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The Figure of the "Other" as the Therapist of Metaphor

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Ι

Truths of all others the most awful and mysterious, yet being at the same time of universal interest, are too often considered as *so* true, that they loose all the efficiency of truth and lie bedridden in the dormitory of the soul side by side with the most despised and exploded errors.¹

Samuel Taylor Coleridge

Let us begin, as all fictions properly begin, in a world that can no longer imagine its own story, a world devoid of metaphor, a world which has gone dead. I am referring to that time in any story which comes *before* the redemptive "Other" has appeared. Typically, at this time, a character or cast of characters find themselves utterly unable to imagine their lives forward. The rockets they launch explode upon lift-off. The weapons they invent proliferate beyond the limits of protective-and even offensive--utility. Even when problems are attacked with corrective measures drawn from the vast stores of Man's accumulated insight and wisdom, persistence in that wisdom repeatedly falls back into folly. Ironically, the situation to which our fictions compulsively return (for reimagining) is one in which the very consciousness that is employed for the purpose of solving a problem actually promotes the problem.²

In fairy tales and myths this situation is often presented in an extreme form. The king (whom we may consider, following Von Franz, as the dominating perspective of collective consciousness³)

has lost the potency which is in accord with his position. Though he continues to rule, he rules from a sickbed. About him the lands of his dominion are afflicted by a severe blight. Crops fail to grow; people starve. The promise of a future generation lies inert and dormant in its barren parents. Even the water, which had once poured so cold and pure, stands stagnate and undrinkable in its wells and cisterns. Nor is the whisper of breeze sufficient to refresh the exhausted air. Sickness sets in and with it the great leveller, Death, arrives. Everyone starts looking like everyone else. A morbid entropy bends the poles of life together reducing their energetic potential. Gradually, the system cools down, becoming less and less differentiated, until at last everything is so like everything else that nothing is "like" anything. The same old truths circulate about until finally everyone is infected with a claustrophobic sense of their familiarity. And the metaphors which had once animated life, eventually they, too, lose their efficacy as metaphors and lie "bedridden in the dormitory of the soul" side by side with the most tired forms of culture.

The state I am describing is that of a fallen world. The freedom and maneuverability which each of us may be imagined to have possessed while hovering in some paradisiacal state of pure potentiality prior to our conception and birth is immediately attenuated with our being exposed to the vicissitudes of an actual life among other beings. Of course, it goes without saying that incarnation into the company of other beings is necessary for the actualization of our particularity. But it must also be recognized (developmental psychology notwithstanding) that this incarnational process at the same time dooms that particularity. For each of us, immediately upon being born (indeed sooner if we consider the claims of ancestors and genealogy myth), becomes a function of our relationship to other beings and other lives. Each of us, that is to say, is reduced--some more so, some less--to the terms we share in common with those persons, places, periods, and things with

which we live move and have our being. Shelley, echoing Coleridge, writes of a "curse which binds us to be subjected to the accident of surrounding impressions," and in another place of a "mist of familiarity [which] obscures from us the wonder of our being." Lacan writes similarly of our being ensnared, already in earliest childhood, within the deceptive images of the imaginary order. And yet, as Jung pointed out, it is only through being "bounded to the utmost" within the tenthousand things of life that we really connect to the unbounded and infinite. The irony here is supreme: while incarnation is absolutely necessary to our becoming real, it is also the original sin from which we again and again find ourselves in need of redemption.

Persons who look to psychotherapy for help are often the citizens of the dead and fallen world I have just described. No matter what story has animated and organized their lives--empire builder, sexual conquistador, husband or wife--inasmuch as they are supplicants of psychological services they reside in that phase or moment of it which has lost its efficacy *as* a story.

A story loses its efficacy as a story the moment it loses sight of its relativity, its sense of being but one story among others. While psychological life requires some kind of narrative construction in order to turn events into experiences, psychological well-being requires that these narratives possess a sufficiently reflective self-awareness to appreciate that other tellings of any event are possible. When we know that there are other possible readings for the events we suffer, the monolithic reading we have been behaving in our lives may become less literal and less binding. Of course, changing the way one has dramatized life and recognizing the possibilities for life within rival dramatizations is not easy. We cling tenaciously to the "truth" of our old story and find its breakdown difficult to comprehend. After all, for years, decades, and often generations every event that has been experienced--whether positively or negatively--has served as a powerful reinforcer of

the *way* in which it has been experienced. Even after denial abates the demise of the fiction which has been sustaining life may be difficult to comprehend since the process of its perishing lay in its very triumph.

