### From 'isolated mind' to the 'flight of the starlings'

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ABSTRACT. – Through a sort of 'journey in time', this work aims to present a brief update on the latest developments on the subject of 'care of the subject' in psychoanalysis. In particular, the emphasis is placed on the therapeutic vision that characterized the early days of this discipline, which was essentially oriented in a single direction from the therapist to the patient, and on its shift to the current dominant perspective, which is different in that it is instead based on the concept of 'mutuality'.

In this more recent view, the changes in the psychic structure of the patient over time derive from the changes that the patient has, mostly unknowingly, produced over time in the psychic structure of the therapist who has taken care of and is taking care of him/her. All this occurs on the basis of concepts and models that have only entered the sphere of interest of psychoanalysis in recent decades, for example, the 'Theory of Chaos' and the various systemic theories that have developed from Ludwig von Bertalanffy's 'General system Theory' to the most recent models of interpretation of 'complex nonlinear dynamical systems'.

Key words: Infant research; isolated mind; principle of mutuality; psychoanalysis; theory of complex nonlinear dynamical systems; psychoanalytic therapy.

### The Cartesian myth of the 'isolated mind'

The relationship between the mind and the body of human beings has been a topic that has interested scientists and philosophers since ancient times. Over the centuries, dualistic positions — which support a dichotomy between soma and psyche - have alternated with positions that affirm a psychosomatic unity. Plato (the first supporter of the dualistic position) introduced the distinction between soul and body as independent and irreducible substances to one another. The soul was considered immortal and the seat of consciousness and higher functions and continued to live after death, while the body, which did not have its own life, was destined to become a simple 'object', a 'thing', and would then dissolve forever.

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The platonic view is revived and accentuated by Descartes almost two thousand years later. With him, the mind and body become substantially distinct and separate entities: the mind ('res cogitans') is the most certain thing on which our knowledge rests and cannot be on the same plane as material reality; the body ('res extensa') which becomes a sort of machine ruled by the mind. It is in this cultural vision of the human being and at a scientific moment dominated by Positivism that, in the late nineteenth and early twentieth centuries, Sigmund Freud founded and began to develop a new scientific discipline, Psychoanalysis, which is, at the same time, both a 'psyche cure technique' and an original and innovative 'theory of the mind'.

Following and developing the line of thought that was affirmed at the University of Vienna over the previous decades through the works of Authors such as Theodor Hermann Meynert (1890), Johann Friedrich Herbart (1891), Ernst Wilhelm Brücke (1891), Sigmund Exner (1894), and especially Franz Brentano (1874), Freud assumed that psychic phenomena could now be regarded as observable and measurable data, thus giving the mental dimension a 'scientific dignity' at least equal to that of the body. This allowed Freud to begin to look at and treat the suffering subject in his/her entirety of both psyche and body, which while still remaining distinct entities were no longer considered to be separate from each other.

The scientific knowledge of the time was not yet sufficient, however, to enable him to make 'a further leap', so to speak, that is, to achieve awareness of an even more comprehensive vision that would not only allow the definitive overcoming of the division between the 'mind' and 'body' operated by Descartes, but also to place this 'psychophysical unit' in a close, constant and inseparable connection also with the relational and human environment outside of it.

Traditional Freudian theory, which Stolorow and Atwood (1992) were probably the first to find, was still pervaded by the so-called 'Cartesian myth of the isolated mind'. Descartes's philosophy divided the subjective world into an internal and an external region, separated both the mind from the body and cognition from affections, reified and absolutized the resulting divisions, and painted the mind as an objective entity that has its place among other objects, a 'thinking thing', which has an interior with sensory systems that allow it to perceive and know the external reality, but which, however, contains all the material within it that it needs to function properly and completely enough.

'The myth of the isolated individual mind, which attributes to the individual mind an existence separate from the world of nature and social bonds' (Stolorow & Atwood, 1992, pg. 19): in the classical version of the theory of the mind that served as the foundation of primitive pulsional psychoanalysis, in other words, the mind was still considered to exist, substantially independently, within the physical boundaries of the individual.

