

Cross identifications and dissociated mourning

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“[...] creativity is one of the common
denominators of men and women [...]”
(1971a/2005, p. 97)

The twenty-first century, shortly after its commencement, is characterized by an actual “epidemic” of symptoms concerning something which I won’t say is “gender identity disorder” but the instability of the said identity, as something which affects a considerable number of young people, from puberty if not infant stage, crying for help in order to cope with either a change in this sexual identity or achieving its stability. I refer mainly to the desire on the part of these individuals to change their name so as to declare the opposite of their biological sex or, in certain cases, to the attempt to also change their biological sex which the individual then demands is in accordance with his/her desire for an identity in the opposite gender.¹ These are changes which run parallel to those of corresponding Western communities following the LGBTQ+² movements, with a plethora of terms which characterize all manner of dispute or polyphony in regard to the question of sexual identity and vary or multiply, beyond any form of gender discomfort. One could indeed perceive the subject of the search for sexual identity as a characterization of the “common denominator between men and women”, which, according to Winnicott, is creativity. As, whichever direction sexual identity might take, even that of its own denial, it nonetheless remains a procedure both psychic and psychosomatic, creative in the sense of its own creation, which many psychoanalysts agree is in its essence traumatic.

A few years ago, during the course of the celebrated Eurovision Song Contest, there appeared a singer with a woman’s name and appearance, accompanied, however, by a beard of the type which didn’t seek to decorate in drag queen style but to intonate the acceptance of all the male and female elements together in the same person and in one identity. Her appearance

¹ See also the works: Eliacheff, C. e Masson, C. (2022) e Melman, C. e Lebrun, J.-P. (2022).

² Within this ‘+’, apart from homosexual and bisexual men and women, I counted in the range of some fifteen characterisations which strive to define a field of sexuality from the social to the biological gender: transgender, transsexual, two-spirit, queer, questioning, intersex, asexual, pansexual, agender, genderqueer, bigender, non-binary, gender variant, pangender, gender fluid.

stirred up a wave of discussion. However, the matter of disguise and concealment of sexual identity, the games between the sexes, is far from new. Antiquity provides a particularly glaring example, which is perhaps not so widely known. Thetis, mother of Achilles, in order to spare her son from the, according to the oracles, fateful for him but glorious Trojan War, dresses him in female attire and hides him in the palace of the King of (the island of) Scyros, Lycomedes, among his daughters. He is discovered by Ulysses who presents himself as a peddler of fabrics but also of guns. Achilles, in his female attire, is the only one who ventures towards the guns and is thus revealed, and in succession easily coerced into following the others to war, and to be triumphantly killed. This story, contrived and mythological as it might be, makes some sense and gives an existential dimension to disguise. Here the disguise in order to conceal sexual identity becomes a way of avoiding certain death and is a defense of life which the clinical experience possibly certifies in its different versions, when sexual identity is concerned, as possibly the patients “find living itself to be the therapy that makes sense” (1968/2005, p. 117). Because the clinical experience shows that behind all the contrived identities lies a mortal deadlock and the contrivance, as is usual in many of the symptoms, is a survival tactic.

A few years ago I received an agonizing demand for help from the side of the parents of a teenager who was considering to proceed with sex reassignment surgery. I conducted a few consultations with the teenager, which allowed him to continue and complete his studies in the last year of Lyceum, which he'd previously considered abandoning, and commence studies at University in the faculty of his choice. Nevertheless, he showed no desire to continue with our consultations, which were additionally difficult because he came from a remote Greek island. Nor did this change progressively, with the commencement of his studies, as the University to which he'd been accepted was considerably far from Athens. During the few consultations we had, he managed to speak in part of his desire to change sex, naming Jennifer Lopez as his model due, as he told me, to the fact that she had all the men at her feet. What he wanted for himself was to become a mirror image of Jennifer. He himself possessed no feminine characteristics, and his desire stated a complete dissociation from the feminine elements of his psyche. Simultaneously he revealed the overpowering fear he felt towards other men, to the point of dysphoria when he happened to be exiting the metro amidst a crowd of them. And it's here that, in my opinion, a particular male homophobia appears and which he would overcome through his fantasy of sex reassignment surgery. As a woman, not only did men not instigate fear but it seemed to him stimulating to provoke their desire. Certainly a similar fear instigated possible inhibition in his relationship with me in the transference, judging by his manner of appearance at our sessions and even in his body language, so that he quickly became evasive

towards the sessions themselves, without however voicing any desire to continue with a woman analyst.

