

# We are IntechOpen, the world's leading publisher of Open Access books Built by scientists, for scientists

6,900

Open access books available

185,000

International authors and editors

200M

Downloads

Our authors are among the

154

Countries delivered to

TOP 1%

most cited scientists

12.2%

Contributors from top 500 universities



WEB OF SCIENCE™

Selection of our books indexed in the Book Citation Index  
in Web of Science™ Core Collection (BKCI)

Interested in publishing with us?  
Contact [book.department@intechopen.com](mailto:book.department@intechopen.com)

Numbers displayed above are based on latest data collected.  
For more information visit [www.intechopen.com](http://www.intechopen.com)



# Human Reconfigurations: Conversations on Being Therap(ist)eutic in Time of Covid

*Jolanda Spoto, Valentina Stirone and Romina Coin*

## Abstract

In this paper the authors' aim is to reflect on the impact the Sars-CoV-2 Pandemic has had and is still having on our external and internal reality, in terms of individual and collective implications. In an open dialog with colleagues and patients, through a psychoanalytic viewpoint capable of respecting the suffering and the solutions identified by the Ego-subject within the "therapeutic dance", it was possible during this period to observe movements and processes underlying these changes. Throughout the paper, the authors highlight both difficulties and resources that the patients put in play within the relational space and the need to "reconfigure" them; our focus is on the creativity and the repercussions this event, significant for the majority of the Society, has had on the practices and beliefs of each of us. The peculiar experience of loneliness and isolation, faced during this pandemic emergency, has profoundly transformed and shaped our living space, demanding a collective reorganization of the social space and thus forcing us to rethink our humanity. In the relational exchange, the possibility of finding one's own space to exist and to inhabit one's present, can be unfolded. A shared resilience is necessary to face current challenges.

**Keywords:** ego-subject, collectivity, reconfigurations, relations, space, inhabit, social dimension, loneliness, suffering, creativity

## 1. Introduction

From February 2020 our lives have changed in an unexpected way. While we are writing our reflections the spread of the contagion is worrying because of unexpected variants of the virus, and the emergency cannot be considered over. Therefore, it is necessary to think of this writing as an outline of reflection on this enormous change that we have been going through for more than a year now.

Some food for thought will therefore concern the effects on our existence, physical and psychological (if we still want to consider them separately), of the perception that a foreign body is spreading among us, putting our safety at risk, and of the limitations implemented by governments to contain its spread.

The interruption of all activities that accompanied our daily routine, although destabilizing, can be an opportunity to highlight and bring reflections on some assumptions and some changes that have characterized our lives in recent years, without our full attendance.

Suddenly space, time, relationships, everyday life, the sense of our proceeding, have taken on different colors. Reactions have been progressively more differentiated, and only in the coming years, with a look less immersed in the phenomenon, it will be possible to have a reading with more defined boundaries and to understand the long-term effects.

What we would like to present in this work are the first impressions gathered in this first period, in the exchange with patients, with colleagues, and in our daily life immersed ourselves in this same reality. In Victor Turner's words, we are in the midst of a liminal phase where everything is possible except returning to the previous state [1].

## **2. The breakout of a pandemic**

If we had been asked to think about what a pandemic would have been like and how we would have inhabited it, we would probably not have imagined it that way. We are likely more inclined to imagine impactful events, delimited in time and definitive, in which little can be done, if not heroic acts that are the prerogative of a few.

In fact, the spread of Sars-CoV-2, for more than a year now, has changed our world as we knew it, not so much in a sudden and evident way, but by transforming that fabric of habits and implications which structure and move our existence. In an anthropological reading of the pandemic, Toseito recalls the concept of "total social fact" by Marcel Mauss, precisely to define "a significant event for the majority of society that has repercussions on the practices and beliefs of all of us" [2]. We all remember how this emergency initially affected our lives here in Europe; it initially felt as a distant fact that would not concern us, with manifestations of intolerance or solidarity towards citizens of Chinese origin (or Asian in general), with growing concern and disbelief when we realized that the virus was already circulating widely in our territory and in our community, and few days later (at least here in Italy), with drastic and strongly impacting daily life measures, which still characterize it to a great extent. Pietro Saitta [3], in his comment on Covid-19 as a "cultural and political object", observes how "the times of suspended normality are those that better illuminate the ordinary than others". In fact, the outbreak of a social matter that interrupts and alters normality "highlights the relationships and ties of everyday life in times of peace". This alteration of "normality" allows us to highlight some assumed assumptions, automatisms and functioning that have become inherent part of our cosmology, they normally belong more to a pre-reflective and implicit sphere, something that directs us without even realizing it.

Again Toseito [2] observes that the pandemic has precisely "reconfigured our practices relating to movement and communication, it has broken the balance between these two dimensions, which the anthropologist Arjun Appadurai identifies as the foundations of globalized modernity". A halt in the movement that has long characterized our realities, both on a small and large scale; the possibility of moving so quickly and in so many people to the other side of the world has to be considered, actually, something recent and certainly impacting. A revolution that is grafted onto another revolution in progress, the latter which seemed indisputable and unstoppable. This arrest of concrete spatial movement has been accompanied by an enormous expansion of the use of technological devices to communicate and keep contact spaces, which were suddenly interrupted, open. We are hardly fully aware of the era in which we live in, of the transformations underway, of the direction that some aspects are taking; however, when something so imposing is

looming, we are given the opportunity to become more aware of what is moving-with-us. In the first lockdown phase (it is identified as the months from March to May 2020, taking as reference the first measures to contain the spread of the virus taken by the Italian government), it was common to read some comforting slogan like “everything will be fine” and “we will make it” that accompanied a sense of human and national solidarity, which characterized the first phase of this emergency period. But another feeling also arised and it was represented by another sentence, which appeared in different languages and in different contexts: “We won’t return to normality, because normality was the problem”.

