



## ARTICLE

### ***What treatment for contemporary civilization?<sup>1</sup>***

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**Abstract:** "What treatment for contemporary civilization?" is the question the author answers in this paper that brings up the psychoanalytical point of view. He tries to demonstrate that because of the word "treatment", psychoanalysts might be invited not only to give their opinion, but also to intervene. In fact, the world community cannot lie on the couch as if it were a subject with a symptom. However, psychoanalysts should not only remain beside the couch, but also give their contribution.

**Key words:** Contemporary civilization; psychoanalysis; treatment; partner-symptom.

**Resumen:** "¿Qué tratamiento para la civilización contemporánea?". Es la pregunta que el autor responde mostrando el punto de vista del psicoanálisis. El autor trata de demostrar que por causa de la palabra "tratamiento", el psicoanálisis podría ser invitado no sólo a dar su opinión, sino también a intervenir. La comunidad internacional no puede acostarse en el diván como si fuera un sujeto con un síntoma, por eso mismo piensa que los psicoanalistas no deberían quedarse tras el diván, sino también ofrecer su contribución.

**Palabras clave:** Civilización contemporánea; psicoanálisis, tratamiento, pareja-síntoma.

Would it be possible for psychoanalysts to talk about such a theme without leaving their own field? I will try to demonstrate, or at least to illustrate, that because of the word "treatment", psychoanalysts might be invited not only to give their opinion, but also to intervene. In fact, the world community cannot lie on the couch as if it were a subject with a symptom! However, should the psychoanalyst only remain beside the couch? Currently, many people, including psychoanalysts, would answer that question with a "no". Bringing up this kind of problem often gives way to a great misunderstanding. How can such misunderstanding be reduced?

Would it be possible to speak about a treatment for civilization, which deals with collective matters and general ideas and does not apparently apply to a subject of treatment? In fact, Freud wrote an article entitled "Civilization and its discontents" (*Das Unbehagen in der Kultur*) in the 20s. In that work, he seemed to be involved with what he had been denouncing about psychoanalysis for a long time: the building of *eine Weltanschauung*, a conceptualization of the world. However, that was not the main issue. Instead, it was an occasion to show that only through the experience of psychoanalysis on a one-to-one basis would it be possible to have effects in communities. He had the same approach when he discussed group or mass-psychology a few years earlier, stating that there is no difference between individual and collective psychology.

That statement has been misunderstood, perhaps because many people are so eager to understand that they do not read properly and cannot follow what is set out. Some tools for reading Freud are offered to those who follow Lacan, but in fact, it is also easy to misunderstand him. It must be taken into account that there is some unavoidable misunderstanding, which is part of language structure. To understand and misunderstand are often two faces of the same issue. An example would be to take for granted that, because he stated that the unconscious is structured as a language, language is the alpha and the omega of psychoanalysis for him. Therefore, nothing else would be left outside language. In fact, that which is left outside language is the target, the point at stake, the repetitive matter, that which remains to work on... The problem is how to name what is not said, which can even be isolated as something impossible to say. There is no other major tension in the world than the tension concerning language. It seeks to reach or catch that which is real that – according to a rigorous Lacanian definition – is considered impossible to say.

In lay terms, and according to the Freudian approach to mass-psychology, the concrete individual in modern individualism is better situated at the community level. The individual is the leader, the master signifier, whereas the subject – called the subject of the unconscious by Lacan – is approached by means of language through the discourse in the analytical experience. The subject is split or divided – a repetitive Lacanian formula – because at least two signifiers are needed to represent it. The subject is represented by one signifier to the other. Thus, represented in this way, the subject comes from a hole, a silent discontinuity, a silent singularity of what is left out of representation. Therefore, the concepts of subject and individual oppose one

another. There is a tension between the individual and the subject (written with a bar in Lacanian formulas). This point is absolutely fundamental for any reference to the analytical experience, especially when community questions, as culture or civilization, are concerned. What is at stake is how to link the individual and the divided subject. The spontaneous way to do that, at least the one built through psychoanalytic interpretation, is the symptomatic way.

Lacan proposed to call the discontents that Freud evoked about civilization a symptom. In my opinion, symptom is the key word, outside psychoanalytic experience, which enables psychoanalysts to make several considerations about civilization. It is not surprising to say that analytic treatment is the treatment of the symptom, usually conceived as deciphering its meaning, which produces an effect of release. That is what is expected as a solution. However, the question of what such a solution is comes next. Although symptom dissolution is usually expected as a result, it actually implies a shift or modification of the symptom rather than its dissolution. What is released is the subject's suffering because the treatment reaches a point where it is no longer necessary to complain about one's suffering. This is because the symptom, according to psychoanalysis, is not restricted to being the main sign of a dysfunction. On the contrary, it is a function per se. In this regard, it is essential to recall that in his course on the Partner-Symptom, Jacques-Alain Miller demonstrated what a useful tool it is to the subject.

