

ISRAELI PSYCHOTHERAPISTS AND THE ISRAELI–PALESTINIAN CONFLICT¹

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ABSTRACT This paper discusses the positions taken by Israeli analysts and therapists vis-à-vis the Israeli–Palestinian conflict and Israeli–Arab relations, in the context of their attitude to political and social issues. The history of this topic is traced for the past few decades and attention is paid to the influence of the conflict on actual analytic and therapeutic processes, to the dilemmas posed by analysts' open expression of political views, and to efforts to reach psychoanalytic insight into the dynamics of the conflict. The author believes that political issues unavoidably influence individuals' lives, cannot be avoided in analytic discourse, and their working through can ultimately deepen and enrich clinical work.

Key words: anonymity, involvement, intersubjectivity, history, transference

The recent deterioration of the Israeli–Palestinian conflict has been of profound concern to mental health professionals in Israel. Over 200 of us published a petition in the Israeli press in April 2002, calling attention to the enormous and potentially irreversible post-traumatic emotional damage caused on both sides, and calling for an immediate return to the negotiating table in order to stop the vicious cycle of mutual violence and bloodshed. Soon after its publication, the petition was attacked by a right-wing psychiatrist as 'mixing professional and political matters' and potentially 'undermining the psychic strength of the population' (*Ha'aretz*, 21 April 2002). A heated debate ensued.

At the same time, many Israeli analysts and therapists – joining academic colleagues

in other disciplines – expressed outrage at the call by some European professors to boycott the Israeli academic world, which has been for many years the location of thoughtful attempts to challenge narrow Israeli nationalism, and to search for an Israeli–Arab dialogue aimed at putting an end to the occupation and resolving the tragedy of the Palestinian people. Some Israeli protesters described a feeling of being backstabbed by their foreign colleagues, while being engaged in a painful frontal struggle with the Sharon government, which is being criticized by the vast majority of the professional and academic community in Israel as narrow minded, militaristic, and unwilling to offer any viable political perspective for the resolution of the bloody conflict.

¹ Some parts of this paper were presented in a conference, 'Identity and trauma', held at the Freud Museum in Vienna in 1999, and are included in a chapter in Bunzl J, Beit-Hallahmi B (eds) *Psychoanalysis, Identity and Ideology*. Norwell: Kluwer, 2002.

Earlier on, in September 2001, numerous Israeli analysts and therapists joined an international call formulated by Israelis (notably the late Rafael Moses), Palestinians (notably Eyad el Sarraj from Gaza) and others (notably Theo de Graaf and Vamik Volkan), parts of which said:

In our view, the Israeli-Palestinian conflict has now reached a deadly stalemate where neither side can win. Apparent gains, whether achieved by military strength or by spiritual dedication to overthrowing the conqueror, are short-lived and illusory in the light of the devastating effects of the violence on all parties involved. We are profoundly concerned over the immediate and the long-term injurious impact of the protracted conflict. The deleterious consequences of this situation include:

- the cycle of recurring traumatization involving violence, humiliation, retaliation and revenge;
- the protracted exposure to conditions of uncertainty, anxiety and stress;
- the personal and national impact of loss of family members and friends;
- the dehumanization of the other side viewed as enemy;
- the dehumanizing effects on young people of being involved in violence and killing and of participating in, or being a party to, oppression;
- the distorted picture of the other side inculcated from a young age into future generations, perpetuating the conflict.

The history of both sides has been fraught with humiliation, betrayal and expulsion. Comparisons as to who has suffered more, who has been more unjustly treated, are counterproductive in resolving the situation. They merely add to a sense of victimization and contribute to the cycle of trauma and violence.

Based on our experience as therapists of severely traumatized individuals and groups and our experience with conflict resolution in a variety of contexts, we are convinced that a way out of this downward spiral, this blind alley with its imminent threat of both moral

and physical destruction for both of our peoples, will require at least some, if not all of the following steps:

1. Personal and public recognition of the harm involved in a policy of retribution;
2. A sincere expression of regret over suffering caused;
3. Denunciation of violence as a means of achieving national goals;
4. Undertaking an initiative regardless of unpleasant political or electoral consequences.

We therefore invite the Israeli government to announce its genuine intention to end the occupation of the West Bank and Gaza and to dismantle the settlements in these areas within an agreed upon time-frame. We similarly invite the Palestinian Authority to officially announce its intention to achieve independence only by peaceful means and to explicitly declare its wish to find a permanent and peaceful resolution of the Palestinian-Israeli conflict. Such declarations should be made concurrently. It is our conviction that breaking the present vicious cycle of trauma and successive violence is absolutely essential, and we will continue to work in this direction. We further believe that this can best be achieved by collaborative effort.

These initiatives are part of a long tradition that I will attempt to outline here in detail.

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The question of political involvement has baffled analysts – as clinicians and as intellectuals – for many decades.