In the first period of pandemic emergency, a shared experience of shock, led to mobilize as much energy as possible to stay alive (some on the front line putting all their effort to do the best possible to ensure adequate care, some immobilizing to stop the contagion), but there was also a sudden realization of some changes, and perhaps limits, previously denied or even just poorly enlightened.

The post Coronavirus is as disturbing as the crisis itself, in fact many share the idea that the world will no longer be what it was before, but what will it be then? We have entered the era of uncertainty, the unpredictable future is now in gestation [4]. In a short time, we have passed from the uncertainty about the origin of the virus to its propagation, its mutations, its treatments as well as its political, social, psychological and planetary consequences.

### **3. How long does an emergency last?**

The human being is phylogenetically ready to respond to sudden and adverse events, mobilizing as much energy as possible to survive. If we refer to the psychotraumatological studies and evidence [5–8], we can consider the first period of this pandemic as the traumatic event that we were ready to respond to, despite the subjective differences of the case, mainly with subcortical activations and with almost automatic mechanisms and with poor reflexive mediation. The possible answers in situations of extreme danger are attack, escape and, as a last resort, collapse, when the first two fail or are impossible. Much has been said about the terminology and the metaphor of war used to talk about this pandemic [9], the concept of enemy often used to identify the virus risks of creating a real misunderstanding, thus mobilizing incorrect reactions that could increase the sense of helplessness. Precisely, a visible enemy allows confrontation or escape but in front of this invisible entity, we cannot attack and even escaping is difficult. Is therefore collapse, or to a lesser degree denial, the only exit strategy, in conditions of grave danger where the only solution is “pretending to be dead”? However, if we pause on the metaphor of war, widely used in some countries to talk about this pandemic, we could ask ourselves: what kind of war? Then perhaps this comparison can be useful, in another way, to linger on some questions about the duration of some events. Probably no one at the beginning of a war would think of a long duration, perhaps of years; also as a psychic defense mechanism, we are led to see that event as point-like and not lasting, probably only this way we could have the energy and strength to cope with it. So it seems to be like this also for this pandemic which is still ongoing while we are writing and it is not over yet and certainly it is not a blitzkrieg. What kind of reactions, in the short, medium and long term, are therefore possible? Over time it will be more likely to understand the responses prevailing in the different phases of this pandemic, and the long-term effects that certain reactions can have, on the functioning of the I-Subject and on its auto-hetero-regulation, in the continuous exchange with the reality [10].



It is also interesting to mention the impact of the restrictions implemented to contain the contagion, here in Italy managed from October onwards through a system of zones (different colors have been used to indicate the greater or lesser danger and therefore the need for more or less stringent measures). In a discussion with colleagues and in the exchange with patients it was possible to collect an observation that we consider interesting to highlight: it was reported how this repeated scenario changes created a succession of “last days”, “last times”, “last meetings”. If on one hand the gradualness can be considered easier for our psychic apparatus to digest, on the other hand the continuous change of state might have created an emotional instability, whose long-term outcomes will only be understood in the future.

The issue of time, which we will discuss later, can help us understand the different observed behaviour as well as the different experiences, of citizens between the first and second phase. The first phase was characterized by a greater readiness to accept indications, the need to receive and show solidarity, and a poor differentiation of behaviors. In the second phase, however, the single management and the climate of sharing and solidarity seem to have left room for different positions, contrasts and less willingness to waive.

It is difficult to say whether precise temporal criteria for defining a state of emergency exist, from a sociological point of view; from the psychological point of view, the difference between a traumatic event delimited in time and what is defined as a prolonged trauma, a traumatic atmosphere, makes the possible outcomes of these events different from each other. A distinction between Post Traumatic Stress Disorder and what is recognized, by various authors dealing with trauma, such as Complex Post Traumatic Stress Disorder (it has recently joined the European diagnostic categorization ICD-11, not so for the DSM-5) consists in a more pervasive and destructuring impact on the personality, and concerns etiopathogenetic situations prolonged over time and often with a characteristic of impossibility to escape [11].

It is not possible here to go into clinical reflections on the psychic outcomes of the pandemic, but we can reflect on the prolonged duration of this situation and ask ourselves if it is still possible to consider it “emergency”. Indeed, it is not possible even at the time we are writing to consider this period behind us, so we are forced to reflect “in vivo”, probably in a strongly embodied way, which has not yet left room for reflexivity, as we usually define it, that is, detached from what we are experiencing at a precise moment. A question that will be discussed more deeply later on, concerns precisely the space for reflection and understanding, not in the “après-coup”, as we are used to, but initiated at the same time as the event, especially if it is excessively long.

### **3.1 The temporal and spatial dimension**

In the various conversations we had with patients and colleagues in this period, and no less in personal experience, it was soon evident that the experience of time gradually assumed curvatures that we are not used to. We tend, perhaps also for psychic economy, to conceive time in a linear and non-contradictory sense. Having worked for some time with traumatized patients, accustomed to temporal leaps and contradictions in autobiographical narratives, it was soon evident to us that what was happening followed this temporal circularity, which tends to curl up around the subject, isolated and plundered by those routines that allow to “keep things in order”.