Winnicott notes:

There may be found clinically a near-complete other-sex dissociation, *organized in relation to external factors at the very early date, mixed in with later dissociations organized as a defense*, based more or less on cross-identifications. The reality of this later organized defense may militate against the patient's revival in the analysis of the earlier reactive split.

(There is an axiom here, that a patient will always cling to the full exploitation of personal and internal factors, which give him or her a measure of omnipotent control, rather than allow the idea of a crude reaction to an environmental factor, whether distortion or failure. (1971a/2005, p. 104, my own italics)

He had brought to our initial sessions, which in total don't surpass six, a dream he'd had prior to coming to see me, and prior to the conscious at least prospect of his seeing me, and while he sat, deep in his crisis, on an island other than that of his origin, where his older sister worked, and whom he was visiting so as to distance himself from his stifling family environment. In his dream he sees himself approaching a rural church, a chapel, and upon entering there is his grandmother, his father's mother, and other elderly women surrounding her, as if waiting for him. Before them, in the centre of the church, lies a stratum, and his grandmother gestures to him to lie on it so that his funeral may commence. The entire setting of the dream within the chapel has funerary references. A woman, a mother, who wanted a son, a dead grandson. Aside from the rest, this deadness and death to which his grandmother beckons him, (perhaps in place of his father?) is what he strives to avoid through the rupture with his biological gender. As if it weren't possible for him to live as a man, and thus he sought through the sex change an existential outlet towards life. The dream concludes with the grandmother's beckoning and the lack of a response on his part as to whether or not he'd be following her command.

From my part, there was no interpretation except for the one concerning the deadly call of the grandmother for him to take the place of a dead man, so they could mourn him. Nor was there any other association on his part, in regard to this position. He severs our collaboration four months prior to entering University and after his idea for a sex change has all but dissolved; a fact which permits him to study and enter. I have news of him only via a relative, the one by whom he'd been referred. He reappears several months later, requesting certification of our collaboration which he requires in order to secure a deferment of conscription, but also determined to interrupt his studies in Greece and continue them in the US, in a different field.

He is already in preparation of the formalities for his departure. I still recall his ironic expression as he bid me goodbye, certificate in hand, and his total reluctance to initiate any form of discussion during this procedure, either to do with his decision or any other topic. A few days later I received a phone call from the aforementioned relative informing me of the boy's death in a car accident on his island of origin, whilst returning home from the Main Village and still in the midst of procedures for his move to the States. On a well-travelled road with the father driving and the mother in the passenger seat, the car overturned around a bend. The parents had come out without a scratch, while their son was killed instantly. Behind his death the mournings are dissociated, his own but also those of his family, at last combined into one huge mourning of the kind which is sorely surpassed. The cross-identifications with the father already lie in the dream with the grandmother and her calling.

Ms. E. comes to seek a consultation for psychotherapy without a clearcut demand, despite being in deep depression of a chronic kind. Lost, for the most part, "in her own world", as she calls it, she'd like to associate more with others, and especially her daughter who is already ten years old. For quite a few years she's been involved in a project, at a very slow pace having also to do with its frequency, which she desires to be no sooner than twice a month, maintaining the laxity of her connection in the transference also. Nonetheless she invests in the psychotherapy which, at this rate, will last seven years. During the course of these years she'll speak as much about herself, and herself as a child, as of her only daughter. She'll speak of fleeing from home as a teenager, to be found kilometers away from her home town. Of her almost paranoid father and her heavily manic-depressive sister. But she'll also speak at length of her daughter, born out of wedlock to a man with whom she'd been constantly on and off. She becomes pregnant at a point when the relationship, albeit of this kind, is ending. She conceals the pregnancy from the father, in fear that he'd force her to terminate it. And when her daughter is born and she finally presents her to him, he accepts and acknowledges her as his child, while already suffering from an illness which, shortly after, will kill him. The plight of this man weighs on her heavily, his own father and brother having committed suicide. Much later on, she'll speak of his liveliness, his activities, and his love for life. However for her he's veiled by the darkest sides of his story, his illness and his untimely death.