A well-known example is the Third Reich. The reaction of the international psychoanalytic community to the rise of Hitler was, from our present viewpoint, cowardly. It is amazing, when looking in the old volumes of *The International Journal of Psycho-Analysis*, to find the brief factual announcement informing the readers that the German Psychoanalytic

Society was disbanded, without one word of commentary, not to mention protest. Jones was apparently determined not to provoke the new German authorities, and so were some gentile German analysts who stayed in Berlin and worked in the Goering Institute (Cocks, 1997).

In retrospect, we may say that a belief in ‘neutrality’ allowed these analysts to collaborate with a most destructive fanatical force, to disregard the danger that such collaboration will allow its toxic effects to penetrate them, and to give up even the slim chance of reducing its murderous impact through honest critical examination. In their illusory ‘neutrality’, in their avoidance, they actually helped Hitler in gaining legitimacy, in creating a semblance of ‘normal life’ in Nazi Germany.

Some of these issues came up around the first post-war psychoanalytic congress in Germany, held in Hamburg in 1985. I assume the willingness of analysts from around the world to attend that congress was aided by the capacity of certain leaders of German psychoanalysis to discuss that horrible era in the history of their nation, and its implications for psychoanalysis, in an honest and straightforward manner. But the experiences of many participants were ambivalent, and Moses and Hrushovski-Moses (1986) suggested that aspects of denial could be noticed in the congress itself.

These issues are far from being limited to Nazi Germany. *International Psychoanalysis*, the bulletin of the International Psychoanalytic Association, has become in 1998–9 the arena of a stormy debate regarding Chile under Pinochet. In preparation for the international psychoanalytic congress held in Santiago, the bulletin published a note by a Chilean analyst, Omar Arrue (1998a), about the recent history of Chile. This note treated the Pinochet years

in a very cavalier way, emphasizing Pinochet’s popularity and achievements but totally avoiding terms such as dictatorship, assassination, torture, disappearance or the like.

Several analysts from around the world (Gampel et al., 1998) protested angrily, and Arrue published an answer, which aroused bitter disappointment. Arrue (1998b) did not seem to genuinely grasp the outrage of his critics, or to reconsider his position with any thoughtfulness. Some of his new glib formulations (‘The avoidance of unnecessary detail is also a form of respect for people’s memory’) re-aroused the intense malaise and distress caused by his original contribution.

Arrue’s claim for a consensus in Chile regarding the dictatorship years was formulated before Pinochet’s arrest in Britain and the subsequent developments in Chile itself. From the stormy and divided reactions in Chile to the possibility of bringing Pinochet for trial, one could learn that the wish to forgive all atrocities in the name of ‘national reconciliation’ was not shared by all Chileans, and many of them were not willing to forgive Pinochet and his henchmen. Those in Chile – like Arrue – who saw this issue as ‘an internal Chilean affair’ must realize that their view is not shared by the international community. At the beginning of the twenty-first century many individuals around the world see the issues of assassination, torture, abduction, and brutal political persecution, as problems involving all of humanity, so that no country has a mandate to ‘forgive and forget’ such phenomena.

As psychoanalysts, we have our own unique reasons to object to such ‘forgetfulness’. Our work with trauma, both individual and collective, has taught us the crucial importance of bringing the pain – and the rage – into full consciousness, and

of their honest verbalization, if a recovery is to be reached eventually. Denial, affective isolation, rationalization, and identification with the aggressor (all of which were used by Arrue) are major obstacles to insight and to recovery.

The lessons from Germany under (and after) Hitler and from Chile under (and after) Pinochet are not limited to dictatorships. They point, I believe, to the need for analysts in all countries to confront openly major issues in their country's history, when these issues have unavoidable psychological implications for their analysands and for their society. The Israeli–Palestinian conflict is a case in point. The impact of this tragic national conflict on the mental health of Israelis and Arabs alike is an unavoidable topic for Israeli analysts.

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Let me start my exploration of the Israeli scene with a clinical vignette.

Some time ago, the Israeli daily *Ha'aretz* published an interview with a woman dedicated to teaching about the Holocaust in Israeli schools. Among other points, she protested the fact that the memory of Holocaust victims is commemorated in ways resembling those of soldiers who died in battle. As an example, she used the Holocaust memorial sculpture at Yad Vashem (the holocaust commemoration centre) in Jerusalem, created by Nathan Rapaport. 'Those Tarzan-like figures bear no resemblance to actual Holocaust victims', she said.

I was quite upset about the comment, and wrote a letter to the editor, which was published. The sculpture at Yad Vashem, I pointed out, is but a replica. The original sculpture was erected on the ruins of the Warsaw Ghetto, in the late 1940s. It was planned by the Central Committee of the

Jews in Poland, chaired by my late father, before the state of Israel was established. Therefore it represented, besides the sculptor's personal style, the aesthetic values of European Holocaust survivors of that generation, and not Israeli images. Can there be, I wondered, a 'true' representation of the Holocaust, beyond the values and tastes of a particular culture?

