

(M)Other Re-spect: Maternal Subjectivity, the *Ready-made mother-monster* and The Ethics of Respecting.

Bracha L. Ettinger

"Our mothers always remain the strangest, craziest people we've ever met."

Marguerite Duras

Maternal subjectivity, which contains pre-Oedipal and post-Oedipal positions, is also a carrier and transmitter of feminine-matrixial connectivity that is charged by – and charges – specific modalities of affected encounter-eventing and makes their effects specific. Maternal subjectivity works inside the subject by inspiration. As a way of beginning I would like to make two points that will carry us through this paper. Here is the first point: The infant meets the maternal subject via its own *primary affective compassion*. I view the effect of primary compassion as a primal psychic access to the other. It arises before, after and also alongside abjection. Being primal, it is not a reaction but an arousal and, like anxiety, a signal. Compassion signals contact and connection, yet it is not reactive. Contacting yet not being reactive – here is a psychic potential for subjective freedom. *Primary affective awe* arises too during being-with and becoming-with. When the affections of awe and compassion arise in an encounter they counterbalance abjection. They counterbalance early forms of fear-shame and fear-guilt charged with anger. In their more elaborated forms, they contribute to the transformation of fear-shame and fear-guilt into mature non-reactive forms – ethical shame and ethical guilt, and also, they directly effectuate forces of freedom and resistance. Here is the second point: Respecting the parental figures of the patient is a major part of the holding that must be offered by any kind of therapy. This respecting, transmitted by inspiration too, doesn't have to wait for forgiveness to arise; respect has its own originary sources. Holding (the patient) by respecting (their human surrounding, past and present, and the maternal and paternal subjectivities in particular) all along — this is the holding atmosphere inside which forgiveness will grow in the process of healing.

Feminine-matrixial encounter-eventing means differentiating and differentiating in re-encountering an-other, a non-I, or few other non-I(s), in a duration of *pregnance*. The coemergence of two or few I(s) and non-I(s) over time stands for transsubjectivity and transjectivity, which are not endless multiplicity or endless transgressivity or endless fragmentation. After birth, as a continuity from the prenatal human stage, the transjective potentiality enters and informs the first post-natal affective arousals. Allowing ourselves to think about the prebirth stage and position in each human subjective beginning is allowing ourselves to consider singular transjectivity before and alongside subjectivity, and realise the impact of the transjective on the subjective sphere. The knowledge and recognition of limited transmissivity – limited by each singular affective encounter-eventing – gives us ethical tools for resisting the endless transjectivity that traverses us, as well as for resisting our own sole narcissistic subjectivity. The feminine-matrixial subjectivising mode (in males and in females) resists both the narcissistic self and the forces of endless fragmentation and endless transgressivity. Awareness of the conjunction of maternal-matrixiality with primal human compassion and awe is the potential site of human resistance and freedom. In that sense, encounter-eventing is not about emergence in intersubjective relations, or in object-relations, but about another subjectivising stratum in which transgressivity and subjective positions are not in contradiction. Transgression and connectivity are not without limits here, because they rely on the affective access of the I to the non-I and to specific time-space-duration constellations of the I and its strangers. By these accesses, the other becomes specific and cared for. Partial transgressivity in the subject is enabled and bounded as long as the subject fragilises itself to allow an encounter of the feminine-matrixial kind. This feminine-matrixiality resists the global web and offers resistance in non-reactive self-fragilisation. On the ethical level, *in self-fragilisation the I contacts the vulnerability in the other, neighbour and stranger* all throughout life. *In my view, at the aesthetical level, primary compassion suffused with fascinace (Ettinger, 2006a) is a precursor to the capacity for experiencing Beauty, and primary awe suffused with fascinace is a precursor for experiencing the Sublime.* The psychoanalytical attitude of empathy (to the patient) with compassion (toward the patient's archaic figures) and empathy (to the patient) with respect (toward the patient's

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archaic figures) contributes to the passage to these ethical and these aesthetical potentialities (in the patient).

What we might call the "positive" experiencing of the maternal-matrixial is usually absorbed by the psyche of the I: its traces are inscribed unremembered, but they have nourished, and they continue to nourish, the I all throughout life. The "negative" experiencing (pains, whatever their sources are, that are accompanied by anger and fear) is the forever potentially remembered, that which is waiting to be attributed a memory, real or phantasmatic, that is looking for formulation, because it is formed as a disturbance to the fluidity of nourishment and well-being. For reasons of this delicate imbalance, and also because of the delicate transsubjective and transjective tissue in the subject, the therapist or the analyst must mix their *reverie* (Bion, 1962) with an active intentionality to keep an access opened to the maternal and also the paternal and to other archaic figures (not as the maternal or paternal projected within him/herself or revealed in/by him/herself) – to keep an access opened to the patient's originary matrixial web, i.e., to the co-affected non-I(s) of the patient, by an attitude of reverence, by keeping an attitude of respect and compassion toward them *while* accessing the patient with respect and with empathy. Empathy-within-compassion and empathy-within-respect are different from empathy per-se. The compassion and respect toward the intimate non-I(s) (the archaic figures that are also sometimes still participant agents in the scene of present reality) unconsciously nourishes the transsubjective dimension of the individual subject and revives their primary compassion and awe. Empathy-within-compassion and within-respect works against the tendency to split and project aggression (one's own revengeful thought) on others and counterbalances jealousy and revenge. The failure in primary compassion and awe leaves the subject – the infant to begin with – at the mercy of paranoid-schizoid mechanisms. The psychoanalytical phantasy to find the ultimate cause of human suffering by empathy toward the subject without compassion (toward its early environment) leads to increasing failures in the subject's primary compassion and awe – a failure which is a royal road, in my view, to splitting (Klein, 1946) and to the fall into the 'basic fault' (Balint, 1968). This same phantasy shapes the endless figures I have named *ready-made mother-monster* (Ettinger, 2006b), offered in different modes by the therapist, as the necessary cause of suffering, under a hidden assumption of the possibility of an idealised