In personal life, time became more and more relative, normative criteria (such as data and recurrences) less usable, no longer responded to perceptions of

speed/slowness, brevity/length; it was simply something else. It was a suspended time, which followed the tendency to put what was happening in brackets, waiting to return to normality, or on the contrary to absolutize it, as when we are experiencing such intense pain that we have the feeling that it will last forever [5]. In conversations with patients, or in discussions among colleagues, we found ourselves clearly dividing this situation from life, as if this were not part of it, as if this were not fully and profoundly life. In the process of life, a body has been grafted which, again, we recognize as foreign, not integrable, detached from the plot of what we consider to belong to us.

The days that are always the same, the loss of the references we were used to, especially in the first long lockdown, led to a crushing of experiences and an agglutination around a theme that, more or less consciously, we only wanted out of our reality. This could be considered as a nuance of a well-known defense mechanism, which has also accompanied this pandemic situation, which helps us in the moments of greatest difficulty to cope with it: denial. If a clear denial cannot be sustained in the course of this emergency, although denial and conspiratorial positions have emerged especially in the second phase, this putting time and life in brackets can be considered a prelude to what will happen next.

Yet, it is also possible to consider this abandonment of the linearity of time and history (especially if identified with a path towards unlimited progress) as an interesting factor compared to the illusion of total domination over it. One of the issues that distinguish our time is precisely that of the use of time, the hunger we have in consuming it, filling it and never allowing ourselves to inhabit it. The feeling of never having enough time, which produces suffering and feelings of growing alienation and dissatisfaction, is precisely the mirror of our use and abuse that prevents us from being, in the continuous pursuit of doing.

Those of us who are inclined to never stop, now that we are forced to do so, we face an opportunity and “over the course of time, time passed on my steps and slowly I was filled up with forgotten things that slowly forgot me” [12].

The time we have to live cannot be chosen, for this reason, as the existentialists maintain, we are thrown into the world and the only answer we can give to our throwaway is a project of a world hopefully authentic, unique and unrepeatable, and this freedom makes man condemned to liberty [13].

Only now that the pandemic stops the world, and even our “little world”, we do realize what world we had built, public and private; and that the dimensions in which we live, time and space, have changed radically and that the space, as well as the time that we have already talked about, undergoes an identical upheaval. In fact, with the pandemic we have gone from a urban space, dense, overcrowded, full of lights, voices, sounds, to an empty, dark, silent and semi-desert space; we have gone from the density and frenzy of a thousand relationships, to a single relationship; we went from changing a thousand clothes to living in a single space wearing disused home clothes, thus stripping ourselves of desires and wearing a psycho-uniform instead and being in relationship with whoever is there, regardless of being comfortable with them or not. The multiplicity of spaces, the cosmopolitan nature of places and the speed have made room for slowness, staticity; and in this living some have felt safe closed in their dimension of semi-isolation, others facing sacrifices and sufferings have experienced a real situation of suffering and nightmare. Reflecting on what happened, one remembers the times when one could freely live our time and space, one could organize outings, a weekend, a trip, choose a film and go to the cinema or to an exhibition, conditions that assume a connotation of privilege in front of a succession of DPCM that regulate and discipline our life and thus our feeling.

#### **4. The relational and collective dimension**

In this suspended time, many people have tried to live their time differently, they have dedicated themselves to tasks that they had delegated or left aside for a long time, they have ventured into new activities, experiencing in an unusual way a being in everyday life that suddenly seemed empty.

Already in the first phase of severe restrictions, different positions were observed in regard to these new routines. There were those who appreciated a recovery of self-care time, those who could not wait to return to their previous habits and those who began to reflect on their previous lifestyle, identifying its limits and planning possible changes.

But living is something that does not only concern individuals and their doing, but above all concerns our way of being in relation to others, in community.

Containment measures, prescribing distancing and isolation (or limiting social contacts to a minimum beyond the close ones – the cohabitants - and necessary - from indispensable work), could be considered as a “collapse of collective life”, on which much of our life is based. As Van der Kolk states, “Our culture leads us to focus on our own uniqueness, but, on a deeper level, we hardly exist as individual organisms. Our brains are designed to make us function as members of a tribe. Most of our energy is spent on connecting with others” [5].

We therefore have found ourselves in a paradoxical situation in which, as observed by Giuseppe Grimaldi “avoidance rather than contact, distance rather than commonality, solitude rather than the group are reconfiguring what it means to” make community “[...] redo everyday life, however not starting from trust and closeness but from mistrust and distance” [14].

But if it is true that we are deeply social creatures [5], how can we live in this new configuration that greatly redefines the way we relate to each other? With geographic, ethnic and social differences perhaps, making community has always been conceived in the proximity of bodies. So what happens when bodies are potential vehicles of contagion, when does proximity, instead of assuming positive connotations, become a herald of danger?

At the end of February already, in Italy, the first precautions began to be suggested, avoid touching each other as much as possible, stay at a safe distance. Then the more restrictive measures came, up to isolation which, for those who lived alone and no longer went to work, became almost total, except for some fleeting encounters at the supermarket or with neighbors in proximity contexts. As much as solitude may be appreciated, those who appreciate being able to take refuge in there, this condition never corresponds, apart from exceptional situations, to a state of almost total and obligatory isolation. In psychopathological evaluation, withdrawal and isolation are indeed considered serious symptoms that distinguish severe disorders such as psychotic or important depressive states.

