Editorial

Fabio Vanni*

This Issue of *Ricerca Psicoanalitica* deals with clinical work on complexity. So too does the interview with Corrado Pontalti, the work by Miriam Gandolfi, and the discussion of a clinical case by Ottavia Zerbi.

Complexity means holding together, com-prehending, and today's clinical work is increasingly more about trying to hold together participants, perspectives and tools. Fortunately, we have gone beyond the protection of school fences, at least in most of the world of psychological care, and instead we are seeking, humbly and dialectically, the most effective forms of therapeutic intervention.

Pontalti, who will not forgive me for saying this, is one of the great masters of Italian psychotherapy. He has traversed this world critically and continues to do so through teaching and supervision. He does so through a dialogue that produces a culture of care, that carefully considers the evolution of the society in which we live and the operational variations consistent with the culture itself.

His experience and cultural evolution allow him to consider clinical settings as instruments of intervention and not as preconceived meetings of observation. Interviewing him was a real pleasure that I think is passed on to the reader through the preservation of a frank and direct style of communication, but also through the lucid vision that he proposes of working with children, adolescents and families.

Increasingly, psychological clinical work (and not only that in public services) needs to express itself in complex forms, not merely by including participants within the 'clinical system' and the 'system in treatment' or by using new technical measures, but also by drawing on analyses that place subjects on both sides of a deep, continuous focus on humans. The human 'subject' as we call it, and thus also of the subject's relationship networks, such as the familial, friendship, and peer ones. Clinical devices are a long

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way from universalistic asepsis. Instead, they are devices that lie deeply within the cultural and relational world in which we and our patients live.

The putting together of this Issue happened within a state of war in which we felt caught up in, and my personal experience is that the theme of 'violence' constantly presents itself in the clinical interactions that I live through and in the personal relationships that I experience. Realising this has given rise to the need to understand more about violence, and I believe that this is a useful and timely way forward.

We have urged the professional world around us to write about this and very soon we will look forward to proposing our thoughts on this topic to our readers. We therefore also take advantage here of encouraging them to do so. A scientific community, we think, should do this as we experience this moment in time.

This Issue contains a commentary about a film, three book presentations, the account of a counselling intervention in an organization, and also research work from an interdisciplinary team that once again delves into complexity within healthcare services, where psychological expertise is compenetrated with that of other disciplinary perspectives for a more caring approach toward the interests of human subjects; in this case, adolescents waiting for transplantation or who have already undergone a transplant.

Therefore, complexity in treatment, but also in scientific research, seems to us to be a necessary way of producing high-quality knowledge and therapeutic action.

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