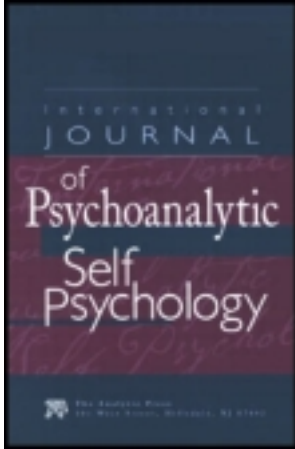


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Publisher: Routledge

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UK



International Journal of Psychoanalytic Self Psychology

Publication details, including instructions for
authors and subscription information:

<http://www.tandfonline.com/loi/hpsp20>

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Available online: 21 Jun 2012

To cite this article: Doris Brothers Ph.D. (2012): Trauma, Gender, and the Dark Side of Twinship, *International Journal of Psychoanalytic Self Psychology*, 7:3, 391-405

To link to this article: <http://dx.doi.org/10.1080/15551024.2012.686155>

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TRAUMA, GENDER, AND THE DARK SIDE OF TWINSHIP

DORIS BROTHERS, PH.D.

There can be little doubt that the selfobject experience of twinship is vital to psychological well-being insofar as a sense of being “a human among humans” tends to mitigate the anguish of existential uncertainty. However, an intense need for twinship in the aftermath of trauma is often the prelude to much pain and suffering. This article attempts to show how trauma-generated twinship needs may lead to denials of sameness and difference and the creation of us–them dichotomies. It proposes that dichotomous gender should be viewed as a trauma-generated relational pattern by means of which unbearable experiences of uncertainty are transformed. Because analysts are as likely to have been traumatized as their patients, the shadow of what I call “the dark side of twinship” falls on many analytic relationships. A clinical example involving a woman whose need for sameness was very great illustrates how struggles over twinship can shape the treatment process.

Keywords: difference; gender; sameness; trauma; trauma-generated dichotomies; twinship

I have no hesitation in endorsing a view shared by many self psychologists that a sense of being “a human among humans,” as Heinz Kohut (1984) described the selfobject experience of twinship, is vital to psychological well-being. In my view, feeling that one is a welcome and familiar member of the human family goes a long way toward

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mitigating the anguish of what I (Brothers, 2008) have called “existential uncertainty” or unbearable doubt about one’s going-on-being (Winnicott, 1965). Although we can never be certain that others will engage with us in the orderly relational give and take on which a sense of differentiated selfhood depends, the experience of being twinned with others tends to promote the expectation that they will.

From what I have just written it might seem as if I regard twinship experiences as unfailingly beneficial, but I am convinced that there are times, often in the context of trauma, when an intense need to experience twinship may be the prelude to great pain and suffering. In this article, I examine what I have come to think of as “the dark side of twinship” as it occurs in many aspects of relational life, both within and outside of therapeutic relationships.

I find Togashi’s (2010) understanding of twinship helpful in explaining what makes this so. For him, twinship involves more than just experiencing our “basic alikeness” with others, as Kohut (1984) proposed. Togashi contends that twinship depends on “mutually finding oneself and not-oneself in the other.” That is to say, twinship involves experiencing both sameness with and difference from another person or persons, and that this occurs in a context in which one is experienced in much the same way.

Research on the “matching” activities of infants and their caretakers appears to support the idea that sameness and difference, the two components of twinship, are experienced in the earliest moments after birth. The microanalysis of films of mothers and infants reveals that they do not match one another exactly. What is matched is the direction of engagement change and the time and rhythm of behaviors (Beebe and Lachmann, 2002). In this way, infants seem to come to know that they are both like their mothers and distinct from them.

While we continue to search for experiences of sameness and difference throughout our lives, psychological trauma tends to powerfully intensify our need for them. To explain this assertion, I briefly summarize my most recent attempt to understand trauma (Brothers, 2008). Using a relational systems perspective, I conceive of trauma in terms of the destruction of the certainties that pattern psychological life—I have used the term systemically emergent certainties (SECs) to describe these—and concomitant efforts to restore a sense of certainty about the continuation of psychological existence.