Tosetto [2] states in this regard: “This retreat is not a free choice of hermitage but, on the contrary, it drags behind the expectations, roles and practices we have experienced in public spaces”. The author articulates, as previously reported, the impossibility of movement and a communicative hypertrophy, made possible by the availability and wide diffusion of technological devices, which “through the transition to the virtual [...] crumbles the boundaries [...]”. Everyone squeezed onto the screen of a device, we translated the habits of everyday life that concerned the way we used to meet, into a deterritorialized [15] and separated level.

Starting from a relational perspective and from the affirmation that there cannot be an individual isolated from relationships with the other, even in exceptional conditions, reflections on the individual inevitably lead to come to terms with



an inseparable co-presence of the individual and of the group dimension and the circularity of the relationships between these different dimensions, in a reading of “circularity of relationships” [16]. The Covid-19 emergency has brought about a revolution in and of our daily life, leading us individually and collectively to reflect on the effects that have been produced on the interaction on social ties. There is no doubt that technology has opened up new possibilities for communicating at a distance, impacting our sociality, thus reducing our opportunities to be together and relate to each other; an extreme negative example is the Hikikomori Syndrome, a pathology widely spread in recent years that describes a particular psychiatric phenomenon manifesting as a profound social withdrawal, a self-exclusion from the outside world and a total rejection of any form of relationship, if not virtual. However, the need for relationship and sociality is still evident, alive, profound: the desire to see each other, to find each other, to communicate, to hug, to aggregate and simply to be among others, remains and is placed as the “higher floors of our feeling”. The relational dimension has been undermined in its roots and through a sense of destabilization and collapse of certainties, it has forced us to deal with pervasive feelings of distrust, deception, suspicion, fear that many people have resorted to cope with in dysfunctional way of isolation and by staying at home, identifying them as a safe haven, thus leaving an indelible mark on social relationships, creating a large consumption of psychic energy, which over time, has inevitably produced, states of anxiety, frustration and boredom. Covid represents for the current Western generations the first time in which history has entered and influenced our lives in such a meaningful way that transformed their dynamics. Until before the Pandemic, “History and Politics” were perceived by most people as external dimensions to our lives, afterwards people have began to feel that they no longer have control over their lives but that they are heterodirected by exogenous factors, which have pervaded the most intimate dimensions, configuring the right to free movement and the freedom to express and live one’s desires and needs. During this period of great uncertainty, we have in fact witnessed phenomena of strong polarization between “denial and security” for example, two apparently opposing postures that have in common the impossibility of holding up, for more or less long, uncertainty, confusion and bewilderment. The continuous closures, openings, closings and reopenings that have followed one another, have exasperated a longing for return to peace, requiring a continuous and extraordinary effort. One thing in the course of these long months has become clear, Covid is a Pandemic which by its nature can be defeated only through collective actions, both as regards the infection, the treatments and the vaccine. Once again thoughts, feelings and individual actions can and must be relocated in a framework of complex globality which, as Ceruti had already argued in 2018 [17], is the great challenge of our age. The philosopher added that it is urgent to rethink our traditional paradigms and effectiveness of our established modes of human action. This challenge requires careful and weighed reflection on the nature of national identities and their “community of destiny”. Therefore, it is urgent to reflect on the psychological ties’ complexity that the members of a society feel because only in this way, in a rereading of the circularity of relationships, we could deal with the suffering and the ties of the individual and of everyone.

## **5. The return of the body and the eruption of death**

A lack of human contact with others, in “real” sociality, which involved an encounter of bodies, was contrasted by an excess of the presence of vulnerable, sick, dead bodies.



The discussion concerning the communication style used during this period by mass media, to describe and narrate what was happening, cannot be treated here because it deserves an analysis and a dissertation on its own. However, it is important to underline that in this period, characterized by limited possibilities of meeting, exchange and discussion, the impact that information can have is to be considered different from that of a period in which it is mediated by other methods of knowledge, less impersonal and asymmetrical. The method used to inform us about the current emergency has influenced, in an exceptional way, our thoughts and the cognitive constructions that we were building with respect to our current reality.

The body dimension is often scotomized by considering ourselves human beings, all focused on our rationality and our “higher” mental functions.

In the new everyday life the body started to assume previously unknown boundaries, the contact no longer allowed, the movements no longer natural. Other people’s bodies gradually became the bearers of potential dangers, our embarrassed way of preserving the others from the same potential danger.

The body therefore assumed an imposing nature to which we were not used to, it was through it that the virus could reproduce and stay alive, endangering our life.

Will the procedural memory and the somatosensory memory keep these “missed acts” or rather withheld, this new way of relating, this caution and this distance, necessary up to now? At the end of the emergency it will be possible and important, to evaluate the results of these limitations and the new bodily and relational configurations.

From a clinical point of view, there are several aspects to pay attention to. Having transferred the therapeutic work from the studies to the virtual platforms, has allowed to maintain a therapeutic and relational continuity, especially in this period of great changes and challenges, and it has been a way to guarantee presence and stability, but we cannot ignore the differences between the two contexts and the effects of these translations.