The mistake made here is that of a confusion between categories. We confuse the fiction which we have been living as *our* truth with truth *per se* and then, when its relevance has worn out, find ourselves locked into an indifferent frame of reference, one that is no longer animating or effective for us.

Psychotherapy calls these redundant narrations of events "symptoms." Symptoms appear when the fiction which has sustained life becomes so compelling that no other accounts seem credible. Old experiences become the paradigm in terms of which all new events must be regarded. Reality becomes increasingly predictable, standardized, closed. Nothing may be added, nothing changed. Even if new events should present themselves they are either denied altogether or made to conform with the norms of the reigning orthodoxy. Jung referred to this state of affairs as the neuroticism of a one-sided ego-conscious. Consciousness, transfixed by a single perspective, loses touch with the terms of reference of the other instinctual dominants, and falls out of sync with existence. As inevitably as life flows on, the fixated fiction which we cling to loses its efficacy, its capacity to keep pace. Like the old king in the fairy tale, it lingers on, ruling life despite its redundancy and ineptitude.

When the fiction which has punctuated life "becomes *so* true that [it] lose[s] all the life and efficiently of truth," a haunting sense of alienation may emerge. Though our story provides a place for everything so effectively that everything is limited to a relational placement within it, there exists "no exit." As Sartre put it, we live in a hell of other people, people, that is, who are no longer

"other" enough to open us to what Shelley called, "the mystery of our being." Projective identification, homeostasis, bad faith: we become what consensus reality requires us to be and are unable to differentiate ourselves out from the familiar types with which we share life's stage.

"As I go on in this life, day by day," writes Robert Louis Stevenson,

I become more of a bewildered child; I cannot get used to this world, to procreation, to heredity, to sight, to hearing; the commonest things are a burthen. The prim, obliterated, polite surface of life, and the broad, bawdy, and orgiastic--or maenadic--foundations, form a spectacle to which no habit reconciles me.⁸

The more we feel reduced to the lowest common denominator we share with the "commonest things" of life, the more poignantly we feel the remainder, that portion of our uniqueness which refuses incarnation. Though a "mist of familiarity obscures from us the wonder of our being," that wonder continues to haunt us as the anti-type of the emptiness we feel. Melancholy, depersonalized, embittered, dis-eased: the world no longer measures up to what the fictions of our souls require it to be. On the one hand, we attempt to preserve the authority of our fiction through a fundamentalistic insistence on it. As the fanatics of the Christian fiction have put it: "If the world fits you're the wrong size." On the other hand, we defend ourselves against recognition of our fiction's demise by adopting an attitude of fatalistic resignation to it. Unable to distinguish between the reified fiction we mistake for truth and the protean nature of events themselves (Shelley spoke of "the vulgar mistake of [confusing] a metaphor for a real being"), the jaded aesthetes among us take pleasure in despising the way "life" seems to eternally parody itself. It is in this way that the sick king lingers on, cheered up by his sickening fool.

II

Who is the third who walks beside you?
When I count, there are only you and I together
But when I look ahead up the white road
There is always another one walking beside you
Gliding wrapped in a brown mantle, hooded
I do not know whether a man or a woman
--But who is that on the other side of you?¹⁰

T.S. Eliot

Here, at the mid-point of this fiction of fictions, let us introduce that figure whom the stories portray as playing the redemptive role. Typically, when a story can no longer imagine solutions to the complications of its plot, a figure from a territory *outside* the domain of the dominating fiction appears. No specific characteristics define this figure. Indeed, the redeemer may take on as many forms as there are stories in which to appear. One feature, however, is elemental: the quality of "otherness." The redemptive figure is incorrigibly Other. Just as Jesus came from Nazareth, Perceval from Wales, and E.T. from outer space, the figure of the Other is a being from an order of reality essentially alien to the one in which the tired tales we live have located us. "A stranger from a strange land," "*in* this world but *not* of it"--the figure of the Other manifests the possibility of a wholly new perspective. Even when the redeemer is a local figure, his or her redemptive power resides in his having made a journey to the ends of the known world in search of the otherness of

the realms which lie beyond it. Explorers such as Marco Polo, Vasco de Gama, Columbus and Magellan can each be imagined as manifesting "otherness" in both these senses. Not only did they bring home with them something of the otherness of the places to which they had travelled, as aliens to those distant lands they initiated them into otherness as well.