The day after my letter was published, one of my analysands lay on the couch and started talking about it. He was particularly intrigued by the figure of my father, and by my identification with him. He noticed I refer to my father as 'Dr. Abraham Berman' (which I did out of loyalty, as that was the way my father presented himself), and asked me what was the doctorate in. I told him it was in psychology, although since the war years my father abandoned psychology in favour of political activity. My patient made the comment that this explains a lot about me, as a politically involved psychologist. (He was right.)

His subsequent associations turned to his own father. His father's family left Europe shortly before the Holocaust, and only recently he found out about some of his uncles who were killed by the Nazis, a topic his father avoided. He thought about his impression that, while the rupture caused by the Third Reich apparently made my father expand, it made his own father constrict himself, limit his ambitions and goals. One expression of that constriction was a disinclination to influence his children in vocational or ideological matters. At the time of elections, he recollected, he used to ask father for what party he voted, and father would answer that the ballot is secret. Eventually, the influence went in the other direction: when the patient became politically involved in the Israeli peace movement, his father started voting for lists his son favoured.

His associations now turned to his ageing father's recent suggestion, that he could take a beautiful antique secrétaire the father owns, and with it all the old family documents stored in it for decades. This possibility intrigued the patient, but also scared him. How would he decipher those documents, in a language he only barely reads? Would he have the energy?

In my subsequent interpretation, I referred to a recent trip my patient made to Europe, in which he discovered his grandfather's grave, and other milestones in his family's history. Father declined his invitation to join him (he has consistently avoided visiting his native land again) but was helpful in planning the trip. I pointed out that irrespective of how much more energy he will invest, the analysand already built a bridge to the family past, a bridge that was also constructed on his father's behalf, although the father was unable to erect it on his own.

There were many additional associations later on (the issue of soldiers who die in battle, and of the patient's own traumatic military experience, came up in the very next session), but I feel I have said enough to introduce my point.

When writing now about that moving session, it becomes clear to me there were two additional levels to our dialogue, which were not spelled out by either of us, but I believe were on our minds.

On one level, while our fathers indeed responded very differently to the rupture in their lives caused by the Nazi regime and by their immigration from Europe, the two of us responded similarly vis-à-vis our fathers: my letter to the editor, and my analysand's trip to Europe (or contemplated reading of the documents in the secrétaire) were acts of filial loyalty, of seeking links, of trying to restore the rupture and to create intergenerational continuity.

The second level, which has been actually spelled out on other occasions, is the nature of our own transference-countertransference relationship, and the way it differs from the patient's relationship with his father. While his father emphasized that the ballot was secret, my 'ballot' was never secret to the analysand. My left-wing views are well known in Israel, and so are my critical opinions about psychology, psychoanalysis, training and related topics. I often write or lecture about political issues, both of the national and the professional variety. (I will quote some of these papers later on.)

Moreover, with this particular analysand-colleague (Berman, 1995a), our superficial acquaintance started years before analysis was ever contemplated, and one of our first contacts was in the context of an initiative to organize a conference on the psychological aspects of the Israeli–Arab conflict. He actually chose me as an analyst, to some extent, on the basis of this known affinity. And in the particular session I described, I chose to answer in a brief, factual manner his question about my father, maybe on the basis of an intuitive feeling that my willingness would serve the intrinsic goals of analysis (goals such as free association, open exploration, direct emotional expression) better than silence, or a stereotypical 'turning the question back'.

Some of the questions this material brings up are universal, and I will return to them later on, in the context of discussing relational and intersubjective models in psychoanalysis, and their implications for issues of anonymity, abstinence, self disclosure and so on.

At the same time, I believe the session described is a very Israeli session, because the issues it raises – issues of the Holocaust, of immigration, of rupture, of intergenerational transmission, of war and peace, of political activism – are central

preoccupations of Israeli culture, typical of a society in which history and politics have visibly effected the lives of so many individuals, and in which analytic and therapeutic involvement often activates questions of national, ethnic, religious and ideological identity.

We cannot understand our patients, I suggest, if we are not attentive to the way history and politics shape their destiny, in subtle and complex interaction with intrapsychic factors. We cannot understand ourselves without similar self-scrutiny, and this has implications for countertransference, and for being clinically effective. Does such insight about the social roots of individual experience lead to a broader social understanding? And can such understanding lead to effective influence on political processes?

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Political and historical reality, including the Israeli–Arab conflict, forms an omnipresent layer in the mind of any Israeli. Doing apolitical, ahistorical analysis in such a society implies a degree of denial.

Naturally, the particular form and intensity in which this ‘external’ reality is represented differ enormously from individual to individual. I consider it a trademark of the psychoanalytic approach that it rejects generalizations, and is attuned to the minute nuances of individual uniqueness. Overinclusive statements, be they about post-traumatic stress disorder (PTSD) or about ‘second generation’ Holocaust influences, are out of place in psychoanalytic discourse.

I do not share the opinion that psychoanalysis deals exclusively with inner psychic reality. On the contrary. Freud paid attention all along to the impact of ‘civilization and its discontents’, and his

theories often gave rise to ideas about potential social change (Berman, 1993).

