

**THE IMPASSIONED BODY:
Erotic Vitality and Disturbance**

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Eroticism, it may be said, is assenting to life up to the point of death. (Bataille, 1986, p.11)

I'd like to begin with a couple of poems. The first is by Sharon Olds whose poetry is remarkable in its physicality. She writes of love, sexuality, his children's growth, life and death with the body at the heart of her writing. This is from a poem called "Greed and Aggression" (1987):

Someone in Quaker meeting talks about greed and aggression
And I think of the way I lay the massive
Weight of my body down on you
Like a tiger lying down in gluttony and pleasure on the
Elegant heavy body of the eland it eats, the spiral horn pointing to the sky like heaven.
Ecstasy has been given to the tiger
...the way if I had a God it would renew itself the
way you live and live while I take you as if
consuming you while you take me as if
consuming me, it would be a God of
love as complete satiety,
greed and fullness, aggression and fullness, the
way we once drank at the body of an animal
until we were so happy we could only
faint, our mouths running, into sleep.

The second is by Thom Gunn. Gunn is British born, a gay poet, now in his 70's living in the U.S. This is from a poem called "The Differences" (1994):

So when you gnawed my armpits, I gnawed yours
And learned to associate you with that smell
As if your exuberance sprang from your pores.
I tried to lose my self in you as well.
To lose my self...I did the opposite,
I turned into the boy with iron teeth
Who planned to eat the whole world bit by bit,
My love not flesh but in the mind beneath.

These poems touch on some of the themes I wish to touch upon in this paper: desire, greed, aggression, biting, eating, tasting, taking, consuming, tumbling from the flesh into the mind beneath, tumbling from the mind into the flesh.

Erotic passions have had a precarious place in the history and values of psychotherapy, including those within the Reichian and body-centered traditions. Sexuality and passion were at the very heart of Reich's work. I was first drawn to Reich's work as an adolescent. Here was someone who wrote *of* passion *with* passion. His writings excited me. He was relentlessly disturbing. While Reich's grandiosity and paranoia also tended to be woven throughout his life and work, his was a passionate madness. And there were truths strewn throughout it, often uncomfortable truths. He confronted colleagues, patients, social structures, sacred beliefs. He provoked excitement, anxiety, and hatred -- three primary emotions so often linked in love and sex.

Throughout his lifetime, Reich returned again and again to the nature and problems of sexuality. Why, he wondered, is such an essential pleasure such a source of personal anxiety and social sanction? Reich was relentless in his confrontation of the social control and repression of sexuality. Reich asserted that the capacity for sexual vitality was essential for emotional health and the achievement of mature relationships.

Decades after Reich's death, questions as to the place of erotic passions in life and psychotherapy remain. The clinical implications of Reich's writings on sexuality have become too often marginalized in the history and the work of body-centered psychotherapy. Reich's early clinical observations of pleasure anxiety, falling anxiety, and orgasmic surrender were rich with possibilities for a fuller understanding of emotional and erotic life. Unfortunately, in his embittered retreat in the face of professional and governmental attacks upon his work and his subsequent investment in his theories of orgone energy, the delicacy of his sexual and psychoanalytic investigations during the 1920's and 30's were lost. We were left in the neo-Reichian traditions with a rather mechanistic and, I think, impoverished model of sexuality.

At the heart of the issues I want to raise in this essay is a reconsideration of the place of passion and of the erotic within contemporary psychodynamic and body-centered psychotherapies. I will examine some of the trends in contemporary therapeutic culture that seem to foster the disappearance of sexuality from the heart of our emotional, relational and therapeutic landscape. I hope here to enlarge our vocabulary as somatic psychotherapists in our conceptualization and discussion of the nature of sexuality and the erotic. How do we speak more richly of the erotic body, to the passionate body? How do we develop a language of passionate and erotic attachments? I will draw upon and quote at length from the writings of contemporary psychoanalytic writers, as well as poets, popular song writers and social critics, whom I find to be exploring the nature of erotic life in ways that are richer than those evident in contemporary body-centered literature. I quote authors whom I have found to be unusually successful in capturing erotic realms in language.

Muriel Dimen, a psychoanalyst, feminist and articulate critic of the contemporary de-eroticization of psychoanalysis, points out that in much of the current psychotherapeutic and object relations literature, "Sexuality has become a relation, not a force" (p.418). In this essay I want to communicate a sense of the *force* of the body, the *force* of sexuality, the *force* of desire. Passion suggests a union of love and sexuality within a wish to create states of mutual ecstasy, with an intensity that approaches the edge of madness in the arms of another. At their best, these are indeed moments of madness – the madness of union and reunion, desire imbued with both aggression and vulnerability, fugues of past and present realms of my body with that of another.

I have subtitled this article “erotic vitality and disturbance” to speak to broader reaches of sexuality than are often reflected in the Reichian and body-centered approaches to sexuality. I draw here from David Mann’s definition of the nature of the erotic:

The erotic includes all sexual and sensual feelings or fantasies a person may have. It should not be identified solely with attraction or sexual arousal as it may also include anxiety or the excitement generated by the revolting. In my use of the term, it will imply an emphasis on fantasy rather than actual sexual activity: there is no sexual activity devoid of an underlying fantasy; on the other hand, fantasies do not always lead to activity. (1997, p.6)

From a Reichian perspective, sexual fantasies were understood as serving defensive functions -- pulling out of the body into the head. That is certainly sometimes the case, but fantasy is not always defensive. It is often the realm of the erotic fantasies within the therapeutic relationship that represents the initial exploration of desire, of emerging possibilities, exciting and disturbing to therapist and client alike.

A Vanishing Landscape

Why do we do psychotherapy these days? What are clients looking for in seeking psychotherapy these days? A review of the clinical literature of the past decade or so would suggest that psychotherapists are responsible for providing--and clients are longing for--an experience of relatedness: a holding environment, a supportive and empathic transference relationship. Safety and compassion seems to have the upper hand these days over conflict and passion within the therapeutic process. Michael Vincent, a psychotherapist and social critic, comments, “I have seen enough so-called therapeutic caring dished out on the fringes of my professional life to conclude that indiscriminate caring is just another kind of carelessness” (pp. 196-197). Center stage in contemporary American body-oriented and psychodynamic psychotherapies are versions of object relations and attachment-focused theories, feminist-based models of mutuality and connectedness, trauma & victim/perpetrator-centered theories and techniques, and New Age spirituality and mysticism. None of these models are overtly anti-sexual, but none value sexuality or emphasize sexual passion as a central and enduring aspect of human nature, personal maturation or therapeutic outcome. Often these theoretical paradigms suggest a none-too-subtle anxiety about and distancing from adult sexual desire, representing a domestication of erotic passions.

