

When Acts Speak Louder Than Words: On Lacan's Theory of Action in Psychoanalytic Practice

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In the first section of his 1958 essay 'The Direction of the Treatment and the Principles of its Power,' Jacques Lacan designated interpretation, transference handling, and the analyst's clinical position as the three defining operations of the psychoanalytic treatment (Lacan 2006d[1958]: 489-495). In order to clarify the relative importance of these operations, Lacan suggested a hierarchical model in which varying degrees of freedom can be allocated to each of these three principles, inversely proportional to their estimated impact on the course of the treatment. In this model, interpretation displays the highest degree of freedom, and thus gives the analyst most space for manoeuvring, because it has the lowest impact on the direction of the analytic experience. By contrast, the analyst's clinical position contains the lowest degree of freedom, and thus the least opportunities for technical flexibility, because it is the most important factor for sustaining the psychoanalytic nature of the treatment process. In handling the transference, psychoanalysts are less free than in their formulation of interpretations, yet freer than in the adoption of a certain clinical stance, because the psychoanalytic power of transference is more encompassing than that of interpretation, yet less pervasive than that of the analyst's position. In keeping with the ambiguity of the term 'direction' in the title of Lacan's essay, one could also say that psychoanalysts need to be less concerned about how to direct (control, monitor, manage) their interpretations, because these contribute relatively little to the direction (orientation, route) of the treatment, whereas they need to be continuously attuned to the direction (steering, maintenance, safeguarding) of their analytic position, in light of the latter's immense power over the direction (course, path) of the clinical process.

In this paper, I wish to reconsider Lacan's distinction between the three fundamental psychoanalytic operations, and their concurrent

tabulation within a hierarchical schema, from the perspective of clinical action, on the side of the analyst as well as from the perspective of the analysand. More specifically, I want to investigate how certain actions performed by the analyst, in relation to interpretation, transference handling and the analytic position, elicit particular actions in the analysand, which analytic actions contribute most effectively to the realisation of the treatment goal(s), and which actions need to be avoided as detrimental to the advancement of the psychoanalytic experience. This vantage point may seem totally at odds with Lacan's general conception of psychoanalysis as a practice based on the function of speech and the field of language (Lacan 2006a[1953]). Indeed, it may appear as a contravention of the very foundations of the Lacanian paradigm to re-introduce the notion of action, at a point where Lacan was at great pains to emphasize the impact of the signifier, precisely against all those mainstream psychoanalysts who believed that actions speak louder than words. Yet however strange the notion of action may sound to those who have familiarised themselves with Lacanian psychoanalysis as a clinical practice in which the manipulation of the symbolic register is paramount, and non-verbal interventions are not supposed to enter the equation, an attentive reading of Lacan's oeuvre suffices to recognize that the term action emerges at regular intervals and in various guises, throughout his intellectual itinerary.

For example, with regard to the aforementioned principles of psychoanalytic practice, Lacan argued in *Seminar XI* that transference is the enactment (*mise-en-acte*) of the sexual reality of the unconscious (Lacan 1994[1964]: 146). When broaching the issue of the analyst's position in the fourth section of 'The Direction of the Treatment,' he placed his argument under the heading of a question whose wording was everything but gratuitous: 'How to Act with One's Being' (Lacan 2006d[1958]: 512). Lacan did not hesitate to describe the analyst's influence on the course of the treatment as a type of 'action', whose precise nature needs to be understood, and whose concrete effects need to be envisaged if the entire enterprise is to proceed along appropriate ethical pathways. Indeed, an ethics of psychoanalysis, Lacan suggested in *Seminar VII*, must

require analysts to formulate a judgement on the nature of their action (Lacan 1992 [1959-60]: 337). Conversely, Lacan regularly demonstrated how spurious interpretations and an erroneous handling of the transference can lead to clinically disruptive actions on the side of the analysand, ranging from an elaborately staged ‘acting out’ to a sudden ‘passage to the act’ (*passage-à-l’acte*). I shall return to the latter two notions in subsequent parts of my text, yet it is already worth pointing out at this stage that, towards the late 1960s, Lacan also expanded the semantic sphere of the term ‘passage to the act,’ so that it no longer referred exclusively to a certain disruptive pathological manifestation, but also encompassed the training effect of a psychoanalytic treatment, that is to say the patient’s transition from the position of analysand to that of the analyst.

‘Action’ thus features prominently in Lacan’s works at various theoretical levels—from the most basic level of considerations on psychoanalytic technique to the most complex level of the formulation of an ethics for psychoanalysis—and especially in those instances when interpretation, transference, and the analytic position, or the analyst’s discourse (Lacan 2007[1969-70]: 35), are at stake. Reconsidering the fundamental principles of the psychoanalytic treatment from the perspective of ‘action’ is therefore not at all contrary to Lacan’s theoretical inspiration, but strictly in accordance with the lines he himself set out from the 1950s until the end of his career. In sum, Lacan’s oeuvre contains a well-developed theory of action that merits at least as much attention as his theory of the signifier’s incidence in the unconscious, if not more, given the fact that in this theory of action a special place is also reserved for the object *a*, which Lacan adduced as his only true invention, and his single most original contribution to psychoanalysis (Lacan 1966-67: session of 16 November 1966; 1973-74: session of 9 April 1974; 1981*a*[1972]: 11; 2006e[1968-69]: 45; Porge 2005: 191-202).

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If many of Lacan’s concepts can be traced back to one or the other aspect of Freud’s works, it is less straightforward to find the Freudian bedrock

supporting Lacan's theory of action. Not only does Freud seem to be much less convinced than Lacan of the value of the notion of action for deploying a coherent and comprehensive account of psychoanalytic practice, his general outlook on action is also much less advanced and sophisticated than Lacan's. Not only does Lacan seem to be much more reassured than Freud of the potential benefits of action for the course of the treatment, his conceptualisation of action is also much more concerned with the analyst's line of conduct than Freud's. Hence, whereas Freud regards action more as a unitary, generally counter-productive phenomenon on the side of the analysand, Lacan employs a multi-layered concept of action, incorporating positive as well as negative connotations, and reflecting psychic mechanisms in the analyst as well as in the analysand.