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childhood. Systematic empathy (to the other – the patient) without compassion and respect (to the other's others) – coupled with systematic offering of the ready-made mother-monster (as an automatic cause of suffering) that gives rise to mother-hate – leads to a fixation in a 'basic fault' positioning while delegitimising and dehumanising maternal subjectivity. Attacks on the archaic non-I(s) due to empathy without compassion and without respect to the patient's non-I(s), and over-identification with the narcissistic self of the infant-I within the adult-I, which limits the I's respect and compassion toward its own non-I(s) (limits the capacity to hold the non-I(s) – the figures that the patient relates to: father, mother and other significant others – with caring intention and respectful attention) doesn't only produce mother-hate and father-hate but also breaks the fragile tissue of trust, awe and compassion that can balance rage and anger, envy and jealousy as well as a revengeful spite. Empathy-without-compassion and empathy-without-respect produce an attack on various aesthetical and ethical potentialities of the subject itself – an attack on the potentiality to transform traces of trauma and pain into beauty, an attack on the passage from proto-ethical awe and compassion into the ethical position of respecting, and an attack on spontaneous self-healing, an attack on the restoration of basic trust. 'I believe that always, or almost always, in all childhood and in all the lives that follow them, the mother represents madness. Our mothers always remain the strangest, craziest people we've ever met', said Marguerite Duras. Therapeutic interpretations that pathologise this experience shape the ways in which our mothers remain the craziest people we've ever met. Interpretations made by the analyst/therapist that are empathic with the 'ready-made mother-monster' (without compassion to the maternal figure) and which locate a 'cause' of our sufferings (the 'unconsciously poisonous mother', the 'intoxicating mother', the never 'good-enough mother', the always 'over-controlling' mother, the always 'constantly abandoning' mother) turn this important, painful and vital conscious and unconscious real-phantasmatic experience into a symbolic 'truth-cause' and turns the intimate mother to whom we are transconnected (whether we like it or not) into the craziest of all figures. But the infant, in each of us, doesn't expect that another adult (father, analyst, therapist) will confirm our intimate infant conviction in a way that will turn it into an objective 'truth' by which our mother is judged. On the contrary, the subject looks for ways to transform this idea, as it emerges again and again, and will always emerge, into a creative

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move. The subject seeks signs, in herself and in the other (the therapist), that her primary compassion (as well as the other's) will overcome contempt and anger. Delegitimising and dehumanising the originary figures harms one's own aesthetical and ethical capacities and postpones the emergence into one's own maternal (and paternal) positioning. When a therapist/analyst finds him/herself in a parental position they must be aware of their own becoming-among-others, in besidness to other figures. Respecting those others, and not attempting to replace them, is a sign of this awareness. Respecting testifies that a passage from the proto-ethical to ethicality has taken place. An ethical seduction into life can occur in psychoanalysis in a matrixial counter-transferential atmosphere in which the therapist respects the others ((m)Others) of the other (patient), no matter what, while still in empathy toward the other (patient) in search for herself.

The matrixial same-sex connecting and differentiating strings need special care and attention in the psychoanalytical transferential process. The transsubjective processes by which the male infant ("son") differentiates himself from the male figures ("father") and the female infant ("daughter") differentiates herself from the female figures ("mother") – before and beyond gender identification – are very delicate. Lack of compassion and respect (of the analyst) toward the parental figures, especially figures of same-sex differentiation (of same sex as the patient) might perforate fatal holes in the matrixial web. When, on the other hand, the therapist keeps her compassionate and respectful attitude toward these figures, the patient can express anger more safely, knowing that their anger isn't going to destroy the matrixial web itself (as long as the therapist keeps the affective compassionate and respecting channels open toward the attacked figures). In other words, the patient can safely feel a splitting hate towards their parent for the period that such a feeling lasts, as long as the therapist doesn't over-identify with instants of hate by empathy-without-compassion and empathy-without respecting (empathy for the patient without compassion to the patient's parents, empathy for the patient without respect for the patient's parent). When the therapist doesn't over-identify with instants of hate, the splitting doesn't get fixated and a possibility to both express it, move from it to another supplementary feeling, and transform it, is offered. And because the non-I(s) are never entirely outside, and hating them is also partially hating oneself, at different points in time, when the therapist gets involved by way of empathy-without-compassion and

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empathy-without-respecting, there are more chances that hate toward the other's others will get fixated and transformed into revenge. Empathy (to the other, experienced by this other as I) without compassion and respect (for the non-I(s) of that I) hurts the potentials of the I for transforming the primary affective awe into ethical respect, for transforming the primary affective compassion into an ethical compassion, and thus for the evolvement from witnessing to wit(h)nessing and from wit(h)nessing to witnessing, and for the transformation of the primary affective fascinace and trust into singular aesthetical maturation and into ethical trust and a capacity for respect during self-fragilisation.

Com-passion is an originary joint event. It opens, by inspirational resonance, the originary human capacity for awe and compassion that will appear after birth in the contact with primal intimate and still yet anonymous (uncognised, known-without-cognition) figures of care. When awe and compassion are mixed with moments of fascinace rather than with moments of abjection, the aesthetical access to the other-stranger and to the Cosmos (each time in its specific revelation) by a mental state of spontaneous early reverence-reverie is enabled. This conjunction leads to respect rather than fear, and trust rather than paranoia and greedy gripping, in the passage from primary compassion and awe to ethical compassion and respect that embodies the potentiality for freedom-with-resistance. Due to the archaic subjectivising contact with the maternal-matrixial position already in the prematernal stage, primary accesses to the world by awe and compassion that open at birth balance early paranoid-schizophrenic accesses and early fusion. The state of reverence-reverie in fascinace, in the infant, like in the analyst, reveals a specific non-sexual kind of Eros. The potentiality to access the other and the Cosmos via awe and compassion persists and evolves during an entire lifetime. These affective accesses indeed fragilise the self and open the boundaries of the subject to transsubjective inspirations. It is however precisely the self-fragilising transsubject that can contact the vulnerability in the other without retraumatising the vulnerable other.

The transsubjective sphere accompanies the "individual" subjective sphere as well as the mutating multiple-"schizo" sphere, and we are rejoicing in it or suffering within it with awareness of it or without. Awareness of it, however, allows freedom and ethicality; the free choice to transcend the self while retracting oneself from endless transgressivity, and to move

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from the aesthetical and proto-ethical transensitivity to communicating, and from affective co-response-ability to ethical responsibility.