Andre Green, the prominent French psychoanalyst, sees sexuality as linked in the most fundamental fashion to human vitality. Green, invited to give the Sigmund Freud Birthday Lecture at the Anna Freud Center in 1995, delivered a provocative address entitled, “Does Sexuality Have Anything to Do with Psychoanalysis?”. In it he raised a series of questions to his psychoanalytic colleagues regarding the goals and intentions of contemporary psychoanalysis:

We should ask: what is important? What has the greatest value? The price of life is attached to what all human beings share and are longing for: the need to love, to enjoy life, to be a part of a relationship in its fullest expression, etc. Again, here we are confronted with our ideology of what psychoanalysis is for. What is its aim? Overcoming our primitive anxieties, to repair our objects damaged by our sinful evil? To ensure the need for security? To pursue the norms of adaptation? Or to be able to

feel alive and to cathect the many possibilities offered by the diversity of life, in spite of its inevitable disappointments, sources of unhappiness and loads of pains? (1996, p. 874)

In this talk and subsequent work, Green challenges the lack of attention within contemporary psychoanalysis to sexuality in theory or technique. Green would not suggest that the “sexual revolution” of the 1960’s has cured sexual malaise. Quite to the contrary, he notes, “Our patients still complain about disturbances in their sexual lives with more or less complete impotence, frigidity, lack of satisfaction in sexual life, conflicts related to bisexuality or to the fusion and defusion of sexuality and aggression, to say the least” (p.872).

I would suggest that this is true not only of psychoanalysis, but most contemporary psychotherapies, including those within the Reichian and bioenergetic traditions. It is as though sexual passions have quietly vanished from the therapeutic landscape, to be replaced to pre-oedipal desires, traumatic intrusions (in lieu of traumatizing desires?), relational and empathic injuries, and spiritual quests of one stripe or another. Within the body-centered traditions of psychotherapy, sexuality and pleasure were central premises in the foundation of Reichian and bioenergetic modalities but do not remain of the heart of our clinical theory and work today.

In his Freud birthday lecture Green argues:

Moreover, it frequently happens that when we listen to the material presented by colleagues during meetings, the manifest presence of sexuality—either through dream material or unconscious fantasy, or even in the reports of the patient’s life and relationships with others—is interpreted in a way which bypasses the sphere of sexuality to address object relationships of a supposedly deeper nature, in a way which refuses to pay attention to the specific sexual aspects that are very often supposed to be a mere defence. (1996, p.873)

Adult sexual issues are not inevitably defensive smokescreens against earlier, and therefore deeper and more primitive, preoedipal and infantile longings and trauma. Green goes on to suggest that “the role of a sexual relationship is not to feed and nurture but to reach ecstasy in mutual enjoyment” (p.877). Of course, achieving this mutual ecstasy and maintaining a passionate adult erotic relationship is no easy matter. There is perhaps nothing more thrilling, unpredictable and revealing than the co-mingling of erotic desires.

What has happened to genitality, pleasure, lust, orgasmic surrender? Green argues, and I agree, that sexuality is the most enduring and exciting force that can sustain people in the face of life’s vicissitudes, its myriad disappointments and frustrations. Mann argues:

The erotic is the very creative stuff of life and is inextricably linked to passion. It is a maverick, capable of the unexpected, and is the therapeutic momentum in analysis. The issue is one of passion, an intensity of feeling with no easy resolution; but out of the heat of passion old links are weakened and new links can be forged. Passion of all kinds dominate the analytic setting: hate, anger, aggression, envy – and hardly less so, love and the erotic. However, the erotic transference, like Eros himself, has been left to the margins of analysis, never quite making it to the

acceptable family of ideas in psychoanalytic theory and practice. (1997, pp.4-5)

In my reading of much of the contemporary therapeutic literature, I see the effort to sanitize life and psychotherapy. All too often the role of the psychotherapist now seems to be that of buffering the client against the vicissitudes of psychic and relational life, rather than entering into these experiences as part of the therapeutic effort.

I think of how often my clients struggle with disappointments in an idealized fantasy of tender, romantic and selfless love. I see a version of this ideal in Judith Jordan's perspective on adult sexual love:

Women are often attuned to and want sensitivity to feeling, while men tend to focus more on action. ...Often mutuality comes more easily for women in woman-to-woman relationships, which can provide wonderfully sustaining mutual empathy and care. ...in sexual engagement there is such a rich potential for expression of exquisite attunement and the possibility to give one's attention in equibalance to self and other. There can be mutual surrender to a shared reality. It is the interaction, the exchange, the sensitivity to the other's inner experience, the wish to please and to be pleased, the showing of one's pleasure and vulnerability that that implies which distinguish the mature, full sexual interaction from the simple release of sexual tension." (pp. 89-90)

This is a heady and subtly judgmental, one might even say coercive, perspective. Who, we might ask, can argue with a goal, a vision, of "exquisite attunement"? To my ears, however, it has the ring of an idealized, rather sentimentalized vision of maternal tenderness and resonance. Where, I wonder, is the aggressive component of sexual passion, the capacity to excite and disturb, the desire to get to and under a lover's skin, to get into the other in such a way that you will not be forgotten, to be taken over by one's lover, to impose oneself upon the other, to penetrate and be penetrated? Contemporary women artists and authors are reclaiming the full scope of psychic and erotic life for women and men alike. Emmylou Harris, once the blonde-headed "Sweet Heart of the Rodeo," has darkened her voice and vision in recent years:

The devil is deep water baby
And I'm in way over my head
But I'd be drawn and quartered
If I could keep you in my bed
I can't break this spell
I know the trouble that I'm in
But if I got out of the mouth of hell
I'd walk right back in
(Harris, "I Don't Want to Talk About It Now," 2000)

The darker portrayals of relentless sexual desires captured by Harris, Patti Smith, and Sharon Olds, among other contemporary women poets and singers, offer a stark contrast to Jordan's erotic vision of mutual pleasing and sensitivity. Psychoanalyst and feminist theorist, Jessica Benjamin, offers a more complex and dark representation of erotic attachments: "The other becomes the person who can give or withhold recognition, who can see what is hidden, can reach, conceivably even violate the "core" of the other. The attribution of this power in erotic attachment may evoke awe, dread, admiration, or

adoration, as well as humiliating or exhilarating submission.” (1995, p.149). Benjamin continues:

There is no erotic interaction without the sense of self and other exerting power, affecting each other, and such affecting is immediately elaborated in the unconscious in the more violent terms of infantile sexuality. But what makes sexuality erotic is the survival of the other through the survival of the other throughout the exercise of power...Eros unites us and in this sense overcomes the sense of otherness that afflicts the self in relation to the world and its own body. But this transcendence is possible only when one simultaneously recognizes the separateness of some outside body in all its particular sensuality, with all its particular differences. (1995, p.205-206)

We give the other, in our erotic bonds, the opportunity, the power to know us in the most essential ways, and in that knowing to unsettle, disappoint and sometimes hurt us. We struggle to come to know the other as different from us and in that differentness find an object of excitement. Desire, vulnerability, aggression and conflict are continually intertwined. The willingness and capacity for surrender to one’s own body, to one’s desires, in a passionate embrace of another (and the other’s otherness) is at the heart of the sexuality I believe to be the core of Reich’s work.

Anxiety

Reich came to understand the underpinnings of characterological and muscular armoring as the defensive effort to manage overwhelming childhood anxieties and the life-long conflicts between anxiety and pleasure. Miller offers a particularly compelling description of the defensive tapestry woven through the relationship of erotic passion and erotic anxieties:

When passionate attraction or a sense of common purpose has dried up in a marriage, provoking one’s anxiety can serve to keep two people thoroughly engrossed in each other. Thus the manipulation of anxiety replaces love as the chief means of social cohesion. (1995, p.37)

...I am convinced that the decline of so many modern relationships into enmity mostly has its roots in the anxieties that wind themselves around all love. ...Because anxiety drives people to attempt control of what cannot be controlled in the hope of making things more predictable, it creates stasis, sameness, and fixation that cause a relationship to become clogged and rapidly winded. Anxiety-ridden intimacy turns into stale intimacy, life shared in a closet, and no one can any longer grow from it. (1995, p.61)

Reich wrote often of the continual interplay of anxiety and sexuality. Miller’s words are a contemporary articulation of some of the most central and enduring concerns in Reich’s work. While Miller focuses on the drying up of marriages, I see the risk of similar dried-up outcomes in therapeutic relationships in which therapist and client bond around the management of anxiety and the healing of disappointment while holding at bay the darker and more passionate forces that threaten to emerge in the therapeutic process.