In Freud's theory, three separate instances of action can be discerned, all of which constitute specific, clinically relevant manifestations on the side of the patient. The first type of action concerns the so-called parapraxes (*Fehlleistungen*), which Freud classified as formations of the unconscious, alongside dreams, jokes and hysterical/obsessional symptoms. In the broadest sense, these parapraxes or 'bungled actions' run the whole gamut of expressions of the unconscious Freud discussed in *The Psychopathology of Everyday Life* (1901*b*): from slips of the tongue and the forgetting of names to the 'accidental' misplacing of objects and the mistaken reactions vis-à-vis other people. In a narrower sense, they encapsulate those acts that fail to be accomplished, either because the subject engages in a different act, or because the act stops short of its realization. For example, instead of ordering a taxi driver to take me from the airport to the house where I live with my wife, I may 'involuntarily' give him my lover's address, and only realize my 'mistake' when I am actually standing in front of her door. Or, because I know how difficult it is for a taxi driver to drop me off exactly in front of the house where I live with my wife, and because I am keen to save some money, I may ask him to stop nearby, only to discover after I have paid him that I am still miles away from my actual destination. If acts remain unsuccessful, here, in terms of their conscious intention, it is exactly because the unconscious interferes successfully with their fulfilment. The more an act fails, the more success-

ful the unconscious. This is why, in *Seminar XI*, Lacan averred that ‘there is cause only in something that doesn’t work’ (*il n’y a de cause que de ce qui cloche*) (Lacan 1994[1964]: 22).

Without going so far as to call these bungled actions royal roads to a knowledge of the unconscious activities of the mind, a privilege which remains reserved for the dream, Freud treated *Fehlleistungen* as valuable objects of analysis whose emergence gives the analyst an opportunity for unearthing, through the analysand’s associations, the latter’s repressed wishes and fears. The analyst cannot elicit these bungled actions and is not responsible for their occurrence, yet when they appear he or she ought to take advantage of them to reveal latent materials in the analysand’s unconscious. And even when bungled actions operate beyond the realm of speech, Freud analysed them as meaningful productions, thus showing, as Lacan put it in *Television*, ‘that it is about nothing other than a deciphering of pure signifying di-mention [*dit-mension*]’ (Lacan 1990[1974]: 9).

A completely different picture unfolds with regard to *agieren* (acting out), which represents the second instance of action Freud distinguished in his theory of the psychoanalytic treatment. Like so many other technical issues of psychoanalytic practice, Freud discovered the problematic function of *agieren* in his case study of Dora (Freud 1905e[1901]). Expressing his surprise at the problematic nature of the young woman’s transference, and in particular her unconscious determination to take revenge on him, as if he were an avatar of Mr K, Freud contended that his patient had been acting out a substantial portion of her memories and fantasies, instead of putting them into words (Freud 1905e[1901]: 119). Only a decade later, in his technical papers, did he theorize the patient’s recourse to acting out as an unconscious attempt at escaping the goals of the treatment (Freud 1914g: 150). Whilst the analyst invites patients to acknowledge the sources of their suffering, to restore them to their proper psychic value through prolonged mental labour, and to resituate them within the confines of their life history, the patient may prefer not to accept this invitation and engage in the acting out of psychic conflicts. Yet Freud did not simply blame his patients, or their neurosis

for this unfortunate turn of events; he claimed that something in the nature of the unconscious itself forces patients to avoid remembering the repressed representations and to act them out vis-à-vis the analyst (Freud 1912*b*: 108). Acting out thus originates in an unconscious resistance to remembering, and it uses the transference as a playground for exercising its power over the analytic process. From 1914 onwards, Freud defined acting out more rigorously as the unconscious repetition of a repressed conflict within the transference, of which the patient remains unaware and which stifles the analytically beneficial operation of remembering (Freud 1914*g*: 151). The classic example is that of the patient who never mentions, much less admits her eroticized aggression towards her father, but who continuously challenges her male analyst in a teasing, pseudo-hostile way.

Freud remained truthful to this basic opposition between, on the one hand, acting out and repetition and, on the other hand, the clinically beneficial process of remembering, until the end of his life, even rekindling the antagonism in his book on Moses, in order to explain why the Jewish people came to regard Moses as a great father-figure (Freud 1939*a*[1937-39]: 89), with the caveat that after the publication of 'Beyond the Pleasure Principle' (1920*g*) he conceptualized repetition as a compulsion whose power resides in the engine of the death drive. Acting out is therefore of a completely different order than the *Fehlleistung*. Whereas the latter provides the analyst with a welcome opportunity for advancing the analysis, the former works against the obtaining of analytic results. If both the bungled action and acting out are rooted in the workings of the unconscious, the former epitomizes its bright, Apollonian, cooperative face and the latter its dark, Dionysian, recalcitrant side. No matter how disruptive the bungled action may be for the analysand, much like the other formations of the unconscious it facilitates the work of analysis. By contrast, acting out undermines the work of analysis, no matter how comfortable the analysand may feel about its occurrence.

Considering its indebtedness to repetition and the death drive, it does not come as a surprise, then, that acting out presented Freud with serious technical and theoretical concerns. If analysts are unable to cancel

out the interference of acting out, which would presumably involve the annihilation of the death drive, the compulsion to repeat and the transference, how are they supposed to handle the clinical vicissitudes of acting out in view of the advancement of the treatment? How can they halt, deplete or curb the incidence of repetition and resuscitate remembering? How can they transform the unconscious from an enemy into an ally? In 'The Dynamics of Transference' Freud did not hesitate to describe the whole situation as a struggle (*Kampf*) between the analyst and the patient, a war between the factions of the intellect and those controlled by the drive (Freud 1912*b*: 108). Eight years later, in 'Beyond the Pleasure Principle,' he posited that the patient's repetition of the neurotic conflict in the transference forces the analyst 'to speak severely to them and treat them coldly' (*den Arzt zu harten Worten und kühlen Benehmen gegen sie zu nötigen*) (Freud 1920*g*: 21). In light of all this, one wonders what Freud had in mind when he suggested in *An Outline of Psycho-Analysis*, his last contribution to psychoanalytic technique, that only the patient's acting out outside the transference ranks as a highly unfavourable phenomenon, acting out *within* the transference bringing about a situation that remains beneficial for the pursuit of psychoanalytic goals (Freud 1940*a*[1938]: 177).

The only proper solution Freud ever suggested in response to the issue of acting out and repetition is the analysand's working-through (*Durcharbeitung*). To the best of my knowledge, this term appears on no more than three separate occasions in Freud's entire published oeuvre (Breuer & Freud 1895*d*: 291; Freud 1914*g*: 155; Freud 1926*d*[1925]: 160), which has prompted some historians of psychoanalysis to argue that the notion and the process have no conceptual status in Freud's theory (see, for instance, Roudinesco & Plon 1997). In addition, Freud offered only very minimal glosses on the nature and function of working-through, which is all the more remarkable given the fact that he regarded it as the most important aspect of psychoanalytic labour. Indeed, working-through purportedly brings about the greatest transformation of the patient's state of mind, guaranteeing psychoanalytic effects beyond those obtained through the power of suggestion (Freud 1914*g*: 155), and

breaking the infernal resistance of the Id, which expresses itself through the compulsion to repeat (Freud 1926d[1925]: 160). Freud's formulations on how exactly we need to understand this mechanism of working-through are restricted to the patient's mandatory immersion in the radius of psychic resistance, in order to discover the drive on which this resistance is feeding itself. Working-through requires the most intensive of labours and its operation can be neither anticipated nor accelerated. One must allow the ill person all the time he or she needs (*Man muß dem Kranken die Zeit lassen*), and the psychoanalyst can only wait (Freud 1914g: 155). If working-through constitutes a mental test for the analyst's patients, it is thus simultaneously a test of endurance (*Geduldprobe*) for the analyst's patience (Freud 1914g: 155).

