## FOCUS: CLINICAL PRACTICE ON COMPLEXITY | COMMENT

## **Comment to:** *Interview with Corrado Pontalti in conversation with Fabio Vanni*

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## An ode to *simplicity*

I read Professor Pontalti's Interview and his rich exchange with Dr. Vanni with great pleasure and interest. I will therefore try in these few lines to share some of my reflections and ideas that emerged in resonance with some of the topics of the interview. I will start from the perspective in which I work as a clinician, the experience of my work in my studio, with adult and adolescent patients, and the institutional work I carry out in Child Neuropsychiatry.

It seemed to me that two main topics were discussed. On the one hand, via a sociological and anthropological point of view, the interview focused on how the representations, the definitions of family and the articulation between family and community have changed. On the other hand, the interview focused on how, in the face of these changes, clinical work poses itself. That if it has the fundamental aim of effectively establishing itself as a treatment for people, it must be able to learn to stay within complexity in order to meet Others who are changing, Others who are the creatures and creators of culture.

First of all, I would like to acknowledge that Professor Pontalti has the quality of simplicity, that to me, even innately, simplicity is a precious rule to work by. Some of his reflections in fact, have the - patiently cultivated - gift of knowing how to stay in the unsettled complexity of meeting another, with a sense of rootedness and respect for life, in the many manifestations that we find in human beings. I believe I saw an attitude of enormous and fundamental respect for other people - here I use the word "fundamental" in the sense that I believe it is an essential foundation of listening and of treating

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the "attitude" that Pontalti suggests he can use to meet people in his clinical work.

The testimony here goes in the direction of *clinical work* understood as an *opening up* - as a first technique, opening up your gaze and your listening, up until the point of risking not understanding, where maps no longer help you along your journey - and as the capacity of remaining open and supporting this opening in time - as a second technique, against the physiological and human temptation of folding back onto oneself in order to find oneself, sometimes losing ourselves in the encounter. The indication which already was and is used in the phenomenological approach - is that of acquiring awareness of one's convictions and models in order to "govern" them during listening, to be able to touch and be touched by another.

Firstly, a brief consideration from a (no longer) young clinician: it seems to me that as I go ahead with my clinical work, I have progressively accommodated the invite that resounds in the *mysticisms* of different latitudes - forms of spiritual therapy, no doubt, and indeed psychotherapies - that consist in practising that attitude of remoulding the *hold* on complexity in order to indulge the *yield* of complexity - in less "esoteric" terms: it seems to me that in order to meet another person, it is necessary to give them space, to create this space beyond the categories of diagnosis, in a sense to become their guest.

Thus, an important question to ask ourselves implicitly is: Where and at what point do we *meet*? In what way can I meet the other as a person - Pontalti's reference to not meeting functions but people -? From this viewpoint, it seems useful to me to also refer to Ethnopsychiatric traditions which, beyond the practices and potential techniques and therapeutic procedures, promotes a meeting between the clinician and the patient, in the awareness of cultural systems in which we belong and that our implicit meanings forge.

In this sense the image of clinical work as a place-threshold is very beautiful, and referred to in the interview, as a sacred threshold between what is visible and invisible, and as it is a threshold, it is a place of opening and a place of meeting between two spaces. The idea of the psychotherapist as a custodian of the sacred space arises on its own. The one who knows how to stay on the threshold, who decides to not decide in order to listen to another as an opaque, unknown whole, learning to trust what they do not see, knowing that the emptiness of not knowing - of not immediately diagnosing, of not forcing a person to function in the role as patient - is not in reality absence of sense or references, but rather an opportunity of meeting and treating. I believe, from my perspective, that this position of listening and dialogue in clinical work represents staying with complexity, on the edge of the unknown, as Pontalti states by citing Ceruti.

The clinical reference here, as far as I'm concerned, is Winnicott; the idea

of therapy as a space for play and the concept of "continuity of being": the patient, is free or freed, authorized by the therapist, if the therapist does so with himself/herself and his/her models - to explore himself/herself in a safe space, in which he/she can experience states of non-integration, experiences of redefinition of the self and new freedoms, of reconnection to needs. Here is a sacred space overseen and protected by the therapist.

Moreover, in the interview as previously mentioned, a strong reference emerges to a connection that has undergone enormous transformations in just a few generations: the connection between family and community. The rootedness of family to which Pontalti refers to within a community in the historical space and time of that community, as well as the practices and rituals of that culture, gave the family a sort of support in the capacity of staying in the reality of life, keeping the founding connection between subject and community alive.

Byung-Chul Han writes that rites are to time as the home is to space: they allow one to "domesticate" life and they can create a community without communication, while today we are in the presence of communications without community, the philosopher remarks.

