

**Contagion, Containment and Staying Connected:
A Virtual Conference**

**Parallel Paper Panels
Abstracts**

11.10 - 12.25, Saturday 28 November 2020

Panel 1: The Foundations of Object Relations as Experienced in Remote Work with Infants, Children, and Mothers

Chair: Christine English (British Psychoanalytical Society and University College London, UK)

On being touched: Psychotherapy with a five year old boy and his mother

Becky Hall (Association of Child Psychotherapists and British Psychoanalytic Association, UK)

Infant Observation

Gianna Williams (British Psychoanalytical Society, UK), and Gil Son I (Moscow Psychoanalytic Society, Russia)

Behind the Screen: Are We Too Detached To Explore Attachment? Remote-working in parent-infant psychotherapy

Dr Nidhita Singh (South London and Maudsley NHS Foundation Trust, UK), and Dr. Anne Ward (South London and Maudsley NHS Foundation Trust, UK and British Psychoanalytical Society, UK)

Abstract

In this workshop, three groups of presenters will describe experiences with three different types of mother-infant work each continued remotely in the Pandemic: the observation of infants, therapeutic work with mothers and infants, and individual therapy with a five-year old boy. The difficulties experienced are substantial. They affect those involved in ways that cannot be entirely grasped. Why?

It has been said that Freud discovered the child in the adult while Melanie Klein discovered the infant in the child; as well she found it persisting as a vital level in the adult. At this, the infantile level, object relating is both psychosomatic and psychophysical. As a mother feeds her baby, or uses her lap and arms to cradle, feelings are directly conveyed to the baby as much as milk; as well, the boundaries of a personal space are set up. The analytic room, couch, the analyst's chair, and the interpretations perform similar pre-verbal functions.

Thus living and working remotely in the Pandemic is an exercise in sensory deprivation. However, by virtue of the very lack of close-up types of sensation, we learn at first-hand about their function in the foundations of object relations - and the effects of variations in their availability as well.

The presentations will be followed by a discussion of their experiences between the presenters. Those attending will have an opportunity to contribute.

Panel 2: Two Effects of the Covid-19 Pandemic on Thinking and Working Psychoanalytically

**Chair: Dr. David Bell (British Psychoanalytic Society, and Tavistock and Portman NHS
Foundation Trust, UK)**

Psychic survival-of-the-object in the context of Covid-19

Professor Jan Abram (British Psychoanalytical Society, UK)

Therapeutic Zeal versus Epistemophilic Enquiry in Corona times

Claudia Frank (German Psychoanalytical Association, Germany)

Abstract

In *Psychic survival-of-the-object in the context of Covid-19* Jan Abram looks in detail at the significance of the situation of analysands whose senior analysts are more at risk than themselves from the virus. What it might do to their analyst should they infect them lays an actual burden of concern upon them. Using Winnicott's thesis that those in analysis need an opportunity to have an experience of maximum destructiveness towards their analyst if psychic change is to be possible, Jan Abram discusses whether this shift from an object relation to the analyst to a use of them is possible in current circumstances

In *Therapeutic Zeal versus Epistemophilic Enquiry in Corona times* Claudia Frank provides material in which the early anxieties stirred up by Covid-19 led to figures who zealously propose solutions supposedly offering salvation or deliverance, sometimes in an intimidating way, or with an implicit judgment of moral failure should one disagree: no alternatives can be tolerated. For a time, in some psychoanalytic treatments and Institutions, such figures were uppermost. Working through in the countertransference first is necessary for the analyst to re-orient himself or herself and recover the capacity and the appetite for psychoanalytic enquiry.

Panel 3: Losing the brick mother but keeping the organization in mind

Chair: Kate Pugh (British Psychoanalytical Society, and Central and North West London NHS Trust, UK)

Working with severely ill patients in the time of Covid

Dr. Miriam Barrett (British Psychoanalytic Society, Consultant Psychiatrist in Medical Psychotherapy and Cassel Hospital Inpatient Lead)

Abstract

This session will address different aspects of the experience of working with severely ill patients at this time, both specifically in the context of the Cassel and more generally in psychiatric services.