I think the nature of these realms of anxiety are extended in Winnicott's descriptions of the "Fear of Breakdown" (1989), i.e., the fears of madness, surrender, "unintegration," and disorientation, that Winnicott ascribes to underlying a patient's defenses in psychoanalysis. In a similar fashion these fears of breakdown, madness, surrender and disintegration can emerge in deeply erotic moments. For Winnicott, though he never to my knowledge wrote of these experiences in a sexual context, these moments of breaking down, surrender, were simultaneously terrifying and exhilarating, taking one to an edge of madness that can give birth to creativity and aliveness. Emmanuel Ghent (1990) offers an especially compelling elaboration of Winnicott's ideas in his account of surrender, particularly erotic surrender, as allowing "a quality of liberation and 'letting go,' ..." a yearning to be known, recognized, 'penetrated,'" (p.134). Breaking down and letting in, opening up and being penetrated, the ongoing interplay of vulnerability and aggression in adult sexuality, are rarely experienced without the accompaniment of anxiety and/or shame.

Massive Orienting Passions

More than two decades ago Dorothy Dinnerstein was challenging the impact of traditional gender arrangements in child care, which she argued was maiming the emotional health of our children and straining and often crippling our erotic capacities as adult lovers:

Our most fleeting and local sensations are shot through with thoughts and feelings in which a long past and a long future, and a deep wide now, are represented. ...But our sexuality [as humans] is also characterized by another peculiarity, one that is central for the project of changing or gender arrangements: *It resonates, more literally than any other part of our experience, with the massive orienting passions that first take shape in pre-verbal, pre-rational human infancy.* (pp. 14-15, emphasis in the original)

Dinnerstein continues:

For this question, the crucial fact is that the feeling, the vital emotional intercourse, between infant and parent is carried by touch, by taste and smell, by facial expression and gesture, and by mutual accommodations of body position. Until the sexual impulse that emerges at puberty throws us once more into acute, physiologically urgent need for contact with the body of another person, life offers us no comparable avenue for direct expression of those feelings which are continuous with the feelings of infancy, feelings for which we then had no words, no language-dominated thoughts, and which cannot be rediscovered in their original fullness except in touch, in taste and smell, in facial expression and gesture, and in mutual accommodation of body position. (p.31)

The "massive orienting passions" that underlie our love and gender arrangements, our sensual and sexual experiences. A DEEP WIDE NOW. *Massive orienting passions.* That interplay of passionate sensation and memory, of resonance and longing is exquisitely captured in Sharon Olds' poem, "My Father's Breasts":

Their soft surface, the polished silk of the hair
running down them delicately like
water. I placed my cheek—once,

perhaps—upon their firm shape,
 my ear pressed against the black
 charge of the heart within. At most
 once—yet when I think of my father
 I think of his breasts, my head resting
 on his fragrant chest, as if I had spent
 hours, years, in that smell of black pepper and
 turned earth. (1984, p. 43)

The force of human sexuality. A DEEP WIDE NOW: drenched, submerged in infantile fantasies, enthralled in the moment, flung back into past, only to be thrust forward into future, wrenched with hope, desire, vulnerability. Essential to both the disturbance and the excitement of our erotic desires is the simultaneous evocation of the infantile underpinnings of our somatic/emotional experiences as well as the force and complexity of adult love and passion. This single poem of Olds could be the subject of an essay in its own right. She reminds us, in the midst of the mother/infant metaphors and models permeating the current therapeutic literature, that the father in his presence and absence is an inevitable force in psychic development.

Dinnerstein's writing offers a startling and enlivening contrast to de-eroticized and sanitized language. She captures the heat and the anxiety, as well as the warmth and caring, in the passions of our infantile attachments and longings, in our massive orienting passions. I am reminded of Dimen's question to some of her psychoanalytic colleagues' writings on sexuality, "What happened to the heat?" (1999, p.419). There is heat in adult erotic passions. These are not quiet waters.

Joyce McDougall's writing often enters the unquiet waters of adult sexuality, infused with ageless desires and conflicts. She writes, "I learned that the terrors of dissolving, of losing one's bodily limits or sense of self, of exploding into another or being invaded and imploded by another, were both frequent and revealing of the buried links to archaic sexual and love feelings originating in earliest infancy." (1995, p.xvi).

These impassioned desires and fears, infused with the force of adult body, emerge and re-emerge with relentless (ruthless, as Winnicott would say) vitality in our adult erotic relations and in the transference-countertransference dynamics of in-depth psychotherapy. To enter the realms of the erotic within the therapeutic relationship, to enter fully into adult sexual relations, one invites the full force of life's vicissitudes, replete with fantasy, idealization, disappointment, frustration, aggression, excitement, and unpredictability. I will explore here the interplay of anxiety, pleasure, contagion, differentiation and loss, all of which are essential to the development of mature sexuality. This is complex and disturbing territory -- territory I would suggest that client and therapist often collude to avoid.

Pleasure and Undoing

We can see in Reich's writings, especially those on the somatic relationship between mother and baby (Reich, 1983), that he sensed the crucial importance of the experience of pleasure for the mother with her infant's body and of an erotic aliveness ("orgonotic contact") in the mother/infant couple. He never fully articulated a theory of sexuality and intimacy separate from Freud's drive-reduction/catharsis model (Cornell, 1997). We now see in the infant research that the experience of pleasure is absolutely central in the baby's organization of a vital sense of self, not only in relation to the parent, but also in relation to its own body (Klein, 1972; Lichtenberg, 1989; Emde, 1988, 1999; Stern,

1990). Schore synthesizes the implications of contemporary mother/infant research this way:

These data underscore an essential principle overlooked by many emotion theorists – affect regulation is not just the reduction of affective intensity, the dampening of negative emotion. It also involves an amplification, an intensification of positive emotion, a condition necessary for more complex self-organization. Attachment is not just the reestablishment of security after a dysregulating experience and a stressful negative state, it is also about the interactive amplification of positive affects, as in play states. (in press, unpagged prepublication manuscript)

Just as the parents of an infant or growing child serve, amplify and delight in the vitality of this newly emerging and organizing organism, so too is the therapeutic relationship a means of creating and strengthening the capacity for positive (and aggressive) affects, as well as the mitigation of distress and negative affect.