However, within the context of his discussion of working-through at the end of 'Remembering, Repeating and Working-Through,' Freud re-introduced a third conceptual component of his theory of action in psychoanalytic practice. From a theoretical point of view, Freud argued that the effect of working-through is comparable to the patient's abreaction (*Abreagieren*) of the affective quantum that has been impounded under the influence of repression. This notion of abreaction has a long history in the Freudian canon, dating back to Freud's collaboration with Josef Breuer during the mid 1880s, and rising to conceptual status with their development of the hypno-cathartic method for the treatment of hysteria. The term appeared for the first time in published form in Breuer and Freud's 'Preliminary Communication' (Breuer & Freud 1893a), which later featured as the introduction to the *Studies on Hysteria* (Breuer & Freud 1895d: 1-17). In this short contribution, the authors attempted to explain why memories of a traumatic event may persist in a patient's mind with great intensity and for a prolonged period of time, facilitating the emergence of hysterical symptoms, without the patient being aware of them. Breuer and Freud postulated that these memories retain their strength, thus withstanding the normal fading off of mental representations over the course of time, because the affective, energetic value with which they are endowed has never been sufficiently discharged. Hence, when proposing a therapeutic strategy for tackling the endless repetition

of these memories, Breuer and Freud suggested an abreaction of the entrapped affective quantum, alongside the psychic integration of the traumatic memories into a broader framework of ideas, through associative labour (Breuer & Freud 1895*d*: 8-9). However, this abreaction does not necessarily involve the patient's performing certain deeds: '[L]anguage serves as a substitute for action; by its help, an affect can be "abreacted" almost as effectively' (Breuer & Freud 1895*d*: 8).

When, in 1914, Freud equated the effect of working-through to the process of abreaction, which he had conceptualised with Breuer *before* the discovery of psychoanalysis, he in a sense admitted that for all the changes his therapeutic method had undergone since the 1890s, the envisioned goal of the treatment remained the same: ruling out, if not restricting the repetition of traumatic memories by neutralizing their affective charge. More than during the 1890s, however, Freud acknowledged the circuitousness of the path that leads up to this abreaction, and the analyst's impotence to direct or accelerate the analysand's journey in any way. At the same time, Freud implied that interpretation is not indicated as an analytic tool for countering the incidence of repetition and acting out, as they take hold of the transference. The analyst's naming of the analysand's resistance entails no more than a preparation for the true work of analysis, which consists in the analysand's working-through of the psychic entropy that is inherent in the unconscious.

The three components of Freud's theory of action in psychoanalytic practice I have outlined relate in different ways to the progress of the treatment, although they also stand in a meaningful relation to each other. If the analysand's bungled actions clear the way for the exploration of the unconscious, and thus somehow abide by the rule of the treatment, acting out is a means of escaping the treatment process, in view of maintaining a psychic status quo. If a bungled action, like any other formation of the unconscious, is open to interpretation, despite the fact that the analysand will probably try to avoid its being interpreted, the unconscious solution of acting out does not react to analytic interpretation, however explicitly it may be directed at the analyst. Insofar as the transference is contaminated by the acting out of unconscious psychic

conflicts, the analyst thus needs to avoid interpreting the transference, opting instead for a position which gives the analysand sufficient time and space for working-through. Abreaction is the expected effect of this general strategy. Unlike bungled actions and acting out, which affect the course of the treatment, it constitutes a major factor pertaining to the end of analysis.

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As I mentioned above, Lacan's theory of action is both more sophisticated than Freud's and more attuned to the analyst's clinical involvement with (and responsibility for) the various actions performed by the analysand. In this section of my paper, I shall concentrate on those elements of Lacan's theory that are most closely related to Freud's elaborations, whereas in the fourth section, I will zoom in on conceptual developments that, whilst still constructed on Freudian foundations, extend the theoretical boundaries and clinical applicability of his ideas. Throughout these parts of my text, I shall attempt to resituate Lacan's views on action within the hierarchical schema of interpretation, transference handling and the position of the analyst, which I explained at the beginning of this paper.

The most Freudian concept within Lacan's theory of action is no doubt that of the *acte manqué* (literally, the failed act), which appears at regular intervals throughout his works as the translation of Freud's notion of *Fehlleistung*. Like Freud, Lacan emphasized that failed acts can be categorized as formations of the unconscious, alongside dreams, jokes, and neurotic symptoms. The failed act is therefore a compromise formation, over-determined and rooted in a repressed psychic conflict. However, much more than Freud, Lacan underscored that 'failed act' is a misnomer when viewed from the angle of the unconscious itself. As he put it in his seminal 'Rome Discourse': 'In the case of the psychopathology of everyday life . . . it is clear that every bungled action [*acte manqué*] is a successful, even 'well phrased', discourse' (Lacan 2006a[1953]: 222; see also Lacan 1967-68: session of 6 December 1967; 1996[1966]: 4; 2001[1967]: 339; 2006b[1955]: 341; 2007[1969-70]: 58). As a success-

ful discourse, the failed act is also firmly embedded within the structure of language, even when the act takes place as a deed instead of a word. Lacan even went so far as to employ the linguistic analyses which Freud had undertaken on innumerable examples of bungled actions in *The Psychopathology of Everyday Life* (Freud 1901*b*) as supporting his thesis that the unconscious is structured like a language. The term 'failed act' can therefore be considered a misnomer not only from the perspective of the unconscious, but also insofar as the act is always determined by the structure of language (Lacan 2013[1953]: 16; 1967-68: session of 10 January 1968). The act, here, is never a pure, trans- or supra-symbolic event, but a formation whose mechanisms are crucially dependent upon linguistic, rhetorical processes and which cannot be conflated with simple 'human behaviour'. As Lacan phrased it in 1967: 'No surprise, then, that the act, inasmuch as it exists only in being signifier, is shown to be suitable for supporting the unconscious. That, in this way, it is the failed act which proves to be successful is but its corollary, and the only strange thing is that this needed to be discovered for the status of the act to be eventually distinguished firmly from that of doing [*celui du faire*]' (Lacan 2001[1967]: 356).