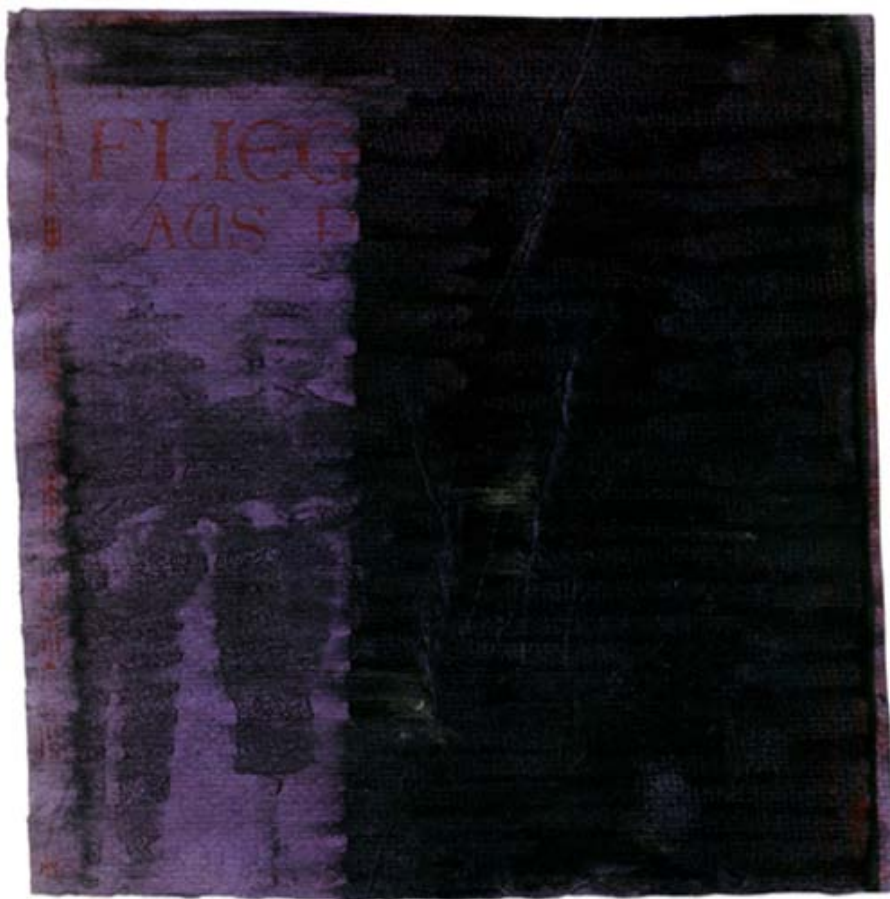
The time-space and duration of pregnancy is the originary matrixial coemergence, but a similar transubjective coemergence can also be awakened in each contact. While connecting, we are also transconnecting. The transferential analytical and therapeutical relations are *par excellence* such time-place-duration where coaffective jointness is in matrixial labouring. Any psychoanalysis that doesn't recognise these accesses via the maternal, and splits the maternal inside the transubject while rejecting one of its partners (by active mother/father blame, by non-respect), in empathy (toward the subject/patient) without compassion (toward its parental figures), channels the subject – deprived of its inside/outside transjects and split from its partial transubjectivity – toward sacrifice (of self or of other) in a paranoid aggression that functions in support of Death Drive. To remain in compassion toward the parental doesn't mean to ignore its contribution to pain. Also, it is important to acknowledge actual traumatic cases of parental abuse, parental over-dominance and real parental abandonment. Those must be recognised as such – but without splitting from the primary compassion and awe which will always remain the subject's basic assets. And it is crucial to differentiate the actual traumatic cases (of abandonment and of over-dominance, devouring) from the existential instances and existential anxieties of devouring, abandonment and not-enoughness. The prevailing primal mother-phantasies of over-devouring, abandonment and not-enoughness are necessary for survival: these are human early tools for organising the not-sufficient reality of living in the world and encountering other human beings and giving early “explanations” for existential anxieties; each subject will find themselves dealing with the overwhelming nature of experience by the use of such phantasies in different moments during life.

Psychoanalytical thinking continues to refer to sexuality and aggressivity as the major denied issues, and to the material associated with them as the repressed *par excellence* – materials for denial and repression. In my view, today (and following paradigmatic attitudes of empathy to the patients without compassion toward their non-I(s) – family, friends, and archaic parental figures that thus are positioned as objects for relation) the affects that are majorly denied, repressed and re-diverted (by therapists) are compassion, awe and fascinane.

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Thus, the respect (*of the patient toward their non-I(s)*) is refused. Moreover, apparitions of compassion, awe and fascinace (in the patients' attitude toward their surroundings and their archaic (m)Other) are consistently interpreted as reactive and defensive – not as authentic. These non-reactive signs of contacting, these *arousals*, are conceived as a reaction to maternal and paternal failures, to their neglect, sexuality or aggressivity. What I call *arousals* are conceived as anxieties. Thus, primary human channels to the Other are consistently perverted, a "cause" is attributed to them (the presumed unremembered parental failure in an unremembered time), even when they have no other cause, when they simply index encounter and signal the echoes of the Other and of the Cosmos with-in us in a primary recognition of the other and of difference itself without rejection. The denial of their status as signals that are different from anxiety goes hand in hand with the disrecognition of the *non-sexual seduction-into-life embedded in maternal subjectivity* and of its ethical value; its unique contribution for human ethics. Since compassion is primary, its re-evocation in the analytical processes and in other human situations is accompanied by some kind of affect which is close to anxiety but is different from anxiety; an arousal. This arousal signals at the same level as that of anxiety. What matters is therefore the way we contain this affective level and how we interpret what arises in it. If we blindly assume that each arousal is reactive and must have a "cause" in previous parental "failure", we assist in perverting its potentialities as an access to the other and to the Cosmos.

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Bracha L. Ettinger, *No Title — Sketch, n.8, 1988-1989*.
Charcoal, graphite and mixed media on paper, 23x23.5cm.

There are existential anxieties of Devouring and Abandonment, and an existential anguish of Not-enoughness. It is crucial to distinguish between the *existential* anxieties of Devouring and Abandonment on the one hand and the *narcissistic* anxieties of Devouring and Abandonment. It is also crucial to distinguish between the existential anguish of Not-enoughness and the narcissistic demand to abolish instances of Not-enoughness. It is also necessary to make the difference between those existential and narcissistic affects and real traumatic events (parental over-control, neglect or abuse). The Primal Mother-phantasies appear as responses to these existential anxieties and anguish, and they are human and prevailing responses to living. When these phantasies are taken for unremembered infant

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realities during a therapeutic attempt to resolve narcissistic anxieties, a distortion is introduced by the therapist to the flow between existential anxieties and primal phantasies, and instances of pathologisation rather than healing occur.