In my view, ‘[t]he capacity to explore “external” reality undefensively may be conceived as facilitating a greater acceptance of psychic reality, rather than as competing with, and taking away from, the importance of psychic reality’ (Berman, 1995a). I fully agree with Winnicott (1975 [1945], 153) when he states: ‘fantasy is only tolerable at full blast when objective reality is appreciated well’. In discussing Winnicott’s notion of transitional space, which is for me a central attribute of the analytic process, Phillips (1988, 119) suggests: ‘Transitional space breaks down when either inner or outer reality begins to dominate the scene, just as conversation stops if one of the participants takes over.’

The history of psychoanalysis in Israel (starting before the state of Israel was established; Rolnik, 1999) is characterized by two opposing trends: strong attention to the unique characteristics of the evolving new society, at times culminating in mobilizing psychoanalysis for societal goals while sacrificing some of its radical, critical nature; and at the other extreme, an attempt to keep its universal intrapsychic purity, at the risk of turning a deaf ear to the historical and social context.

The first trend appears more dominant from the 1920s to the 1950s, and is expressed for example in the idealistic (but at times naive) involvement of psychoanalysts in moulding educational systems, in the kibbutz movement and elsewhere, in the Bernfeld tradition (Berman, 1988a).

The second trend is more dominant in recent decades, as part of the shift of Israeli society in general away from idealistic pioneering concerns, an aspect of the wish for ‘normalization’. Most Israeli analysts, and many of the more experienced clinical psychologists and psychotherapists, work

nowadays mostly in private practice, and avoid involvement in the deteriorating mental health system (Berman, 1997a, 1998a) or in the problem-ridden school system. Still, they are often forced to realize that private patients, even if they are relatively affluent, are social creatures too, and are not exempt from the influence of historical and political forces.

This growing (though conflictual) realization accounts, I believe, for the repeated attempts of Israeli analysts and therapists to express their political concerns; but the conflicts aroused, and possibly the introverted style of many analysts, their greater comfort in the privacy of their consulting rooms and embarrassment about exposure, may account for a certain instability and discontinuity in these attempts.

Overall, the distribution of political opinions among Israeli analysts, therapists, clinical psychologists and so forth is quite consistent. Over 90% identify with secular, democratic, socialist or liberal values; with the wish to achieve an Israeli-Arab accommodation, including a territorial compromise, and in recent years with the goal of establishing a viable Palestinian state, side by side with Israel. Less than 10% side with the right wing, with nationalistic and anti-Arab sentiments, or with the wish to transform Israel into a theocratic state. Mental health professionals who are orthodox usually identify with moderate religious groups, and the few who live in settlements in the West Bank usually support the more pragmatic and compromise-seeking line among the settlers. Several of the latter are active in an organization ‘Besod Siach’ (literally translated as ‘in the secrecy of discourse’), which seeks dialogue with colleagues on the left, in spite of ideological disputes.

When – as a notable exception – an extreme right wing psychologist, Neta Dor-

Shav, published a hostile pseudo-diagnostic character assassination of Itzhak Rabin (a prelude to his actual assassination later on), her article aroused enormous anger among most psychologists. The widespread rejection of the paper as unethical, was combined for many with a dismissal of Dor-Shav’s fanatical political agenda as well (Berman, 1996a).

This distribution, let me add parenthetically, while radically different from that in the general population (which has usually been closer to 50:50), is characteristic of most Israeli professional groups with higher education in the humanities and the social sciences. Tempting as it may be, it need not be necessarily interpreted as a unique outcome of psychological knowledge or of psychoanalytic values, although these may have some contribution.

But should these views be expressed and, if so, how? Can our psychological insights contribute to political understanding, even to political influence? The dilemmas of Israeli analysts and therapists in expressing their political thought can be traced through a long sequence of events. Let me list a few of them chronologically. To some extent, this is also a history of my own personal odyssey in this terrain.

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When Israeli analysts, together with American colleagues (and at the latter’s initiative), met in the 1960s to discuss the psychological bases of war, their concerns were great. ‘At first the Israelis demurred, feeling their views about war were suspect because they themselves are involved in one’ (Ostow, in Winnik et al., 1973, 9); ‘could we be purely objective and our thinking abstract enough, no matter how hard we tried?’ (Bental, in Winnik et al., 1973, 17). Eventually the discussions took

place and a book was published, but the attempt to keep the exploration apolitical is evident throughout.

Before the elections in 1981 a group of psychologists considered issuing a public statement about Prime Minister Begin's shaky mental condition. Others, including myself, objected on ethical grounds; and the compromise was to issue instead a statement about the manipulative propaganda of Begin's party, the Likud, which we all feared would lead us towards another war. Although today we have an even clearer impression that Begin was probably manic-depressive, I am still glad we avoided this particular form of political involvement, which may shift attention from substantial political matters to personality traits of leaders, using amateur diagnosis of non-patients as a political weapon. Years later, when several of us made complaints to the ethics committee about Dor-Shav's public diagnosis of Rabin as 'borderline', we could do so with a clear conscience.