This leads to talking about civilization in terms of the symptom, the real name for the presumed dysfunction. The symptom characterizes civilization, and curing the symptom may resemble throwing the baby away with the bath water, as we say in French. In fact, the situation will easily become worse if that approach is followed despite the best intentions or wishes of those who use it.

I approach this issue regarding a treatment for civilization not only because of the usual misunderstanding about the symptom, but also because of the current misinterpretation of the modern master. What is the modern master? My thesis is that, more than ever before, he is now primarily the therapist. Everybody approaches him to request a treatment or a cure for what is wrong. That means curing the symptom or getting rid of it. However, how would it be possible to get rid of what is the most important link for the subject in relation to the individual if the individual is, in a certain way, the subject's symptom? To consider the master able to treat or eradicate what is lacking in the supposed continuity of the individual demonstrates the

impossibility of getting rid of the real. On the contrary, and this is the main point, the symptom itself is a treatment for what is real.

For instance, protests aimed at the master seem to be more and more frequent in the contemporary world. They address a master supposed to have power, one who we can compare to the subject-supposed-to-know, named by Lacan as the incarnation of transference. This means that forms of transference, or transference devices, are becoming more visible and seem to be enough, even if they produce no practical results. The satisfaction connected to the simple fact of speaking and taking part in the street manifestations seems to be more important than the satisfaction claimed in what is said - the latter is supposed to be a satisfaction whereas the former satisfaction is effectively experienced.

Therefore, I consider the symptom itself a therapy – in fact, the only therapy. There is no therapy outside the symptom. This is what must be achieved in the analytical experience and what can be a useful lesson from psychoanalysis, a lesson that comes from the essence of the experience and helps us avoid wandering; it is impossible to grasp the symptom at all with no positive presence of what seems to be “bad.”

Having the master as the therapist at least shows how problematic this therapeutic function is and what paradoxes it brings along.

Let us now consider some other aspects of the symptom. For instance, why is a symptom spontaneously considered a deficit to compensate or an anomaly to eradicate? Thinking this way doubtlessly has a lot to do with the connection between the symptom and the medical field. From a medical standpoint, a symptom is the sign of an illness to be cared for, treated or cured. A sign is distinct from its cause; therefore, its treatment is only palliative, a local relief of the suffering that risks to mask the essence aimed at in an etiological treatment. It is always a means but never an end in itself.

In psychoanalysis, we certainly have to be aware of the distinction between the symptom and the sign, as well as the distinction between the analytical symptom and the medical one. In psychoanalysis, we pay attention to the symptom's meaning without necessarily ignoring its own consistency; we are concerned with the symptom as *jouissance*, a kind of resistance that attaches one to the symptom's persistence. We attach to it dearly, and more than that, we insist on it. However, although our first orientation is still to look for the hidden meaning to be revealed or deciphered with the

releasing effect, we do not want to identify it as dominance to be acquired over the symptom. There is a common hypothesis regarding domination obtained by means of the symptom's solution that psychoanalysis does not support. This is because overcoming the symptom by revealing the meaning should result in patients cured by a submission to the splendor of the truth instilled by the master.

The result of this reputedly analytical psychotherapy could be compared to the hypothetical war-therapeutic democratization of the Iraqis recently anticipated as the effect of meaningful bombs. Revealing meaning only works when it is a vehicle toward what is real, whether it is there or elsewhere; this is a point worth insisting on. If we become fascinated by these edifying stories, we do not see what is really at stake: the true master's symptom – a suggestion. As experience has shown, the master needs no bombs to dominate: transference is enough, as long as it lasts. Time in psychoanalysis is encompassed by what is real; it is so real that it cannot be measured with a stopwatch. An absolute instant separates before from after! The effect produced is suspended in relation to it.

In contrast, when we believe in eradication, there is in fact nothing more but the imposition of a symptom. Misrecognition is reinforced, and it goes unnoticed due to the sensationalism of the supposed change. This is authentic psychotherapeutic politics; it is a treatment that happens by means of what Lacan called the master discourse. Therefore, the therapist is a good definition of the modern master that distributes good to combat evil.

Please excuse my cavalier casualness, or in more modern terms, my army-tank style, aimed only at the surgical hits of generally accepted ideas. It is not a question of challenging the benefits, if any, of psychotherapy or other therapies, but of distinguishing it from psychoanalysis. This includes "applied psychoanalysis", even if it is considered the relief or the solution it can bring to those who make use of it. Applied psychoanalysis is first applied to the symptom. The symptom is the framework, the beginning and the end of the psychoanalytical treatment. In psychoanalysis, the only treatment is a symptomatic treatment, a treatment of the symptom including its cause, which is not-all and which is the subject's partner.