When the *primal mother-phantasy of abandonment* meets definitive traumatic parental abandonment in the real (like the death of a parent), a psychic catastrophe takes place. When the *primal mother-phantasy of devouring* meets accumulative controlling parental impingement, a psychic catastrophe occurs. The subject's emerging psyche cannot continue to use these phantasies as beneficial regulatory sense-giving mechanisms, and experiences of partial abandonment and of relative impingement become intolerable, dissociated and split, unavailable for a beneficial later regulation by an emerging maternal subjectivity in the future. (The psychoanalytical process must aim at restoring and securing their functioning as phantasmatic processes alongside the working-through of any real trauma.)

Any kind of unremembered early painful material may lead to the construction of the archaic mother as a cause of pain – this is a therapeutical ready-made "object" – a *ready-made mother-monster*. If her part in being a major subjective-object of early affective fascination, awe and compassion, and finally her active participation in the aesthetical and ethical (non-sexual) seduction into life, is re-repressed and diverted (toward the analyst) while splitting the maternal instance from the matrixial web, hate will result. Such a mother-hating is also, and more deeply, a self-hate, because the (m)Othernal non-I intended by it is not only another subject in inter-subjective relationality and is not even a mere internal object, but is – first of all, on the feminine-matrixial level – a transject that is transconnected to the I, and therefore, also, a psychic *continuity* of the subject itself (and of the non-I itself) in their transsubjective matrixial web. We could have called this mother trouble issue the daughter's betrayal, but every mother is also a daughter, and we are all, males and females, daughters in this sense, in the sense of being subjected to these mechanisms. The maternal figure, after birth, is not necessarily a female, of course. And the father is not necessarily a male. Only the prematernal figure of archaic pregnancy is always a female, and so, each one of us, male or female, has to deal with its difference-in-jointness with/from a female corpo-real figure. It is on that level of difference-jointness that we first encounter sexual difference, a difference that can't be abolished. The daughter's betrayal in us is assisted by the search for an imaginary cause for

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existential anxieties and anguish and for total understanding of unremembered past and for perfect parenthood that compensates for existential troubles arising from being alive. I would therefore rather say that psychoanalysis, that betrays the maternal by the attitude of empathy (towards the patient)-without-compassion and without-respect (toward archaic figures), betrays the human subject as such, the narcissistic infant in each of us, as well as the transsubjects that we are, since our subjectivity is pregnant with transitive traces and includes strings to the matrixial-maternal subject – meeting its inside from the inside, in the psychic borderspace in which the mother is not an object but a subject, a subsubject, a transject and finally also a subjective-object (Winnicott, 1969) and self-object (Kohut, 1971) too. When the subject (patient) loses the potential for respect for her own parental figures, she feels humiliated, ashamed of her archaic awe and compassion toward these figures, ashamed of being subjected to the decisions of such parental figures during her childhood, of belonging to her own particular filiation. The symbolic articulation of matrixial transsubjectivity exposes the catastrophe of the splitting processes caused by the therapeutic attitude of empathy alone (empty empathy without compassion and respect). Early scenes and phantasms that appear in analysis are already reconstructions, since the mechanisms to metabolise and elaborate materials change from infancy to childhood and to adulthood, and actual phantasies in the process of analysis are gradually produced together. So what psychoanalytical theory offers as the possible primal phantasies that have been ready to absorb existential pains is crucial. Primal phantasies are archaic means by which the psyche gives meaning to infantile existential enigmas. When we reflect what they might be, we arrive at what kind of phantasmatic scenarios might absorb them. A disrecognition of basic enigmas and their basic phantasmatic scenarios might establish for early experiences – that are traumatic only in the simple sense of encounter with the Real and not in the sense of psychic pain, and that perhaps should simply be called events – the status of painful psychic traumatic events, inside the analytical process itself, precisely because an anxious search for coherence looks for an addressee that becomes its retroactive source. Existential anxieties of abandonment and devouring, and the anguish of the not-enoughness, are such basic events that can be channeled through narcissistic routes during regression (in dreams and in therapy).

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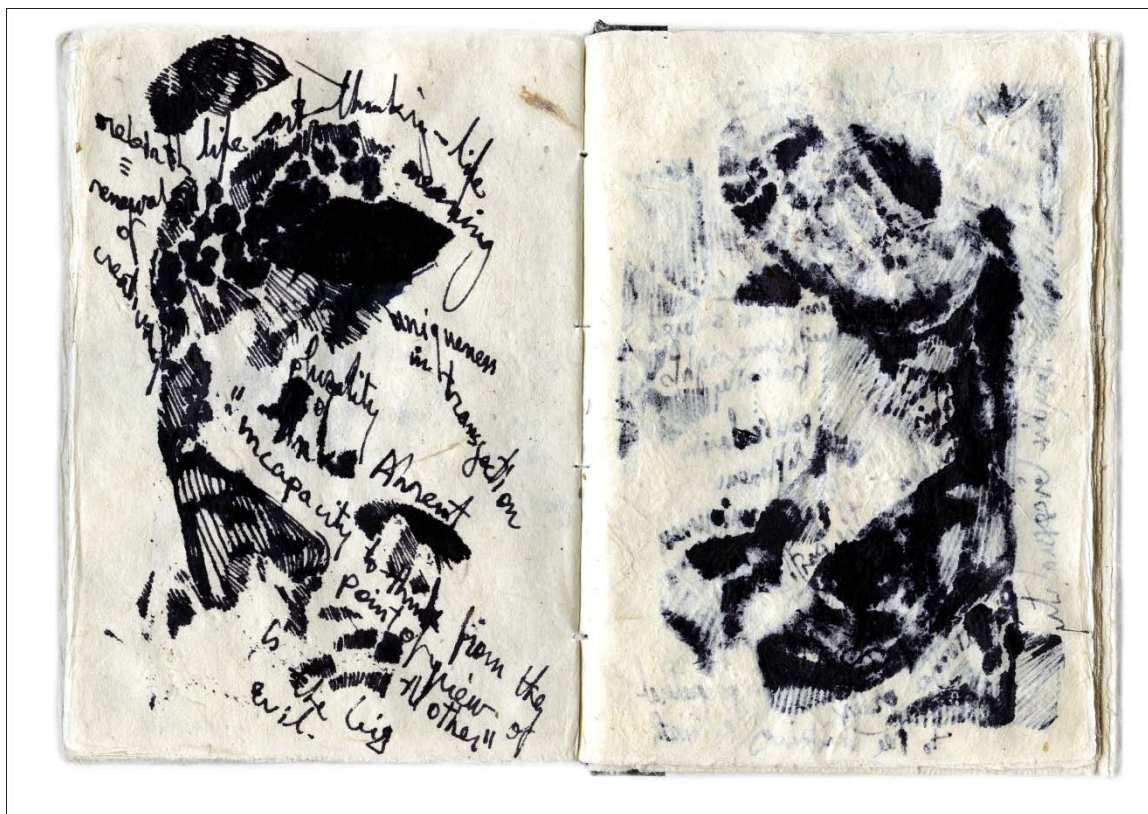