Even that petition, dealing with issues of principle (psychological manipulation by politicians), came under attack from within the profession. You should express your political views as citizens, and not tie them to your professional identity, we were told. Rebutting this criticism, we argued that as psychologists we have unique expertise, which is relevant to interpreting political processes as well, and can be legitimately used.

In 1982, several psychologists planned a conference about the impact of the occupation of the Palestinian territories on individuals and society in Israel. It was cancelled due to the war that indeed erupted in Lebanon. Although fruitless, this initiative is noteworthy due to its timing: long before the first Intifada, when the destructive significance of the occupation was generally denied by Israelis. Later on,

an organization of 'psychologists for social responsibility' was established, emphasizing educational goals, supporting democracy and condemning racism; it was active only for a brief period. Another initiative in the 1980s was a public call of numerous psychoanalysts supporting the suggestion for an international conference on the Israeli-Arab conflict (an idea that eventually materialized in Madrid). I should also mention the pioneering theoretical attempt by Moses to clarify the emotional dynamics of the Israeli-Arab conflict, through the notion of the group self and its pathology (Moses, 1982).

The heavy emotional impact of the Lebanon war led me to present, in 1985, a paper entitled 'From war to war: cumulative trauma', at a conference of the Israel Association for Psychotherapy. The Mental Health Division of the Israeli Army (in which I was involved at the time, as my reserve duty) did not allow me to use the painful data and case material regarding severe battle reactions of soldiers, so I had to present a fictionalized version. I spoke of three soldiers: Abraham, who went through traumatic experiences in the 1967 and 1973 wars, suppressed his panic and nightmares, and collapsed in 1982 when his past undiagnosed reactions were reactivated; Isaac, who went through parallel traumata but was never diagnosed, and his agony was only discovered when interviewed as part of a control group in a PTSD study; and Jacob, who was seemingly unharmed, but became cynical and emotionally aloof. (I was asked later on whether I deliberately chose the names of the patriarchs. I did not. Consciously, at least, I looked for a Hebrew equivalent of 'Tom, Dick and Harry'.)

Later on in that paper I raised the issue of defence mechanisms developed by Israeli mental health professionals, which lead to a conspiracy of silence regarding the impact

of cumulative war trauma – on soldiers, on their spouses, on their children – in shaping psychopathological aspects in the lives of many Israeli patients. An awareness of this growing price could create moral dilemmas for Israeli psychotherapists, threatening their attempt to remain politically neutral on issues of war and peace.

Similar defence mechanisms, I suspect, made it very difficult to publish that paper itself. It was censored (almost mutilated) when reluctantly published in the bulletin of the Israel Psychological Association, and only when *Sihot: Israel Journal of Psychotherapy* was started did I manage to have a full version published (Berman, 1987). My views were then criticized by one of the editors, who suggested that I disregard the main source of trauma: ‘Our inability to give the traumatic experience of prolonged war a clear, coherent and optimistic meaning’ (Shalev and Berman, 1988, 147). In my counter-rebuttal I expressed the concern, that the belief – on both sides of a national conflict – in the clear and coherent meaning of wars, and the illusory optimism as to their outcome, prolong wars; maybe only a pessimistic view of wars’ meaninglessness could push enemies to seek compromise? (Shaler and Berman, 1988, 148).

Sihot also published an intriguing series of papers about the history of battle reactions in Israel, their initial denial and the phases in their treatment (Witztum et al., 1989–91); as well as empirical studies on PTSD in Israeli soldiers (for example, Solomon et al., 1987). Nevertheless, to my mind, the silence about the broader social implications of these issues is still persistent.

The next meaningful milestone in our chronology is 1988. With the outburst of the first Intifada, the denial of the destructive impact of a continued occupation of Pales-

tinian territories broke down (Berman, 1988b). A group of Israeli mental health workers visited Gaza, meeting with local colleagues, and I recall this visit as particularly meaningful in making Palestinian needs and concerns much more vivid and clear to us.

Two petitions of mental health workers about the psychological price of occupation appeared in the press, and they soon gave rise to the foundation of Imut (Verification) ‘Mental Health Workers for the Advancement of Peace’. This organization had, at its peak, hundreds of active members. It organized several successful conferences, on topics such as ‘the psychology of occupation’, ‘psychological obstacles to peace’, ‘nationality, nationalism and chauvinism’ and ‘imagining peace’. It established ties with Palestinian mental health workers, participated in joint conferences in various countries, and initiated fruitful educational programs (Gampel and Sarraj, 1999).

In one of the ‘Imut’ conferences I presented a paper which aroused stormy reactions, this time from the left. While rejecting once more the sterility of ‘reclusive psychology’, I suggested that some of the political discourse of psychologists runs the risk of becoming a ‘mobilized psychology’ namely, of seeking psychological rationales for preconceived ideological conclusions. This I contrasted with ‘involved psychology’, where the psychological (and specifically, psychoanalytic) tools are utilized creatively to re-think political reality, and contribute to fresh insights.