In language bordering on the poetic, Bollas offers this description:

Essential to generative mothering is her erotic love of her infant, conveyed most particularly in the eroticism of breast-feeding, which is a form of sexuality unto itself. With breast full, she often aches for the passionate attack of her hungry infant, whose sucking inspires a radiant pleasure that courses through her body. ...It is not only through the breast-feed that the mother conveys her eroticism. She bathes the infant in seductive sonic imagery, ooing, cooing, and aahing, luring the infant's being from autistic enclave into desire for the voice. ...Maternal speech links language to desire long before words-in-themselves are used by the child to express desire. In "voicing over" the infant's body, the mother touches her infant through acoustic fingers, precursive to all conversions from word to body, and likewise accomplishing its reversal, as the body is now put into words. ...Every day, for years, she finds her child's sexual and aggressive bodily expression delightful in countless ways, linking the drives and transferring the very body she had aroused into language. (2000, pp. 42-45.)

Returning again to the poetry of Sharon Olds, we find an eloquent evocation of Bollas' meaning:

Coming home from the woman-only bar,
I go into my son's room.
He sleeps—fine, freckled face
thrown back, the scarlet lining of his mouth
shadowy and fragrant, his small teeth
glowing dull and milky in the dark,
opal eyelids quivering
like insect wings, his hands closed
in the middle of the night.

Let there be enough
room for this life: the head, lips,

throat, wrists, hips, cock,
 knees, feet. Let no part go
 unpraised. Into any new world we enter, let us
 take this man.
 (1984, p. 68)

Poet Gary Snyder exquisitely captures what Bollas seeks to convey, extending the maternal dyad into an erotic triad of mother, father and infant:

The hidden place of seed
 The veins net flow across the ribs, that gathers
 milk and peaks up in a nipple – fits
 our mouth –
 The sucking milk from this body sends through
 jolts of light; the son, the father,
 sharing mother’s joy
 That brings a softness to the flower of the awesome
 open curling lotus gate I cup and kiss
 As Kai kaughs at his mother’s breast he is now weaned
 from, we
 wash each other,

this our body

....
 These boys who love their mother
 who loves men, who passes on
 her sons to other women
 (1999, p.469)

The eroticism conveyed in the words of Bollas, Olds, and Snyder propels the child *forward* into their bodies and into a future of the body. These are the early erotics that carry the child beyond the cocoon of infant/parent comfort and nurturance to lay the foundation for all of the intensities of adult relations.

The pleasure and eroticism Bollas and Snyder convey are not the experiences that bring most of us into psychotherapy, especially not to body-centered psychotherapy. Clients often enter psychotherapy seeking compensation for their childhood and relational wounds, wishing for an idealized, healing relationship provided by an understanding and near-perfect parent substitute. There can be a place such an arrangement, but I would argue that sweetness and idealization in a therapeutic relationship are not sufficient if one seeks the capacity for passionate attachments.

Mature adult relations are not safe and predictable. Mann observes that “it is not in the nature of the erotic to be cozy” (1997, p.18). Bataille’s elaborates:

The whole business of eroticism is to destroy the self-contained character of the participators as they are in their normal lives. Stripping naked is the decisive action. Nakedness offers a contrast to self-possession, to discontinuous existence, in other words. It is a state of communication revealing a quest for possible continuence of being beyond the confines of the self. Bodies open out to a state of continuity through secret channels that give us a feeling of obscenity. Obscenity is our name for the uneasiness which upsets the physical state associated with self-possession,

with the possession of a recognized and stable individuality. (1986, pp. 17-18)

The erotic is invasive, naked, contagious with the desire to be taken over. One wonders with the other, who is doing what to whom? Lucinda Williams (2000), in her song “Essence,” portrays this desire in straightforward language:

Baby, sweet baby, kiss me hard
Make me wonder who’s in charge

Baby, sweet baby, can’t get enough
Please come find me and help me get fucked up

The erotic is often messy. A mature therapeutic relationship must also have the capacity to be messy.

In an essay on lust, Dimen exults in the “messiness” of intimacy both in the psychoanalytic process and in sex, ...”intimacy, relatedness, and warmth as well as complexity, confusion, and the half-lights of bodies and minds growing into and out of each other—a viny, complicated mess...”(1999, p.430). Dimen continues:

Way down deep, *Lust* means not the conclusion of discharge but the penultimate moment of peak excitement when being excited is both enough and not enough, when each rise in excitement is, paradoxically, satisfying. Orgiastic. I would not want to do without orgasm—catharsis—myself. But isn’t the pleasure of *Lust* equally central? A need calling for satisfaction, a satisfaction becoming a thrilling need? An excitement whose gratification is simultaneously exciting? (1999, p.431)

In a similarly evocative essay on eroticism, Ruth Stein (1998) writes that “eroticism in its vehemence and irrationality may seem monstrous, or at least unintelligible” (p.257), describing eroticism as a means “for carrying us beyond the toll of our separate individuality: it ‘undoes’ us” (p.255), and which “responds to and expresses the need for magic, for overstepping one’s boundaries, for endowing one’s sensuality and profound corporeality with meaning, a meaning that is both clarifying and mystifying...” (p.266).

John was someone who refused to be undone. He held life at a skeptical distance, yet had entered therapy with me despairing of his ability to join his affectionate life with his sexual activities. Now in his mid-thirties, he had become sexually active with men in his mid-teens. John is a bright man with a brilliant sense of humor. “I have sex,” he would say, “but no sexual *relationship*.” He expressed bitterness at what he viewed as the dominant gay subculture for normalizing this style of sexuality.

Much of our early work focused on his dreams, which were prolific, and his conscious sexual fantasies. His dreams were often filled with longing, his conscious masturbatory fantasies with mechanistic sex (“Just put it there, man,” he would joke) or of forced sexual encounters, edged with submission and humiliation, in which the other man overtake John’s body. “I can’t seem to *let* anything happen, so I guess I imagine somebody will *make* something happen,” as he tried to find the meaning of these fantasies. He expressed relief and appreciation at finally being able to talk about these fantasies, to gain some understanding and compassion for himself. He found himself increasingly disinclined to have sex until he could feel something shift within himself.

We made no psychical contact in our work, no handshake in greeting, no contact at the end of sessions, though there was an unmistakable closeness with each other during the sessions. At the end of a session I found particularly moving, as John walked to the door, I spontaneously reached out and touched his shoulder. He said nothing, gave no overt response, but I had the sense of the skin and muscles recoiling beneath my fingers.

The next session went as usual. John said nothing about my having touched him at the end of the previous session. It was a fleeting touch. I thought perhaps he hadn't noticed. I remembered the reaction of his body and wished he hadn't noticed. I hesitated to bring it up, but fearing I'd made a serious error, I asked him if he'd noticed that I'd touched him as he left the previous week. "Sure did," was his terse reply. "Should we talk about it?" I asked. "Figured you'd say something like that. You first," he replied. I told him what I'd been feeling at the end of the session and that I'd reached to him without forethought. "It was OK," he said, "I know what happens to me matters to you. I took it like that." I described the sense I had of his body recoiling from my hand, my subsequent dismay and discomfort. "Standard procedure on my part, Bill. Nothing personal. You didn't fuck up. I wish I could have liked it, but I hate being touched. I really can't stand it." I expressed my surprise at this accidental discovery and inquired why he'd never told me. "I'm not very proud of this. Makes me feel even more fucked up. Figured we'd get to it eventually or maybe that it would just change without having to talk about it. Even at the office sometimes somebody will be talking and touch my shoulder. I just want to scream, 'Don't touch me!' I hate it, but I guess we got to talk about it," came John's reply. "Hating being touched has got to make having sex all the more difficult," I commented humorously. "Oh, there are ways to have sex without getting touched. Just the act, sir, just the act, get off."