Consequently, what in psychoanalysis – at least in Freud's original intentions - was the most important area of application, namely the 'cure' of mental illness and problems, had led the creator of this psychotherapeutic technique to focus his interest mainly on what was happening within individual psychic activity, both at the level of consciousness and above all at the level of the unconscious, assigning the external social and relational context a substantially secondary role and importance.

## The two 'therapeutic factors' of the original 'Freudian psychoanalytic cure'

According to the website *Una Parola al Giorno* (https://unaparolaal-giorno.it/significato/cura), the Italian word 'care' derives from the identical Latin word that meant 'attentive and prompt interest; treatment, attention; remedy; concern, worry'. In Italy, therefore, it has remained essentially unchanged for at least twenty-four centuries, which is certainly an extraordinary peculiarity if one considers the numerous and often rapid changes that verbal language has undergone in this long period of time.

In fact, this same website states: 'Already in the early days of its use, this word had an ambivalence similar to that which it has for us now: 'care' is first and foremost attention, a careful and prompt interest, but in a higher register it is also concern, and worry... Its meaning has matured in a dimension of temporality: attention can be instantaneous, empty interest, whereas care is different. Paying attention to flowers, taking an interest in flowers or taking care of them are profoundly different acts. Care follows a process, follows a project that develops between the past, present and future'.

Since care is very often not a 'punctiform' episode but develops over time in a process whose duration is not always definable beforehand, it cannot by definition be independent of the dimension of the relationship between the person being 'treated' and the 'therapist', precisely because it is a prolonged process. This dimension certainly implies that the 'therapist' has a certain technical and therefore cognitive mastery, but which also implies, for all the actors involved, relational and human aspects, which are essentially emotional and sentimental. 'Taking care of means dealing with. Attention, even diligent attention, can be a purely mechanical and closed recording, like handling something. Care is not only interested but participates' (idem).

Similar to the term 'care', which, as we said, derives from Latin, is the Italian term 'therapy', which instead derives from the Greek word  $\theta \epsilon \rho \alpha \pi \epsilon i \alpha$  (therapeia), which also meant care in the sense of seeking and pursuing a cure. When the care is not aimed at healing or recovery from diseases of the physical body, but from inner disturbances, like the suffering of the soul, it is called 'Psychotherapy' (a term also derived from Greek, composed of the

words psycho- in Greek  $\psi v \chi o$ -, that is 'soul-, and therapy, from the word  $\vartheta \varepsilon \rho \alpha \pi \varepsilon i \alpha$  meaning 'cure') which therefore means 'care of the soul'.

The origins of psychotherapy are lost, as they say, 'in the distant past'. However, according to Paolo Migone (2020, 2021), a well-known expert on the matter, even in the most distant past, one can properly speak of 'psychotherapy' only when such 'care of the soul' is carried out not by a simple friend, relative or acquaintance, but by someone 'socially recognized and authorized to practice it.'

Moreover, according to this scholar, today the term psychotherapy is considered to be applicable only in those contexts where there are three additional elements: a 'technique' (that is, organized practical and applied knowledge, with which to achieve it), 'tools' (such as an 'interview', or the 'power of suggestion', *etc.*) and a 'theory' from which a socially shared sense derives, attributable to both the technique and the tools used.

In this perspective, Migone argues, probably the first 'professional' psychotherapists were - in the early days of human history - the so-called 'shamans,' who actually possessed their own technique, tools, and 'theory' (such as 'ancestor theory'), and a socially recognized role. In fact, all this meant that very often people who underwent treatment from a shaman improved and sometimes, even recovered.

What made the patients of shamans get better? The problem is still partially open for debate, but there are a number of hypotheses in this respect that are widely accepted and that are, in fact, convergent at least in part with the results of scientific research that today recognize the validity and effectiveness of contemporary psychotherapies.

In modern times, the first major innovation in the history of Psychotherapy can probably be found in Mesmerism, more or less in the Napoleonic period. Later, Hypnosis (which in part derived from Mesmerism) was of great interest, but even more so was Psychoanalysis, whose conception is unanimously attributed to Sigmund Freud in the years between the late nineteenth and early twentieth centuries.