The Cassel is a national NHS Tier 4 specialist personality disorder service offering assessment and treatment to young people and adults with emerging and severe personality disorder. Treatment consists of a combination of individual and group psychoanalytic psychotherapy and psychosocial nursing in the safety and containment of a therapeutic community setting. In order to access inpatient treatment at the Cassel, patients are required to meet the criteria for inpatient admission, i.e. have a level of need and risk that can no longer be managed in the community, or require greater intensity of treatment than local services can provide. "The Hospital as a Therapeutic Institution" (Main, 1946) asks of Cassel patients that they are actively involved in their treatment and that of their fellow patients.

On the 20th of March, following a directive by the COVID19 response committee of our Trust on March 12th to close "community" inpatient units, all Cassel inpatients were placed on home leave. For the first time in its almost 100 year history, the Cassel Hospital temporarily closed its doors to patients and for the next 3 ½ months was to support its patients through treatment remotely.

In this short paper the author describes the impact this decision was to have on the work and life of patients, staff and the therapeutic community and reflects on underlying organisational dynamics. Importantly, it also provides an opportunity to think about what happened and to learn from this.

Staff worked hard to develop a day programme with out of hours support and secured a virtual platform, but patients soon started to disengage from the programme or to switch off, bar a few who kept this going. As time went on, patients became increasingly despairing, hopeless, and furious with each other and staff who couldn't make them attend. Staff in turn were impotent – the only option available being to discharge patients – and low in morale, the patient community fragmented and afraid of voicing anger with each other for fear of their destructiveness and impact on each other.

Thus staff found themselves in the unusual position of working in a hospital without patients in the building. It soon became apparent that the virtual programme was not the same as meeting face

to face, but a transitional arrangement. Patients were missing each other, the sense of community and more informal spaces (not just therapeutic structures), although staff tried to accommodate these, too. Staff could equally feel unsure of their role and task, or worry about patient safety. Therapeutic work took place in two rather than three dimensions, had an as if quality, was disembodied, with staff straining to hear and listen out for the patients which seemed to require a gargantuan effort.

In time, and after many delays, the Cassel senior management team was able to secure agreement that patients could return to inpatient treatment at the Cassel Hospital, albeit with new measures around infection control, and to invite the patients back from early July. Whilst this has in many ways been quite a traumatic experience for patients, staff and the community alike, the Cassel has been able to hold onto its patients and the majority of them have returned (having been given an extension to their treatment for the time of lockdown). With this there is an opportunity to try to make sense of and process this experience.

Using Bob Hinshelwood's concept of the "organisation in the mind" the author reflects on what it may have meant to patients to have been sent away in this (unplanned) way and some of the feelings evoked, a feeling of being abandoned and too much to bear, and ensuing issues with trust, particularly in this patient group. The author concludes with some reflections on underlying organisational dynamics, questions of authority and an ensuing lack of democratisation for the work of this therapeutic community during lockdown, which will now need renewed focus and attention. In the end it was the patients, according to Eileen Skellern "our greatest resource", fighting for their well-being, safety and needs, that made it possible to resume the much-needed therapeutic work at the Cassel itself.

Panel 4: Five Uneasy Pieces: analytic work in the shadow of Covid-19

Contributing Chair: Donald Campbell (British Psychoanalytical Society, UK)

Donald Campbell (British Psychoanalytical Society, UK), Dr. Eileen McGinley (British Psychoanalytical Society, UK), Dr. Tobias Nolte (British Psychoanalytical Society, University College London and Anna Freud National Centre for Children and Families, UK), Dr. Joan Schachter (British Psychoanalytical Society, UK), and Dr Rachel Sharp (British Psychoanalytical Society, UK)

Abstract

Five psychoanalysts of different generations and traditions describe their experiences of situations when the visceral threat of death from Covid affects the analyst's functioning, even when the analyst himself or herself may not recognise it. In other situations, whether because of youth or gender, the analyst herself or himself may be truly less vulnerable, which can mean that other factors such as exceptionalism, triumph, or guilt may be operating. In yet others, there exists an insidious effect of remote working, which produces a strange combination of physical absence together with intimate presence. Recognising how such factors operate is important if remote psychoanalytic treatments are to satisfy the obligation of acknowledging psychic reality and personal truth.