Such re-examination, I suggested, should be directed towards the Israeli left itself, towards the Israeli peace movement. (The equation of the two terms is inexact, but I will follow here this Israeli habit.) One factor in its failure in the 1980s, I suggested,

was its rationalistic attitude, its advocacy of principled solutions, while disregarding or even condemning as 'irrational' the emotional obstacles to their acceptance (the deep-rooted national identifications on both sides, the annihilation anxieties of many Israelis, and so on). Greater empathy with the emotional experience of the individuals involved in the conflict, rather than a hostile labelling of their motives, can pave the way to detoxifying hostility and fear more effectively by a new leadership (Berman, 1989).

I am not sure myself why the activity of Imut eventually declined. Was it a result of personal burnout, which made several leaders step down? Was it an expression of the growing depressive pessimism in the Israeli peace movement? Was it a reaction to complications in the collaboration with Palestinians? Was it a retreat by psychologists to their familiar introverted style? Possibly a combination of all these and other factors. By 2002 we witness new initiatives in the same direction.

The first Intifada aroused heated debates in the Israeli army, about the impact of military service in the occupied territories on the soldiers. I participated in one meeting, which was visibly divided. Most practising mental health officers present described severe post-traumatic stress reactions of soldiers after they participated in violent clashes with demonstrators, shot demonstrators or harshly beat them up, and conducted brutal searches in Palestinian homes. Many of their descriptions indicated intense experiences of anxiety, conflict and guilt. In contrast, their superior officers, heads of psychiatry and behavioural sciences in the army, made many efforts to trivialize these accounts, dismiss them or rationalize them away, and kept warning of risky political influences. (The army prevented empirical PTSD research during the Intifada, after it was legitimized during the Lebanon war.)

Only those of us who came from outside the army, and participated in the discussion as consultants, kept encouraging the field officers to describe their experiences openly, and not to allow them to be silenced.

The traumatic experiences of soldiers fighting against a civilian population were explored in a documentary film, *Testimonies*, in which the soldiers were interviewed by a clinical psychologist in psychoanalytic training. The emotional impact of the violent attempts to suppress the Intifada, (in addition, of course, to the emotional impact on Palestinian victims of violence, an important topic in itself), and its contribution to violence in Israeli society in general, is still an open issue. Such possible influences came up in a number of murder trials in recent years.

Bar-On (1999) asks: 'Was there emotional injury to the soldiers? How does Intifada injury (moral trauma) differ from usual battle reactions (mental trauma)? How can it be treated? Why is it difficult to diagnose in a situation of social conflict, when its recognition has political significance too?' (p. 174). Bar-On suggests that the free exploration of these silenced questions may become possible only when peace with the Palestinians progresses, and gains broader public support.

Let me mention a few other turning points when political events captured the attention of Israeli analysts and therapists. One was the Gulf War of 1991, when Israeli cities were attacked by Iraqi missiles; many families left their city homes and moved to the countryside; and citizens were ordered to wear gas masks and enter impermeable rooms when a siren sounds (what does one do if it's the middle of a session, analysts and therapists debated; what happens to boundaries?).

An analytic issue I recall as characteristic of that period was an analyst's

anger at me for moving with my family out of Tel Aviv (I came by train to see the patients who could continue, but had to change their hours). We gradually came to understand her anger at me in the context of her mother's Holocaust experiences: the mother's father and older brothers escaped from the Ghetto, leaving her mother behind.

A special meeting of the Israel Psychoanalytic Society was dedicated to discussing the implications of these unusual situations for the practice of analysis; one analyst described the reactions of patients to the destruction of her home and office by a missile.

Sihot urgently published a special issue, with 15 brief papers on these dilemmas. In my own contribution, 'So far only questions', I asked:

How can we still be attentive to subtle nuances, when the exploding missiles are so noisy? Can we give full credit to the massive influence of this external reality, and at the same time keep the door open to the expression of inner reality? How can we take into account the collective experience we all undergo, and yet notice its completely individual translations, avoid projecting our own interpretations on our patients, and help them reject the banal standardization of experience offered by the mass media? (Berman, 1991; see also Keinan-Kon, 1998)

The election of Itzhak Rabin as Prime Minister, and the Oslo process initiated by the new government, introduced greater optimism into the Israeli peace movement, including the mental health professionals involved in it. Personally, I felt that Rabin offered the kind of leadership I hoped for a few years before; namely, a leadership which is experienced by many people as close enough to their national identifications, to their resentments and fears, as to allow it the power of detoxifying the darker,

more paranoid and violent expressions of these fears and angry affects, transforming them into more pragmatic concerns. His military background was helpful in this respect. When Rabin said his stomach aches when he shakes Arafat's hand, this made the handshake more acceptable to many Israelis, who until then saw the PLO as a demonic arch enemy, and would have rejected a more enthusiastic handshake.

Still, this effectiveness was far from complete, and the presence of a vocal minority fighting the budding peace process tooth and nail culminated in Rabin's assassination, at the end of a moving mass rally celebrating the growing Palestinian-Israeli understanding.

