



# The Uncanny During Adolescence Dialogues on Development

## Contents & abstracts

### Editorial

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### Theory and technique

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Bronstein C. "Is This My Body?": Managing the Uncanny during Adolescence. *Richard & Piggle*, 33, 4, 2025, 351-365.

While we can all have uncanny experiences from time to time, there are some patients who live with a permanent sense of estrangement from themselves and the world that surrounds them. Uncanny experiences – and those involving the body, in particular – gain predominance during adolescence. The difficulty some adolescents have in recognizing their body as their own can become very pronounced after puberty when they are faced with the task of re-working through the Oedipal conflict and the potentially overpowering effect of their drives. In these cases, the uncanny experience of a 'disquieting unfamiliarity' can be felt either in relation to parts of their body or to their whole body, leading to a feeling of being inhabited by a double. Through detailed clinical material regarding a disturbed adolescent, the author shows how the double is the product of a process of dissociation that involves a previous process of projective identification: one connected to the wish to enter the mother's body so as to possess and/or control her and her sexuality and procreativity, in particular. As a consequence of this process, the individual can feel persecuted by the phantasy of an introjected object, which now either claims independence or threatens the subject with the possibility of taking over the whole of the body/ego and thus killing the host. The author proposes that the uncanny effect that accompanies the process of dissociation and is lived out through the phantasy of the double, is what paradoxically eases the ego's anxiety that it could be taken over by the delusional aspects and risk a total psychotic breakdown.

Iole Caratelli T, De Vita F. **From Primary Maternal Preoccupation to the Brain's Predictive Capacity: Clinical Reflections on the Mind-Psyche-Soma Dialogue.** *Richard & Piggle*, 33, 4, 2025, 366-386.

Psychoanalytic theory in dialogue with elements of affective neuroscience offers new possibilities for understanding psyche-soma integration. Taking Winnicott's theory of primitive emotional development as its starting point, this article sets out to consider birth as the *incipit* of the process through which the psyche – in the authors' opinion – establishes itself as the dynamic hinge between body and mind, translating physiological states into subjective experience. Within such a framework, recent neuroscientific concepts such as homeostasis, allostasis, interoception and exteroception are explored not only in their biological sense but also as psycho-corporeal metaphors of the psychoanalytic work on primitive mental states. The clinical focus concentrates on cases of psychoanalytic psychotherapy with children in the latency period who present a birth experience that is traumatic in the psychopathological sense. The authors explore the possibility of using the construction of a “made-to-measure” setting in order to re-establish environmental predictability and foster the restoration of mind-psyche-soma continuity, thereby reactivating the integration processes that were interrupted during the primary phases of development.

### **Clinical reflections**

Günter M. **The Paradox of illusions in Child Development.** *Richard & Piggle*, 33, 4, 2025, 387-404.

The article explores the dialectic at work in the forming of illusions, the destruction of those illusions and the establishing of new illusions during child development. Taking the theoretical reflections of Balint and Winnicott as his starting point, the author shows how children and adolescents develop their own Ego with the aid of illusions. The very Ego itself, along with the defensive structure belonging to it, could be understood as an illusion operating at the service of both survival and connections created by anxiety. Three clinical vignettes are used to outline how child and adolescent fantasies and their transference can be understood in terms of a complex use of illusions and how they may be rendered usable for therapy. In this key, defences can be considered successful if they allow a person to have or find a sufficiently secure internal access to very early childhood illusions.

Gritti A. **Traumatic Distortion of the Primary Illusion. Reflections Developed from a Work by Michael Günter.** *Richard & Piggle*, 33, 4, 2025, 405-415.

The author tackles the topic of illusion and formulates the hypothesis that some patients have suffered a distortion of the primary illusion process described by Winnicott. The hypothesis takes its cue from a study of the clinical cases presented in the article by Michael Günter published in this volume under the title, “The Paradox of Illusions in Child Development”: cases in which the squiggle game was used with two patients. A bi-focal study of the sessions – which examined them both through the analyst's account and through the evolution of the squiggles – made it possible to reconstruct the complexity of the communication and relationship between the two partners. Like the reverse side of a piece of embroidery, the squiggles highlight what the account of a session cannot capture, namely, the interweaving



of profound, silent and intimate elements produced between analyst and patient and best expressed in graphic form. Studying the clinical material in this way allowed the hypothesis of a traumatic distortion of the primary illusion to emerge.

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### **Therapeutic communities and day centres for minors**

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Quintiliani R, Giuliani R, Schirinzi S, Cusumano G, Carboni M. **How do Therapeutic Communities Treat People? An Integrated Approach for the Treatment of Persons with and Onset of Psychosis during Adolescence.** *Richard & Piggie*, 33, 4, 2025, 416-436.

The article describes the integrated approach adopted by the “Reverie” Therapeutic Community for adolescents suffering an onset of psychosis. The Therapeutic Community is presented as a “workshop” and a mental space where treatment is provided through a multidisciplinary team and external psychotherapists. The authors structure their text around six observational perspectives that illustrate the work’s complexity: those of the trainee, the professional in charge of the programme, the professional in charge of foster care, the person running the workshops, the individual psychotherapy which is integrated with community experience and, lastly, the group. The authors reason around what is specifically therapeutic and what it is that unites the various forms of intervention and comes to constitute community therapy.

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### **The enchanting screen**

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Silvestri M. Luca (2021). **Directed by Enrico Casarosa.** *Richard & Piggie*, 33, 4, 2025, 437-439.

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### **Reviews**

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### **Recommended reading**

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