In terms of a bond between the subject and the community, I think of the metasocial and metapsychic guarantors in R. Kaes' thinking, understood as structural symbols, artefacts, ideas, institutions that allow people to avoid that existential disorientation, by anchoring themselves to a belonging. Which becomes a belonging to history, feeling part of one's history because it is part of History - Ernesto de Martino dedicated memorable pages to what happens to the subject when, exiled to the margins of history, deprived of the capacity to act and affect one's destiny, he/she encounters a crisis of presence.

In this sense, it seems to me, that it is necessary to underline the progressively increasing importance of the peer group, for young people. If family is fragile because it is dispersed in the social sphere, a dispersed fragment that is no longer connected to the articulation of mutual development with the community, then the only other family that can hold together these two dimensions - familiar and social - is the peer group, even via rituals. Therefore, even family becomes a state without connections or social mandates, as Pontalti recalls, because of historical, sociological, and economic changes and the fragile marginalized subject is folded up within in it. Once upon a time, becoming an adult meant acquiring operative skills and resources to become citizens, in an inseparable bond that defined the subject as he/she was connected to the community and a mandate; nowadays however, the subject is first a carrier of individual rights, among which is the right to happiness.

In the Chapters on the Fathers, in the Talmud, one can read: "You are not obligated to complete the work, but neither are you free to desist from it". This seems to me, and I assume all responsibility for this gamble, that some of Pontalti's references, duly transferred, allude to this direction or, at least, that is how they resonate with me. Today we live in a time in which "becoming yourself" prevails and achieving one's own life seems to constitute the highest calling. I ask myself: what if, at a certain point, we dealt more "simply" - in an integrative and not exclusive perspective - to achieve *life*, adhering to the process that we belong to? What if the obsession of achieving one's own life has distanced us from life as such and from the capacity of listening to the silences? And similarly, what is the price of abandoning reality, from a clinical perspective, to affirming the goodness of one's models against and not for the record of the existent? I think clinical work is not free from subtracting itself from the restless reality of life, if not at the price of not understanding the living being anymore. In a slightly provocative manner, but I think Pontalti indirectly draws attention to this passage, he invites to consider the possibility of a return to that type of "simplicity" that represents the condition of remaining in complexity. How would clinical work change if it de-anchored from certain simplistic loyalties to models and dove back into the flow of "simplicity", where we do what is necessary and intuited as good? And, I add: What type of training, for future generations of psychotherapists could support the consolidation of such an attitude as the main "tool" to work with?

Just as the subject belongs to more systems, that define him/her and contribute to his/her making and undoing, clinical work belongs to history. Contrastingly, if clinical work continues to do without History, sooner or later History will do without it, bringing about the definitive disarticulation between two intimately entwined poles that are present in the psychism of a person, subject and society, clinical work and community, relegating psychotherapy to the practice of wellness or fitness and no longer as a transformative opportunity, with the unavoidable political implications that derive from it.

Maybe, the first and implicit task of the clinician is that of witnessing how to stay in complexity beginning with the ways and methods of intervention that have the living being as a main reference. Too often we have the sensation that the clinician tries to explain without understanding, in accordance with a classic phenomenological definition.

The examples brought by Pontalti, drawn from clinical experiences, seem to indicate the importance of being profoundly rooted in the historical context: on the one hand, continuing to keep the connection between systems (between individual and context) alive in clinical readings, considering the dynamics, games and why not even the balances of power - just as the ethnopsychiatric gaze invites us to consider; on the other hand, because needs change, the way we think needs to change, in order to intervene.

In this sense the example Pontalti brings is interesting to me. In working

with parents, he says, that in current clinical work the pattern that is in vogue is that of insisting on parental deficits as the main cause of child illness. Thus, Pontalti recommends, provocatively but not too much, working on trying to soften the parental care dimension, I imagine here not understood as a fundamental condition for the development of the child, but rather as an attempt to immunize the child, to compulsively protect him/her from impact-trauma? - so that the world can have their child. It seems, deep down, a society of adults that suffers from *pre-traumatic* stress, in the sense that the suffering originates from the improbable effort of controlling reality, immunizing it, unlearning to welcome it and navigate it.

Psychology cannot not consider history and not be, in turn, part of history. This means considering the inseparable link of the person (and the clinician) with contexts: ecological - as in the logic of the environment-, economic as consequent rules for the environment -, political - as a community-, and biological - as a logic of the living being.

Any psychology or psychotherapy that removes itself from contexts, that is not willing to transform, even to "die" in order to be "reborn", and that atomizes the person, is only I believe destined to not understand, not know how to listen and even not know how to take care of a person.



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