In an editorial in *Sihot*, a few days after the assassination, I said:

It is no coincidence that psychotherapy has developed in a democratic, pluralistic culture. Many of its basic assumptions are close to those of democracy: the complex and paradoxical nature of human reality, which cannot be explained by an overriding single principle; the uniqueness of the experience of different individuals and different groups, which precludes the possibility of absolute truth; the power of words and verbal communication in clarifying reality and solving conflicts; the value of free choice, and the difficulty in making it possible; the importance of attempting 'to step into the other's shoes' and taking his needs into account; the effort to avoid black-and-white thinking, drastic polarizations of good and evil, and paranoid perceptions demonizing the other, individually or collectively.

The assassination, I suggested, proved that there are groups in Israeli society that reject these values completely. Psychotherapists cannot be indifferent to such trends, which threaten the foundations of their work; but they must struggle against them thoughtfully, within ethical boundaries and within a democratic structure (Berman, 1995b).

Many of my patients cried in the sessions following the assassination, and could barely return to discussing their private lives. Some analysts chose to sit up, needing face-to-face contact. I tried to seek with all of them the links between the joint trauma and its personal echoes, but I made no attempt to hide my own turmoil.

Our insight into the psychological impact of the political situation is limited by the fact that there are no Arab analysts in Israel, no Arab analysts, and Arabs are underrepresented among clinical psychologists and psychotherapists. A committee sponsored by Imut tried to explore this situation, and offer remedies, a few years ago, with little success. I recall discussing this issue with a highly talented Arab undergraduate psychology student, who told me he will pursue graduate studies in another discipline, because clinical psychology may remove him too far from the values and interests of his milieu. As there are few Arab therapists and few Arab patients in psychotherapy, there is barely any Israeli literature on issues of nationality in transference and countertransference.

In a recent attempt to arouse interest in the political implications of psychology, Dan Bar-On (1999) raises the question: Why is there no 'new Israeli psychology'? Using the example of the Israeli 'new historians', who rebelled in recent years against the traditional Zionist narrative, offering new interpretations of the Israeli-Arab conflict, Bar-On expresses his disappointment with the meagre contribution of Israeli psychologists to the evolving critical discourse regarding our society and its ideological foundations. He explains this, in part, by pointing out there is no 'old psychology' either; namely, that unlike history or sociology, which a few decades ago were intensely mobilized to support the Zionist ethos, Israeli psychology tended

from the start to be individualistic and universalistic.

One of the issues Bar-On hopes a future Israeli 'new psychology' could deal with is the acknowledgement of a unique Palestinian voice, substantially different from our own collective voice. Both Palestinian children and Israeli children (many of the soldiers who were sent to suppress the Intifada were 18 or 19) paid a heavy price for our inability to change our social perceptions, of ourselves and of the other (Bar-On, 1999, 174).

The further political upheavals of recent years in the Israeli-Palestinian arena again left their mark on our lives, including on analytic work. The basic tensions of Israeli society, as well as the fundamental difficulties at the core of the Israeli-Arab conflict (including its psychological aspects, such as mutual fear and rage, feelings of victimization and entitlement) have again intensified in 2000–2, and will certainly take many decades to resolve.

* * * * *

In conclusion, let me return to a broader perspective on these issues.

First, I feel it is quite clear that attention to historical, social and political processes can help Israeli analysts and therapists better to understand their own lives, the lives of their patients, and the juncture in which they and their patients meet, namely the transference relationship in its broadest sense.

Second, I feel that, as concerned citizens, as professional experts, and as critical intellectuals, Israeli analysts often find themselves forced to form and express an opinion about central political issues, which have a major impact on the emotional life and emotional wellbeing of many Israelis. Not to do so would be morally reprehensible.

How does such a political involvement of analysts influence their clinical work?

From the point of view of classical theory of technique, such exposure is clearly disastrous. The blank screen is soiled, and can no longer serve as a background for the analysand's projections. Anonymity and neutrality are compromised and the analyst becomes present as an actual person, disturbing the development of transference.

This view probably contributed to the determination of past analysts to keep their political views hidden, even to the point of not taking for several years a public position against the Nazi movement, and condemning and expelling Wilhelm Reich when he did (Sharaf, 1983).

The earliest critique of the classical position was offered by Ferenczi (1980 [1932]), who suggested that the patient often perceives the analyst's emotional reactions despite the attempt to maintain anonymity; and that the analyst's denial of such perceptions, while interpreting them as displacements or projections, may become 'professional hypocrisy', mystifying and retraumatizing the patient (Berman, 1996).

Paraphrasing Ferenczi, I would suggest that withholding the analyst's political views and reactions, in a society which experiences political issues with great intensity (especially at times of crisis, war, crucial elections, and so forth), may also be experienced by some patients as professional hypocrisy and become destructive for the analytic process.

