

PSYCHOANALYSIS, CULTURE AND POLITICS: GENDER, LGBTQIAPN+ SUBJECTIVITIES AND POSSIBLE HORIZONS FOR A SOCIOPOLITICAL CLINIC

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ABSTRACT

This work seeks to explore the contemporary challenges faced by psychoanalysis, particularly with regard to public clinics, culture, and interdisciplinary studies, with a focus on gender issues and the experiences of the LGBTQIAPN+ population. From the context of the public clinics of the first generation of psychoanalysts, I propose a reflection on new theoretical and clinical horizons. The article delves into the Freudian concept of public clinic, examines the foundations for the creation of a sociopolitical clinic, and discusses how the political dimension intertwines with the symptoms that mark the subjectivity of LGBTQIAPN+ individuals, challenging dominant norms and structures.

Keywords: Sociopolitical Clinic. LGBTQIAPN+ subjectivity. Contemporary Psychoanalysis.

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INTRODUCTION

The theme that I propose here arises from the work carried out with the Working Group (WG) – Maieutic Clinic, considering the concerns, sensitizations and political and social implications related to the challenges of life in culture, from the fact that these challenges demand urgency in the construction of theories and practices so that they can be faced in a psychoanalytic clinic, the work of the Maiêutica Clinic itself, which currently comprises two territories in psychoanalytic care, with children in adoption situations and with LGBTQIAPN+ population living on the streets, and the study and control analysis group with psychoanalyst Jorge Broide.

Such restlessness begins to take shape, consistency, theoretical reflection and breath from the postdoctoral studies that I am carrying out at the Federal University of Santa Catarina (UFSC), under the supervision of Professor Ana Lucia Mandelli de Marsillac, as well as from the research period in Vienna, Austria, where I investigated Freud's public clinics and their records in the Proceedings of the Vienna Psychoanalytic Society and, mainly, from the clinical work that has already been taking place within the Maiêutica Florianópolis institution.

Thus, with the possibility of sharing the works related to the Maieutic Clinic, of reflecting on some of the central characteristics that the TG and the Clinic embrace to think about a psychoanalytic performance committed to the sociopolitical dimension and of considering the interests of its possible implementation, this text focuses its reflection on the theme: the LGBTQIAPN+ subject, its production of subjectivity in culture and the enjoyment of hatred that peculiarizes this population in current times.

To support the work of the Maieutic Clinic, considering the due theoretical contours necessary for its understanding, I present the concept of extended clinic, which

[...] addresses the dilemmas of the advancement of psychoanalysis and takes into account certain problems, such as social exclusion, racism and other situations of this kind. These questions emerge when the psychoanalyst offers his listening in the *polis*: in health, care or educational institutions, in communities (ROSA; STEPHEN; BRAGA, 2017, p. 2).

This clinic aims to carry out its work in the articulation of its theory and practice with social issues, seeking interfaces with culture, as well as dialogues and compositions for the clinic, taking into account the political, economic and social dimensions of groups and communities. Thus, this work presents a conception of psychoanalysis implied and concerned with building a clinic with helpless subjects from the discursive point of view



(ROSA; STEPHEN; BRAGA, 2017), even more so considering that our country, with all its history, is marked by social, racial and gender inequality.

This work comes, therefore, from three expressive places that propose conditions for me to continue dreaming, walking, building and sustaining psychoanalysis in my practice: from inspiration, invention and understanding to ground a theoretical scope and a praxis another to think about Sociopolitical Clinic in Maieutics; from my postdoctoral studies, in which I am mapping the practices of sociopolitical clinics in psychoanalysis in Brazil; and from my deepening, of the experience and research in the collection of the Freud Museum,² in Vienna, where I was able to immerse myself in the minutes of the first psychoanalysts of that psychoanalytic society (from 1906 to 1920). Thus, as Winnicott (1971) points out, it is in Freud's work that we find the basis to continue exploring and expanding the horizons of psychoanalysis, keeping its relevance alive in current times.

Psychoanalysis implies a theory and a way of operating. Therefore, in order to think about and ground a sociopolitical clinic from one praxis to another, it was necessary to echo a question that is constant within the clinic's work: [how is this clinic done?]. This question has accompanied and sustained the fundamental tripod of the group – personal analysis, control analysis and permanent formation. Thus, it is from it that this text takes place.