Fabio Dei [18] asks himself “if Freud had been able to use Skype, would he have constructed the analytic setting in a different way? Would he have renounced the coexistence of bodies and elements of material culture (the ancient and ethnic objects that crammed his office, referring with their presence, to the “archaeological” depth of the unconscious?)”. His answer tends towards yes, being psychoanalysis “a verbal therapy that avoids contact between bodies (as opposed to popular therapies studied by anthropology which are based on touch instead: yet even in these, the principle of action at a distance is valid)”. Today many psychoanalysts pay increasing attention to various factors and they do not just consider the verbal component, although, what is exchanged through language still plays a preeminent importance. But it is perhaps precisely because of, or thanks to, this sudden change that some aspects have come to light. Beyond the attention to the setting, often simplistically identified with a physical space, many therapists have paused to ask themselves the type of work possible in those new conditions, both for the state of exceptionality in which they found themselves and which involved both (we will return to this point later) and because of the differences in the new “rules” of the meeting. The tendency to “go back to doing what had always been done”, to put in brackets the consequences of the spread of this virus and the containment measures adopted, certainly also affects mental health professionals, who have been no less affected from what happened. Meeting in a completely new way has brought multiple meanings and multiple reflections; here we focus in particular on the absence of corporeality. If on one hand, as Fabio Dei observed, this new structure could be the essence of the “talking cure”, few have considered this type of meeting preferable,

especially when extended over time. Knowledge, learning, change, necessarily pass from a substantial involvement, which cannot be separated from the body, precisely because it passes through it.

This same body, through which we experience our being in the world, has been discovered vulnerable, or rather rediscovered. Vulnerability, the very essence of being alive, is in our time an aspect that we would like to deny or overcome, for that more or less explicit omnipotence that distinguishes the contemporary human being. The worry of getting sick, the fear of a body contaminated by an invisible and potentially lethal being, have brought back to the center the absolute violability of the body and human existence, which we tend not to consider in our reality, especially in the so-called developed countries, where early death, but perhaps by now death in general, is considered something exceptional and unacceptable.

And the return of the body and its mortality was accompanied by death burst that could not be ritualized. Academics have recognized, among the anthropological constants, the cult of the dead and the passage between life and death, as a moment to be accompanied by collectively shared rituals.

The now well-known images of the army wagons that, in Bergamo, carry the bodies of COVID-19 victims away from the hospitals, will remain a symbol of this cultural break that highlights the state of exceptionality. As Dei affirms, we observe an “anonymization of death, and the absence of any ritual filter that helps, to use De Martino’s words, to transcend anguish in value”, and always taking up De Martino’s concept, it brings us back to the importance of groupality in order to go through this phase of transition, both for the living and for the dead, “this transcendence can only be collective, communitarian. There is no reintegration into pure individual experience” [18].

Some hypothesize, once the emergency is over, a recovery of this collective rituality, which can be reparative with respect to this cultural break that will certainly leave scars. Dei is not positive about this, however he asserts “Having studied the forms of traumatic memory, even if in contexts completely different from this one (such as the massacres of civilians in war), I feel I can foresee rather bitter memorial conflicts” [18]. The loneliness resulting from the death and loss of a loved one brings excruciating emotions and the idea of dying “alone” is the most painful and excruciating expression that one can relive. This pandemic has seen us coming to terms with the awareness that death could not be shared with anyone, that the precious little world of a loved one would disappear with all its unique memories, feelings, experiences, dreams and desires known only by the one who was disappearing, reminding him of having no importance for the people who remain and giving back in turn, to those who wanted to cry and remember that person, the human need to be able to give and have a farewell from loved ones. The mystery of death and dying is immersed in the deep waters of solitude [19]. So what distinguishes loneliness from isolation? Loneliness is defined by the relationship to the other, which does not happen in isolation, it is staying open to the world of the other, of people, of things, keeping oneself open in a meaningful relationship with others. And in this, there is the real antithesis with isolation, in which one is closed and lost to the world, in its dimension of disinterest in interpersonal and community values. The emergency saw us sink into solitude but also into isolation and in some cases found us particularly negative, monads without doors and windows and in other cases, particularly positive, capable of opening loopholes and drawbridges to the experience of the story of suffering of the other which also met ours a little.

The invitation that Nietzsche addresses to each of us is to flee into our solitude, a solitude that in a different way belongs to each of us, to be silent as the tree that rises above the sea is silent and as the stone is silent. When loneliness ends, then the market begins [20].

We faced a crisis of meaning that sees us rethinking profound categories of living and dying, confronting ourselves with desperate fears that affect and attack our body, alive and dead, and ask us to activate a deep look in trying to rethink what has always been, as it has always been: “mourning makes us human and not being able to say goodbye upsets us”, the devotion and the cult of the dead transcends religions because, as the anthropologist Marta Villa [21] says “it is an intrinsic characteristic of being human”. In the time of Covid we face a mutilated mourning and this marks a profound fracture from a historical, cultural and anthropological point of view. Forced hospitalization has prevented us from greeting our loved ones, it breaks a moment that is personal but cultural at the same time, and checkmates the possibility of the individual being able to alleviate the moment of detachment from this land with the presence of the group, not being able to thus collectively manage the pain.