Bracha L. Ettinger, *Notebook* 2004-2005

With the matrix I intended a psychic-mental universe in which the archaic (m)Other is not a Thing becoming object (which is then lost) but an Encounter-Event (at the level of the psychic Thing) that becomes a borderlinking string and a subjectivising agency that leaves unconscious traces as a thread (link-o) in-between the I and the non-I. Lack isn't a sufficient term to process and absorb the traces of the string-like joint subjective instance, and castration isn't the proper mechanism of passage that it requires. Lacan explains that the lack, that he termed objet (a) – or in English (o) – is produced in becoming a subject; it is its price. Inserting the brackets around the (o) in the M(o)ther, neighbouring the figure I have called (m)Other, refers to the transjective traces of the incapacity for a total cut from the Other-mother in a certain subjective sphere. If we bring into account that the subject is also transjective, and that psychic unconscious strings still always also attach the I to the archaic (m)Other and, now, also to its new non-I(s), the "object" is a transject and it leaves particular traces. Attacking the (m)Other as a split unit and approaching her as a totally separate agency is at the same time also a self-attack on a subjectivising feminine-matrixial-maternal transject located simultaneously in the outside and in the inside. In that sense, empathy for the unique and separate subject, the I-as-subject, without compassion to its archaic borderlinked non-I ((m)Other, early father and other significant archaic non-I(s)) is a blow to this same I – I-as-

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transject – on the matrixial level. Empathy (addressed to the subject), without compassion (towards its early figures), oh so infinitely different from empathy-within-compassion to these same figures, creates a splitting that hurts the subject's capacity to get connected in itself to the primary affective modes of accessing the (m)Other, which are the aesthetic and proto-ethical modes of accessing the Other and the Cosmos. I have named *full empathy* the empathy within the matrixial sphere which is empathy within compassion. I have named *empty empathy* the compassionless empathy (full empathy and empty empathy being of course empathy's two extreme poles) (Ettinger, 2006b), as a way to emphasise the pathologising potentiality embedded in the attitude of empathy without compassion to which I add the pathologising potentialities of empathy without respect and reverie without reverence. I would like to draw the therapist's attention to the healing potentialities of compassion and respecting. The continual struggle to respect the others ((m)Others) of the other humanises the self and the other and testifies to the continual passage to the ethical realm.



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The difference between therapeutic retraumatisation that produces mother troubles on account of early childhood, and a potential passage into healing – more creativity and ethical transformativity, depends, in my view, on re-respecting maternal subjectivity, respecting the existential anxieties of devouring and abandonment as well as the anguish of not-enoughness, and distinguishing them from narcissistic anxieties and anguish as well as from real traumatic maternal abandonment, devouring over-control, and chronic not-enoughness – a chronic mismatch and disattunement to the infant's needs. It also depends on five interwoven shifts: One: A shift towards the feminine-matrixial, that is, moving away from the understanding of the unique subject as phallic and separated by clear-cut boundaries on the one hand, as well as moving away from the endless fragmentation or transmission that indicates endless transgressivity that becomes a global web on the other hand. This is a move toward subjectivity that includes singular and not endless transjective webs. Two: A shift from the therapeutic paradigm of empathy to a paradigm of empathy-within-compassion and empathy-within-respect. Three: The introduction of the three primal mother-phantasies into the list of primal phantasies that up until now (and for almost a hundred years already) has brought into consideration only few phantasies that mostly regulate male sexuality and also regulate son/father relationships, son/mother relationships and the paternal at the price of ignoring maternal subjectivity, the daughter/mother relations and the matrixial son/father differentiation-in-co-emergence. Four: The recognition of the primary affective arousals of compassion, awe and fascinace as originary and non reactive. Compassion and awe are not a reaction to parental failures, and together with fascinace, they have to be differentiated from anxiety. Five: differentiating between inter-subjectivity and transjectivity, recognising the transjective dimension within inter-subjective relations.

A therapist's empathy-without-compassion and empathy-without-respecting damages the mother/infant and father/infant net of borderlinking strings, and therefore, also, the internal maternal and paternal positions "in" the subject itself. Handling traumatic traces with care and channelling them towards ethicality and creativity calls for the matrixial transference that echoes a correspondence to the singular limited transgressivity of the early period and offers it a symbolic relief via compassion and respect that echo primary compassion and awe and thus enhance subjective freedom.

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Primary compassion starts before and goes beyond any possibility of empathy that entails understanding, any economy of exchange, cognition or recognition, reactive forgiveness or integrative reparation. Primary awe starts before and goes beyond any fear. Both compassion and awe are inseparable from the affective access to, and awareness of the (m)Other and the Cosmos without abjection and rejection and without fusion. They are a part of primordial trans-sensitivity, and they alternate with or soften autistic, symbiotic and paranoiac moments. Borderlinks of compassion and awe transgress the more clear passions or links of *love*, *hate* and *knowledge* (Bion, 1962). Borderlinking might be veiled by stronger survival tools, and borderlinks might seem to melt inside stronger links, but they go around and beyond them.

Traces of coemerging with-in the (m)Other non-I are reawakened to reabsorb new traces. Links (o) absorb objects (o) and subjects when transensitive strings re-vibrate. Unconscious threads composed of shareable traces of encounter-eventing become transformational in and by new self-fragilisation. From the angle of maternal subjectivity, in self-fragilisation, the maternal subject (the I now) meets the vulnerable infant (the non-I now) while in parallel, the same maternal subject functions on a post-Oedipal level to establish boundaries while still borderlinking.