THE DESIRE TO INVENT A SOCIOPOLITICAL CLINIC

What is this importance attributed to the social and the political when clinical work in psychoanalysis is proposed? This question can lead us to some theoretical and epistemological paths, especially because this is a very recent field of study in Brazil, with basic references centered on a few researchers and with a theoretical scope in the making. By pointing this out, I am not disregarding the research breath applied by some psychoanalyst colleagues in Brazil [quite the contrary], but proposing composition together with this body so that the theme continues to expand. After all, there are still very incipient questions on the subject.

Thus, in addition to these colleagues and in a position contrary to what is dealt with in some researches on psychoanalysis and politics, when the indicated theme is closed in

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² The research was carried out from August 2 to September 10, 2023, in the museum built in Freud's own home and office in Vienna, Austria. To carry out the investigative work, the archives of the minutes of the Wednesday meetings of the Vienna Psychoanalytic Society (1906 to 1920) were used. IMPORTANT NOTE: the research work continues at this time of publication, both in the sense of translating the minutes into Portuguese, as well as in the theme of Freud's Public Clinics. This research work is funded by the Research and Innovation Support Fund of the State of Santa Catarina.



the psychoanalyst's own politics, what is proposed here is to discuss a psychoanalytic clinic involved with the social and the political, betting its praxis on a reflexive and practical action that questions the political dimension that marks the symptom; that interrogates the theoretical thought of clinical practice at a respect for the epistemological foundations and the political and ideological influences that order their logic; that considers in its listening contemporary themes of political and social crossing – : gender, class, ethnicity, race, etc., and that, as Freud postulated at the beginning of psychoanalysis, it can compose with the public service networks in the country (either in an individual way, or by opening paths that consider group devices).

Therefore, it is important to conceive the practice of psychoanalysis in a context of decolonial experience and the resumption of the historical practice of the first social clinics of psychoanalysis undertaken by the psychoanalysts of the first generation, considering, based on this, the resistance to a discourse of neutrality in psychoanalysis and to a possible elitization – in the access of certain segments of society both to psychoanalytic listening and to training in psychoanalysis.

In convergence with what is being done at Maiêutica Florianópolis – Psychoanalytic Institution, in the WG and in the Maiêutica Sociopolitical Clinic, studies and practices from other institutions are observed, as well as approximations of psychoanalysts and permeability of psychoanalysis, both nationally and internationally, with regard to interdisciplinary studies based on anti-racist, gender and decolonial studies linked to psychoanalytic praxis. Thus, the intersectionality between these bases of studies and research, although still nascent, takes into account the conditions of the various levels of society, especially of social groups that are abandoned to their fate, whose daily lives, due to the unequal distribution of precariousness and political-social vulnerabilities, are especially painful.

From this point of view, the challenge is to propose a new field of reflective, theoretical elaborations and praxis in psychoanalysis – both in the clinical sphere and in work relations and training –, since one of the objectives that directly influence the possibility of invention of this clinic is to offer psychoanalytic listening outside the settings of the traditional office. This challenge obviously takes into account the social, economic, and political particularities of the time in which we live. With this, it is understood that, if the practice is related to the current transformations of time, the theory will follow it.



Thus, the desire to invent a sociopolitical clinic in ties with collective territories and communities in critical social situations consists of composing clinical interventions in the face of the sociopolitical dimension of suffering (ROSA, 2016) – either through listening intervention devices in territories or in spaces that can welcome the subjects of these territories. In this context and moment of practice of the clinic, one of the territories with which the Maieutic Sociopolitical Clinic began to relate, offering listening and composing with the service network of the city of Florianópolis, is the LGBTQIAPN+ population living on the streets (hence the choice of the theme for this article).

This group and the territory of the streets were guided in view of the critical political and social impasses that this population currently lives in Florianópolis/SC, which produce suffering and symptoms and result from a continuous and persistent challenge regarding a malaise that is triggered by the LGBTQIAPN+ population. Therefore, it operates as a continuous [subjective and social] tension that has repercussions in a climate of hostility in the psychosocial interactions of the daily life of this group, promoting violence and denial of social rights.