I have come to think of traumatized people as exiles forced to live in a world they no longer recognize—a world without meaning. Having lost all that is known, familiar, and meaningful, and facing the horror of self-annihilation, they are likely to crave reassurance that they have not been stripped of what so powerfully reminds them of their connection to other humans—their similarity to them. Since our hope of emerging from the unbearably lonely exile of trauma depends, to a great extent, on finding that one is still welcomed into the human family, whatever confronts us with evidence of our difference from others may be dissociated from awareness or denied. In other words, among traumatized people, the search for sameness may be transformed into a denial of difference.

The sense of being a distinct, one-of-a-kind individual also emerges out of the relational give and take. When the availability of that relational exchange is thrown into doubt by trauma and the loss of one's very existence as a unique individual seems imminent, the search for difference is also likely to become very intense. Finding differences, making sharp distinctions among that which is similar, tends to bring certainty to experience. Just as the search for sameness may become transformed into a denial of difference, the search for difference may be transformed into a denial of sameness.

It is probably obvious that feelings of uncertainty are increased by experiences that are complex and multifaceted and reduced by ones that are simpler. In the aftermath of trauma, when the uncertainty of psychological survival seems close to unbearable, we tend to simplify experience by whatever means are available. Extreme forms of twinship characterized by denials of sameness and difference then become especially compelling insofar as they rely on black-or-white thinking that reduces the complexity of lived experience. Moreover, these denials tend to be rigidly maintained and resist all appeals to reason.

Trauma-generated longings for twinship often give rise to us–them dichotomies in which differences among those we consider “us” and our similarity to those we consider “them” are both denied. Such denials rest on dissociative processes that blind us to the complexity of lived experience. In fact, I have argued that dissociation reflects a need to simplify experience in response to the unbearable uncertainties that trauma forces us to confront (Brothers, 2008).

When I refer to the dark side of twinship, it is mainly the formation of these complexity-reducing us–them dichotomies that I have in mind. While the enmities that grow up among peoples of different races, religions,

ethnicities, and so on undoubtedly result from enormously complex and diverse factors, I suspect that the intense search for sameness and difference in the aftermath of trauma plays a significant role. It is not only in the context of war and political strife that these extreme forms of twinship emerge; they pervade everyday life.

With the possible exception of race, I cannot think of a more problematic us–them dichotomy than that of *gender*—a term that refers to the psychological and cultural meanings associated with biological sex, or what we commonly think of as masculinity and femininity. Since there appears to be only a weak biological basis for dichotomous gender—empirical research has found few significant inborn psychological differences between the sexes and the variance between the sexes in most respects is about the same or less than the variance within each sex (Young-Bruehl, 1991)—it makes sense that the psychological meanings for its existence must be very strong.

Viewed from the perspective of relational systems theory, all of one's experiences are highly context sensitive. Why then, should one's experience of gender be an exception? Why should men and women rigidly conform to societal stereotypes no matter what the context? I like the way Adrienne Harris (1991) characterizes gender experience. She writes: "Gender can be as core and coherent an experience as any structure of self and subjectivity. But gender can also mutate, dissolve and prove irrelevant or insubstantial" (p. 197).

I would say it is only in the context of trauma—when a sense of flexible certainty is turned into rigid certitude—that dichotomous gender becomes the norm. Virginia Goldner (1991) concurs. She suggests that the consolidation of a stable or core sense of gender involves the activation of "trauma-related processes," such as disavowal and dissociation. Therefore, rather than being an inevitable consequence of biological sexual differences, dichotomous gender may itself be viewed as a trauma-generated relational pattern by means of which unbearable experiences of uncertainty are transformed.

A sharply experienced gender dichotomy functions to reduce the complexity of lived experience by means of denials of sameness and difference. In other words, to the extent that they experience themselves as feminine, women tend to deny their sameness with men and their difference from other women; and, to the extent that men feel masculine, they tend to deny their sameness with women and their difference from other men.

