these “truths” are continuously reworked to match our longings and fantasies. Yet, as we discussed in chapter 1 on screen memories, it is hard to know what is actually “true” memory because to some degree we are constantly engaged in creating and rewriting our pasts. As Rainer Maria Rilke wrote, “And still it is not enough to have memories. One must be able to forget them when they are many, and one must have the great patience to wait until they come again. For it is not yet the memories themselves. Not until they have turned to blood within us, to glance, to gesture, nameless and no longer to be distinguished from ourselves—not until then can it happen that in a most rare hour the first word of a verse arises in their midst and goes forth from them” ([1910] 2008, xii).

In our stories and reflections, an overriding theme has emerged. Throughout our lives, we look for ways to construct our personal narrative. The mind organizes memories in search of an unbroken and cohesive storyline. We seek a narrative that fits with our ideas about who we are and what matters most to us at a given moment in time. After events transpire, we weave narratives around them that draw on language, metaphor, and images and thus form a tapestry from the wisps of our memory. We try to put our many thoughts and feelings into words, no matter how eloquent, raw, or unformed. One word follows another, and for a period of time we often find ourselves frustrated because we do not know the pattern the words are creating. We long for certainty, yet we find that as soon as we have one story line, it slips through our fingers and another appears in its place. What was once in the foreground becomes the background, which shifts the focus of our life story. Then suddenly we discover yet another new thread.

In other words, the process of simply living life revises our earlier memories. Consider, for example, this memory: A blue-eyed child dances at a wedding. In the memory, she is at the center, surrounded by other dancers. She sways to the music. In your mind’s eye, you see the child glide across the floor, twirling, a wide smile spread across her face. Years later you run into the bride at this

wedding, and you both recall the dancing child. She mentions that it's her tenth wedding anniversary and you are momentarily puzzled. You do a quick calculation and suddenly realize the child was only eleven months old at the wedding, far too young to dance and twirl across the floor. Now the memory is revised, and a new one appears, just as real as the one before: an infant, sitting on the floor, rocks to the beat.

So why does your memory have her gracefully dancing on two firm legs? Here, the memory is altered to better fit one's current understanding of the world. The long-ago memory of the child has become consolidated with a present-day image. In this way, memories are both timeless and changeable. We rescript our history in order to ensure that our self-narrative keeps pace with our current emotional state. We unconsciously synchronize external events with our internal experience so that our memories are consistent with the emotions we feel now.

Despite the complex processes through which memory is altered, we are predisposed to dichotomize memory as either true or false, as if we were not continually revising our own stories. It is like writing an internal memoir: we seek a version of the truth—an emotional truth—rather than a factual one. Similar to the process of writing, a memory goes through many revisions. When we return to it later, it no longer looks the same to us. Hence, we typically need not decide if a memory is veridical truth or fiction. It is always the "truth" as seen through the current slant of one's life and always looks different from afar. When we write, it is the same: we can only hope to evoke, through words, the many meanings that lie beneath the surface.

One of the challenges of writing this book was finding our own voices as individuals and coauthors. As analysts, we have struggled throughout our careers to integrate the multiple contributions to our work made by teachers, therapists and analysts, mentors, and psychodynamic thinkers and, perhaps most important, to utilize the insights and wisdom we have garnered from our patients. In

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the course of writing this book together, we sought to distill what we believe to be the liveliness of psychoanalytic theory and the myriad ways it enriches our thinking. This process is similar to what happens between patient and therapist. Over time, we find a common language.

As we wrote this book, a striking parallel emerged: just as treatment changes our patients, so, too, writing or the process of putting words to our ideas has changed us. Our own understanding of theory has evolved and deepened over the course of this joint project. A wonderful and unexpected outgrowth of our writing was that the creative process affected us in personal ways beyond what we ever anticipated. As our project took shape, our stories became more articulated, and themes emerged that had shared meanings and resonated within each of us in different ways. We were continually surprised by the power of words to evoke new understanding.

We see that in stories, as with patients, the points of entry and change are through affect. If we can engage our patients in meaningful ways, then the process of healing can begin. When a new insight or understanding is developed, its power lies in reawakening old feelings that now become available for reworking and repair. It is through an enlivened connection with the therapist that a patient can resume the process of development and growth. When stories touch us the most, it is likewise because they reach us in an affectively alive way.

Stories have the potential not only to surprise and delight us, but also to disturb, confuse, or even dismay us. Being surprised by new insight is both exciting and scary. It is not always easy to listen to the stories of our patients, especially when they can cause us to cringe or want to turn away. Like traumatic memory, which can be disconnected, affectively deadened, or incomprehensible, narratives of trauma can jolt the reader. Yet as readers we know that what is most disturbing can also be most important, and it is the same with clinicians. Our most potent tool as therapists is our ability to strive

for meaning, to find some part of us that can hold on to what is broken in our patients—to not turn away.

Because we recognize that the clinician's task is complicated and challenging, we are convinced that it is crucial for clinicians to discuss their work openly. There are many reasons why this task challenges us. It is difficult to shake off the internal supervisors who sit on our shoulder, ready to judge, criticize, or take issue with our work. Beyond that, however, we struggle to recapture in language all that transpires with our patients—even though the sum of the work is exponentially greater than even the most diligent of our process notes can convey.

As writers and psychoanalysts, we believe we share strands of meaning and commonalities in life. We express our commonalities through our stories. As you see in our book, and as we know from our work with patients, our narratives vary widely in details, yet the themes are the same. We love, we hate, we want, we grieve for what we've lost, and we celebrate what is to come.