This is so because, from the beginning to the end of the psychoanalytical experience (Lacan preferred the term experience to that of treatment), the subject could not have another partner, besides the symptom. Different from established assumptions about therapeutic results, or about didactic ones – which are equally impossible to

anticipate, since they also depend on the experience –, the results come from the unexpected, or even from new facts that the experience may entail and have to be considered outside any automatism. That does not mean that there are no therapeutic effects, but rather that their occurrence comes "as a surplus" as Freud and Lacan have put it.

This thesis in itself, on the other hand, does not come as a surplus. It is an integral part of the structure of the experience itself, even if the symptom *dis*-integrates it as a totality. It is a way to consider the symptom as including a "not-all", which means that any "progress" in the treatment exceeds or lacks with a result as "total".

Again, we find the symptom here, in its place, function and structure, in the context of an experience that aims at what is real, beyond the limits of meaning and even beyond the well-known meaning of the symptom as a formation of the unconscious.

It is often recognized that there is some misunderstanding about the symptom in psychoanalytic practice, especially when it is seen as unique in its structure, in spite of the fact that it is heteroclitic concerning what is real that it brings up. It is common to see the symptom in repetitive acts and to consider it as a sign of dysfunction. It is also common to search for symptoms (in the plural) in order to establish the appropriate diagnosis and to allow deciphering a possible meaning. All this can easily be seen as the major concerns of both the subject and the analyst – who are supposed to work together in the same direction, namely the seeking of relief. Deciphering, learning how to read the formations of the unconscious – and among them, the symptom – is supposed to produce relief automatically.

Nevertheless, Freud himself stumbled upon what he curiously called the "negative therapeutic effect", that is, the absence of an effect on the symptom where one was expected as a result of producing meaning. The reason for this obstacle is that the analytical experience is not a simple matter of meaning; not everything can be dissolved by what is symbolic. Something remains outside the symbolic operation that corresponds to what Lacan abusively and falsely calls the real. I say abusively because it is impossible to say the real. This not-all symbolic is initially the not-all symbolic of the analytical symptom.

The symptom presents two poles: that of the message which can be symbolically translated, and that of what is real, the symptom *jouissance* that Lacan in his later

teaching called the "sinthome" (a word from ancient French that he used to create a true neologism, that is, a symbolic invention that aims to distinguish what is real). Thus, the symptom is the subject's own way of being, an invention that follows its own path. The symptom is the subject's own way of connecting to what is real.

This is also why we may say that the symptom as such, before requiring any treatment as the sign of an illness, is in itself a symbolic treatment toward what is real. The analytical experience can produce a change (that we may call a treatment) that is principally a change in the relationship or partnership with the symptom, a change in the subject's position within symptom. It is impossible to consider psychoanalysis in its effective, active dimension without such a change.

The consequences, for instance, should be sought at the level of what Lacan calls "pure psychoanalysis" when he speaks of "identification with the symptom". Nevertheless, they must also be found at the level of "applied psychoanalysis" – that part of the experience that is occupied with therapeutic effects – as a treatment applied to the symptom, through the symptom, targeting the symptom without going beyond it. With the symptom as our touchstone, we cannot err looking for a fallacious psychotherapy promising to eradicate evil. There is no therapeutic effect without the symptom.

By emphasizing the symptom, our attention focuses on its localization, construction and articulation. The analyst is part of this process, mobilizing the symptom in a partnership by handling the transference, for example, by managing session time and silence – a kind of handling that is not suitable to any descriptive classification.

Thus, it is the analysts' experience with the symptom – the development of their experience with the symptom gained during their own analytical experience, a certain loss of their subjective position (desubjectivation) in the symptom that allows somebody else to take the subjective place in the experience – that can allow the analysand subjects to use psychoanalysis according to their own symptom.

The symptomatic relationship is the result for the subject. One treats oneself as it suits one without the imposition of the psychoanalysts' own symptoms. That is what analysts should learn through their own treatment so that they can occupy the analyst's position for someone else. So, it is through the analytical treatment that the subject can learn how to get away from his subject position to be in the analyst position in order that a symptomatic rapport can be established with the analysand

subject - the single subject in the treatment - by means of his/her own symptom.

The symptom's function forces it to be taken into account, rather than eradicating it. Does this mean we must only accept the world as it is, without any attempt to change or improve it? Could the conservative viewpoint be the only right one? That is not exactly what I mean. However, if the symptom's domain is that of the real, then it is impossible to reach it successfully and change it unless one is ready to face impotence. One must take into account that what is real can only be changed via the symptom. This is the only possible way. That is why the pure therapeutic method, increasingly demanded by the contemporary master, cannot be adopted without the symptom. The symptom is the true name of the Father.

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