Building on the idea that trauma-related processes give rise to gendered experience, Brothers and Lewinberg (2000) suggested that they may

also underlie the behaviors that are usually thought of as “oedipal.” We suggested that children may find their disavowed gender-linked qualities embodied in others (often, but not always, the opposite-sex parent). Closeness with those whom they perceived as embodying these qualities may allow them to experience a sense of cohesive wholeness otherwise difficult to attain. Sexuality, we suggested, is often an avenue through which this closeness is achieved. This conceptualization employs an understanding of “alter-ego experiences” that is different from twinship experiences in that they involve feelings of sameness with others who embody disavowed aspects of oneself (Brothers, 1998). I proposed that sexual feelings, fantasies, and activities may not only be employed to confirm one’s experience of oneself as lacking the gender-related qualities that have been disavowed, but also may provide a sense of blissful merger with them. So, for example, if a woman has disavowed her boldness and forcefulness (i.e., stereotypically masculine qualities), sexual experiences with a man she experiences as bold and forceful may reinforce her conviction that she lacks these qualities while at the same time allowing her vicarious access to them.

Aggressive, hostile experiences seem to serve many of the same functions as sexual ones. We may feel reconnected with disavowed aspects of ourselves when we attack them in others. Little boys who make fun of “sissies” may thereby gain access to that which they could not integrate without putting themselves at risk for scorn and derision. Homophobia has been explained in similar terms. Those who vociferously demean homosexuals are believed by many to have disavowed their own homosexual longings.

From a relational systems perspective, it is not possible to precisely determine the causes and effects of any trauma. Consequently, it is impossible to predict with certainty what meanings any given person will attach to prohibitions against exhibiting characteristics associated with the other sex, nor is it possible to predict that a specific relational pattern will come into play. Just what makes for the emergence of experiences that have been called oedipal must remain open to question and considered in terms of each individual’s relational configurations. Nevertheless, it seems that traumatic experiences associated with gender imposition not only tend to give rise to rigid, restrictive relational patterns, but these may, in turn, create the contexts for further trauma.

Is the almost ubiquitous emergence of dichotomous gender attributable to the fact that the world has always known violence, wars, natural catastrophes, and other destabilizing traumas on the societal or global level? Perhaps. However, it seems clear that after becoming deeply

entrenched within societal systems, the gender dichotomy has perpetuated itself, and the traumas associated with it, intergenerationally. I find Ian Hacking's (1999) concept of "the looping effect of human kinds" helpful in understanding its endurance. Clearly, the very act of classifying people into categories serves to reduce experiences of uncertainty (see Brothers, 2008). Gender categories are examples *par excellence*. Children born with female genitalia are usually classified in the category "girls," while those born with male genitalia are classified as "boys." Once they are made aware of the sexual category to which they have been assigned, all that children come to know about boys and girls influence their ways of feeling, thinking, and acting. Their experiences, in turn, loop back to change the categories.

What people classified in a specific category learn about themselves, and is considered the truth about them by others, emerges from the relational engagement of those who do the classifying and those who are classified. The meanings associated with being a girl or boy for any particular child reflect all that transpires within the cultural, subcultural, and familial systems in which that child's experience is simultaneously embedded. Because of the porousness of our systemic universe, no child is likely to be completely ignorant of the dictates of dichotomous gender, but some children are very forcefully taught that their personality characteristics must be diametrically opposite those of children of the opposite sex. For many of these children, the gender category to which they are assigned feels as confining as a straitjacket. As I explain in the clinical example that follows, I was one of them.

Traces of the dark side of twinship are also to be found in relational patterns between parents and children, which I have referred to as *traumatic attachments* (Brothers, in press). I based this concept on the work of researchers like Liotti (1992) and Hesse and Main (1999), who, using methodology derived from attachment theory, have found that the effects of trauma are intergenerationally transmitted within the moment-to-moment, largely nonverbal, relational exchanges that occur between parents and children. These exchanges are often replete with denials of sameness and difference.