The psychological repercussions of this impossibility echo a *pietas* that goes beyond good and evil and that is even reserved for an enemy and that even in times of war was respected with a truce aimed at burying the dead which is why, in this serious emergency health, we are led to individual and collective destabilization at the same time. History and our history struggle to meet. How can such peace be found? It is therefore really important to think about mourning elaboration, where the mourning process is interrupted and there is the risk of being trapped and doing so we must keep in mind that “this remains, in spite of ourselves, a great shared historical moment, and that adequate support psychological can be fundamental to elaborate such conditions of complicated bereavement. Suddenly Covid broke personal death into our daily lives, so far postponed to the future, into our daily lives, counting and quantifying the mortality rate, with a number in brackets in red, with a small positive sign [4].

## 6. Recognizing oneself in a single reality, in a world made up of islands

As already said, pandemic danger, the containment measures adopted to cope with it, have suddenly made it necessary to rethink the places and methods for continuing psychotherapy with patients. The disruption of the therapeutic work has led colleagues to discuss issues connected to this particular situation in a way that has probably never happened before in terms of frequency and intensity. Multiple reflections have been made about the setting change, with very different positions, as already mentioned. However, it can be hypothesized that the majority of therapists considered it essential to give continuity to care, especially in this particular period of high stress, by finding alternative methods of meeting.

Nevertheless, it seems more interesting to us to focus on another aspect discussed in these close comparisons: what should be handled in this “new meeting space”? The Covid issue, especially in the first pandemic phase, not only became part of the topics addressed in the session, but also seemed to occupy a different space. According to the discussions we had with colleagues at that time and our own clinical experience, there seemed to be a “surplus” of reality that it was difficult to place. The feeling of losing a degree of asymmetry, which allowed the therapist to “read” the reality with sufficient distance, to be able to understand it and restore it digested, made the therapeutic work different, apparently more complex. It has been stressed by many that this “social fact” involves everyone, recognizing this situation as different and unique.

It is curious to think how, focusing on our personal reality, we sometimes forget that we are part of a world that moves together and, without having to resort to complex phenomena such as the “butterfly effect”, there is nothing that really does not concern us. We tend to see ourselves outside the world, as if we were not part of



it ourselves, as if we could observe it from the outside, even protect it, forgetting that we ourselves are what we consider and define “nature” and what we destroy or protect is ourselves, inserted in our reality, deeply interconnected with it and the other living beings who inhabit it; as Siegel claimed “Ironically, we come to feel attuned to ourselves while we also attain a sense of being connected to a much larger whole” [22].

Minolli [10] observes how there is the “danger of letting oneself be taken by self-organization and eliminating the eco-organization seen as “disturbing” because they are either opposed or remain distinct as if they were two alternative aspects”.

In our clinical practice we meet people from very distant countries, defined until recently “third world” or “developing countries”, although the stories they brought, as well as their reading, may seem distant, we soon realize that we can share feelings that allow for a profound exchange in which the distance tapers until it vanishes.

This danger, which has involved everyone, has allowed us to touch this closeness, the perception that what happens even far away from us directly involves us, to the point of upsetting our daily lives.

Therefore, how is it possible to inhabit the therapeutic space by sharing experiences and sensations that have rarely crossed us in such synchrony? Is it possible to understand what is happening to us “in the heart” of the very moment in which we go through it or is it only understandable in the *après-coup*?

Minolli [10] identifies two levels of functioning of the I-Subject. The first level is given by the “conscience” which has the task of “maintaining coherence with the received configuration and affirming itself”. The second level is given by the “consciousness of consciousness” which allows the I-Subject to “recognize its own configuration and existing being”.

It is possible to hypothesize, although it cannot be taken for granted, that in an emergency moment the I-Subject is more inclined to keep itself alive by affirming its own coherence and only in a moment of less external pressure, the activation of the “consciousness of consciousness” leads to a grasp of what has happened in the movement. If we remain in the conception of a body subject to external stress and its reaction to this pressure, as well as in the concept of resilience as the ability to return to the initial state, we risk losing the possibility created by this grasping itself in transformation, in a movement that it can go far beyond the “initial state” from which one started.

Several authors, among which we want to mention Marcelo Viñar, a Uruguayan psychoanalyst who lived under the civil-military dictatorship, criticize the concepts of trauma and resilience because, when decontextualized, they risk “fixing” the person in a out of time and out of context state, determined without escape from the outside. Viñar [23] writes about this “for a long time I have opposed the medicalization conveyed by the concept of PTSS (Post Traumatic Stress Syndrome) and its proliferating symptomatology, just as I have equally opposed resilience and its voluntaristic normalization. From pass-partout words by which pathologization replaces reflection. In their place, we have proposed the notion of sign, replacing that of outcome, since this is characterized by the pejorative tone of the handicap; on the other hand, the sign returns the multipurpose dimension of the painful experience, both in the sense of a handicap or outcome and in the sense of creativity”.

## **7. Being therap(ist)eutic? Open dialogs between resilience and creativity in a pandemic**

In all these months we have been constantly engaged with every ounce of energy and by all means to avoid contagion, to maintain social distancing, hoping that the lockdown of the bodies would not irremediably translate into a lockdown of the soul