According to this approach, which is still followed today by many psychotherapists who closely abide by Freud's original theorizations, the two main factors determining the curative effectiveness of Psychoanalysis are 'intellectual' or cognitive understanding, which is based on insight, interpretation, etc., and the emotional connection with the analyst, the emotional relationship that develops in the patient toward the therapist (which has been given different names, such as attachment, positive transference, *etc.*).

In the original Freudian view, however, both of these factors proceeded substantially in the same direction, that is, from the therapist to the patient. It was the therapist who, through his/her 'interpretations', could allow the patient to understand his/her inner problems cognitively, and thus be able to govern them and not 'suffer them anymore.' and it was always the therapist

who, by providing the patient with a model of positive attachment, allowed the patient to develop that intense emotional investment toward him/her that enabled the patient to trace (through so-called 'transference') his/her original conflicts and thus to deal with and process them.

A direction essentially analogous, in substance, to that belonging to the primitive shamanic traditions, or to those of the ancient priests and the first doctors of the Assyrian-Babylonian, Egyptian, and Hellenic civilizations, that is, from the therapist to the patient and only in an absolutely minimal and marginal way in the opposite sense. This is probably because, in the period when Sigmund Freud devised this innovative health discipline, the scientific knowledge that dominated the overall picture in which it arose was naturalistic and positivistic, with strong organicistic and biological imprints.

# Genotype, phenotype and their current interpretations: from Biology to Sociobiology

Taking for a moment some borrowed terms from Natural and especially Biological Sciences - which chronologically represented the pre-existing disciplines around which Psychotherapy developed as a specialty of Psychological Sciences - we define 'genotype' as the set of genetic information transmitted from parents to children and 'phenotype' the set of visible or otherwise conspicuous characteristics of an individual at a specific time of his or her existence. With this premise, it is useful to take as the basis for any subsequent reasoning of ours the general law published in 1958 by Sinnot, Dunn and Dobzhansky - and which in turn represents an evolution of a previous and more concise 'equation' formulated in 1911 by Danish geneticist W.L. Johannsen - according to which the 'phenotype' of an organism is always the result of the interaction between a 'genotype' and an 'environment'.

And this, I would particularly like to emphasize, while starting from a fundamentally biological area and at the start concerning the physical characteristics of every living organism, and not just those of human beings, is a 'firm point' that is no less true for human psychology than it is for Zoology or Botany. This must be reiterated because, as all the most authoritative scholars of these subjects have always pointed out in the last two hundred years, every human being in his/her extraordinary uniqueness is represented by a still mysterious but absolutely unavoidable 'mind-body unity.'

Each of us, in fact, is born with our own genetic heritage, inherited biologically half from our father and half from our mother. But, as we all know, the possible combinations of genes from our father and those from our mother are a very large number. This is because neither the father nor the mother transmits to each of their children the same genetic heritage - except in the case of monozygotic twins - and that the DNA of each human being is made up of

about 6 billion base pairs, in the 46 chromosomes that normally comprise it. The former, in turn, play a varied role in determining the presence and characteristics of thousands and thousands of different genes, which will have both physical and psychological effects throughout the life of the individual to which they belong.

The conclusion of this concise and indispensable initial reasoning is that every human being is born with a genetically determined 'predisposition', which from the moment of conception makes him/her more or less suitable to living and facing life; this predisposition is essentially - as the Nobel laureate Jacques Monod, for example, pointed out in his celebrated work 'Chance and Necessity' - the result of random combinations.

If you want to apply the aforementioned contribution of Sinnott, Dunn and Dobzhansky to the more limited area of Human Psychology and Psychotherapy, you can make the form of the general law expressed by them more specific, gradually changing it firstly - following on from Barash's contribution and the sociobiological approach that brought so much innovation and also a lot of disruption to the scientific world in the mid-1970s - with the phrase 'Any phenotype derives from the interaction of an organism's genetic potential with its environment, and behaviour is a phenotype like any other' (Barash, Sociobiology and behaviour, Franco Angeli Editore, pg. 50). Or perhaps even better, to put it a little more into my own words (which are in my opinion, more current and at the same time more sensitive to many of the most recent contributions to this field, including from the world of Human Psychology), 'the psychological and psychophysical phenotype of a human being is always the result of the interaction of its genotype with the experience that the same individual has had within the physical and human environments in which he or she has lived since conception as a specific subject.'