More about maternal subjectivity now. The borderlink (o), contrary to the object (o), doesn't disappear when the subject appears. Awareness of the feminine-maternal sphere arises, lacking concepts to contain it. Pregnancy is a maternal trauma. Birth-giving is another trauma. The mother (now as I) will never get over the corporeal, phantasmatic and mental coincidence of co-emergence with an-Other (now; the infant as non-I) in her corpo-Real embodiment. She can only get transformed by and with the encounter-event. From her side as a phallic unit of subjective individuality, we must recognise a triple trauma-event of the matrixial-mother corporality: the proximity to the Other during pregnancy, the temporary regressions to an archaic sharing (as pre-daughter carried within her own archaic (m)Other) and the corporeal separation from the non-I at birth-giving. The consequences of "normal" pregnancy and "normal" child-birth qua "normal" trauma-plus-jouissance events must be taken into account in terms of the matrixial as well as the phallic, so as not to produce fatal tears in the maternal matrixial webs, not to retraumatise the transjective tissue but to heal. The

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maternal regression to "symbiosis" immediately after child-birth, as "normal" and expected as it may be, is still not less traumatic to the matrix than a total rejection would be, even though the first kind of regression is more beneficial and the second kind is more catastrophic to the infant; those are two extreme phallic reactions to the jouissance and trauma of the encounter-event. The prenatal encounter-eventing, experienced beyond pleasure and pain, leaves traces of that for which only life is responsible both in the infant and in the archaic (m)Other. Only compassion to the non-I (now mother) while in empathy towards the I (now infant) will reach these traces without constructing them in retrospect – misleadingly – as traces of a trauma that could be avoided. The trauma and the anxieties that accompany it can't be avoided. The enigmatic arousals can't be avoided either. Their cause is the mere being carried into life in jointness and the mere bringing into life in jointness, as well as the contacting non-abjecting access to the other.



Bracha L. Ettinger, drawing from *Mamalanguê — Borderline Conditions and Pathological Narcissism*, n.5, 1989-1990. Indian ink, graphite and mixed media on paper, 38.8x28.9cm.

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In a number of psychoanalytical traditions, quite unconsciously, a *mother-monster readymade* is offered to the patient qua the major "cause" for anxiety that the arousal of unremembered early encounter-eventing brings about. A theoretically prefabricated mother-monster, always compared, and almost always failing the comparison, with a good-enough mother, is in stand-by readiness to replace the basic lack in the phallic dimension of our subjectivity, the (o) in the brackets, the m(o)ther deprived of (m)Otherhood. Lacanian analysis clearly offered here another path, in offering the recognition that there is no cause, finally, that the "cause" is an imaginary solution. But the prevalence of the imaginary mother-monster readymade figure (and with different theorists we have new names for it: the "intoxicating mother", the "poisoning mother", the "unconsciously abusive" mother – an ever growing list) testifies in my view not only to a major theoretical lacuna, but also to the narcissistic trap of the transferential relationship itself. This is due to the ignorance of the transsubjective matrixiality on the one hand and to a systematic disrecognition of the following on the other hand (and I repeat here); particular kinds of recurring phantasmatic and imaginary complaints, arising in almost each and every reported case, represent primal phantasies that have no painful-traumatic "cause". I have therefore suggested adding them to the classical shortlist of primal phantasies which are: Origin in terms of Birth or Primal Scene, Seduction, Castration and Oedipus. These three Mother-phantasies are: a. Not-enoughness – the primal phantasy of the not-enoughness of the mother; b. Abandonment – the primal phantasy of the abandoning mother, and c. Devouring – the primal phantasy of the devouring mother. Their characteristics correspond to the basic requirements of primality. Freud, as well as Lacan and practically all analysts, did of course notice their prevalence but didn't realise that they are primal and must be symbolised as such, because they correspond to the basic enigmas of human existence. Following their irruption in transferential relationships, an endless search for their "causes" begins, repeatedly retraumatising the I in the locus of her archaic transconnectedness, in herself and in the mother.

Recognised primal phantasies are beneficial to the symbolic organisation of the subject. The disrecognition of the primality of the Mother-phantasies harms mainly daughters vis-à-vis their mothers, who are daughters too (while the classical primal phantasies support

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the primary pre-objectal love-identification with the primordial father echoed by Lacan's figure of S1 that stands for its originary repression by originary signifier (Lacan, 2007)). The paternal thus comes to guarantee symbolic order and love. In parallel, a fatal connection between maternity and "hate" was established by the idea that the first other-mother is recognised via rejection.

Anxiety of abandonment and of devouring, and anguish of not-enoughness are part of the human-born condition. Their phantasmatic correspondences are their early meaning. The thread of the phantasmatic abandoning mother registers feelings of psychic pain from different sources including the maternal source (amplified of course by real abandonment); the thread of the phantasmatic devouring mother registers feelings of anxiety arising from different sources including the maternal source (and amplified by real over-domineering). It digests and elaborates anxieties of being invaded, dominated and penetrated (amplified by real impingements and over-domination). The Not-enough mother phantasy arises as a reply to the enigma of repeated loss of harmony between presubject and subject and its environment (the disturbances in "Oceanic feeling"). Apart from occurrences of real traumatic maternal abandonment and real traumatic maternal over-domineering (that must be recognised as sources of suffering), and apart from traumatic and dramatic disturbances in presubject/environment reattunement, it is, in my view, the failure to recognise these three unconscious threads as primal phantasies that actively accounts for an endless search after non-existing "causes" resulting in "replies" that leads to the fragmentation of the matrixial web and the weakening of the Eros of compassion and of knowledge accessed via awe and fascination.