For these reasons, these subjects are presented as the focus of this text, due to the understanding that they represent one of the social minorities in deep vulnerability resulting from this situation. In addition, also because of their experiences of multiform trivialization of violence and cruelty exemplified in physical and psychological aggression or in the persistent suffering caused by disrespect, denial or deprivation of fundamental rights, which has been occurring more than ever in current times [considering the political, ideological and cultural conjuncture of our country].

Of course, I could bring here other populations also considered minorities in this context, but these are some of the subjects most crossed in culture by the enjoyment of hatred that peculiarizes them in current times. I will return to this subject later in the text. Therefore, bringing these subjects to this discussion would be a possibility for us to think about what truths are produced in the culture, as well as how we, psychoanalysts, situate ourselves in the face of the discourses that hinder the symptoms of this population – discourses that hierarchize forms of sexual partnership, discriminate ways of enjoyment, exclude social classes, ethnicities, aspirations and symptoms.



THE POLITICAL DIMENSION THAT MARKS THE SYMPTOMS OF THE LGBTQIAPN+ POPULATION

Next, I present the possibility of thinking that there is a political dimension in the symptom and that, by taking it to the world, confronting it with what is happening in civilization at this moment, psychoanalysis can situate itself politically in culture against the discourses that hinder the symptom of each one, which, for example, in the case of the LGBTQIAPN+ population, are marked by the following narratives:

- a) the social representations of the LGBTQIAPN+ population, for the most part, are based on a pathological conception of "non-normative sexualities" either by voices that have exposed the weight of stigma, or by those that insinuate that the suffering of these subjects is born from a trait that morality insists on judging as reprehensible;
- b) belonging to the LGBTQIAPN+ segment is to carry a brand that substantially deteriorates its identity;
- c) thinking about the health of the LGBTQIAPN+ population, on the part of many professionals, is to consider it determined by sexual practices, failing to perceive it as existing in other important needs that this population has;
- d) there is a lack of social and public policies that recognize the existence of discrimination, prejudice and stigma due to sexual orientation and gender identity as potential causes of suffering and illness in the LGBTQIAPN+ population.

Such narratives are listed because they denounce the destructive link to the dissimilar other, represented here by LGBTQIAPN+ subjects. In addition, they denounce a manifestation of a content rooted in the unconscious that achieves the ultimate end of a jouissance of hatred characterized by prejudiced and cruel discrimination. In this regard, I present a clinical excerpt from one of the cases in psychoanalytic listening extracted from one of the life stories narrated in the Sociopolitical Clinic of Maieutics:

The subject being treated is 25 (twenty-five) years old, has lived on the street for approximately 3 (three) years, his sexual orientation and gender is a gay man and has lived with HIV for about 2 (two) years. According to his account, two of the reasons that lead him to live on the street are his chemical dependence and the non-acceptance of his serological condition. According to his account, the impact of the discovery of HIV raised the question of how he would tell his friends and potential partners about his situation, since he had



been educated to see living with HIV as a death sentence or a condition linked to a morally reprehensible attribute.

From this, he asks himself: "when am I going to die now? Will it be deplorable? Is it going to be terrible? How many hours? How many days? How many months in the hospital? And how much suffering? Will people who know me suffer with me? With these questions that are not silenced, you start to have less and less contact with your friends, you don't feel like taking care of yourself, you feel lost, you don't want to go to the doctor and much less adhere to the treatment".

For this reason, his relationship with life, according to him, is very impatient: "I'm letting it flow, paddling, going with the current, with the tide, I know it will end up somewhere, I can even get back up, but I can't hear so clearly, there are many lines at the same time". He presents an absence of care for himself, enhanced by the fear of non-acceptance and, above all, by the looks of prejudice, hatred and discrimination that are cast on the gay subject, on the street and living with HIV.

In this situation, as analysts, perhaps the best thing is to follow and witness the path of this subject, seeking to invent other destinies together, without excluding risk and death. This is so that life presents itself as a stronger option than annihilation, since tragic has been the circuit through which this subject has been treading his life. An intervention in this process, therefore, is very delicate to be made, since, depending on the intensity in force, the worst may be the best choice for the subject.

Taking this into account, a possible listening emerges in the reception of the unique times and rhythms that singularize the subject, opening gaps for him to escape the gears of a system that oppresses under the weight of homogeneity and hatred. In this crossing, one can glimpse the paths of his own expressiveness – to shout life as an insurgency or to murmur death to another who recognizes him in his radical difference.