I would now like to point out that what Sinnot, Dunn and Dobzhansky stated in 1958, as well as many other scientific statements, has been defined here by the term 'law.' In my opinion, this is permitted, because of one of the various meanings that this term takes on in current Italian language, but I also think that this should now be taken up and analysed in order to clarify, if possible, what I mean when I use it in strictly psychological terms.

According to Italian language dictionaries, in fact, the term 'law' is understood, by general definition: both as all kinds of 'firm and constant rules that come true in practice' and 'the rules that are imposed by Authority to determine the rights and duties of individuals belonging to a specific social group'. In a more strictly legal sense, 'laws' understood as 'legal norms' are, especially today, written or otherwise 'public' laws that are established by Authority to determine the rights and duties of individuals belonging to different social groups.

In accordance with these considerations, I now feel that I can state, with a

more 'current' language that is understandable even to 'non-experts,' what I have accepted for years now as the 'starting point' of my vision of every human being, and which, therefore, I will temporarily name, to make its meaning clearer, as the 'Law of constitutive interaction'. This may, generally, be defined in the following way: 'The psychological and psychophysical structure and organization of every human being is always the result of the interaction of his/her genetic makeup with the experiences that this person has had within the physical and human environments in which he/she has lived since conception as a specific subject.'

### From Sociobiology to Interactionism and Co-Constructivism

This definition, which is generally considered correct, must however be slightly refined in order to be considered accurate in the light of current trends in scientific Psychology, which evolve from a simply 'interactionist' view to a more 'constructivist' concept. Indeed, the 'individual-environment' interaction is never a process that can be interpreted only through the assumption of a principle of radical interdependence between organisms and environments, in which each one co-determines and co-defines the other: in fact, in addition to these 'interactionist' and 'co-constructivist' aspects, even 'random variations' contribute to this process to a never negligible extent that is typical of biological matter, that continuously intervenes at the cellular and subcellular (e.g. molecular) level precisely because, by definition, everything that is 'living' is never 'static' and is, indeed, undergoing continuous and incessant modification in never predefinable directions but that are always, necessarily, contingent.

For these reasons, the full expression of this Law (better defined, at this point, as the Law of contingent interaction) can be described as follows: 'The psychological and psychophysical structure and organization of every human being is always the result of the interaction of his/her genetic makeup with the experience that the person has had within the physical and human environments in which he/she has lived since conception as a specific subject, as well as the random variations introduced into this interaction both by the continuous modification of biological matter and by the specific and unique characteristics that each individual interaction between all three of these factors continuously produces and presents'.

Moreover, with regard to all these clarifications that have finally led us to the 'Law of contingent interaction,' I would like to stress that the most innovative element compared to earlier less psychological and more biological-naturalistic assertions is the presence of the term 'human environment,' which inevitably leads us to address the issue of what helps to characterize the human being as such, with his/her deepest psyche rooted within.

The contribution of *Infant Research* and of *Complex Nonlinear Dynamic Systems Theory* to contemporary psychoanalytical thinking

Infant research and the Complex Nonlinear Dynamic Systems Theory have decidedly represented a turning point in contemporary psychoanalytic thinking. These new acquisitions, based on direct observation of children in their natural environment with their caregivers, were theorized by Sander (2007) as part of the complex nonlinear dynamic systems within the self-ecoorganization, taking inspiration from the ideas of Ludwig von Bertalanffy (1967), according to which 'every organism is a system, that is, a dynamic order of parts and mutually interacting processes' (pg. 317).