In fairy tales and myths the redemptive Other is the one who kills the dragon which has lain seige to the castle, marries the melancholic princess after making her laugh, and rejuvenates the sickly king. Whether he is a local hero returning from abroad or a complete stranger whom no one has seen before, the alien perspective which he brings, has, by virtue of its otherness, the power to re-vision or redeem those bogged down stories in which the dominating style of consciousness has perpetuated the very problems it wished to resolve.

When the explorers came back from their journeys they returned with new ways of doing things, new technologies: gun powder from Cathay, tobacco from North America, precious metals from the southern tip of Africa. More important, however, than any of these imported technologies were the stories which they also brought home. The privateers returned with tales of strange, odd-customed people. I do not mean to suggest that these tales were put to the same practical use as was the booty they brought back in the holds of their ships--though, certainly, that was sometimes the case. The stories of distant lands where people lived by different rules, devoted to different religions were important in that they provided a *context* within which the fixated fictions which the local mind-set regarded as the truth could be *relativized* and *revitalized*. Even when the stories were blown out of all proportion or entirely made-up, they still had a relativizing effect on the values and terms of reference to which the local mentality was bound. Listening to these stories, audiences learned how arbitrary their own predicaments were. If other societies experienced the events of life

through entirely different fictions, perhaps--and here is the redemptive idea--they could too. With the realization that rival systems of reality exist, the possibility of re-imagining the local fiction became possible.

When the sameness and routine of ordinary life meets otherness the chance exists to grasp itself anew as metaphor. The figure of the Other, simply by virtue of being other, challenges the ways in which familiar objects have capitulated to a common identity. Inasmuch as the alien or stranger does not fit with the existing scheme of things, he possesses the power to dislocate the sense of "fit" which had previously held sway.

Otherness, let me say in plainly, is the factor which makes any figure *figurative*. By presenting itself in a manifestly different form than ordinary life is familiar with, the figure of the Other rekindles the likening process by which the imagination proceeds. Immediately upon being touched by otherness metaphor dawns. Each tired figure which experiences itself in and through the otherness of a more extraordinary figure (with or without words of comparison such as "like" or "as") is released by the encounter from the restricted identity it was subject to as a member of its homely surround. Set beside the "Other" the familiar also becomes "other."

Without exaggeration the claims which Shelley made for the poetic imagination could be made for the figure of the Other as well. Like the imagination, the figure of the Other,

Transmutes all that it touches, and every form moving within the radiance of its presence is changed by wondrous sympathy to an incarnation of the spirit that it breaths; its secret alchemy turns to potable gold the poisonous water which flows from death through life; it strips the veil of familiarity from the world, and lays bare the naked and sleeping beauty, which is the spirit of its forms ¹¹

The imaginative capacity of otherness to strip "the veil of familiarity from the world," "changing every form moving within the radiance of its presence," is reminiscent of the *deus ex machina* in Greek drama. Just as a god was lowered onto the stage by ropes and pulleys to resolve, as if by supernatural agency, the entanglements of a story's plot, the figure of the Other--and by this term I mean *any* Other--adds itself to the entanglements of our lives in a fashion which is transforming of them. As a new and anomalous element descending into the existing order, the figure of the Other shifts the context of every relationship and releases each of the players to new roles and identities.

Surely this is an important part of effective psychotherapy. If therapy is to help people out of the psychic wastelands which have closed around them ("blunted by reiteration" 12), it must be able to foster an encounter with otherness. Unconditional positive regard, accurate empathy and congruence are not enough. Indeed, a swerve in the other direction may also be necessary. After indicating the extent to which he understands the patient's frame of reference and can empathize with it, the therapist may indicate (when such is truly the case) that he does not view the situation in the same way. This mixture of emphatic understanding and incredulity on the part of the therapist—one is reminded of the "caring pessimism" and "benign indifference" of Freud—may, of course, be disconcerting to the patient. For how can he enact his tragedy with the unconsciousness befitting a tragic hero when his audience, the therapist, reintroduces the disbelief he had been suspending up until this point? Whereas empathy tends to be leaven of credulity, it is by not wholly suspending his disbelief with regard to the patient's construction of reality that the therapist enables the patient to suspend the disbelief which he (or the culture to which he has been unconsciously recruited) has extended to all other constructions besides his own. Bit by bit the

closure cracks open. The therapist, by not taking the patient's punctuation of familiar events literally, helps him to entertain other possibilities.