Let us first consider the trauma-generated attachment patterns that arise out of the need by some traumatized parents to deny differences between themselves and one or more of their children. A parent who finds it very difficult to tolerate uncertainty is unlikely to perceive and recognize a child's uniqueness. After all, a unique child is not only different from his or her parent, but one who cannot be fully known. For a traumatized

parent who is already struggling against overwhelming uncertainty about psychological survival, acknowledging the unknowable aspects of a child may pose an insuperable challenge. Insofar as children of such parents must dissociate qualities and attributes that differ from those of their parents or risk losing them as urgently needed relational partners, their attachments are marked by a high degree of experienced sameness.

Some parents may locate dissociated aspects of their own self-experience in their children. To the extent that a child comes to embody a parent's dissociated attributes and qualities, he or she is perceived as different from that parent. Thus, for example, a father whose restorative efforts in the aftermath of trauma involved the disavowal of all feelings of weakness and vulnerability may find these qualities in a child. By railing against the child for being weak and vulnerable, the father may gain some sense of connection to what he disavowed in himself. Despite being criticized and demeaned for embodying qualities the father seemingly despises, the child may unconsciously sense that connection to the parent depends on his or her difference from him.

Considering the ubiquity of trauma in the lives of therapists, as well as patients (Ozer et al., 2003), it is hardly surprising that what transpires in analytic relationships often threatens one or both of the therapeutic partners with retraumatization. When this occurs, traumatic attachment patterns based on denials of sameness and differences and us-them dichotomies often emerge between patient and analyst. It is in this context that the dark side of twinship casts its shadow over the treatment.

DIANA

In my 2008 book, I described Diana, a patient whose need for experiences of sameness seemed to be exceptionally great. However, I provided only a brief summary of our work together. Since this treatment illustrates how struggles over twinship can shape a therapeutic relationship, I take the opportunity to give a fuller account of it here:

Diana [is] a 24-year-old woman, who had been severely traumatized at the age of 16 when her mother ran off to join a lover. Left in the care of her distracted, rather bumbling father, she barely managed to get through school. Despite her keen intelligence and personal charm, she then found a job that barely tapped her potential. I was perplexed by her fierce insistence that the ways in which

we understood the world and experienced the treatment situation had to be identical. Whenever she discovered that some thought or perception of mine differed from hers she would either change her perception to match mine or desperately attempt to persuade me to change my mind [p. 55].

Diana's complaints on entering twice-weekly treatment involved her inability to find a satisfying career, as well as her contentious relationships with both men and women. It is difficult for me to convey the unusual way we related, but the following is how I recall her addressing me one day early in our work together. Searching my face intently with her eyes, and in a voice and manner befitting a much younger person, she spoke in a torrent of words that left no room for me to reply:

Oh, you think I should go back to school. No, maybe not yet? But at some point, right? That's what I was thinking. I should go back to school, but not right now. So we both want me to go back to school, but we think I should wait a while. Why do we think I should wait? We think I need more time to be sure that I'd be happy studying massage therapy, right? I know that you enjoy being a therapist and helping people and I like to help people a lot. Doris, maybe you think I should apply in the fall. I was also thinking maybe I should apply in the fall.

Initially, I was at a loss to understand Diana's curious relational style. However, I gained a deeper sense of its possible meanings when, in the course of our work together, she questioned her mother, Sheila, about Sheila's childhood. Diana was amazed to learn that her mother had been incestuously abused by her grandfather. She also found out that Sheila had become pregnant with Diana on one of her first dates with Diana's father, Jim. They had quickly married. Since Diana reported that Sheila had constantly demeaned and criticized Jim, we conjectured that Sheila might have identified him with her abusive father. This probably helps to explain Sheila's strenuous efforts to prevent Diana from believing that she was like her father in any respect. She even refused to allow Diana to take piano lessons when she asked for them. "My father plays really well," Diana explained. "I guess she didn't want me to follow in his footsteps."