This was a turning point in the work. John had no associations to why this was the case, no hypotheses, no remembered history to account for this profound revulsion. He could acknowledge fantasies of my holding him in my arms, his feeling my tenderness for him in my body and his being able to cry, coming undone in my arms, but he couldn't actually imagine doing it. I suggested that we needed to work first, and directly, with his revulsion, with the physicality of his recoiling skin and muscles. We entered the erotic spaces of revulsion. For months we worked with my touching him and his feeling his body's wish to retreat and then allowing the retreat. The retreats were filled with shame and dismay. He'd spent nearly twenty years trying to make his body act right, or at least look right. His shame and self-contempt had prevented him from ever allowing this sort of experience and exploration.

The recoiling of John's body from my touch can, of course, be seen as a defense. Within the Reichian and neo-Reichian traditions, such body defenses are to be confronted and dismantled. I have learned over many years in my work with the body that to confront and seek to change the defensive patterns within a client's body process can shortcircuit crucial learning. John had modified his body throughout his life in response to environmental demands and judgements of one sort or another. I was not to join that chorus of body judges and body shapes. Our ability to inhabit together these "negative," shame and anxiety drenched spaces together – *not* to change his feelings or alter his behavior – began to give him his body back. It has been the beginning of the awakening of his erotic life.

In the undoing and overstepping within erotic relations, in being naked to another, we are continually invited to undo ourselves and to revisit, undo and (hopefully) redo the

history of our loves, desires, dependencies and moments of madness and fury. These undoings and fragile redos are the source of profound hope and anxiety.

Erotic Contagion: Transference and Countertransference

The experience of erotic transference and countertransference is an undoing, the force and forms of adult desires emerging from the shadow of disowned, disavowed and disorganizing longings.

When we enter the realms of the erotic with our clients, do we court disaster or invite possibility? Do we dance on a knife blade edge between the two? Do we allow the forces of erotic desire and fantasy to push against the familiar, established order of therapeutic limits? What is the nature of erotic transference? What is there to be gained for the client? The erotic is inherently contagious. It creates the confusions of desire: “Whose feelings are these? Who started it? Who are you to me? Who am I to you? Where are the boundaries between desire and action?” The erotic moves not only the client but also the therapist into realms of ambiguity, ambivalence, excitement, anxiety and disgust. How can this be good for anyone? How do I contain and use my erotic countertransference as a source of information rather than a means of contagion?

Davies observes that “psychoanalysts have contorted themselves, their patients, and their understanding of the psychoanalytic process in an attempt to minimize, disavow, project and pathologize the sexual feelings that emerge between the analytic couple in the course of their emotionally powerful and most intimate encounter with each other” (1998, p.747). She sees this anxiety as rooted in the fears and prohibitions of sexual acting out between therapist and client and as fostered by the lack of any intelligently articulated theory of the “nature of normal adult sexuality and its manifestations in clinical practice” (p.751). She argues that a sexual (I would say erotic) aliveness is inherent and healthy in the later stages of an in-depth therapy. She argues that these concomitant feelings of aliveness and attraction are not to be avoided, lived in silence, or eliminated through clinical consultation but are to be welcomed and examined.

Mann, too, defines psychotherapy as an erotic relationship, in which the force of the erotic is a primary means for growth and change:

...it is my proposition that the emergence of the erotic transference signifies the patient’s deepest wish for growth. ...Through the erotic, light is shone on the deepest recesses of the psyche. ...The development of the erotic transference is a major transitional stage in which the repetitive and transformational desire of the patient’s unconscious meet at a passionate junction. The heart of the unconscious is visible in all its ‘elemental passion’, and in so opening allows for the prospect of transformation and psychic growth. (1997, pp.9-10)

My clinical experience mirrors the positions articulated by Mann and Davies. The understanding of erotic fantasy and transference/countertransference extends and deepens the therapeutic work with the body itself. The erotic needs to be welcomed and explored, not ignored and not acted out.

It is important to clarify the difference between *erotic* transference and an *eroticized* transference (Gorkin, 1984; Bolognini, 1994; Mann, 1997; Bonasia, 2001). To speak of an eroticized transference is to speak of the defensive use of sexuality and the erotic. In an eroticized transference, the feelings do not emerge within the developing and deepening relationship, they are imposed upon it. The eroticized transference is typically an idealized transference which forecloses deepening and seeks to defensively ward off

conflict and loss. There is typically an overt or covert demand for the therapist to validate and reciprocate these feelings. The eroticized transference is one-sided, from the client to the therapist, and while a therapist may become enmeshed in this kind of transferential conundrum, this is not a transference that evokes delight and affection in the therapist. An eroticized countertransference is equally one-sided, now serving the narcissistic needs of the therapist and imposed upon the client.

In working within the erotic transference/countertransference matrix, I am not advocating for the therapist's direct disclosure of sexual or erotic feelings to the client (although Davies does). I have found consistently (I think without exception) that direct disclosure of my personal feelings of sexual interest or disinterest has trivialized the erotic space, foreclosing (at least temporarily) more complex and ambiguous territories of exploration. I am arguing for the therapist's making use of the erotic countertransference to recognize and understand what is becoming psychically and emotionally possible for the client within the therapeutic relationship. Erotic feelings and hopes arising within the transference are often attributed to the therapist ("You make me feel this way." "I've never been able to feel this toward anyone before."). The emergence of desire needs to be returned to the client.

Marie entered therapy with me ten years after the failure of her first and only love relationship, which had started in college and continued until shortly after her completion of graduate school. Marie and her lover had shared an apartment through much of their time together. With the ending of the relationship, Marie lived alone, but her life was full of friendships developed in graduate school and at work. During those years she described herself as mildly depressed but deeply gratified by her work. Gradually friends began to move to other cities or marry and form families, so her social group began to fray. She found herself unable to replace the lost friends. Her depression deepened, and she entered therapy. In her initial therapy her attention turned quickly to her childhood, which was dominated by the neglect of disinterested parents, punctuated by violent outbursts by her mother cruel, sometimes violent play among her siblings.

Marie moved to Pittsburgh in pursuit of a lucrative career opportunity and entered therapy with me. She saw herself as in therapy to deal with her depression, which she saw as a result of her having walled off her history and all affect associated with that history. Her living alone was simply a fact of her life, not a focus of her therapeutic efforts. I kept my feelings about her aloneness to myself, as she never made any allusion to problems with her solitary life in session. She was not forming friendships. She kept a busy and satisfying life with work, gardening, a range of outdoor activities, travel and volunteer work. Her social contact was all organized within those purposeful contexts. So far as I knew, no one was ever in her house. We were engaged in a traditional psychotherapy with no direct, body-oriented work. I felt a great deal of admiration for Marie, for the seriousness and integrity with which she approached her life. Over time I grew very fond of her, greeting her easily at the start of each session with a quiet smile. My smile was not returned, but I was quite sure it registered. After about six years, I began to notice the return of a fleeting, shy smile.

Marie often had difficulty in remembering the focus of sessions from week to week. I carried the memory and meanings of our work for quite some time, which she gradually internalized as evidence of my care for her. I would acknowledge my care for her and at the same time comment on her struggle to hold her internal experience as having any significance, even from one week to the next. Her depression gradually lessened.