Considering this story, as well as the others we hear in the sociopolitical clinic, there is a universe of pluralizations of ways of life [living with HIV or not] happening to subjects who live on the street. This is because, even with the evolution of science, which, through less aggressive and more effective drugs, has made AIDS a practically chronic disease, the ghosts that surround it remain, accompany this population. Added to this is all the hate speech that is launched against this population in the most diverse modalities and aggressive forms.



INSIDE PSYCHOANALYSIS...

It is possible to say that civilization is increasingly contaminated by barbarism at various levels: barbarism of capitalist plunder, segregation, wars and the destruction of the environment, for example. In this regard, the path of psychoanalysis is not immune to this process either. According to Antônio Quinet (2016), about the history of psychoanalysis, unfortunately there are issues that weaken its path, which, due to a sedimentary and apolitical officialism as a dominant discourse, bring the following facts: the participation and condescension of analysts in movements of military dictatorship, homophobic discourses uttered in psychoanalytic institutions and positions of analysts recognized by international institutions against the laws of homosexual marriage and with a certain homophobic content. These facts mark moments of segregation that incite discrimination and hatred, while situating LGBTQIAPN+ subjects as a threat to the social locus.

From this it can be concluded that psychoanalysis can be subversive, but many analysts do not. When dealing with a subject that relates psychoanalysis and culture, having as a discussion the LGBTQIAPN+ subject and its production of subjectivity in culture, it is necessary to criticize not only the climate of hostility in the psychosocial interactions faced by the LGTBTQIAPN+ population in culture, but also the lack of consideration of these issues by a psychoanalysis degraded and swallowed up by some discourses. Contrary to the scenario pointed out by Quinet (2016), is it not up to the analyst to consider the enjoyment of the synthoma, with its singularity, and bring with it the politics that its practice teaches?

Following Quinet (2016), it was not psychoanalysts who broke the shackles of pathologization and discrimination shaped by sexual racism. These fissures in history have been opened by the courage of social movements and gender theories, which have torn the veil of hatred and exclusion. Even so, there are in psychoanalysis, in Freud and Lacan, seeds of change, forces that can sustain these insurgencies. But it is up to us to ask, with indignation and hope: why do we insist on walking backwards, when subjectivities are remade and synthomas?

Based on this, in order to elaborate a sociopolitical clinic for the current moment, more than ever, it is necessary to go back to the beginnings of psychoanalysis, since the first psychoanalysts, given that history is not linear, but a composition of dialectical forces that place the conflicts of the facts as landmarks and as possibilities for the elaboration of new and opportune experiences in the present. Thus, to recover the memory and legacy of



Freud's public clinics is to bring the possibilities of looking at the history of psychoanalysis and regaining its dignity with the social.

In this path of recovery, it is perceived that today little is said about Freud's ambition and initiative regarding the construction of a psychoanalysis attentive to the social, sensitive to listening to marginalized populations and thought and developed from the encounter with them, their realities and their specific experiences of the world. Perhaps this silencing of history and Freud's legacy with the social intended to place psychoanalysis and its praxis in an apolitical expedient, being "neutral" to its coming horizon (DANTO, 2019).

According to Danto (2019, p. 390), under the selective officialism that for a long time was in charge of consolidating apoliticism as the dominant discourse in psychoanalysis, initiatives by several pioneering psychoanalysts are relegated to the indignity of the technique. This is because contemporaneity has been demanding from psychoanalysts the need to develop more flexible methods to meet these demands of the subject today. Therefore, there is a challenge, which is to try to elaborate these methods "without abandoning the technical principles that underlie our discipline – , without becoming rigid or remaining imitative" (ALBUQUERQUE, 2010, p. 22).

In psychoanalysis, listening is not limited to a pre-established method, but expands as an open, flexible space, capable of following the mutations of the subject and society. The rigidity of a single model would therefore be a prison, an impediment to understanding the subjective processes that emerge in cultural tensions. Psychoanalysis, by distancing itself from this rigidity, becomes capable of listening to the demands of the present, recognizing the marks of oppression and resistance in subjectivities. As Freud (1908 [2006] warns us, it is in the dynamics of culture, with its generative and repressive forces, that symptoms are born. And it is in this field, often violent and contradictory, that psychoanalysis must intervene, not to condemn, but to offer the tools that allow the subject to reintegrate into his own power.