At the same time, Sheila seems to have gone to great lengths to encourage Diana to think that they (i.e., mother and daughter) were

identical in every respect. She often commented on their physical resemblance, although, according to Diana, Sheila is a voluptuous woman who embodies the ideals of beauty celebrated in the 1950s and 1960s, while Diana is quite slender and angular in appearance—more like her father in this respect. Even Diana was amused by Sheila's insistence that they both resembled Brigitte Bardot.

Diana also reported that Sheila would recount anecdotes from her life as if they matched Diana's perfectly. As Diana retold them to me, it became apparent that the similarities were very strained. All in all, Diana's relational style seems to have revived a traumatic attachment with Sheila that emerged out of Sheila's intense need for sameness with Diana and her repeated denials of the differences between them.

At times, I found Diana's insistence on our likeness difficult to tolerate. I regret to say that, on occasion, I responded to her bids for sameness in ways that confronted her with our difference. I soon learned to recognize these hurtful lapses in my responsiveness because Diana would immediately complain of severe anxiety and express concern that she was falling ill. "I just know something is terribly wrong with me," she would moan. Fortunately, as soon as I was able to identify what I had done to disrupt her experience of sameness with me and find some way to address my failure in empathy with her, Diana's complaints would disappear.

Particularly trying for me were the times when Diana insisted that we see eye-to-eye on gender. Probably because her mother has achieved considerable success in the fashion industry, and, according to Diana, always looks, dresses, and acts "like a lady," Diana had also embraced ideals of stereotypic femininity.

A turning point in our relationship occurred during a session in which Diana vehemently railed against a friend who had been very argumentative and confrontational. "Don't you think she was disgusting?," she asked; "She just forgets she's a woman." Without thinking, I blurted out, "Diana, I know that Mary upset you but maybe she felt very strongly because . . ." Diana looked as if I had slapped her. Before I could finish my sentence, she said, "I can't believe this. You think it's okay for her to act like a man? How can you think that?"

This time, Diana became enraged with me. "I don't know if I can continue to see a therapist who doesn't know how women should conduct themselves," she shouted. While she remained angry and remote in our next session, I noticed that she was wearing a sweater exactly like the one I had worn several days earlier.

I cannot say that I completely understand what made me disrupt Diana's experience of sameness with me in such a grossly un-empathic way; however, I believe it reflected traumatic attachments in my own life. Like Diana, my relationship with my mother was marked by her insistence that I conform to her stereotyped view of femininity. I spent many years in my own analysis trying to integrate my disavowed "masculine" attributes. I believe that my rejection of Diana's bid to experience sameness with me with respect to dichotomous gender reflected remaining conflicts over abandoning what had once connected me to my mother.

After acknowledging that I had injured her by disagreeing that her friend's behavior was reprehensible, I explained that her insistence that we think alike recreated some troubling aspects of my upbringing. Diana was thrilled. "Oh," she said excitedly, "I should have known that you had to overcome psychological obstacles too." My disclosure turned out to be sweet confirmation of our sameness.

Not long after this disruption, however, Diana became increasingly interested in understanding what made it so painful for her to experience us as different. She began by admitting that she had sometimes felt constrained by her mother's insistence on their likeness. We gradually reconstructed the following understanding of her traumatic experience after her mother's abandonment of her:

[An] SEC that coalesced in [Diana's] childhood involved her belief that since she and her highly competent and hard-working mother saw eye-to-eye on everything, she too would also achieve great recognition and success. Nothing could have revealed the differences in their thinking more forcefully than her mother's apparent belief that greater happiness lay outside of their family. The certainty that had come to organize Diana's early life was thereby brutally destroyed. It seems that she was able to trust that I would not subject her to a devastating abandonment only to the extent that our perceptions matched perfectly [Brothers, 2008, pp. 55–56].