The specific nature of human beings in their development from child to adult has been further examined by neurocognitive research. In the context of the contemporary psychoanalytic landscape, they laid the foundations for a recontextualization of the subjective unit which is placed within the self-(geno-pheno)-organization paradigm as postulated by Morin (1980). According to this author, whose theorizations were later confirmed by Rochat P. (2011), the self is to be understood as a phenotype, in the literal sense of an organism that emerges from the continuous interaction between genotype and environment, leading to the mutual modification of both.

Subjective organization has also been studied within the Biological sciences. According to Maturana and Varela (1980), for example, a biological or living system is an autopoietic entity, that is, it organizes itself and maintains its organization also by interacting with the external environment. This biological unit therefore actually constitutes the evolutionary basis of a cognitive system (Thompson, 2007).

Thus, in this cultural humus, almost simultaneously in the United States and in Europe, about fifty years ago, so-called 'Relational Psychoanalysis,' was born, which emphasizes the constant creation of data that occurs between the two protagonists of the treatment process, founded on 'mutuality' (that is, 'reciprocity') of both the recognition and the continuous regulation of the therapeutic relationship established between them.

In Italy, in particular, this approach developed the years immediately following the establishment of the School of *Relational Psychoanalysis*, according to which the explanatory model of normal or dysfunctional functioning of the individual is based on at least the following five specific constructs: i) the 'I-subject'; ii) the 'self-eco-organization'; iii) the 'consciousness of consciousness'; iv) 'Creativity'; v) the 'presence to oneself'.

All of these constructs will now be detailed one by one more specifically, according to the definitions that are specific to contemporary *Relational Psychoanalysis*.

As regards the first of these four constructs, Michele Minolli (2015) first States that: i) the *I-subject is one* - to affirm that the *I-subject is one* radically

combines diversity with unity, the parts with the whole, respecting the I-subject as such and avoiding the absolutization of a part or a holistic view of the whole; ii) the *I-subject has several parts in interaction with each other* - the various components or different functions must be understood in their interaction. A model that only captures the aspect of unity and does not help to understand the recursive functioning of the subject between its parts and the whole is not adequate; iii) the *I-subject is in relation with the external world* - it would not make much sense to deal with an I-subject that is estranged from the interactive reality in which it is necessarily embedded. And this, in particular, with respect to the influences and modes of retroactive incidence in the interactions with the external object' (Minolli, 2015, pg. 74).

Regarding the concept of 'self-eco-organization', Minolli states that:

- 'Two or more interacting systems give rise to changes that are always determined by the unit that receives the perturbations.' Both the system and the environment are sources of reciprocal perturbation, and it is only from the point of view of an external observer that the change in the system is thought of as being determined by the environment or by the interior.' (Minolli, 2009, pg. 53). The same author goes on to say: 'Any consideration that would accentuate one or the other of these incidences is clearly dependent on the point of view adopted. If we go beyond this, that is, if we try to consider the I-Subject as it presents itself to itself and to others, it is always the result of self-organization and eco-organization' (idem, pg. 57).

#### Thus, Minolli himself concludes in this respect (2009):

'Every system, therefore, every human system, follows its path and finds its solutions. Whatever its status, it is certainly functional to its coherence.

There is no ideal model of what it should be. There is no specific time for change. There is no desirable way to be.

Analysis can only pursue a 'Presence to oneself' of the system. *A Presence to one-self* that allows one to feel 'well' in one's historical and therefore current solutions or to propose changes in the directions set by the system itself.

Physics, Biology and the Science of Evolution have helped us to think of a functional change in the system. It is in the service of the system that we operate. It is as 'facilitators' of the I-Subject that we are important' (Minolli, M., 2009, pg. 159).

To complement his overall theoretical construct, Minolli himself (2015) then uses the specific concept of *creativity*, which he interprets as one of the most useful and functional modes that allow the I-Subject to acquire an adequate level of 'consciousness' and, therefore, sufficient overall psychological well-being.

Having clarified these assumptions, we can now list the main features of the creativity of the I-Subject:

- Creativity is a quality of the I-Subject. *Consistency* depends on the process of creativity, that is, the well-being of the I-Subject in any internal and external situation.