and feelings, thus living the pandemic as a watershed between the world before and the world after and where no gesture, however small, can be taken for granted. In several articles and texts, the need for the presence of the other has been mentioned, the coordinates of “dematerialization” of life, as the safest way to keep everything and everyone safe, displacing so many of our functions on the network, placing the relational sphere in the abstract art of bodies. But we have lacked and we lack bodies, we miss feeling and touching that are among the highest senses as stated by Hegel, because they connote us as humans and whose lack over time, could lead to being socially and spiritually distanced humans. Anyone who has given a caress or a kiss knows that in that instant the soul comes out of itself to meet another. For that meeting we fought, we are fighting and we will fight to keep our bodies alive. With this idea of living and embodied presence, we therefore come to terms with the psychological and social effects of a prolonged time of distance learning, smartworking or home-working, which are not necessarily immediately visible but whose prolonged effects could accompany us for a long time, and as Lingiardi argued in his recent interview [24] we do not contrast the culture of the *agora* with that of the hospital, but we can think that this is both a psychological and cultural opportunity to rediscover solidarity and protection of the most vulnerable, to redefine and rethink relationships with ourselves and with each other. Vulnerability that could belong to each of us. The body, both in its absence and in its hyper-presence, has been the undisputed focus of this Pandemic, it has been placed at the center of private considerations and public debate, invested with the restlessness of individuals but also with global interest. The body was presented as fragile and to be protected, shown to be delicate and sick and no longer put on display as in recent times, by the dictates of fashions and esthetics, but instead health has clothed and covered a collective habitus. We face social distancing and a crisis of presence, the primary feeling of one’s “making sense” in a world endowed with meaning”, a feeling that according to the philosopher De Martino [25] is however a precarious acquisition, constantly exposed to the crisis risk “the existential drama of being exposed to the risk of not being there”.

In the processes of the “Presence to oneself”, patient and analyst work on shared method conditions that allow an opening to the possibility of going, both beyond the other and the other made one’s own [26] facing it and taking positions about it. This is where the space of crisis and creativity is experienced and in which you can actively choose your own path. Life poses challenges to us and never, as in the past year, the challenge has been and is ongoing, with objectives to be pursued, doubts, our patients’ anxiety and our own as well, to be handled with care and attention; “The quality of creativity not only goes beyond the contents, but it is present regardless of the achievement of any objective, and the mere fact of glimpsing the light at the end of the gallery already modifies one’s walk. It is already creativity to be on the way, in motion, despite the lows and the halts, towards taking one’s life qualitatively in hand” [27]. We as therapists can only emotionally support the process, always being on the patient’s side, whatever path he may take. In this presence and creativity of being, our Resilience could reside, as the ability to be Present to what is happening in that given moment.

After this long period of distancing and the strenuous attempts to avoid contagion, the feeling of needing to touch each other again, to contaminate oneself seems to be gaining ground; the ease with which the virus passed from one body to another has shown how much considering ourselves as single and separate beings is an illusion that is still difficult to sustain. Perceiving oneself as part of a single reality can be experienced as a bond but also as an opportunity to regain possession of a us that is constitutive, not questionable, and that does not block our personal progress but on the contrary supports and enriches it, in a dance which is made up of balance and rupture, harmonic by the mere fact of existing.

## 8. Conclusion

During this very long period, many sessions took place online, many “meetings” had instead of the consulting room, a “virtual” setting, such as the telephone and the internet. We constantly questioned about the quality and therapeutics of these interventions, and how it was possible to continue to be so, albeit with great fatigue reported by both sides. Covid entered the sessions, not only through the rooms of the house, the children and pets that burst onto the screen, but with all its reality and emotionality, the shared reality and the concrete suffering of the historical moment, they were no longer contents brought only by the patient, did not concern him excluding the therapist from that given moment, they were our daily life, our life. As reported by the psychotherapist Nancy Mc Williams [28] the Pandemic has made our work more intimate, informal, more revealing of the real interdependence between the patient and the analyst.

The fear of Covid affected both of us. It is here, in this theory of suffering, that this conception is assumed as a condition inextricably connected to the passage. “When a system faces a passage it is inevitable that it is bad, its passage from one state to another implies a passage that is not neutral at all, because it is marked by a laborious and dense elaboration, aimed at assuming the new. This transition is not a private, individual, intrapsychic fact, but also involves the outside world and the environment. The objective of the clinical intervention cannot therefore be the elimination of suffering, neutrality, but the therapist must make sure with his or her presence, that the patient appropriates it, actively, increasing self-awareness to make himself Present to himself, and to accept his own suffering and use it to cross the ford” [29].

Therefore, there is no normality to return to, a return to a first free from suffering, but an active, creative, suffered being there, which leads us to co-construct together, patient with analyst, person with person, an “uncertain here and now” made of human beings. In this perspective of care as a social paradigm, there is an intrinsic peculiarity of the relationship that binds patient and analyst together, trusting and relying, which transforms the process of taking care into an authentic anthropological project. Even beyond the Coronavirus these aspects belong to the human being, “the extraordinary thing of our time is to be open and available to a new vision of the world and therefore of the human being” [29].

## Acknowledgements

We thank the Center of Milan of SIPRe (*Il Centro SIPRe di Milano*), and the “Couple Project Area” (*L'Area Progetto Coppia del Centro SIPRe di Milano*) in particular, that organized a series of Webinars on the topic, called “Live, discussions to stay open” that primed the reflections for this paper, a particular thank to Francesco Dettori, Linda Alfieri, Enrico Vincenti, Laura Girelli, Riccardo Strada, Massimo Schneider, Marcello Florita, Alice Bozza, Mara Ciracì, Giuseppina Riscassi and Claudia Garlini.

## Conflict of interest

The authors declare no conflict of interest in preparing this paper.