Diana and I then discovered that my errors in empathic attunement were also painful for her because, at those times, she experienced me as resembling her father, Jim. She feared that I, too, was an incompetent bungler—someone who could not be trusted to protect and guide her in life. No sooner had we begun to explore this aspect of our relationship than Diana started to question Sheila's assessment of Jim's incompetence.

She mentioned having frequently heard Jim unfavorably compared to Dan, Jim's older brother—the one his mother favored. Dan, she informed me, went to the best schools and eventually became a very well-known politician. Yet, while Jim never became a superstar like Dan, Diana knew that he was a very successful businessman and not at all a bungler in his professional life.

We conjectured that just as Jim had accepted his mother's view of him as inferior to Dan without complaint, so he seems to have accepted his wife's denigrations. We might wonder if Jim's attachment pattern involved a denial of sameness. To show his competence and sameness to Dan might have cost him his only means of surviving in his family.

Along with Diana's attempts to form a new relationship with Jim, I noticed some marked changes in her. No longer compelled to present herself as a carbon copy of her mother, she seems to have given up many of her little-girl mannerisms. She has traded her ultra-feminine dresses for clothing that better suits her slim frame, and she even speaks in a lower register and sounds as if she expects to be taken seriously.

As Diana and I found ways to explore our sameness and difference, she seemed to become increasingly able to tolerate, and sometimes even to celebrate, the aspects of her appearance and personality that differ from those of her mother and to enjoy the similarities she finds with her father. She has even begun to study piano. While she still suffers over conflicts with her closest relational partners, she has established herself in a career that she feels "suits me perfectly." I believe this marks the greater consolidation of her emerging sense of differentiated selfhood.

Would Diana's longings for sameness have been so intense with another analyst? Did she sense that I, too, had struggled with denials of sameness and difference in my formative relationships? Had I somehow conveyed this to her through nonverbal means? While I can see no way to answer these questions definitively, I have little doubt that my own traumatic attachments, especially those involving dichotomous gender, strongly influenced our relationship. I believe that it was mainly through our increased ability to recognize and accept the ways in which we were alike and different, and the concomitant dissolving of the barriers that interfered with our healing partnership, that her therapeutic gains occurred.

Aside from our work with patients, there are many others ways in which detrimental aspects of twinship crop up in our professional lives. As Peter Gay's (1988) biography of Freud makes clear, psychoanalysis

has been plagued by us–them divisions almost since its inception. Phyllis Grosskurth (1991) described Freud as harshly imperious and cruel to followers who deviated from his theory—notably, Adler and Jung. According to Grosskurth’s account, Freud not only demeaned ideas that differed from his own, but regarded those who strayed from Freudian orthodoxy as enemies. Possibly because of Freud’s example, an enormous disparity between the power of faculty members and that of candidates became common in psychoanalytic institutes. I (Brothers, 2008) compared some institutes to cults in which the difference between faculty and candidates is exaggerated while, at the same time, sameness among candidates is so strongly encouraged that their thinking is marked by a high degree of conformity.

We are all familiar with the intolerance often displayed by adherents of one psychoanalytic approach to all others and the hostility with which members of various institutes regard one another. Even within the same institute, various factions often engage in bitterly contentious disputes.

Considering that psychoanalysis, as Goldner (1991) observed, has always been “the discipline most practiced in the art of uncertainty,” (p. 251) and even the most distant and abstract considerations of uncertainty tend to put us in touch with traumatizing losses of certainty in our lives, it is hardly surprising that denials of sameness and distance pervade our field. Many recent writers, especially those who embrace hermeneutic perspectives (e.g., Cushman, 2011, Hoffman, 2009), called attention to the impossibility of separating psychoanalysis from the social and political contexts in which it is embedded. To the extent that this is true, it is not naïve to believe that our therapeutic processes may spread beneficial changes beyond the doors of our consulting rooms. Let us hope that as we come to regard the pernicious us–them dichotomies that appear within our therapeutic relationships with more compassionate recognition of their traumatic origins, we will gain a deeper understanding of the destructive conflicts that continue to splinter our world. Then, perhaps, the dark side of twinship will begin to fade from our lives.