Perhaps the most naive of the many illusions psychotherapy has had to rid itself of is the illusion that it can "understand" its patients. No matter how many months and years are devoted to the goal of understanding, the "otherness" of the patient will always elude comprehension. This is not to say that therapists will not continue to convince themselves that they have gained a true insight into their patients. After all, the notion that right understanding is necessary to right intervention makes more sense than the opposite claim. Experience teaches us, however, that we are more apt to fail our patients the more we believe ourselves to know them. Indeed, exaggerated knowledge-claims along this dimension are, perhaps, the most sure indication that we are subject to countertransference illusions. The more the therapist believes himself to know his patients the more his maneuverability is attenuated. Like the *local* suitors who try to release the princess from the fairy tale in which she is imprisoned, therapists who mistake their maps for their patient's territory get caught in the thorny rose vines on the tower wall they scale to claim her.

Psychotherapy is a subversive activity. Though we may be quite sincere in our attempt to understand the patient, our goal in doing so, like that of our co-therapist, the patient's symptom, is to subvert the terms of understanding in which the patient is stuck. What use being received like kin and kind into the patient's fiction if we do not break its rules? The therapeutic task is to interrupt the way the patient or system of patients return to zero. Above all else the therapist must set up a situation (through interpretations, directives, or, simply the otherness of his own person) which the patient cannot incorporate into his existing fiction.

This is not to say that the therapist's map is to be taken over by the patient. Psychotherapy is not

an educational enterprise, at least not in any didactic or instructional sense. Indeed, patients often change the way they construe life without borrowing much at all from the therapist. The important thing for therapy--and here I am tempted to call it the necessary and sufficient condition of the whole process--is simply (and, yet, not so simply) the experience of otherness. Mediated as much by the patient to the therapist as by the therapist to the patient, Otherness is the archetypal correlate to what Bateson has referred to as the "difference that makes a difference." It is the encounter with Otherness that puts the patient and therapist in touch with a difference which, if credited with a point of view, releases the possibility of construing all things differently. Again, the patient does not have to adopt the therapist's reality. It is enough to experience that other readings of any event are tenable. As Wallace Stevens has written,

The final belief is to believe in a fiction, which you know to be a fiction, there being nothing else. The exquisite truth is to know that it is a fiction and that you believe in it willingly.

Ш

The ancient Poets animated all sensible objects with Gods or Geniuses, calling them by the names and adorning them with the properties of woods, rivers, mountains, lakes, cities, nations, and whatever their enlarged & numerous senses could perceive.

And particularly they studied the genius of each city & country, placing it under its mental deity;

Til a system was formed, which some took advantage of, & enslav'd the vulgar by attempting to realize or abstract the mental deities from their objects: thus began Priesthood;

Choosing forms of worship from poetic tales.

And at length they pronounc'd that the Gods had order'd such things.

Thus men forgot that All deities reside in the human breast. 14

William Blake

The redemption of a story is not the end of a story--though this lie has been told. Were we to send follow-up questionnaires to our patients, or read a few pages further in the texts of their lives, we would learn how quickly the sense of metaphor which the therapeutic process had aimed to foster can be abstracted into system and truth once more. Why is it so hard to maintain the fictive stance? Why is the grace of metaphor so brief and fleeting? Why do the symptoms return?

As therapists have long known, it is precisely at the moment when a "change" or "cure" seems most securely achieved that the danger of backsliding poses its greatest threat. Though the patient may leave therapy confident that he has gotten over his problems, the therapist knows how easily such confidence can be shattered by even the slightest set-back. All that is required to undo a therapeutic gain is a single exposure to a single event which revives some aspect of the experiential categories with which that event had previously been associated. If the new fiction cannot turn such an untoward event into a tolerable experience at least as well as the old fiction turned it into intolerable one, a re-lapse may be triggered. It is important to emphasis here that the triggering event is not in itself the problem, but, rather, the *way* that event is construed and experienced. If the patient is to sustain the change which he has attempted to inaugurate through the re-writing of his fiction, he must provide a place within his revised sense of "time, place, circumstance, cause and effect" (Shelley) for all events which were once aversive to recur in a favourable way. Fictions which do not give place to the possibility of encounter with events which the discarded fiction had struggled with run the risk of being torn asunder by them. Indeed, in fairy tales the wedding of the

Prince and Princess, and, hence, the renewal of the kingdom which this wedding is intended to bring about, is frequently jeopardized by the very guest whom the couple had neglected to invite. Even when the indignant event which crashes the party is only slightly discontinuous with the expectations the patient has had of his cure, it may cause him to worry that other events for which he is even less prepared may turn up uninvited as well. In many cases a catastrophizing process is set in motion at this point which quickly destroys the anticipated change. As the first event which fails to fit the fiction which the patient had imagined for his life becomes the vantage point from which the rest of life is viewed, a second, forth and sixteenth ill-fitting event is soon spotted, and so on *ad infinitum*.