More provocatively, Lacan also claimed that the fundamental template for the failed act is the sexual act (Lacan 1976[1975]: 19). No sexual act between human beings is ever completely successful, at least from the perspective of consciousness, because the unconscious always interferes with its realisation, either by triggering all kinds of involuntary considerations of quality and quantity amongst the partners involved, or by conjuring up, in a more symptomatic way, the spectres of orgasmic and erectile dysfunctions. As early as 1956, in his seminar on object-relations, Lacan pointed out, in this respect, that the scandal provoked by Freud's work resides less in its emphasis on sexuality, and has more to do with his thesis, formulated towards the end of the *Three Essays on the Theory of Sexuality* (Freud 1905*d*: 235-243) that every relationship with the sexual object is marred by an essential, intrinsic difficulty (Lacan 1994[1956-57]: 59). Indeed, for Freud human sexuality, whatever form it may take, is always inherently problematic. This is what Lacan eventu-

ally tried to convey with his well-known formula 'there is no sexual relation,' (*il n'y a pas de rapport sexuel*) (Lacan 2007[1969-70]: 116), which could be rephrased as 'there is only ever a bungled sexual act'.

At a different level, Lacan also reconsidered the clinical issue of acting out, both within and outside the psychoanalytic treatment. Here, he moved from an orthodox Freudian outlook, which aligns acting out with repetition and transference (Lacan 1988[1953-54]: 246), to a more original viewpoint, extracting acting out from the field of symptoms and taking account of the analyst's ineluctable contribution to its emergence. This theoretical transition occurred primarily in line with Lacan's critical analysis of a case-study by the ego-psychologist Ernst Kris (1975[1951]), which is generally referenced in the Lacanian psychoanalytic literature as the case of the Fresh Brains Man (Leader 1997: 52).

The case concerns a young academic who, among other things, feels hampered in the pursuit of his scientific career, because each time he is about to embark on a new project he claims to discover that he is merely plagiarizing other people's work. Plagued by his unconscious compulsion to plagiarize, the young man fears that he is doomed to spend his days amongst the lowest ranks of his profession, if he is not to lose his job altogether when charged with professional misconduct. One day, after another attempt at publishing the results of a research project, he finds to his horror a book in the library that contains ideas very similar to those he is about to release. Although the book was known to him, he had no idea that he had simply been pilfering its contents when preparing his own work for publication, and so he became a plagiarizer in spite of himself. At this point, Kris decides to obtain the details of the book from which his patient had allegedly plagiarized, and after 'a process of extended scrutiny' (Kris 1975[1951]: 244), which does not necessarily imply that he went on to read the book himself (Leader 1997: 54), he arrives at the conclusion that plagiarism is not at stake, and that his analysand has read his own ideas into the work of the fellow researcher. Kris proceeds to disclose to his patient what he has found out, thus reassuring him that his fear of plagiarising is unwarranted. He then goes on to interpret the young man's inhibitions in his work as being rooted in

an unresolved oedipal conflict with his father. After a lengthy silence, the patient responds that for some time now he has adopted the habit of checking out some nearby restaurants when leaving the session, with a view of finding a place that serves his preferred meal: fresh brains (Kris 1975[1951]: 244-245). In Lacan's analysis of this peculiar sequence of events, to which he returned on a regular basis (Lacan 1988[1953-54]: 59-61; 2006c[1956]: 328-332; 1993[1955-56]: 79-80; 2006d[1958]: 500-502; 2014[1962-63]: 124-125; 1966-67: session of 8 March 1967), although with alternative readings and not without occasionally distorting Kris's own account (Baños Orellana 1999), the patient's act of eating (or seeking out) fresh brains, which seems as incomprehensible to him as the very act of plagiarizing, constitutes an acting out, in which something is being shown to the analyst (Lacan 2014[1962-63]: 124).

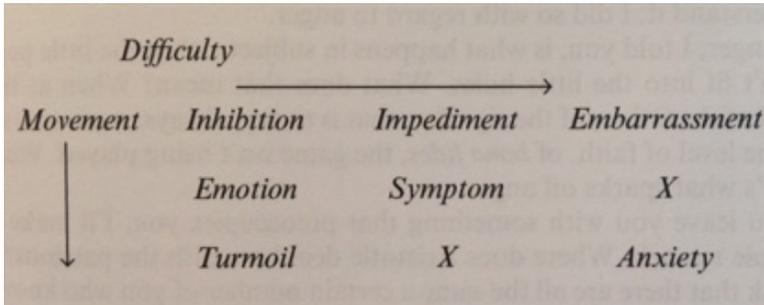
In *Seminar V*, Lacan argued that the backdrop against which an acting out takes place can only be understood if the event is not conflated with the category of symptoms, compromise formations, bungled actions, and so on (Lacan 1998[1957-58]: 420). Yet over and above this differentiation between acting out and the formations of the unconscious, which is already evident from Freud's works, Lacan also urged his audience to maintain a strict distinction between acting out and repetition (the compulsion to repeat), thus rallying for a revision of Freud's ideas on the subject. Acting out, Lacan indicated in *Seminar V*, always contains a message addressed to the analyst (Lacan 1998[1957-58]: 421) or, we can assume, at whoever sustains the transference relationship, and it includes a hint that the analyst is 'barking up the wrong tree' (Lacan 2006d[1958]: 501). The most general formula of acting out, Lacan declared in *Seminar VIII*, is that the subject acts in order to demand a more accurate response (*une réponse plus juste*) from the analyst (Lacan 2015[1960-61]: 336).

'A more accurate response to what?', the reader will probably ask. Relying again on Lacan's reading of Kris's case-study, the only possible answer is: to the analysand's desire. According to Lacan, Kris had failed to recognize the young man's desire, not so much by formulating a so-called intellectualist interpretation along the lines of 'I know and you are ignorant', but by unwittingly annihilating it in his attempt to readapt his