She began to describe herself as feeling lonely, describing herself wandering in her house at night (it was large enough to allow considerable wandering), wondering how it was that no one was ever in it. She interpreted her loneliness as a symptom of her depression returning. I interpreted it as a symptom of her life and vitality returning, however tentatively, precariously. She had begun to seek a career move, “an upgrade” she would joke, and began networking in service of her next career move. Her accounts of these phone conferences and “power lunches” had subtle but unmistakable edges of both excitement and anxiety. When I comment on this, Marie interpreted this quiet emotional tinge as a sign of her apprehension about being able to advance her career. There was a distinctly more personal quality to reactions in these meetings. I began to describe this edge to her, encouraging her to notice, open herself to these feelings as she “networked.” She realized that she was having fantasies, quickly pushed away, of these new acquaintances to suggest a movie, play, or dinner. She realized that she looked forward to these meetings and liked some of the people she met. She could not imagine initiating anything more personal, but she could feel her way of being in these meetings subtly shifting.

One day she returned my greeting smile with a broad smile. The smile filled her face and eyes. I felt a rush of delight. Her whole face transformed, inviting my gaze. She announced with an ear to ear grin, “I had one of my meetings this week, a neat lunch, a really good time. I didn’t care if I got a job. I just had a good time, like I forgot why I was there. And she invited me to a party. I think it’s a date. I mean she didn’t *say* it was a date, but it felt like she was making a date. ‘Course it’s been soooo long since I’ve been on a date, I could be seriously mistaken.” I replied, “Marie, I’ve waited years to see a smile like this on your face. I guarantee you that if this woman isn’t actually asking you on a date, if she sees a smile like this one, she’ll wish it were a date. Then it might become a date. You walk into that party with a smile like this, and there’ll be plenty of people in that room interested in a date.” The erotic potential was not carried out through my feelings for Marie but were fueled and enabled, at least in part, by my feelings for her life, her desires, and her intimate potential. In nearly ten years of therapy I have never physically touched her, but in many ways I have touched her. She says that I keep her in touch with reality.

The erotic transference/countertransference matrix is by no means all sweetness and light. The light of the erotic to which Mann refers as being shone into the deepest recesses of the psyche must often penetrate dark shadows and conflictual spaces within both client and therapist. Client and therapist are both likely to experience emotional and bodily turbulence, uncertainty and conflict. As Billow observes, “The analyst’s passion, the capacity to feel both primitive and mature, like the patient’s, cannot be legislated into existence or produced on command” (2000, p.418). The elements of an erotic countertransference may include the therapist’s deadness, disinterest or disgust as well as attraction, tenderness or arousal. All of these reactions are signals that something is becoming possible within the client’s erotic, somatic, and psychic life. In my clinical experience, it is rarely helpful for the therapist to simply disclose such feelings to the client. The therapist needs to sit with these feelings, metabolize them, discover their meaning, so as to offer the client a kind of translation service for erotic vitality. The therapist’s simply disclosing (not to mention acting out) erotic feelings likely forecloses exploration and understanding, derails the client’s opportunity to take ownership of emergent desires. Bonasia states succinctly that “the analyst must ‘sink into’ the erotic fantasy without ‘drowning’ in it” (2001, p.260), also, I would add, without drowning the

client in it either. For the erotic to remain open and alive, it is essential that the client not be an object of the therapist's ongoing desire and attraction, but of ongoing attention, curiosity and affection in the midst of the pleasures and passions of the therapeutic process.

Differentiation and Maturation

Mann observes that the erotic pulls us toward "greater differentiation and individuation, ...to greater complexity and more diverse and complex structures" (1997, p.9). Here we have the distinction of the erotic pull into adult life and intimacy from that of the erotic being seen as the regressive pull of infantile longings and fusion fantasies. Work within the erotic transference matrix allows a gradual evolution from one's younger, wish-driven fantasies and desires to those that are more psychically substantial and differentiated. Within the play of erotic countertransference, there will be moments when a client suddenly emerges as an object of desire, arousal, excitement, hatred and/or disgust. These are not structures of relatedness but moments of intense recognition and opening.

In this regard, I have learned a great deal from Davies' articulation of function of the "postoedipal parent," described as "a parent whose object functions and self-experience are more grounded in the mutual recognition of experienced sexuality and intimate exchange and who must nourish and then set free the child's emergent sexuality" (1998, p.753). The therapeutic relationship, even in the midst of intensity and turbulence of erotic transference and countertransference, is not an end unto itself, but the means to finding love and life elsewhere. Davies continues, "Perhaps it is openly in our role as parents, or, in this case, as analysts, that we finally come to terms with what we can and cannot have – the haunting residues of our own oedipal longing that we nourish in our children and then set free for someone else, some more appropriate lover, to enjoy" (p. 764).

In a similar and very poignant fashion, Bolognini describes this developmental and therapeutic accomplishment, switching from the voice of a therapist to that of a father:

I have an idea of my own, which I shall express by an image: *every good father should at least dance a waltz with his daughter* and show himself to be thereby moved and honored. ...In the same way, every father must be capable of standing aside at the appropriate time, so as not to impede the gradual process of separation during youth, after having protected and encouraged growth – until he symbolically accompanies her to the altar to hand her over to her real adult sexual companion. (1994, p.82)

The poet, Sharon Olds, writes of her children as she watches them mature, first of her daughter in, "For My Daughter":

That night will come. Somewhere someone will be
entering you, his body riding
under your white body, dividing
your blood from your skin, your dark, liquid
eyes open or closed, the slipping
silken hair of your head fine
as water poured at night, the delicate
threads between your legs curled
like stitches broken. The center of your body
will tear open, as a woman will rip the

seam of her skirt so she can run. It will happen,
 and when it happens I will be right here
 in bed with your father, as when you learned to read
 you would go off and read in your room
 as I read in mine, versions of the story
 that changes in the telling, the story of the river.
 (1984, p.65)

We see again, as we saw in the poem to her son quoted earlier, that Olds does not shy away from the physicality of her children's lives, the sensuality of their developing bodies. Parental delight, love and anxiety intermingle in her reactions to these young, emerging bodies. Olds' erotic delight in her children does not take possession of them. Her delight throws them forward, outward into life, outward into the arms of others. She captures in these poems what I think Davies would characterize as post-oedipal love. As therapists in passionate involvement with our clients, we engage, wonder, uncover, confront, protect, encourage, accompany, delight, and then let go.

Sandra said to me, rather unexpectedly, "As I was driving here today, I found myself thinking that your clients probably have sexual fantasies about you rather often. Do they?" "My clients have all sorts of fantasies about me, some of them certainly sexual and erotic, others decidedly not. Are you trying to tell me something about your feelings in here with me?" I replied. "Oh, unfortunately, no. I'm not that far along. I don't have sexual fantasies about anybody, but I look forward to the time. I guess it was a fantasy of a sort about you. What I was thinking about was that people probably have sexual fantasies about you all the time. People don't have sexual fantasies about me. Where would someone start with me? What do I give people to go on? I don't really know anything about you. Don't even know if you have someone in your life, but you have a way of being that makes you feel alive. I imagine you really like being alive. That must make you attractive to people. I get excited about coming to see you, like maybe your energy will rub off on me in some way. Magic, I guess. But I know you want things for me, more for me, more for my life than I let myself want. I don't think you want something in particular for me, not like that, but you're not afraid to want." With that exchange, we entered the beginning stages of recognizing erotic desires. Our therapeutic relationship began to provide the fuel for possibilities of wanting, of desire. My interest in the vitality of life itself, manifested both consciously and unconsciously, was at least as important--gradually becoming more important--than my interest in her. Sandra's perception of my love of life was propelling her beyond our relationship into creating a world and loves of her own.