The growing trend towards relational and intersubjective reformulations of psychoanalysis (Berman, 1997b) supplies us with a new framework for these issues. If we take the personal and subjective nature of the analyst's presence for granted, the political aspects of this presence are not necessarily disruptive. If we come to suspect that 'anonymity for the analyst is impossible',

because 'every intervention hides some things about the analyst and reveals others . . . [and] any way an analyst decides to deal with his or her emotional response is consequential' (Renik, 1995, 468), the anxiety and need to be constantly on guard are reduced. A conception that assumes that transference is constantly influenced by countertransference, and self-disclosures and enactments naturally happen in most sessions, implies that what is crucial is not the avoidance of contamination (the image of the sterile test tube, which Freud imported from the natural sciences), but the free exploration of this unavoidable reciprocal influence, and its utilization for the development of insight and of a deeper and richer analytic relationship.

When an analysand of mine became saddened (back in 1981) by my public statement against Begin's propaganda, this proved a fruitful starting point for exploration, which unearthed his deep transference feelings towards Begin as a father figure. He could have guessed my views about Begin to begin with (they were shared by most analysts and therapists) but as long as I did not express them the issue remained dormant. Similarly, my open positions on various controversial issues in Israeli psychoanalysis (Berman, 1998b) allowed my analysands who were analytic trainees to voice their reactions, both approving and disapproving, and join in exploring their deeper implications, more, I believe, than would have been possible had I attempted to hide them.

A lot, I believe, depends on the atmosphere. '[A]n analyst who regards his or her own constructions of reality as no more than personal views to be offered for a patient's consideration has no reason to avoid stating them explicitly' (Renik, 1995, 478). In this respect, what is destructive is authoritarian certainty, whether in interpreting the

patient's unconscious or in interpreting the political situation. If the analyst is not experienced as an omniscient authority, if discourse is free and flowing, a transitional space can evolve, both external and internal reality – and their frequent interaction – may be noticed and contemplated and one can work fruitfully with the analysand's reactions and associations.

Certainly, there can be painful moments in such a process. A realization that one's analyst is 'on the other side of the barricade' can be upsetting (just as being together 'on the same side of the barricade' may lead to defensive solidarity that whitewashes other areas of conflict). But this may happen with personal issues as well, such as when a vocational or romantic choice the analysand is excited about is interpreted by the analyst as destructive. (In my experience, analysands notice very fast the analyst's disapproval, even if expressed through a supposedly 'purely intrapsychic' interpretation.) A lot depends on the analyst's tact, on her or his ability to maintain empathic listening despite different opinions, without putting down or dismissing the analysand's views, without hurting the analysand's feelings.

The last major issue I want to discuss is the nature of analysts' and therapists' contribution to political discourse. As I mentioned earlier on, this contribution may be at times shallow and limited, when psychological concepts are used in the service of preconceived political opinions. Whether one offers psychiatric diagnoses to a resented leader, or derogatory generalized interpretations about resented political groups ('the right wing is prone to projection and splitting', as if such trends never appeared in left-wing movements), these uses of psychology are barren intellectually. Being visibly manipulative, they lack credibility, and may easily backfire.

The kind of involvement I believe we should strive for is based on using our expertise in listening for a fresh examination of political reality. To give one example, I would suggest that a major weaknesses of many peace movements is their pacifism; namely, their utopian tendency to deny group loyalties and aggression as basic human realities, and to appeal to an idealized peace-loving humanity free of any dividing forces (Berman, 1993). Such idealizations, based on a narrative of progress ('from national or religious loyalties towards internationalism'), which postmodern thinking has exposed for its wishful thinking, may become an obstacle to realistic peace-making, which in my mind necessitates full awareness of the power of national, ethnic and religious belonging, and of the universal tendencies to fear and distrust the other.

For me, fighting chauvinism is aided by fully understanding its emotional dynamics; and only empathy towards national sentiments can facilitate their detoxification from destructive hostilities so that pragmatic compromises can be reached. This is parallel, to some extent, to the way an analyst can absorb toxic projective identifications and return them to the analysand in a detoxified version, a process Bion and Ogden describe as crucial for achieving change.

A rationalistic, condescending or judgmental attitude, rejecting common human affects as base, primitive and 'irrational', does not allow such healing processes to evolve. Empathic listening, even to a violent patient, may eventually calm down the violence more than moral condemnation.

Listening empathically to the individuals on both sides of a bloody dispute does not imply agreeing with their opinions, which may be extreme and rigid, especially when

historical rights are at issue, and each side has an experience of victimization based on a frightful memory of past atrocities. It implies, however, a realization that unless the yearnings and anxieties on both sides are not sufficiently attended to, no lasting peace is possible. Analysts are equipped to offer a model of such patient and insightful listening.

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In the long run, I personally conclude, social responsibility, leading to an attempt to contribute to the understanding and resolution of crucial political issues, and the responsibility to help a particular individual in need of treatment, while they may be in tension and at some moments in conflict, do not necessarily exclude each other.

The analyst's political involvement, if it is thoughtful and non-manipulative, and if it is expressed in non-authoritarian terms and remains open for candid critical discussion, can become a stimulus for fruitful intersubjective analytic exploration with each analysand. A straightforward and serious political involvement of analysts may then acquire a positive significance, of broad-minded innovative thinking about our historical destiny, both collective and individual; of willingness to take risks, and step out of one's self-centred interests and concerns.

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