

The author considers the therapeutic alliance to be a conscious and unconscious shared commitment as patient and analyst collaborate in the work of analysis and he maintains that such an interpretative perspective is particularly important in therapy with adolescents. He identifies the distinguishing feature of the therapeutic alliance during adolescence as its being a process, “a sort of tailor-made garment” that analyst and patient create and fashion throughout the whole psychotherapeutic journey, whilst he assigns to the therapist – in his/her capacity as the “agent who subjectivizes the alliance” – the task of fostering the adolescent’s subjective appropriation of the therapy. Lastly, he discusses the need for the “therapeutic alliance’s diffraction” in other figures of reference, particularly in the most serious cases and those that risk being cut short.


The work discusses the possible meanings of an eroticization of the transference during therapy with seriously ill adolescents, highlighting its opportunity for development rather than the traits that resist and obstruct the analytic process. A deep understanding of both the patients’ internal disposition and the flows of transference (which had become significant, with separation for the holidays round the corner) allowed the therapists to give a “tuned” response capable of generating a transformative experience within a defined setting. When the communication of feelings of love is met with a counter-transferential resonance that does not wound the boy’s fragile narcissism or mortify his emergent instinctuality, the relationship makes it possible to re-animate the previously frozen internal dispositions, thereby fostering a revival of psychic activity and a more developed functioning.
B. Carau. **Comments on the Article by Amabili and Olivieri.** *Richard & Piggle*, 27, 2, 2019, 149-152.


Taking some clinical observations as its starting point, the article proposes a reflection on the methods used by today’s adolescents to work through puberty or defend themselves against it. Particular attention is paid to the possibility of accessing creative resources in order to promote developmental progress. The clinical hypothesis is that, during adolescence, still unthinkable content linked to puberty can be deposited in “border” areas of the personality and contribute to establishing borderline traits of varying gravity. The clinical cases discussed illustrate how the analytic space and the encounter with the other (the therapist) allow the adolescent to find an environment that facilitates a collaboration between the infantile and the pubescent, thereby helping him/her to define him/herself as a social subject.


The author works with adolescents who often express their profound malaise through non-mentalized forms of behaviour. These reflect their attempt to free themselves of anxieties and painful emotional states by short-circuiting the contact with emotionally intolerable mental representations and taking refuge in an autarkic dimension directed at denying the object’s affective meaning. At the same time, such forms of behaviour - which generally cause a strong reactive participation on the part of the immediate environment - contain clearly traceable (conscious and unconscious) paradoxical elements that testify to a vital drive in search of the object. It is precisely in this vital drive (which risks being overwhelmed by self-destructive and hetero-destructive instincts) that analysts can identify the nuclear aspects on which to build an alliance with adolescents.

**Clinical Reflections**


The article offers some theoretico-clinical reflections on the complexities of the anal phase after opening with the clinical example of a six-year-old boy who oscillated between the analysis room and the bathroom for a long period of his psychotherapy. The actions of withholding faeces and letting them go are considered in relation to the possibility of appropriating one’s own ability to think and to choose what must be held onto or kept in reserve. A key observation was the importance of the part played by the therapist’s reverie during sessions as she accompanied the child in the delicate work of joining the “bodily” to the “mental”. The emphasis is therefore placed on the delicate phase of hesitation before the act of expelling and on the indispensable contribution made by the environment in the promoting and accompanying of a new awareness that heralds psychic development.

This article explores the connection between the phenomenon of social withdrawal and primitive states of mind, making reference to the concept of mirroring (Winnicott 1971). To this end, the authors present two clinical cases describing different ways in which the withdrawal manifests: in the case of Iago, through the virtual world of videogames and, in the case of Alessandro, through its counterpart, silence. In the light of the cases presented, the authors reflect on the extent to which experiences linked to a lack of mirroring can have repercussions during adolescence, fuelling a young person’s fears of disorientation and putting a dent in the inner resources needed to face its developmental challenges.

The Enchanting Screen


Reviews

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