REFERENCES

- Beebe, B. & Lachmann, F. (2002), *Infant Research and Adult Treatment: Co-Constructing Interactions*. Hillsdale, NJ: The Analytic Press.
- Brothers, D. (1998), Exploring the “bi” ways of self-experience: Dissociation, alter ego experience and gender. In: *Progress in Self Psychology, Vol. 14*, ed. A. Goldberg. Hillsdale, NJ: The Analytic Press, pp. 233–252.

- Brothers, D. (2008), *Toward a Psychology of Uncertainty: Trauma-Centered Psychoanalysis*. New York: The Analytic Press.
- Brothers, D. (in press), Traumatic attachments, dissociation, and the analytic relationship. *Internat. J. Psychoanal. Self Psychol.*
- Brothers, D. & Lewinberg, E. (2000), Contemplating the death of Oedipus. *Gen. and Psychoanal.*, 4:497–515.
- Cushman, P. (2011), So who's asking; politics, hermeneutic, and individuality. In: *Persons in Context: The Challenge of Individuality in Theory and Practice*, eds. R. Frie & W. Coburn. New York: Routledge, pp. 21–40.
- Gay, P. (1988), *Freud: A Life for His Time*. New York: Norton.
- Goldner, V. (1991), Toward a critical relational theory of gender. *Psychoanal. Dial.*, 1:249–272.
- Grosskurth, P. (1991), *The Secret Ring: Freud's Inner Circle and the Politics of Psycho-Analysis*. Reading, MA: Addison-Wesley.
- Hacking, I. (1999), *The Social Construction of What?* Cambridge, MA: Harvard University Press.
- Harris, A. (1991), Gender as contradiction. *Psychoanal. Dial.*, 1:197–224.
- Hesse, E. & Main, M. (1999), Second-generation effects of unresolved trauma in nonmal-treating parents. *Psychoanal. Inq.*, 19:481–540.
- Hoffman, I. (2009), Doublethinking our way to “scientific” legitimacy: The desiccation of human experience. *J. Amer. Psychoanal. Assn.*, 57:1043–1069.
- Kohut, H. (1984), *How Does Analysis Cure?* Chicago: University of Chicago Press.
- Liotti, G. (1992), Disorganized/disoriented attachment in the etiology of the dissociative disorders. *Dissoc.*, 5:196–204.
- Ozer, E. J., Best, S., Weiss, D. S. & Lipsey, T. (2003), Correlates of post-traumatic stress disorder in adults: A meta-analysis. *Psychol. Bullet.*, 129:52–73.
- Togashi, K. (2010), Mutual finding of oneself and not-oneself in the other as a twinship experience. Paper presented at the 33rd international conference on the Psychology of the Self, October 21, Antalya, Turkey.
- Winnicott, D. W. (1965), *The Maturational Process and the Facilitating Environment: Studies in the Theory of Emotional Development*. New York: International Universities Press.
- Young-Bruehl, E. (1991), Rereading Freud on female development. *Psychoanal. Inq.*, 11:427–440.

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TRANSLATIONS OF ABSTRACT

No cabe duda de que las experiencias de selfobject gemelar es vital para el bienestar psicológico suministrando la experiencia de ser “un humano entre humanos” que tiende a

mitigar la angustia de la incerteza existencial. Sin embargo, una necesidad intensa de gemelaridad como secuela del trauma es a menudo el preludio de mucho dolor y sufrimiento. Este artículo intenta mostrar como la gemelaridad generada por el trauma puede conducir a la negación de la igualdad y diferencia y a la creación de las dicotomías nosotros-ellos. Se propone que la dicotomía de género puede ser vista como un patrón relacional generado por el trauma a través del que se transforman las insostenibles vivencias de incerteza. Puesto que es probable que los analistas estén traumatizados como los pacientes, la sombra de lo que denomino “el lado oscuro de la gemelaridad” recae sobre muchas relaciones analíticas. Un ejemplo clínico sobre una mujer con una necesidad intensa de igualdad ilustra como los esfuerzos alrededor de la gemelaridad pueden influir en el proceso terapéutico.