Nevertheless during the course of our consultation she'll strive more dominantly to bring to the forefront the father of her daughter, attributing his surname to her alongside her own, in other words that of her own father, conducting a particularly complicated bureaucratic procedure so as to accomplish this, so as her daughter acquires both surnames, the first being her father's and the second her grandfather's. Her daughter reacts to this, albeit moderately, but

apparently accepts it. However the mother is experiencing considerable difficulty in her relationship with the girl, and the girl, in turn, appears to be demanding in an absolute manner her autonomy from the mother, as though she completely lacks her own psychic space. The daughter attempts to commence psychotherapy on the grounds of hassles at school, though this doesn't go beyond three or four consultations. This is repeated twice more, on the basis of certain symptoms of depression, and she commences an anti-depression treatment which she interrupts reasonably soon on her own initiative. An attempt for omnipotent control, reminiscent of her maternal grandfather, comes closer and closer to the forefront. Up until the point where, around the age of sixteen, she states that she feels like a boy and asks to be called by a boy's name. Firstly by her friends, then her mother, who appears to accept the fact with no particular resistance, and finally school. The mother appears worried over this development, though accepts it with certain discomfort together with consent. Almost as if it were to be expected. The point where I'd say her own cross-identifications, with her paranoid father and deeply depressive mother, leave the female element extremely detached and attempt to reintroduce a dead or omnipotent male element.

When his mother brought in T. in search of a therapist for him, Th. was eight years old. He'd lost his father at the age of three, from a heart attack which left him no opportunity to even be transferred to hospital. T. portrayed a girl, copying particular and extreme girlish behaviours, playing with Barbie dolls and taking on theatrical poses displaying all manner of coquetry with the aim of intonating a femininity in its most exaggerated form like a caricature, the kind which according to him represented a girlish and female behaviour. His therapy lasted a few years, a large-scale and painstaking procedure, with sketches and descriptions of dreams with huge dramatic force and an unconscious imprint, not to be expected, perhaps, from a child of his age. Nonetheless T. moved on to a mental process which, on the one hand, rapidly led him to the disappearance of the girlish imitation symptom, connected to the dominant matriarchal figure of his maternal grandmother, and on the other hand in the area of a basic trauma involving the death of his father, and the circumstances of this death, chiefly the fruitless efforts on the part of the mother to resuscitate him, a scene which took place right before the eyes of the three-year-old boy. Indeed behind the father's untimely death lay the story of his own family, ridden with catastrophe and leaving behind no relatives.

Years later T. is a young man commencing his university studies, another repercussion of the analysis being the investment in knowledge and school which was gradually restored, and an orientation towards an homosexual choice of object, which contained certain remaining characteristics of the family neuroses and was connected to the huge void of the father's

absence, but also of the great absences in his own genealogy. Here the cross-identifications had once again dissociated the mourning for the father, which wasn't easily done and had to do with T.'s position between his mother and his maternal grandmother, where references to his father bore only characteristics of death. The maternal grandfather had also died, and her brother was tormented by a chronic illness in a weak male form. The psychoanalytic work done by T. reassociated him with these losses, once difficult for him to approach and touch on, leading him to a psychic integration which went contrary to his severance from every paternal genealogy sealed by death, allowing him to enter into a state of mourning which, of course, was completed only to the extent corresponding with the age at which his analysis "finished". There is no doubt that this procedure had to be repeated at an older age, enriched with the experiences of his intervening adult life, in order for us to say that the mourning for his father could one day be completed.

B. was a woman of mature age, who came to seek psychoanalysis at a point where she found herself in crisis of a clear psychotic nature. This crisis had begun, a fact which she was able to ascertain many years later into her analysis, with the death of her father, with whom she shared a worshipful relationship. She treated this death, when he was all of 90 years old, as something which could have been avoided, followed the funeral procedure with the pertinent emotional coordination, and subsequently, as she says, for a year she "froze". She referred to an emotional immobility which kept her away from any kind of mourning procedure. At the one-year memorial she lamented, as she said, for twenty-four hours and wept as she should have wept at the funeral. This association between the external and internal reality successively took a direction via which she chose to dissociate from the mourning she'd only just touched on and to maintain this cross-identification with her father and not only. This took on the form of a manic-erotic fixation, bordering on delirium, for a woman in her professional environment, whom she'd considered to be homosexual because another colleague had told her of her possible involvement with another female colleague. From the latter she demanded she succumb to her erotic desire, a homosexual desire she was discovering blindly with her, while the object of this desire, in defiance of all she'd imagined, wasn't reciprocating. Up until then she'd shared close friendships with women, and in particular with one who'd referred her, many years prior, to me and who was no longer alive; one whose loss she'd been able to mourn.

