

BORDERLINE PATIENTS, THE PSYCHOSOMATIC
FOCUS, AND THE THERAPEUTIC PROCESS

by *Peter L. Giovacchini*

Northvale, NJ: Jason Aronson, 1993, xi + 284 pp., \$35.00

Reviewed by Gerald J. Gargiulo, M.A.

And all is always now —T. S. Eliot *Burnt Norton (Four Quartets)*

Among the many books and articles that Peter Giovacchini has written, it is more than gratifying to read his latest text on the theory and treatment of borderline patients. The title, however, is too modest. Although ostensibly addressing the borderline patient, the book's usefulness is not limited to that diagnostic category. The text is clear in its exposition, focused in its technical recommendations, and sensible in its understanding of psychoanalysis. This is no *vade mecum* teaching us "the right way," nor is it consequently, a "new" theory that dispenses with whatever preceded it. Instead, it is the work of a mature analyst, giving us the fruits of his many years of labor.

That psychoanalysis has treated, since its beginnings, borderline symptomatology, identified as that or not, is one of Giovacchini's repeated, and well-documented points. In part I, the author, in the shadow of Winnicott, formulates his guiding thesis, a thesis he elaborates with numerous clinical examples as the text unfolds. Giovacchini writes: "The treatment of borderline patients has caused clinicians to revise their views about the therapeutic process. In many instances, the formation of a holding environment is more important than insight producing interpretations" (p. 85). A holding environment enables insight to become personal knowledge and only as such can it in any way be mutative. Giovacchini presents numerous and detailed clinical examples evidencing the type of sensitivity that enables a patient to find his own psychic place. In this context, his observations on the futility of much "resistance analysis" become clear: all too easily such an approach issues in an adversarial relationship, a stance which most clinicians recognize as not particularly productive, whether with the borderline or the classical neurotic patient.

Not interested in promoting the "Giovacchini" school of psychoanalysis, the author is able to be sensibly critical of the model that exclusively understands the patient through the lens of transference. His reading of borderline pathology in terms of structural developmental considerations enables him to write, "I believe that in character disorders and borderline patients, integrative and disintegrative processes can be embedded in the same time and operate simultaneously" (p. 33). The linearity of most transference interpretations is frequently unable to address such phenomena. Giovacchini, walking along the same pathway that Winnicott trod, notes that for human beings "to have needs met leads to a sense of aliveness, which is the essence of the human condition" (p. 38). Abstinence, consequently, although it is of cardinal importance, cannot be rigidly applied. Giovacchini gives us many examples of his personal involvement and interactions with patients—all in the service of attempting to address, and hopefully resolve, various structural deficits. Note his observation when he writes, "By supplying something that was missing in early life, such as a protective, understanding environment, some patients are able (within the therapeutic encounter) to establish psychic equilibrium...the interplay of specific care giving experiences and the fragility of the infant's psyche have to be precisely understood" (p. 64).

In his chapter on the concrete patient, the author notes how such pathology is reflected in our society. Observing the frequency with which psychiatrists single-mindedly respond to psychological issues with biological responses (i.e., medication), Giovacchini relates this popularity to the fact that such patients easily respond to such an approach because an interpersonal feeding is sadly beyond them. Building, in an integrated and personal way, on Winnicott's understanding of the transitional place, Giovacchini demonstrates how responding to structural deficits enables a patient to both "find" and "create" the world of the other, thus achieving a level of integration previously unavailable to them. Of course, if a patient needs to experience "creating" the analyst, instead of remembering and displacing a forgotten wish or desire, then the analyst must be internally malleable, so to speak, ready for a response based on the

patient's needs, rather than on the analyst's expectations. Giovacchini places such considerations in context, aware that there is a boundary in terms of an analyst's professional self-representation and the consequent range of response available to him or her. What he fails to mention is that such professional self-representation is highly conditioned by cultural expectations. Winnicott, for example, among others, had some patients live with him during the course of their treatment—a practice which, in America, we might find puzzling. One suspects, additionally, that many practitioners would be overly concerned about how to bill for such services.

The last section of the text presents a short but pertinent evaluation of both Kernberg's and Kohut's approaches to psychoanalysis. Giovacchini notes, as has been noted before, that Kohut's complete lack of recognition of his professional history in his writing is rather odd and puzzling. Most analysts would agree, I believe, that the fantasy that we gave birth to ourselves, that we are our own fathers, is at the core of unresolved oedipal neurosis. While acknowledging Kohut's personal therapeutic gifts, Giovacchini implies that such personal creativity need not issue in establishing a new school.

Finally, the role of interpretation, understood within the broad spectrum of the analyst's total use of himself within the therapeutic setting, is insightfully discussed. Of particular value are Giovacchini's examples of those patients who find any interpretation intrusive and assaultive, a clinically difficult manifestation of borderline pathology. Giovacchini rightly suggests, I believe, that in such cases focusing on external events offers the patient an opportunity for observation of reality without the fear of being criticized. All of which means, as I read Giovacchini, that when a relationship experience aids in a patient's modification of his or her perceptual system *then* we have the possibility of therapeutic change. Giovacchini's approach, with this type of pathology, is a superb example of what is meant by a "holding environment."

The present text can be read repeatedly without danger of losing its value. It summarizes years of clinical experience and reflection. Additionally, Giovacchini clarifies many of Winnicott's

insights in a way that makes them amenable to therapists. While the text is long, it captures what it means to work with the timeless *now*, which involves not only the presence of the unconscious in our lives, but also an essential aspect of our personal aloneness.

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THE CHANGING FICTIONS OF MASCULINITY

by *David Rosen*

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Reviewed by Daniel W. Ross, Ph.D.

Pardon the cliché, but David Rosen's *The Changing Fictions of Masculinity* may be a "cutting edge" book. For those who suspect that it could be a reactionary attack on feminism or a trendy pop psychology appeal to Robert Bly's acolytes, fear no more. *The Changing Fictions of Masculinity* is both a complement and a compliment to feminist theory. Rosen's book is serious literary criticism that deserves a careful reading.

I say "careful reading" because readers must be urged to consider *The Changing Fictions of Masculinity* in its entirety. The book has chapters on the following works, covering a full millennium: *Beowulf*, *Sir Gawain and the Green Knight*, *Hamlet*, *Paradise Lost*, *Hard Times*, and *Sons and Lovers*. Such breadth poses potential difficulties, even misunderstandings. If, for instance, a medievalist chooses to read only Rosen's chapters on *Beowulf* and *Sir Gawain and the Green Knight*, I suspect that reader will find Rosen's work superficial. The strength of Rosen's book lies not in interpretation of individual works, but in the connections he makes gradually and carefully, connections which indicate recurring motifs in this broad span of texts about the problems and anxieties that literature reveals about masculinity. Thus, I appreciated Rosen's reading of *Beowulf* much more after finishing his later chapters on *Hard Times* and *Sons and Lovers*. His emphasis on *Beowulf*'s and