As I thought through my clients to find a reasonably succinct example of erotic maturation and differentiation, I thought of Tony, realizing that our work together reflects my therapy with several male clients, working to achieve a more vital sexuality. Though many of the particulars of this case example are Tony's, this case discussion reflects the work of several men.

Tony was referred to me by his mother's therapist, calling me herself rather than having Tony make the initial call himself. An interesting beginning, I thought silently to myself. She justified her call by explaining that she only knew of me by reputation and felt the need to do some personal assessment of my treatment philosophy before giving my name to her client's 40-year-old son. She further explained that she had seen Tony herself several times within the context of his mother's treatment. She was troubled by

Tony's treatment of his mother, which she found distant and cruel. She was further worried that he would be less than honest with me, so she wished to provide background. I suggested that most clients are less than honest with their therapists and that I would welcome whatever facts, lies or defenses he brought to me. Tony's mother's therapist did not have a sense of humor. I declined the therapist's wish to provide Tony's history.

It was clear from the initial phone contact that Tony was a fellow quite willing and able to make his own phone calls. It was clear that he was serious about entering psychotherapy. From the very beginning of our contact Tony maintained an exquisite contradiction in his presentation of self: internationally known in his field, he felt the object of everyone's disdain, haunted been a relentless sense of failure. He managed a wondrous wedding of obvious competence with a chronic, self-deprecating submissiveness. Quick to claim all responsibility for evidence of his neurotic, avoidant functioning, he constantly thanked me for my patience and understanding with him. I would suggest that if he must thank me for something, it might be my persistence and interest in him and confront his efforts to credit the success of our work to my personality rather than his own efforts.

Patterns of submissiveness also characterized his love life. Tony did not approach women. To do so was to be selfish and demanding. He waited to be approached. Good-looking, well dressed, well behaved and reasonably well off, he didn't wait too long. Once divorced, he had occupied himself with a series of frequently thrilling but constantly chaotic relationships. He was well trained. His mother's life, from his earliest childhood was rich with disappointment, crisis, eruptions and collapses of one sort or another. His father having abandoned the family early on, Tony was the salve for his mother's woundedness, even now as he entered his 40's and she her 70's.

Tony's waking life was dominated by women, including his mother, who seemed to constantly want of him but never seemed satisfied with what they got. His dream life was dominated by hyper-masculine men who took his women, threatened or assaulted him, but whom he found mesmerizing. These guys knew, at least, "how to be men." The men of his dreams reminded him of aggressive, narcissistic colleagues whom he both detested and envied. The men of his dreams were like his mother's many told tales of his self-indulgent father who cared of no one but himself. As he got to know his father in adult life. He saw his father as more of an inept, child-like bully than an all powerful bastard. He experienced his dream life as a humiliating reminder of his failures as a man, his inability to stand up for himself or hold on to what he wanted. He was terrified that these might be homoerotic manifestations of some sort. It was difficult for him to see the identificatory core of these dreams. He also sensed in some vague way that he wanted me to be a version of these men in his life, that he needed to stop seeing the ways of being lived by the dream men as reprehensible and frightening.

Tony and I have worked several years now. A myriad of factors have interwoven to support his development of a more forceful and vigorous self. I would place at the heart of his changing my consistent confrontation of his submissive, demeaning presentations of self, especially within our relationship. We have created a therapeutic space of disinterest in the interests of those around him, as we have painstakingly built a space of interest in his self-interests. I have insisted upon his right to pursue women solely on the basis of *his* attraction to *them* and for his own sexual satisfaction. He's learned that lust is not such an ugly motivation, that it does not deaden his heart or destroy his sense of the other. As he gains a sense of freedom, so too does he now experience genuine regret (replacing his passion-numbing habits of guilt-driven acquiescence) and an openness to the experience

of others. He is discovering he can be interested in differentness, excited even, rather than sacrificing himself in the face of the other's experience and desire. He is no longer apologetic for his sexual interest or disinterest.

Otherness and Loss

I return to Green's words as he addresses the tendency to defend against yet another aspect of adult sexuality and genitality:

...it is most of the time because he has some unconscious awareness that giving sexuality and genitality their full importance would lead him to greater danger himself, such as the impossibility of accepting the slightest frustration, the torments of disappointment, the tortures of jealousy, the storms of having to admit that the object is different from the image projected by him, the disorganization of limitless destruction either of the object or the self in case of conflict, etc. And it is in order to avoid all these threats of breakdown that the patient will disengage himself from a full and total relationship, leaving the field to other regressions which happily enough for him do not involve the existence of another object and the dissatisfactions that he, or she, may cause. (1996, p.874)

Breakdown. Frustration. Disappointment. Loss. Each and all are elements of a full and total intimate relationship, coming to truly know and love another, who will inevitably prove to be different from what we have imagined. We cannot avoid the possibility of loss in our passionate attachments.

McDougall suggests that loss at the heart of our sexual development:

The notion of Another as an Object or a Place distinct from oneself and one's own space only comes into existence as a result of inevitable frustrations that the new little human being is bound to encounter and that are destined to arouse feelings of rage followed by a primitive form of depression that every nursing experiences. Thus we are not surprised to find in the course of a psychoanalytic voyage, many traces of what we might term "archaic sexuality," in which feelings of love are scarcely distinguishable from those of hate. The tension that emanates from this early dichotomy is destined to form a vital substratum to all expressions of sexuality, eroticism and love that are to come. (2000, p.156)

Mature sexuality necessitates the experience of otherness, and the experience of otherness is so often shadowed by the past, shadowed in surprise, uncontrollability, and loss. McDougall emphasizes that sexual development involves the negotiation of a series of losses throughout early childhood. Sexual development is intertwined with the experience of loss. The successful negotiation of these losses allows the child to establish an independent sense of identity and vitality.

The first loss for the infant is that of the constantly available, perpetually gratifying mother. As Winnicott emphasized, the mother must return to her own life and in so doing must "fail" the infant, no longer being the perfect mother but now a "good enough" mother. It is in the now suddenly and seemingly empty spaces left by the good enough mother that the baby has the opportunity to begin to discover and explore the liveliness, boundedness, and activities of its own body. When all goes reasonably well, the baby learns that its body stays alive and has differing states of pleasure with and without the parent.

Loss continues as the toddler becomes upright and mobile, now able to leave the parent, as well as being left by the parent. The toddler's vertical, walking body becomes its own source of excitement and exploration. Often in this stage the parents experience a loss of the baby. How do the parents negotiate this loss? Do they remain available for the toddler's returns? Does the growing child remain an object of delight, love and sensuality for the parents as the child becomes more independent? If so, the child learns that separation is not equivalent to loss and that this developing body can be a source of both independence and intimacy.

Then there is the sense of loss accompanying the necessity of gender differentiation, the discovery of the differences between boys and girls, mothers and fathers, and that one cannot be both. The discovery of gender differences is a source of anxiety, confusion, attraction, revulsion, and envy in the development of all children. Is it good to be a boy? Is it good to be a girl? How do one's parents feel about boys, about girls? How are the body and the genitals of a boy greeted in this family? How are the body and genitals of a girl greeted in this family? What does it mean to be more like one parent than the other?