patient to an external reality. In other words, in telling his patient that he had not plagiarized Kris endeavours to replace what he perceives to be an unwarranted fear with a more truthful state of affairs. Yet in doing so he disregards his analysand's subjective truth, because it contradicts objective reality, and despite the fact that this subjective truth buttresses an unconscious desire, which is in itself caused by the object Lacan dubbed object *a* (Lacan 2014[1962-63]: 101). In a sense, the problem is not so much that Kris is formulating an inaccurate interpretation—if anything, his intervention is correct from the perspective of objective reality—but that he exchanges his analytic position, which should be geared towards the recognition of the patient's unconscious desire, in favour of a distinctly non-analytic, proto-educationalist stance, which involves careful 'reality testing', and which is focused on getting the patient to accept the objective facts. In the face of Kris's interventions, the patient reacts with an acting out, which takes the object *a* qua cause of desire out of the field of language and into the realm of a staged performance, where it is materialized in the form of fresh brains. As such, the acting out presents the analyst with 'the object on a plate' (Lacan 1966-67, session of 8 March 1967; Burgoyne 1997: 57), and serves the sole purpose of safeguarding the unconscious desire (in this case, to plagiarize), against its potential destruction at the hands of the analyst. Articulating the unconscious thoughts going through the patient's head in the moment of his acting out, Lacan rendered them as follows: *'Everything you [Ernst Kris] say is true, only it leaves the question unscathed. There are still the fresh brains [the object a]. To make a point of it, I'm going to eat some right afterwards so that I can tell you about it in the next session'* (Lacan 2014[1962-63]: 124-125). The acting out itself, as Lacan explained in *Seminar V*, always has the structure of a performed scenario or a theatrical display. This implies that it is situated on the same level as the fantasy (Lacan 1998[1957-58]: 421), whose function is precisely the maintenance of desire.

Lacan's most detailed reflection upon the psychic mechanism underpinning acting out appeared in his *Seminar X*, which examined the topic of anxiety (Lacan 2014[1962-63]). In the course of this seminar, Lacan constructed a conceptual matrix with nine cells, along the

two orthogonal axes of ‘difficulty’ and ‘movement’, whereby he distributed the three terms of Freud’s 1926 paper ‘Inhibitions, Symptoms, and Anxiety’ (1926*d*[1925]) across the diagonal, in such a way that inhibition and anxiety operate at opposite ends of the clinical spectrum, the former coinciding with minimal difficulty and minimal movement, the latter maximizing both criteria.



At the start of his seminar, Lacan took great care in filling out all the other cells of the matrix, choosing terms whose psychoanalytic import was not always clear, save two, which he kept open until the seminar was well underway. Eventually, he put the term acting out in the free cell between turmoil (*émoi*) and anxiety on the axis of difficulty, and at the end of the column comprising impediment and the symptom on the axis of movement (Lacan 2014[1962-63]: 13, 77). How are we supposed to read the position of acting out within this schema? What does it mean for acting out to be located between turmoil and anxiety, and for it to terminate a line that runs from impediment to the symptom?

As is so often the case with Lacan’s graphical representations, the meaning of the individual terms is easier to grasp than their interrelations. It seems to me that the specific location of acting out in the above matrix serves to indicate how the phenomenon stems from the synergetic operation of two conditions, notably impediment and turmoil, and functions as a psychic barrier against the eruption of anxiety. Lacan glossed ‘impediment’ (*empêchement*) as ‘to be ensnared’ (*être pris au piège*, literally

‘to be caught in a trap’), whereby the capture in question is purportedly conditioned by the subject’s narcissism (Lacan 2014[1962-63]: 10). ‘Turmoil’ (*émoi*), on the other hand, he explained as ‘trouble’ and ‘the fall of might’ (*chute de puissance*) (Lacan 2014[1962-63]: 13), which occurs owing to a lack of available signifiers, a ‘too little’ (*trop peu*) share of symbolic elements (Lacan 2014[1962-63]: 77).

In view of the aforementioned case-study by Kris, to which Lacan returned in *Seminar X*, these two coordinates of acting out are relatively easy to elucidate. Kris’s patient must have felt simultaneously struck in his narcissism and radically disempowered as a result of the analyst’s interventions, that is to say owing to the analyst’s replacing his analytic position with that of a psycho-educator. When confronted with his analyst’s discovery, the young man must have felt he had totally lost face, whilst at the same time being highly moved and incapable of redressing the balance, for want of words (signifiers). Yet instead of entering a state of anxiety, he has recourse to an acting out, which occurs as much in the very act of his having looked for and eaten fresh brains as in the ‘confessional’ retelling of the event in response to his analyst’s interpretation, through which he manages to retain his composure, whilst demonstrating how the Other (in this case the analyst) has made a crucial mistake.

Whereas Freud put acting out on a par with the compulsion to repeat, Lacan thus appeared to attribute its sudden emergence during the course of the psychoanalytic treatment to a technical error of the analyst at the level of interpretation. Nonetheless, in ‘The Direction of the Treatment’ he was keen to emphasize that this explanation does not at all exhaust the aetiology of acting out, and may even obfuscate its real source and origin. Not all scenes, exploits, performances and fits can be reduced to an unfortunate fault of the analyst (Lacan 2006a[1958]: 533). Exploits may already be part of the clinical picture before the start of the treatment, and may even be one of the principal reasons why somebody seeks, or is forced to enter treatment. Just as much as the analyst cannot be held responsible for creating the transference, he or she is not entirely accountable for sowing the seeds of acting out in the mind of the patient. The analyst may contribute to the awakening of acting out or, to use a

different metaphor, to its being born during the course of the treatment, but he or she is not involved in its conception, the circumstances of which are determined by the neurotic constellation. More fundamentally, however, it seems to me that the analytic error is less related to the contents of the interpretation *per se*, but rather to the fact that the interpretation is no longer strictly psychoanalytic, because it ignores the patients' subjective truth in favour of objective reality, which also implies that the analyst abandons his position for a psycho-educational approach. Drawing on Lacan's theory of the four discourses (Lacan 2007[1969-70]), one might even say that the analyst has unwittingly exchanged his analytic discourse, where he is held to occupy the position of a semblance of the object *a*—thus causing and sustaining the analysand's unconscious desire—for the discourse of the master, where his signifiers command and where the analysand's object *a*, as product/loss of the operation, is no longer allowed to enter the symbolic circuits of desire (Lacan 2007[1969-70]: 108).

From a technical point of view, acting out does confront psychoanalysts with more problems than they have probably bargained for as expert exegetes, or experienced explorers of the unconscious. For unlike the formations of the unconscious, which are not addressed at an Other yet do respond to interpretation, acting out crucially involves the Other, which is exactly why Lacan dubbed it 'wild transference' (Lacan 2014[1962-63]: 125), yet it does not react to interpretation. A double paradox emerges here. On the one hand, the formations of the unconscious (symptoms, bungled actions) do not appeal to interpretation—Freud himself had already pointed out that the dream 'does not want to say anything to anyone', 'is not a vehicle for communication' and is therefore not meant to be understood (Freud 1916-17a[1915-17]: 231)—but they are nonetheless being resolved, at least partially, through analytic interpretation. On the other hand, acting out does call for interpretation, if only because it is addressed to an Other, yet analytic interpretation has no effect on it (Morel 1987: 21). Again, Freud was all too aware of this singular inertia, which may explain why he considered the labour-intensive, time-consuming, yet poorly understood process of

working-through as the only alternative. As Lacan put it in *Seminar X*: 'The question is one of knowing how to take action with regard to acting out' (Lacan 2014[1962-63]: 126).