The homosexual investment by this woman had to do with the complete dissociation from the mourning for her father, a dissociation which allowed her to continue to hold on to the cross-identification with this father. It wasn't, however, the only one. During her analysis, prior to reaching this most recent and close identification, and while still in the course of the

psychotic crisis which had taken on a paranoid-like character of grandeur and persecutory with an ideological political content, without herself realising how this had happened, there emerged a deep dissociated mourning and a cross-identification with a dead brother. She was around three years old when the event occurred. It concerned her mother's second pregnancy, which was to twins, a boy and a girl. The boy, for reasons unclear to her, died shortly after birth, which had occurred at home while she watched. He was transferred to hospital, only to die a few days later, and after having been given a name via emergency baptism. This younger brother she was able, to her great surprise, to mourn during analysis, who had been the only boy in the family among three girls, none of whom had had a family, and continued to live all together in their middle age. Her reference for months to this brother was perhaps a huge realisation for her, the first born, in a well-repelled cross-identification with this dead baby, the mourning procedures from which she maintained certain memories mainly from the visits to the cemetery. And here we return to the words of Winnicott: "The other-sex element may be completely split off so that, for instance, a man may not be able to make any link at all with the split-off part. This applies especially when the personality is otherwise sane and integrated." (1971a/2005, p. 103). This woman had to go crazy so as to be able to reassociate with the dissociated section of her self, and with which she had been living for the better part of her life.

There is a factor which connects these four cases, even though the ages, the impasses are created differently and the solutions given in different ways. In one case a dissociation remains powerful, the deathly identifications taking the upper hand and reinforcing the existential impasse. In another the touch of madness is needed so as to oblige a solution which leads towards the direction of life. In yet another the analysis helps to lift the dissociation so as to achieve a procedure of mourning which will reveal a "crypt". In every case the environmental factor, in the form of the other and the events of life with their management, holds a decisive role which reinforces the impasse or the solution, and I'd need to offer a lot of details so as to support with arguments all which contributes towards the building of the self of every subject, with cross-identifications and the dissociation of the mourning procedures as its base, without this reducing the factors of inheritance. As Winnicott notes:

[...] in health, there is a variable amount of girl element in a girl, and in a boy. Also, hereditary factor elements enter in, so that it would easily be possible to find a boy with a stronger girl element than the girl standing next to him, who may have less pure female element potential. Add to this the variable capacity of mothers to hand on the desirability of the good breast or of that part of the material function that the good breast symbolises, and it can be seen that *some boys and girls are doomed to grow up with a lop-sided*

bisexuality, loaded on the wrong side of their biological provision." (1971a/2005, p. 111-112)

Nevertheless in every instance the collapse of such an identification or a fixation and attachment to it as an element of an identity which moves not in the dynamic of life but in a deathly dissociation each time leads the psyche to an impasse. In addition to the fact that in all the cases with the exception of T. it's the female part of the identification which is at risk or in a deathly dissociation. This isn't mourned nor does it meet with the recognition to which it's entitled as one of the aspects from which the psyche breathes as well as creates. And this because the female element has to do with the maternal, with the dependence on and the adjustment to it, with an existential dimension which emerges in each case, inseparably connected with sexual identity. The existential dimension of the subject is connected with the cross-identification which an identity in the subject offers, and not with that which, being in decline, complete dissociation leaves exposed to paths of death within life. The ability to mourn this in decline cross-identification restores the association and reinstates something of the subject's lost psychic bisexuality which, otherwise, tends to result in a change of name, sex, or be transformed to a delirium and to natural deaths occurred in the case of the young teenager.

And to return to Winnicott

Psychoanalysis has drawn a full measure of attention to the operation of instinct, and no sublimation of instinct. It is important to remember that there are significant mechanisms for object-relating that are not drive-determined. I have given examples to illustrate *interrelating that belongs to exploitation of the dependence and adaptation phenomena* that gave a natural place in babyhood and parenthood. I have also pointed out that much of our lives is spent interrelating in terms of cross-identifications." (1971b/2005, p. 185, my own italics)

The manner, therefore, in which each subject experiences psychic bisexuality, what destiny may be met by cross identifications which support or contribute in a way which, at some point, steers matters of sexual identity towards the male or female side and regardless of the biological sex, all these raise issues which, in accordance with the stories of every subject and those of its generators, lead to sexual identities which are called upon to support life. Something which occurs, however, only when the mournings which penetrate the cross identifications can be experienced and led to some end and a solution. Otherwise the cross identifications determine the identity of the subject leading it on the basis of the untold mournings and the open wounds to a life sealed by death, both psychic and physical.

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