And then there is the loss of the oedipal stage, when the child recognizes that the bond between mother and father is the primary bond within the family system and that it is the sexual nature of the bond that differentiates it from all others within the family. At least one would hope that this is true, for when it is not, the child can be faced with a number of symbiotic and regressive pressures. The recognition of the sexual primacy of the erotic bond between parents represents both loss and freedom for the young child. It is the task of oedipal and post-oedipal parenting to celebrate the gender of the child, enjoy the increasing competence and independence of the child's body, and to "nourish and then set free the child's emergent sexuality" (Davies, 1998, p.753).

The intertwining of loss and sexuality do not stop with the oedipal period. It is inherent in the passionate attachments of adult life that we can sustain love and excitement in the face of conflict, disappointment, and loss.

Olshan, in his novel, **Nightswimmer**, provides an eloquent description of this deepening of erotic desire, this intertwining of one's body/self with that of another, and the ever-present possibility of irrevocable loss:

That first feast of another man's body is both joyful and confusing. I want to fill myself with everything, every nipple and biceps and every inch of cock, but I want to savor it and that demands more than one occasion. When I know a man for a while, when the parts of his body become more familiar to me, as his own scent that I carry on my clothes, on my forearms, when he ceases to become just a name and becomes a familiar man, that's when the real sex begins. By then he's told me private things, and I know something of his story; and when I reach over to touch him in a bed that we've both slept in night after night, nothing casual, no matter how galvanic, can rival the power of that touch. For that touch is now encoded with the knowledge that I can lose everything, and movement by movement, as I make love, I'm more completely aware of what I stand to lose. (1994, p.64)

As adults we learn to sustain desire without the promise or certainty of gratification. We can sustain erotic desire and sexual arousal either in the arms of or in the absence of another. But we cannot avoid loss. Can we sustain or regain passionate desire after the

loss of a loved one, be it through separation, divorce, conflict or death? I do not suggest that this is easy. Meadow describes her own struggle:

...I know that now, as a single woman who has lost a partner of many years, I must, to avoid the deadness, direct my longings to another human being with passion and love, and find a person who will return these longings to me. I am confronted with finding a person who wants the same kind of sex at the same time. For me this feels like a traumatic undertaking. (2000, p.175)

I think of my own struggle in leaving a 25 year long marriage to resume a life of passion, to open myself to another again. Sex was relatively easy to re-establish. Passion was not. Opening to someone new, unknown, was not. Such re-opening inevitably evoked the pains, failures and anxieties of the disintegration of my marriage, not to mention the losses of my childhood lying in dark shadows to be torn into the light by my decision to leave my wife. Such re-opening was essential to resume a real life. It is a central and enduring task of psychotherapists to invite our client's to face their losses and failures and try again to embrace another, to embrace life.

In Conclusion

What happens when we do not celebrate the bodies of our clients, when we turn away from erotic fantasy and interplay? Bollas describes the impact of a mother who cannot enter the erotic realm with her infant:

Specifically, the mother experiences intense ambivalence towards the infant as a sexual being, especially towards the genitalia, which cannot be sensorially celebrated. Maternal care is in this respect a "laying on of hands" and the mother in this case cannot eroticize her infant's body through her own hands. ...If the mother than refuses the infant's genital sexuality -- not sonically celebrating it, averting her gaze, stiffening her touch -- thereby displacing it to other parts of the body...she has removed the core of erotic life and sought surface sexuality as a defense against deep sexuality. ...As maternal love is the first field of sexual foreplay, the hysterical mother conveys to her infant's body an anguished desire, as her energetic touches bear the trace of disgust and frustration, carrying to the infant's body communication about sexual ambivalence, 'rolfed', as it were, into the infant's body knowledge, part of the self's unthought known. (2000, pp46-48)

As I first read Bollas' words, I thought of the disservice we do our clients when we avert our gaze, our minds, our language and the attention of our clients from the realms of the erotic, be it the erotic aspects of the transference/countertransference interplay or the attention to the depth and pleasures of their sexual relationships and desires. How often, I wonder, do we offer our clients empathic relatedness, holding environments and spiritual quests so as to avoid the intensity, uncertainty and disturbance of sexual passion? I am not suggesting that we need to *lead* our clients into realms of the erotic. Our bodies, given time and attention, will take us there perforce. Instead, we need to examine the many subtle and not-so-subtle ways that we may facilitate our clients avoiding these realms, perhaps even leading them away. We need to create an evocative and reflective space for our clients, a kind of erotically charged space, to hold for our

clients as they investigate realms of passion in psychotherapy and out in the world. Our willingness to enter erotic realms of anguish, desire and delight with our clients offers the opportunity to reclaim the body in its full vitality from the deadness and distortion of parent/infant eroticism gone awry or the fears of passionate attachments and adult intimacies.

Dinnerstein speaks of the “long past” of our erotic passions, but she also invokes “the deep wide now” of our adult sexual relations. Green seems to suggest that the potential disturbances and uncertainties of that deep wide now, in the here and now of adult sexual relations, are often cause for defensive avoidance and retreat for client and therapist alike. I’ve been told that Bette Davis once said, “Growing old is not for sissies.” I would suggest that the same can often be said for making love. Davis makes her point pointedly, though “sissies” carries a disparaging connotation of the effeminate, the emasculated.

It would be difficult to speak of love any better than James Baldwin and Adrienne Rich already have. I quote Baldwin from **The Fire Next Time** first:

Love takes off the masks that we fear we cannot live without and know we cannot live within. I use the word love here not merely in the personal sense but as a state of being, or a state of grace—not in the infantile American sense of being happy but in the tough and universal sense of quest and daring and growth.

And Rich:

An honorable human relationship -- that is, one in which two people have the right to use the word “love” -- is a process, delicate, violent, often terrifying to both persons involved, a process of refining the truths they can tell each other.

It is important to do this because it breaks down human self-delusion and isolation.

It is important to do this because in so doing we do justice to our own complexity.

It is important to do this because we can count on so few to go that hard way with us. (1979, p.188)

The words of Baldwin and Rich are all the more compelling in that both are gay. It is one aspect of heterosexual privilege that one can take the right to be loved and to love for granted, heterosexual unions to be blessed and held sacred. This has not been so for gays and lesbians, especially at the times when Baldwin and Rich were writing these words. The efforts to love, in their lives, were acts of determination and honor.

It is in the nature of impassioned relations to excite, disturb, transgress. Sexual passion has to do with the capacity, the willingness, to be fully alive in one’s own body and with the body of another. Love and lust, at our best moments, when we don’t turn away from the heat of passions, come together to move us more fully to each other and into life. Within our erotic passions are a multitude of desires--pleasant and unpleasant, regressive and progressive, soothing and demanding. Here is both the hard work and the excitement of love and of lovemaking. In the heat of our erotic passions we need the

other, we want the other, we wish to be wanted, desired, to be taken up, to be tender, to be unrelenting. We face the other, we face ourselves, we hate the other, we overcome the other, we are overcome by the other, familiar gender roles and orientations begin to blur. We are simultaneously thrown backward and forward in time. We are excited and disturbed. We lust and we love.

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