When broaching the issue of the analyst's response to acting out in *Seminar X*, Lacan reviewed three options suggested by Phyllis Greenacre, in an influential paper entitled 'General Problems of Acting Out' (Greenacre 1950): interpretation, prohibition and the strengthening of the ego. The slightest acquaintance with Lacan's work from the early 1950s suffices to realize that he was unable to accept the third option. To Lacan, strengthening the analysand's ego is a clinical evil against which analysts need to guard themselves at all cost, since it fosters the analysand's identification with the analyst (Rowan 2000: 98). Yet the other two options might not make much sense either. As I pointed out earlier, Freud had already arrived at the conclusion that acting out does not resolve itself through analytic interpretation. Lacan reformulated this principle by saying that interpretation 'is not destined to have much effect, if only for the fact that acting out is made for that' (Lacan 2014[1962-63]: 126). The flipside of this statement might be that, when it comes to dealing with bungled actions, the analyst's interpretations are destined to be effective, precisely because as formations of the unconscious they are *not* made for it. As to prohibition, instead of being a solution to the problem of acting out, it is likely to precipitate, perpetuate or exacerbate it, because an interdiction may very well contribute to further impediment and increased turmoil. Prohibition may even contribute to the acting out becoming unbearable in itself, as a result of which the analysand may resort to more radical types of action, or may be faced with an 'eternalisation of the neurosis' (Quackelbeen 1988: 373). As far as I am aware, the only alternative Lacan considered, although without much elaboration, is for the acting out (and the transference that supports it) to be analysed (Lacan 1967-68: session of 29 November 1967), that is to say for it to be curbed back onto a verbalisation of the patient's unconscious desire and subjective truth, which requires the analyst to adopt the position of semblance of the object *a* (Lacan 2007[1969-70]: 106-107), so that the patient be given the space and time to become both the narrator and

the author of his or her desire. Another option might be for the analyst whose patients engage in acting out to analyse the pitfalls of his or her approach in a process of clinical supervision (Verhaeghe 1993: 59). In terms of Kris's case-study, Lacan argued that the analyst should have allowed his patient to avow his desire (to plagiarize), whilst simultaneously leading him to acknowledge that the object of this desire is simply 'nothing' (Lacan 2006d[1958]: 502). This crucial difference is captured in the distance that separates Kris' psycho-educational intervention 'You do not steal' from a distinctly more analytic interpretation such as 'You steal nothing' (Lacan 2006d[1958]: 502; Fink 2004, 58-59).

4

Thus far, one cell in the conceptual matrix of anxiety has been left vacant. In this cell Lacan wrote the term *passage-à-l'acte* (passage to the act), by which he pushed his theory of action even further away from its Freudian homestead. Lacan's concept of *passage-à-l'acte* has no equivalent in Freud's discourse nor, for that matter, in any other psychoanalytic paradigm. The word itself does feature prominently in French criminological and forensic-psychiatric texts (Merle & Vitu 1997; Castel 2011: 986-992), as a technical term for various psychopathological manifestations that are all characterized by sudden, uncontrollable outbursts of affective energy—generally in the form of violence or aggression directed either against oneself or against another person—and until 1963 Lacan employed the term *passage-à-l'acte* exclusively in this, its ordinary psychiatric understanding (Lacan 1931; 1949; Lacan & Cénac 2006[1950]: 109).² To complicate matters further, the notion *passage-à-l'acte* is commonly used within French psychoanalytic circles as a translation for acting out which, as I mentioned previously, is itself a rendering of Freud's *agieren*. This is why Laplanche and Pontalis, in their authoritative and widely consulted *Language of Psychoanalysis*, did not devote a separate entry to *passage-à-l'acte*, neither in the English version nor in the original French, and restricted themselves to a discussion of acting out (Laplanche & Pontalis 1967: 6-8; 1973[1967]: 4-6). Lacan's decision, in *Seminar X*,

to reserve a special place for *passage-à-l'acte* in his conceptual matrix of anxiety, separate from acting out and with a novel meaning, thus challenged reigning criminological and psychiatric as well as established psychoanalytic vocabularies. For, on the one hand, he endorsed the value of a known forensic-psychiatric concept for psychoanalysis, without accepting its conflation with acting out, whereas on the other hand he refused to take on board the meaning with which psychiatrists had traditionally equipped and utilized this concept.

In Lacan's *Seminar X*, *passage-à-l'acte* concerns those events through which subjects transport themselves beyond the boundaries of the symbolic universe that has hitherto presided over their social and mental existence. Or, as Miller put it, *passage-à-l'acte* 'signals that one is leaving the ambiguities of reason, of speech and language in favour of the act . . . [I]n the act the subject escapes from . . . the ambiguities of speech as well as every dialectics of recognition' (Miller 1988: 53). In allocating *passage-à-l'acte* a place between embarrassment and anxiety on the axis of movement, and at the end of a line running from emotion to the symptom on the axis of difficulty, Lacan tried to demonstrate how *passage-à-l'acte* may also function as a psychic safety valve against anxiety, and is conditioned by the simultaneous occurrence of supreme embarrassment and intense emotion (Lacan 2014[1962-63]: 100-130).

In the opening session of his seminar, Lacan defined 'embarrassment' (*embarras*) as the experience of no longer knowing what to do with oneself, of desperately looking for something behind which to shield oneself (Lacan 2014[1962-63]: 11). If 'impediment' refers to the narcissistic blow of losing face, embarrassment is clearly much worse, because it concerns 'losing everything', being exposed in the naked reality of one's (lack of) being. If 'impediment' leaves subjects trapped in one place, it always remains possible for them to exercise their function elsewhere. Embarrassment, however, entails a much more radical confrontation with the failure that lives at the heart of human subjectivity. This is probably why Lacan put embarrassment at the extreme end of the axis of difficulty, beyond impediment and inhibition. Taking advantage of etymology, he also indicated how embarrassment conjures up 'the experience of the bar'

(Lacan 2014[1962-63]: 11)—not the experience of having had too much to drink, which may be terribly embarrassing in its own right, but the experience of being exceedingly struck, *barred* by the law of the signifier, which does not represent the subject for what it is, but merely for another signifier. If turmoil stems from too little signifier, embarrassment thus derives from too much signifier, that is to say from the superabundant infiltration of the symbolic law (Lacan 2014[1962-63]: 77). Hence, from a Lacanian perspective, embarrassment is always by definition an embarrassment of riches, notably the riches of the signifier. As far as ‘emotion’ is concerned, Lacan steered away from the panoply of meanings that have been accorded to the term in the history of philosophy and psychology, in order to promote the (etymologically precise) dimension of being pushed outside movement (Lacan 2014[1962-63]: 11-12). Or, in Cormac Gallagher’s words, it ‘is the experience of being knocked out of the motion that is geared towards a particular goal, which is . . . a way of inhibiting appropriate movement: *ex-movere*, emotion’ (Gallagher 1996: 14). Emotion is about being moved to such an extent that it becomes difficult to move; something is so moving that one is arrested in one’s movements.