Lacan reveals to us that at the heart of all fraternity lies segregation (ALBUQUERQUE, 2010), as we unite in communities of jouissance that exclude and reject any form of satisfaction that threatens us. However, with the unbridled accumulation of capital and the devastating effects of neoliberalism, something in the social bond has fragmented, giving rise to a new grammar of enemies, fueled by the intensity of the enjoyment of hatred.



In this context, emancipation and the possible solutions that we can invent in a sociopolitical clinic depend on an ethical and political direction of our praxis, which challenges the logics of exclusion and hatred. This praxis must be able to transform listening into a space of resistance, where the subject, when welcomed in his difference, finds the strength to subvert power relations. A clinic that is not content with curing, but that proposes to liberate, questioning oppressive structures and creating alternatives that allow the subject to reexist and assert himself, without fear of the other, in the strength of his own difference.

The challenge, therefore, lies in building a psychoanalytic clinic that not only listens, but is committed to the complexity of subjectivation, taking into account the various layers that make up the subject: their ethnic, cultural, linguistic and sexual roots. We need a listening that does not ignore the marks of oppression and exclusion, but that recognizes them as fundamental parts of the history of each subject, as elements that, far from being pathologies, are singular productions of resistance and survival. Psychoanalysis, therefore, must open up to the multiplicity of voices that constitute the subject, without seeking to standardize, but rather to welcome differences in their creative power. A theorization that, at the same time, feeds on the history of Freud and Lacan, must go beyond the limits of tradition and insert itself into the political struggle for freedom, recognizing that true emancipation passes through the recognition of plurality and the transformation of the power structures that define and limit the subject.

The clinic should be a field of creation and reinvention, where the subject has the possibility of reconstituting his bond with himself and with the world. In this space, psychoanalysis, when confronted with the multiple dimensions of subjectivity, becomes a practice of resistance, capable of opening paths to new forms of jouissance and existence, not defined by exclusion, but by the radical affirmation of difference.

NOT CONCLUDING...

The symptoms that cross contemporary life impose on the psychoanalytic clinic the challenge of reinventing itself, not restricting itself to dogmatic or closed practices, but creating theoretical bridges with other areas of knowledge. It is imperative that we expand both psychoanalytic listening and transferential relations, so that practice is not lost in time, imprisoned in a single clinical model. Rather than limiting itself to an academic rigor that ignores the issues of death and suffering that mark marginalized bodies and lives, the clinic



needs to open up to the complexity of the human experience, recognizing the multiplicity of malaises that emerge on the margins of society.

Contrary to a conception of psychoanalysis that does not open itself to these issues, and that insists on remaining faithful to a closed protocol, several research groups and psychoanalytic collectives in Brazil seek to recover the memory of the public clinics of the first generation of psychoanalysts, in an attempt to build clinical devices that welcome subjects whose subjectivities have been systematically excluded and silenced. This research, which begins with this article, aims to map the public psychoanalysis clinics operating in Brazil, their theoretical and political bases, their interfaces with the social environment and, above all, their ability to insert themselves in the territories that most need their ethical intervention.

Not concluding, in addition to contributing theoretically, the main idea is to compose with the work of the Maieutic Sociopolitical Clinic, bringing its praxis constantly implicated with the question: how is this clinic done? This is a question that is not exhausted, it is not concluded, because the path that is being followed in this clinic is located in an observation involved with certain modalities of suffering, which are silenced when a precarious place is established for certain groups and populations in the social bond.

The invention of this clinic, therefore, lies in the ethical responsibility of psychoanalysis, not for an ideal of universal society, but for a practice that dialogues with the concrete of the polis, where the intimate of the subject meets the collective. It is urgent, then, that this clinical practice recognizes the tragic trail of death that accompanies those who live on the margins, in situations of misery and abandonment, as a reflection of a social structure that needs to be reconfigured. The Maieutic Sociopolitical Clinic is, therefore, a simultaneously clinical and political work, where psychoanalysis is committed to listening to the voices that cry out for welcoming, intervention and transformation. How, then, can we continue to listen to and respond to the echoes of these voices in the next generations of psychoanalysts?



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