- Creativity, as a qualitative property, comes into being from within and belongs to the whole of the I-Subject. The emergence of creativity cannot be simulated, predicted or imposed from outside.
- Concretely in humans, creativity involves: actively recognizing how limited the I-Subject is by a beginning and an end and by its existence, and then allowing itself to direct one's life enlightened by the 'consciousness of consciousness.'
- Creativity is a slow and painful process. We cannot think that creativity is achieved and completed once and for all. But if the I-Subject allows itself to go down the path of the creative process, it is already creative' (Minolli, M.2015, pg. 190-191).

As further evidence of the ever-increasing abandonment of a 'compartmentalized' view of the person and of the contrary assumption of a 'holistic perspective' of the individual, it is appropriate to recall here the definition of the term 'health' in the World Health Organization's 'Constitutive Act', according to which it should be seen not as 'a mere absence of disease or infirmity, but as a state of complete physical, mental and social well-being'. Health, in this perspective, is therefore a positive concept that values both physical abilities and personal and social resources, in the sense that it is achieved when individuals develop and mobilize their resources to the best extent in order to satisfy both personal (physical and mental) and external prerogatives (social and material). Health and disease are therefore not mutually exclusive conditions, but end points of a common continuum.

# Psychoanalysis as 'care of the human soul' based on the 'principle of mutuality'

Today therefore, also due to the contributions from recent 'Systems Theories' (and in particular the so-called 'Complex Non-linear Systems Theory'), the view of the interaction between therapist and patient, in the specifically psychotherapeutic domain, appears to be deeply and radically changed now.

According to the vision of Psychoanalytic Psychotherapy adopted by 'Relational Psychoanalysis', both the roles, functions and responsibilities of the therapist and the patient remain fundamentally asymmetrical in the care process: but the 'therapeutic relationship' between them is not only asymmetric, as it had always been seen before, but also 'mutual,' because within it both the patient and the analyst regulate and influence one another continuously, both consciously and unconsciously.

The focus (Spagnuolo & Zito, 2022) is on the concepts of 'interaction' and 'interdependence': the 'therapist-patient' dyad is a 'Complex Nonlinear Dynamic system,' a whole in which both the therapist and the patient are in turn two additional complex systems joined by a regular relationship of interaction and mutual interdependence.

As a result, this process of continuous 'co-construction' of the care relationship that reverberates and produces changes within both the 'patient-subject' and the 'analyst-subject', Psychoanalysis no longer characterizes itself, as it did at the start, as a 'care of the human soul' that the therapist implements for his or her patient, but as a continuous variation of the inner arrangements of both, based on the so-called 'principle of mutuality', which firstly needs to be distinguished from both 'reciprocity' and 'fusionality' (or 'fusion').

In this respect, the Relational Psychoanalyst Giuseppe D'Amore (2021, pg. 114-115) points out that:

'The first meaning of mutuality is to consider it synonymous with reciprocity, although one can see a difference between the two: mutuality is a common involvement of the two participants in the relationship, meaning that they would be united in the same act of exchange, while reciprocity signals the response of one of the two participants returning something the other had previously done for him/her. [...] Aron argues that (2004, pg. XV, footnote): 'Mutuality involves reciprocity, a community, and unity achieved through exchange. The absence of mutuality, in contrast, connotes difference and separateness, a lack of sharing. Although I stress the aspects of mutuality in psychoanalysis, it must be remembered that psychoanalysis requires a dialectical relationship between mutuality on the one hand and separateness, difference, and autonomy on the other. Without a hidden idea of autonomy, the meaning of mutuality would degenerate into that of fusionality or fusion.'

The principle of mutuality, therefore, governing the process with rules and modalities similar to those that allow thousands of Starlings to fly together, as one, in the same shared direction, allows the two 'actors' and 'authors' of this common path to evolve into new and more expansive ways of interpreting their inner and interpersonal realities. As a result, when this happens, the patient, and also the therapist, will have access to new and more stable structures of overall emotional, psychological and relational balance.

Today, in other words, modern psychoanalytic psychotherapy is no longer seen as a 'solo' concert in which there are people playing and listening, but it has clearly taken on the connotation of 'music being played together.'

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