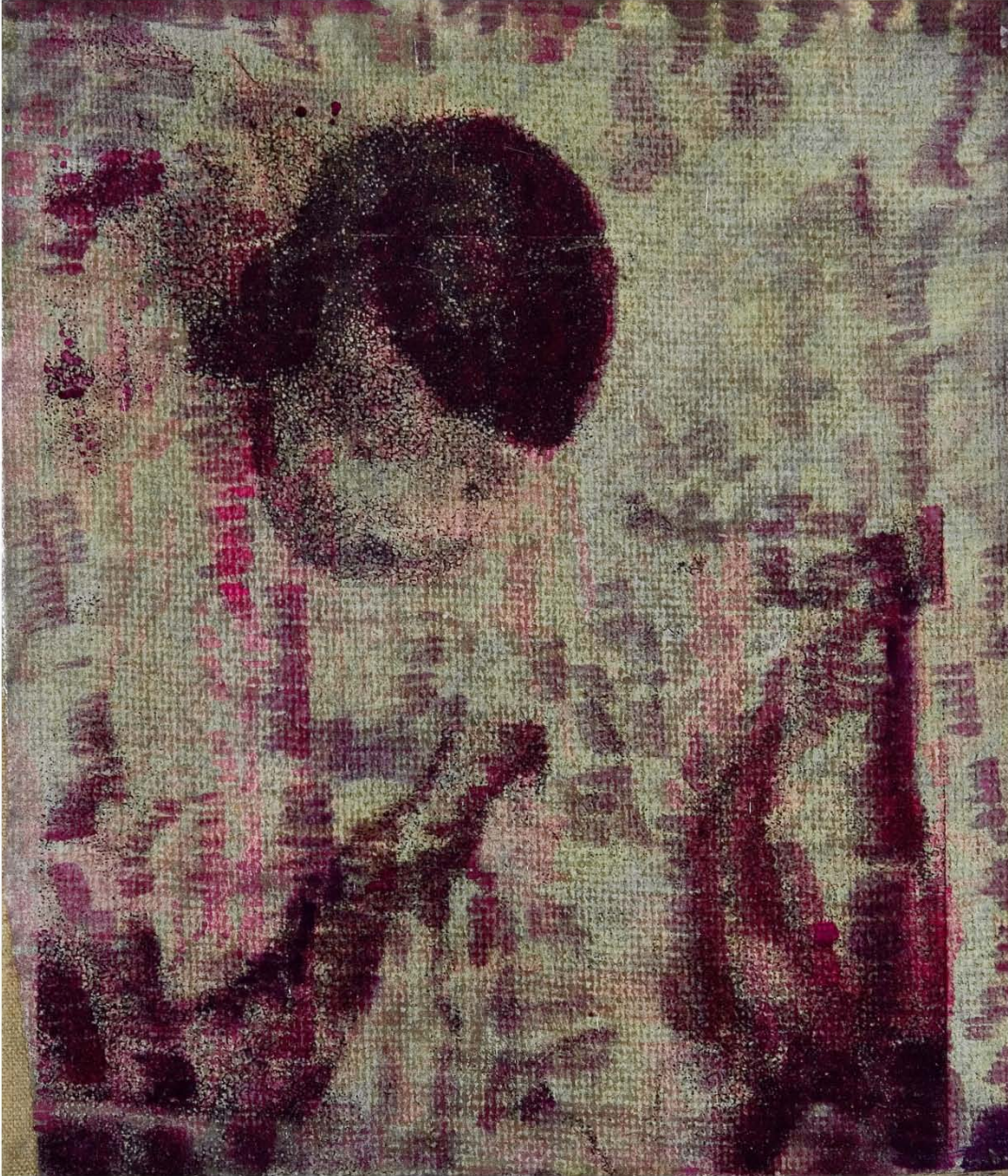
In a transferential pregnancy space, it is possible to formulate a relation to the Other which doesn't appropriate and doesn't abandon; a non-appropriative access. Matrixial futurity articulates non-abandonment and non-devouring in terms of com-compassion, besideness, jointness-in-difference and continuity before compassion, awe, fascinace and wit(h)nessing. The primary compassion and awe by which the I opens itself to the maternal non-sexual Eros and Ethics of seducing into life already plants the seeds for future responsibility. In this futurity, the principle of the continuity of one's life in the other's life is revealed as a symbolic principle while the m(o)ther of matrixiality is not sacrificial; the

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passage of pregnancy demands life transconnecting to life, life with and beside, and assumes transcription (Ettinger, 1999) of traces.

Compassion and awe balance disgust, rage, jealousy and envy, and also fear. Fascinance balances distrust. The respect to which compassion, awe and fascinance can be transformed by analytical re-spect counter-balances anger and rage aroused by fear, disgust and greediness that can accompany precisely the same events addressed by those feelings. Deprived of these tendencies toward the other, (m)Other, parental figures, and the Cosmos, the patient – infantilised by empathy-without-compassion – is not only exposed to fear and disgust, rage and anger, but also to the mechanisms that reinforce them and that breed greed and revenge. In the domain of art, they are precursors of affective beauty and the affective sublime. In the domain of ethicality, they are proto-ethical paths to freedom-with-resistance. Resistance impregnated by and built upon compassion, awe and fascinance is different from resistance impregnated by fear, disgust and rage; the Ethics it calls for involves – beside or beyond a revolt against an outside instance – the resistance to one's own narcissistic self. It therefore can't be "ordered" or reactive, it can only be accessed by self-fragilisation, nourished by arousals, an enigmatic call: the *Hineni*: "here I am" without the *aiecha*: "where are you", a non-sacrificial modus of response. It involves re-spect of the archaic (m)Othernal and encourages respect to each specific non-I and to singular Cosmic strings to which the I is affectively transconnected. This is the enigmatic ethical capacity to be responsive and not reactive, to be responsive and contribute to the arousal of co-response-ability. This non-reactive response-ability — a resistance — continues beyond fear, disgust and rage, beside them, before them, around and after them. When resistance is not revengeful it becomes an ethical point of view. When response is not reactive it becomes an ethical point of view. When a patient becomes revengeful toward parental figures *during* therapy, a splitting has been created inside its con-ferential frame, and the splitting is maintained by what I consider to be a non-healing attitude of empathy-without-compassion and without-respect that can lead to the outbreak of a 'basic fault,' to mother/father-(and self-)hating, and to mother/father-(and self-)blaming, since the potentiality for respecting, that enables the possibility of response without reactivity, is interfered with.

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Bracha L. Ettinger, *Mamalangué*, n.5, 2001.

Oil and mix media on paper on canvas, 27x23.8cm.