To illustrate the incidence of *passage-à-l’acte*, Lacan collected two examples from Freud’s clinical cases, one from his case-study of Dora (Freud 1905e[1901]) and one from the case of the young homosexual woman (Freud 1920a). In the Dora case, he recognized an instance of *passage-à-l’acte* in the young girl’s slap on Mr K’s face after he has told her that his wife means nothing to him (Freud 1905e[1901]: 98; Lacan 2014[1962-63]: 115). In Freud’s case of the young homosexual woman, Lacan defined as a *passage-à-l’acte* the girl’s sudden jump into the depth of a railway cutting after she had ‘accidentally’ bumped into her father, when walking on the street with her ‘society lady’ (Freud 1920a: 148; Lacan 2014[1962-63]: 122). The combination of these two examples makes it clear that for Lacan *passage-à-l’acte* does not necessarily require an unexpected explosion of extreme violence, and should not be restricted to suicidal acts. As a matter of fact, the only thing these two examples have in common—and this is exactly why Lacan called them *passage-à-*

l'acte—is that they both constitute a desperate attempt to end a scene that has become unbearable. In slapping Mr K, Dora tried to finish the complicated intrigue she had set up between herself, her father, Mr K and Mrs K. Likewise, the young homosexual girl's suicidal act is literally an attempt at disappearing from the scene and leaving behind the circumstances and the people she has been involved with. It is worth noting, here, that Lacan typified the amorous adventures of both Dora and the young homosexual woman as typical examples of acting out (Lacan 2014[1962-63]: 122-123). Hence, if acting out involves 'making a scene' on the stage of the world, because one feels unrecognized in one's desire, *passage-à-l'acte* epitomizes a reaction against this very scene becoming unbearable in its own right—a reaction which not only facilitates the dismantling of the scene on the scene, but also the dissolution of the stage of the world in itself.

What triggers a *passage-à-l'acte*, according to Lacan, is the coincidence of embarrassment and emotion, the convergence of too much signifier with what I would call a 'moment of moving immobility'. How do these factors operate in the two examples Lacan highlighted? For the sake of brevity, and because the dynamics are easier to pinpoint, I shall restrict myself to the case of the young homosexual woman. When the girl runs into her father, who knows yet disapproves of her relationship, he passes them by 'with an angry glance [*mit einem zornigen Blick*]' (Freud 1920a: 148), which she reads as a sign of prohibition. Although she must have calculated, if not to say deliberately increased the risks of meeting her father when going off on a walk with her girlfriend in an area of the city that was on his way home from work, it is difficult to imagine how her being caught in the act by her father could have had any other effect than a profound feeling of embarrassment. Yet when she reveals the man's identity and his apparent state of mind to her 'society lady', the latter insists that they stop seeing each other and so declares the relationship over. Following Lacan, this second message must have induced some strong emotion in the girl, an experience of feeling deeply moved and utterly motionless at the same time. In conjunction with the embarrassment she experiences when being exposed in public to the paternal law, which is

her way of reading the father's angry glance, and as such already a phallic interpretation of the gaze—one of Lacan's figurations of the object *a*—the emotion prompts the girl to leave behind both the scene of the acting out and the stage of the world in general, by which she exchanges her divided subjectivity \$ (and her place within the symbolic order) for a position as mere object. Put differently, whereas the acting out constitutes a symbolic scene where the object *a* is served up in its brutal, concrete materiality, in the *passage-à-l'acte* the subject falls out of the symbolic altogether, and reduces itself to nothingness in its very identification with the object *a*.

The above examples of *passage-à-l'acte* are somehow less compelling than those Lacan gathered to illustrate acting out, if only because they concern events that take place before rather than during the course of a psychoanalytic treatment. Nonetheless, it is not inconceivable to apply these examples as paradigmatic cases of *passage-à-l'acte* within the confines of a clinical process. If the experience of embarrassment, resulting from an excess of signifier, is logically the first moment in the triggering of a *passage-à-l'acte*—the young homosexual woman would not have gone through her moving immobility had she not caught her father's angry look—then it is perfectly possible for this experience to be invoked by an analytic intervention. By contrast with acting out, which may be triggered through a technical error at the level of interpretation, yet an error which simultaneously drives the analyst out of the analytic position into the realm of the master's discourse, I want to propose the hypothesis, here, that *passage-à-l'acte* is likely to occur within the arena of transference handling. This proposition by no means contradicts the aforementioned idea that *passage-à-l'acte* happens when an acting out becomes unbearable. Indeed, both Freud and Lacan argued, although each in their own way, that transference cannot be divorced from acting out. To Freud, acting out is inextricably linked to repetition and transference, and in his technical papers he hardly differentiated between transference, repetition and acting out. To Lacan, transference is the enactment (*mise-en-acte*) of the sexual reality of the unconscious (Lacan 1994[1964]: 146), whereas acting out is a form of wild transference (Lacan 2014[1962-63]: 125).

What type of transference handling might be held responsible for the analysand's 'decision' to leave the scene in a *passage-à-l'acte*? How can psychoanalysts unwittingly induce potentially self-destructive acts of violence in their patients via a particular management of the 'emotional tie' (Freud 1916-17a[1915-17]: 431-447)? I am deliberately using Freud's characterization of the transference, here, because it demonstrates how transference is also intrinsically related to the realm of emotion, which Lacan singled out as the second condition for the emergence of *passage-à-l'acte*. The answer to these questions, it seems to me, lies buried in Freud's case-study of Dora, and more specifically in the technical error that made her end the treatment prematurely. Dora's goodbye to Freud deserves to be called a *passage-à-l'acte* because it entails a radical departure from the scene—not the scene of the world, but the 'analytic scene' of the transference. As Freud acknowledged in his subsequent reflections upon the event, he himself had precipitated Dora's vanishing act, because he had failed to accept her positive transference onto Mrs K, whilst underestimating the escalation of her negative transference onto him—as an oblique shadow of Mr K— during the course of the treatment (Freud 1905e[1901]: 120, footnote 1). Freud believed he knew something about the nature and outcome of hysteria, and so he could not stop telling Dora about her secret love for Mr K, to the point of encouraging her to consider marriage, satisfying himself with the thought that the more she refused to agree, the more she unconsciously repeated these feelings vis-à-vis him, Sigmund Freud, within the transference. Dora's *passage-à-l'acte*, of saying goodbye to Freud 'very warmly, with the heartiest wishes for the New Year' (Freud 1905e[1901]: 109), without showing up to her next appointment, is her way of slapping Freud in the face. It is designed to shatter Freud's trust in the value of his psychoanalytic knowledge, and is indelibly marked by his explicit reliance on this very knowledge during the analytic process. Simply put, what triggered Dora's *passage-à-l'acte* is Freud's intimate conviction that he knew the answer to the problem of hysteria, and his unscrupulous, indefatigable campaign to convince Dora of the validity of this answer. When viewed from this angle, Freud's strategy of transference handling in the Dora case can easily be associated