Il y a peu de doute que l'expérience objetsoi de jumelage est vitale au bien-être psychologique en ce sens que le sentiment d'être "un humain parmi les humains" a tendance à atténuer l'angoisse liée à l'incertitude existentielle. Toutefois, un besoin intense de jumelage à la suite du traumatisme est souvent un prélude à beaucoup de douleur et de souffrance. Cet article tente de démontrer comment les besoins de jumelage générés par le traumatisme peuvent mener au déni des similitudes et des différences, et à la création de dichotomies nous/eux. Il propose que le genre dichotomique peut être conçu comme un pattern relationnel généré par le traumatisme par lequel d'insoutenables expériences d'incertitude sont transformées. Parce que les analystes ont probablement été aussi souvent traumatisés que leurs patients, l'ombre de ce que l'auteur appelle "le côté sombre du jumelage" tombe sur plusieurs relations analytiques. Un exemple clinique impliquant une femme dont les besoins de similitude étaient très grands illustre comment la recherche de jumelage peut façonner le processus thérapeutique.

È indubbio che l'esperienza di oggetto-sé gemellare sia vitale per lo stare bene psicologico, in quanto un senso di essere "un umano tra gli umani" tende a mitigare l'angoscia legata all'incertezza esistenziale. Comunque, nel periodo successivo al trauma, un bisogno intenso di gemellarità spesso costituisce il preludio ad altrettanto intense esperienze di dolore e di sofferenza. Questo articolo tenta di far vedere come il trauma generato dai bisogni gemellari possa condurre a dinieghi delle esperienze di identità (sameness) e di differenza, insieme alla creazione di dicotomie noi-loro. Si sostiene che le dicotomie di genere dovrebbero essere osservate come un pattern relazionale generato dal trauma, pattern tramite cui le esperienze intollerabili di incertezza si trasformano. Poiché probabilmente gli analisti sono stati esposti ad esperienze traumatiche come i loro pazienti, l'ombra di ciò che l'autrice definisce "il lato oscuro della gemellarità" si diffonde su molte relazioni analitiche. Attraverso un esempio clinico relativo ad una donna che presentava bisogni molto intensi di esperienze di identità, si illustrerà come le tensioni nei confronti della gemellarità possono plasmare il processo di cura.

Es kann keinen Zweifel darüber geben, dass die Zwillings – Selbstobjekt-übertragung wesentlich für das psychologische Wohlbefinden ist, insofern als das Gefühl, „ein Mensch unter Menschen“ zu sein, die Qual existentieller Unsicherheit mildern kann. Ein intensives Bedürfnis nach Zwillingserfahrung in der Folge eines Traumas ist oftmals Vorspiel zu großem Schmerz und Leiden. Diese Arbeit versucht zu zeigen, wie ein durch ein

traumatisches Erleben verursachtes Bedürfnis nach einer Zwillingserfahrung zur Leugnung von Gleichheit und Unterschiedlichkeit und zum Entstehen von „Wir-versus-Diese“ Dichotomien führen kann. Sie schlägt außerdem vor, die dichotome Gender-Sicht als ein durch ein Trauma erzeugtes Beziehungsverhalten zu sehen, das den Zweck hat, die unerträglichen Erfahrungen von Unsicherheit zu verändern. Weil Analytiker oft ebenso traumatisiert sind wie ihre Patienten, fällt der Schatten dessen, was die Autorin die „dunkle Seite des Zwillings“ (der Zwillingserfahrung) nennt, auf viele analytische Beziehungen. Ein klinisches Beispiel von einer Frau, die ein starkes Bedürfnis nach Gleichheit hatte, zeigt wie der Kampf um das Zwillingserleben den Behandlungsverlauf prägen kann.