Only in empathy-within-compassion and empathy-within-respecting can the analyst ethically authorise her/himself to mentally "receive" or "solicit" the other's others into the analytical scene, since this will assure their symbolic and imaginary safety (with-in and with-

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out the self) at moments of heightened fragility in which these others – the patient's internal objects and transjects, her mother, father, sibling and other human-beings co-implicated in her/their history – are at risk of hate, blame and revenge. In that sense – of containing the other's others for the I and for its others and on behalf of the matrixial tissue itself – it becomes an analytical tool and a safety mechanism within regressive moments, when primal phantasies dominate the scene and a painful shame arises. As a state of mind, it works against splitting, paranoia and projection.

The invention of the mother as a ready-made monster and figure for projecting hate, that goes hand in hand with the channelling of unbound anxiety and free-floating aggression toward the actual mother (outside the analytical room), are undoubtedly a major result of some Western theories and practices of psychoanalytically-oriented psychotherapy, since this ready-made is the unavoidable imaginary artifact of the combined processes of regression, splitting and transference/countertransference relationships intensified by the major blind spot of maternal subjectivity. The mother for psychoanalysis is an object, and the analyst him/herself is the imaginary good or good-enough mother that replaces the real (always not-good-enough by definition) mother. This is aided by the desire of individual analysts to occupy the ideal space in the splitting and by the patients' empathic collaboration with the desire of the analyst to be loved and idealised as the good mother/father. The ready-made mother-monster becomes the imaginary "source-cause" for the enigmatic source-less pains, anguishes and anxieties of human existence, the imaginary "cause" for phantasmatic "memories" from unremembered periods that are endless variations of the primal phantasies that correspond to the existential anxieties and anguishes that are unrecognised for what they are; an integral part of being born, alive and mortal, subject to sexuality and to death. Rage, shame and anxiety might not only accompany the cause for psychotic disintegration but might also sometimes be its result, revealed when a splitting has become frozen. Borderline patients enter endless revengeful moodiness when the "causes" that they find are in fact primal phantasms and therefore offer no relief when they are imagined as real "memories" or offered as "causes." In such a case, therapy is retraumatising, or rather, the retraumatising moments that can lead to healing and transformation turn into fixations. The time-space of potential retraumatisation that can potentially lead to healing leads indeed to retraumatisation when the

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ready-made mother-monster automatic interpretation (judgment) is offered by the therapist. When a structure of primal phantasy is revealed, it is therefore crucial to carefully recognise the difference between traces of one's own real trauma, traces of the other's trauma, the imaginary and the real, and real trauma versus phantasmatic solutions to the basic enigmas of life. It is the analyst's task to make the difference between a traumatic early reality and existential anxieties. By interpretations that look for reasons (a cause) for the primal phantasies and produce the mother as their cause, the mother becomes imaginary cause in a process that might transferentially produce psychotic moments – and then, later on, overcome them.

There is a healing psychoanalytic quality that depends on the analyst's modes of keeping distance-in-proximity, proximity-in-difference and reattuning the jointness in compassion and respect beyond empathy. I name it "reverence". Bion had named "reverie" a psychic meditative state of active-passivity (Bion, 1962). You are both here-and-now and beyond, hopefully also connected to an oceanic or cosmic feeling that Bion calls "O". To the mystery of the "O" I add another one by thinking reverie and "O" together with reverence in order to re-spect the function of maternal subjectivity within the function of the analyst as well as the subject's relation to the matrixial-maternal from an archaic within and a primordial before which is always-already a beyond.

While wondering at the idea of re-specting the maternal and the enigma of primal awe, I remembered the surprising "reward" attached to the Biblical commandment to respect, or honor "your father and mother... so that you may live long". Since there is a prize attached to respecting, the promise of a surplus of life, what could this mean?

Reward, like punishment, belongs to the world of exchange. While the earlier commandments transcend this human level, this commandment is in a middle position, between those directed to the divine presence and those that deal with human relations. So there is some measure of exchange here, and some measure of a beyond-exchange, and even of a beyond-relationality. How are we to understand this *beyond* in the present context of m(o)ther trouble and psychoanalysis? Honor and Respect are bred upon awe that is primary and unconditional. In the beginning there was awe. In the beginning of a certain knowledge, a certain wisdom, there is awe. When awe turns into respect and honor – and not into fear and

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horror – the promise of long life does not intend perhaps a personal reward but indicates the possibility of life (of an-other) beyond (my) life, that is, that in the future there will be a life toward which your past participation in the living would already be contributing by this kind of respect which makes the parental a possibility for the subject. By respect, your very participation in a matrixially intuned human atmosphere is distinguished. By respecting you reach the domain of Ethics. Thus, this mystery brings me to Freud's *Beyond the Pleasure Principle* (Freud, 1920). What in the human living being desires to go beyond the pleasure principle? Whatever it is, it must be connected to a desire, in the living being, to work beyond and even against its own body and self, to the extent that Freud asks us to consider the expressions, in us, in our desire, of that which can indeed work against ourselves and even reach Death Drive, inasmuch as it has to do with the fact of our mortality and the continuity of life beyond us, through our body. We are being interpellated by the continuity of life itself, in us, through us, unconsciously, for the time of without-us, involved in the prolongation of life for which we are only a passage-lane. The prolongation of the living being traverses us, we are a station on this path. It is this prolongation of life that in my view is concerned by the elaboration of the primary affect of awe into respect in the passage from the proto-ethical to the ethical. If human beings are to survive beyond the personal self, respect needs to be respected. This begins with the re-respect of the (m)Other. The respect for the mother is required not in order to satisfy her or for getting something from her in return, but is inherent, like awe and compassion, to the futurity of life itself in its continual re-passage to the ethical.

The (o) in the *m(o)ther trouble* marks for me not a lacking object (the Lacanian (o)) but a lacking transject (a matrixial (o) that stands for a link). The matrixial (o) indexes the unconscious continuity between prenatal life and life whose imprints marks transsubjectivity. If the Lacanian (o) indexes psychic caesura, the other-object-lack or subjective lack-to-being, the psychic object in-between being and not-being, our (o) indexes transformative continuity that goes beyond the self in a transmission that is not endless but limited by the affects of awe and compassion that can grow into adult continual re-respect and respect of the intimate other and of the stranger that is a part and a partner in our matrixial web, a transformation that in my view can imprint in the "O" termed by Bion a particular path: that of the passage of the

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human encounter-eventing with maternal subjectivity into the spirit of the Cosmos in the form of a reverence-reverie.

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