with Lacan's formula of embarrassment as an excess of signifier. Freud stripped Dora of her love for Mrs K and imbued her with injunctions and prohibitions, in short with the symbolic law of the father. In light of Lacan's assertion that transference always involves the analysand's investment of the analyst with the function of the 'supposed subject of knowing' (*sujet supposé savoir*) (Lacan 1994[1964]: 233), *passage-à-l'acte* would thus occur when the analyst identifies with this function, and starts to act as a knowing subject. Or, to put it in yet another way, *passage-à-l'acte* originates in the analyst's determination to overpower the transference, either by offering a 'knowledgeable' interpretation of its mainspring, or by formulating strict rules as to what is acceptable and what is not. Again, in operating in this way, and taking advantage of the transference in order to impose a certain epistemic template onto the analysand's desire, the analyst leaves his or her position to enter another discourse, yet instead of its being the master's discourse, it is the discourse of the university that is being adopted, insofar as knowledge comes to occupy the place of agency (Lacan 2007[1969-70]: 54).

The scarce in-depth discussions of Lacan's concept of *passage-à-l'acte* that are currently available in the psychoanalytic literature generally stop at the point of its disruptive and sometimes literally destructive side. However, from the late 1960s onwards, and especially with his *Seminar XV* on the psychoanalytic act (Lacan 1967-68), Lacan also considered its constructive face, which brings into play the goal and the end of the psychoanalytic treatment. In a sense, Lacan had already foreshadowed this aspect of *passage-à-l'acte* in *Seminar IX*, i.e. before the introduction of the conceptual matrix of anxiety, when he singled out the opening sections of Descartes' *Discourse on the Method* (Descartes 1985[1637]) as an example of *passage-à-l'acte* (Lacan 1961-62, session of 22 November 1961). What is Descartes' purpose in these pages? He expresses a fundamental doubt, and ultimately discards everything he has acquired during his journeys in the world of learning as spurious knowledge. He liberates his mind from the straightjacket imposed by the purportedly scientific opinions of his era, in order to clear the path for the discovery of a new beginning—a new unary trait that does not so much distinguish itself through its power

of unification as through its formal one-ness—in the famous *cogito ergo sum*. Descartes separates himself from the alienating constraints imposed by the Other (of authoritative knowledge), and proceeds to the formulation of an innovative philosophical principle.

If this too is a *passage-à-l'acte*, then we can begin to understand why Lacan considered its constructive side for the end of analysis, and why he invented a procedure called 'the pass' to verify its effects (Lacan 1995[1967]). The analyst's correct handling of the transference, then, does not entail its interpretation or its reduction to an unconscious psychic conflict, whose template is known by the analyst, but rather its employment as a tool for the analysand's construction of the fantasy. It is worth noting, here, that at the very end of *Seminar XI*, when discussing the end of analysis and the analysand's so-called 'traversal' of the fantasy, Lacan returned to Freud's mysterious notion of working-through. Lacan underscored that the end of analysis occurs 'after the mapping of the subject in relation to the *a*, [when] the experience of the fundamental phantasy [*sic*] becomes the drive' (Lacan 1994[1964]: 273). This statement was immediately followed by the idea of the traversal of the fantasy, which has gained momentum as the most significant of Lacan's contributions to a theory of the end of analysis, despite its being a hapax. Yet Lacan launched this idea by means of an open-ended question—'How can a subject who has traversed the radical phantasy (*sic*) experience the drive?' (Lacan 1994[1964]: 273)—and deplored the fact that it had only been investigated from the viewpoint of an analytic treatment with training effects. At this precise point, Lacan rekindled Freud's notion of working-through, which he employed to designate the process whereby an analysand runs through the cycle of analytic experience a sufficient amount of times for the fantasy to give way to the drive, and for making possible the transition from analysand to analyst. Hence, in Lacan's reading of Freud, working-through coincides with the traversal of the fantasy, prefigures the emergence of the drive (*jouissance*), and makes way for the concurrent adoption of the position of psychoanalyst by the former analysand.

During the late 1960s and early 70s, Lacan did not hesitate to

qualify this transition from analysand to psychoanalyst as a *passage à l'acte* (Lacan 1967-68; 1981b[1972]), so that working-through may be conceived as the psychic force that clears the path for this very act. Similar to the process of facilitation (*Bahnung*), which Freud explained in his *Project for a Scientific Psychology* (Freud 1950a[1895]: 300-302), working-through involves path-breaking—not of the neurones, but of the mental logic of the fantasy, and in view of the crystallisation of an act. The latter point is fully consistent with Freud's outlook in 'Remembering, Repeating and Working-Through', where the effect of working-through is compared to that of an abreaction (*Abreagieren*) (Freud 1914g: 156). In other words, Freud's concept of abreaction re-emerged, here, in the guise of a constructive *passage-à-l'acte*, whose occurrence is tantamount to the precipitation of a psychoanalytic training effect, and the possible transition from analysand to psychoanalyst. Much like in the aforementioned examples of *passage-à-l'acte*, divided subjectivity \$ is thus exchanged for the object *a* when the analysand comes to adopt the position of the analyst, with the double caveat that this transition is not triggered by the unexpected synergy of embarrassment and emotion, but by a process of working-through, and that the analyst is not supposed to identify with the object *a*, but only to operate as its semblance, supported by the snippets of knowledge that have been acquired during the process of psychoanalytic training.

Notes

- 1) Preliminary versions of this paper were presented at Dublin School of Arts, State University of New York—Buffalo, Fordham University, Creighton University School of Medicine, and Mission Mental Health—San Francisco CA. I am grateful to all the participants in these seminars, and especially to Rik Loose, Dan Collins, Ed Robins, Tom Svolos and Raul Moncayo, for their constructive criticisms.
- 2) In the paper by Lacan and Cénac, Fink has translated the term *passage à l'acte* as acting out.

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