IntechOpen

IntechOpen

### **Author details**

Jolanda Spoto\*, Valentina Stirone and Romina Coin  
Italian Society of Relational Psychoanalysis (SIPRe), Milan, Italy

\*Address all correspondence to: jolandaspoto@gmail.com

### **IntechOpen**

© 2021 The Author(s). Licensee IntechOpen. This chapter is distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by/3.0>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. 

## References

- [1] Turner V.W. Il processo rituale: struttura e anti-struttura, Brescia: Morcelliana; 1972.
- [2] Tosetto F. Lo spazio del Covid-19: una prospettiva antropologica. 2020. Available from: <https://www.sophiauniversity.org/it/news/lo-spazio-del-covid-19-una-prospettiva-antropologica/> [Accessed: 2021-04-11]
- [3] Saitta P. Covid-19, a cultural and political object. 2020. Available from: <https://www.lavoroculturale.org/corona-virus-oggetto-culturale-politico/> [Accessed: 2021-04-11]
- [4] Morin E. Cambiamo strada, le 15 Lezioni del Coronavirus. Milano: Raffaello Cortina Editore; 2020.
- [5] Van der Kolk B.A. The Body Keeps the Score: Mind, Brain and Body in the Transformation of Trauma. New York & London: Allen Lane, Penguin Books. 2014.
- [6] Porges S.W. The Polyvagal Theory: Neurophysiological Foundations of Emotions, Attachment, Communication, and Self-regulation, New York: W. W. Norton & Company; 2011.
- [7] MacLean P. The Triune Brain in Evolution. Role in Paleocerebral Functions. New York: Plenum; 1990.
- [8] Panksepp J., Kenneth L.D. The Emotional Foundations of Personality: A Neurobiological and Evolutionary Approach, New York: W. W. Norton Company, 2018.
- [9] Piazza F. Metafore Di Guerra E Guerra Alle Metafore Sull'uso Del Lessico Militare Per Parlare Della Pandemia Di Covid-19. DNA – Di Nulla Academia 1 (2), 2021, Bologna:87-96. <https://doi.org/10.6092/issn.2724-5179/12314>. [Accessed: 2021-04-19]
- [10] Minolli M. Essere e divenire. La sofferenza dell'individualismo, Milano: Franco Angeli Editore; 2015.
- [11] Herman J. L. Trauma and Recovery: The Aftermath of Violence-From Domestic Abuse to Political Terror. New York: Basic Books, 1992.
- [12] Sepùlveda L. Storia d'amore senza Parole. Editore: Guanda (Guanda. bit); 2021.
- [13] Sartre J. P. L'Esistenzialismo è un umanismo, trad.it., Mursia, Milano, 1963.
- [14] Grimaldi G. Ethnography in the time of Covid-19: notes on the relationship between communities and social distancing. 2020. Available from: <https://www.fieri.it/2020/04/02/letnografia-ai-tempi-del-covid-19-appunti-sulla-relazione-tra-comunita-e-distanziamento-sociale/> [Accessed: 2021-04-11]
- [15] Benasayag M. Il cervello aumentato, l'uomo diminuito, Trento: Erickson; 2016.
- [16] Vincenti E., Nosedà F., Alfieri L., "Adolescenti, famiglia, gruppo. Circolarità delle relazioni e processo terapeutico". In Clinica Psicoanalitica della Relazione con l'adolescente, a cura di Vanni F., Milano: Franco Angeli Editore; 2016.
- [17] Ceruti M. Il tempo della complessità. Prefazione di Edgar Morin. Raffaello Cortina Editore; 2018.
- [18] Lombardozi A., Dei F. The coronavirus crisis. Psychoanalysis and Anthropology in Dialogue. Alfredo Lombardozi's interview with Fabio Dei, Available from: <https://www.spiweb.it/cultura/la-crisi-del-coronavirus-psychoanalysis-e-antropologia-lombardozi-intervista-f-dei/> [Accessed: 2021-04-11]



[19] Bernanos G. Dialogues des carmélites. Edizione francese: Points; 1961.

[20] Nietzsche F. Considerazioni inattuali, I-III in F. Nietzsche, La nascita della tragedia, Considerazioni inattuali, I-III, a cura di G. Colli e M. Montinari. Editore: Adelphi; 1972, p. 167-457.

[21] Villa M. La morte ai tempi del coronavirus. Available from: <http://www.ildolomiti.it/> [Accessed: 2020-03-17]

[22] Siegel D. J. Mindful awareness, mindsight, and neural integration. *The Humanistic Psychologist*, 2009; 37(2): 137-158. <https://doi.org/10.1080/08873260902892220>

[23] Viñar, M. Les damnés de la Terre en Amérique Latine, Borrador; 2011.

[24] Linguardi V. Come uscire dall'abisso. "Il recupero psicologico di medici ed infermieri". *La Repubblica* of 3 April 2020, Available from: <http://www.repubblica.it> [Accessed: 2020-04-03]

[25] De Martino E. Il mondo magico. Prolegomeni a una storia del magismo. Editore: Bollati Boringhieri; 1948.

[26] Minolli M. Ricerca Psicoanalitica. Franco Angeli Editore; 2013, N. 3, p. 1.

[27] Minolli M. Gli scherzi della "coscienza". Dattiloscritto non pubblicato (per gentile concessione dell'autore) 2014, p. 17.

[28] McWilliams N. "Psicoterapia durante una Pandemia". *Lettera aperta* of 5 April 2020.

[29] Minolli M. Psicoanalisi della relazione. Editore: Franco Angeli, 2009, p. 138-139.