One fiction in terms of which patient's commonly take flight into health, but which is particularly vulnerable to catastrophizing and re-lapse, is the redemption story called "no longer." In this story the patient simply negates the symptoms which had complicated his old life's story by claiming that he "no longer" suffers them. The problem here is not that the patient is being untruthful. When he claims to "no longer" suffer the complaints which brought him into therapy we have no reason to doubt his sincerely. Indeed, it is entirely possible, for the moment at least, that he is completely symptom-free. The pathogenic aspect of his "symptom-free" construction resides in the fact that though the symptoms of the old fiction are now denied, they are still mentioned. "The unconscious," as Freud said, "knows no negation." To be no longer depressed, no longer hysterical, no longer impotent, is to be potentially all these things once more. The "no longer" fiction fails for the same reason as the directive---"don't think of a pink elephant"--fails. As the deconstructionist literary critics would put it, the cure which the patient claims for himself with the expression "no longer" is belied or "deconstructed" by the very terms in which he articulates that

claim. Traces of the old fiction's terms of reference are still present on the erased page. Nothing has really been re-written at all.

After killing his mother, Clytemnestra, in revenge for her murder of his father, Agamemnon, Orestes was pursued by the maddening Furies to the Areopagus or hill of Ares, west of the Acropolis. There Athena held court and granted Orestes amnesty. This mythical trial marked a transition from the old vendetta system of justice to the more politically regulated court system from which our modern justice system is derived. Significantly, for the new system to take hold, the Furies, who were dissatisfied with Athena's judgement in the case, had to be given a role in the new order which her decision had inaugurated. After much negotiation, Athena was able to persuade these furious spirits of revenge to make a change in their archetypal portfolio. In subsequent mythology they were given a new name, the Eumenidies or "kindly ones" and given the job of loving and guarding the city of Athens. ¹⁶

Just as Athena's decree that Orestes was *not* guilty was insufficient to free him from the claims of the old vendetta system of justice, the decree by the patient that he is *no longer* symptomatic is insufficient to free him from the claims old symptoms still may make upon him. As with Orestes, so with the patient: the Furies must be relocated, given a place within the new fiction, a place which is supportive of it.

The tragedy of the mental patient is that he leaves the hospital *no longer* confused, *no longer* depressed, *no longer* reporting suicidal ideation, *and*, *yet*, *hounded by these labels all the same*. No longer is he free to experience sleeplessness, listlessness, and moments of sadness without the support system around him taking his reports as indicative of a relapse. Once a mental patient always a mental patient.

So long as the patient is still subject to his old labels his adjustment to Otherness is inadequate. Indeed, the patient has not made a full transition into his new life (and thereby ceased to be a "patient") until he resides securely in a sense of the otherness of others and the otherness of himself. A sense of metaphor, a sense that life is a complex composite of fictions, is all that is required to incorporate the Furies which events become when seen from a viewpoint which denies its relativity and competes with other perspectives for the distinction of offering the ultimate vantage point.

If our "final belief," as we have already heard from Wallace Stevens, "is to believe in a fiction, which [we] know to be a fiction, there being nothing else," we will be able to tolerate and even entertain anomalous beliefs without the threat of relapse. Relapse is a possibility exclusive to the genre of truth. It is only fictions which have forgotten they are fictions that destroy our capacity to live and imagine on. It is only cures which are dogmatically achieved and fundamentalistically maintained that run the risk of relapse in the face of those heretical events which life inevitably brings.

Let us imagine therapy as a fiction in the service of the Other. The story of therapy is a tale which opens a multitude of stories into one another in order that they may be reminded of their relativity and maintain their health as stories. Therapy, in this sense, is about the individuation of our sense of otherness. No matter what techniques are employed--analytic, strategic, systemic or behavioral--the job is to remind the patient, relentlessly if necessary, that "patienthood" is but one fiction and that there are other points of view. How would it look from another perspective? How would it all look to the man on the moon? This is the sensibility which therapy must sophisticate-regardless of whether symptom-relief, ego-development, or individuation is the focus of the work.

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