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Panel

An ethical violation of one is a violation of many: The disruptive impact on individuals and the group

Chair: Cecilia Taiana, Ph. D, Canadian Psychoanalytic Society, Ottawa, Canada.

Presenters: Jane Burka, Psychoanalytic Institute of Northern California, San Francisco, USA.

Presenter: Angela Sowa, Psychoanalytic Institute of Northern California, San Francisco, USA.

Discussant: Viviane Chetrit-Vatine, Psy.D, Training Analyst, Israel Institute of Psychoanalysis; past President, Israel Psychoanalytic Society.

Summary:

An ethical violation is a shock that harms many individuals and the group, as it repudiates the institute's foundational commitment to an ethics of care based on the presence in its membership of a matricial space position, that is a position of asymmetrical responsibility towards the other. An extensive study by one institute demonstrates how violations disturb the containing and holding functions of the institute that is its ethical stance conceived precisely as responsibility toward the other. Uncontained anxieties stimulate primitive defenses, creating widespread tension among individuals and sub-groups.

Key words: ethical violations; ethics of care; group unconscious; matricial space position; survival anxiety.

Abstract:

An extensive institute-wide study after two investigations of serious ethical violations by senior analysts shows there is no such thing as one victim. An ethical breach by an institute member is experienced as a psychic shock that harms many individuals directly and sometimes permanently. The violation is also destructive on a group level. It repudiates and attacks the community's primary purpose: its commitment to an "ethics of care" involving a radical responsibility toward the other (Chetrit-Vatine, 2014).

Ethical violations by analysts have insidious and malignant effects on many levels, requiring timely institute responses toward membership. The ethics of care must turn toward balancing an

investigatory process with an ongoing matricial functioning that will allow responsible concern for the victims, the community, and the analytic process.

The first two panelists developed their ideas from participating in qualitative research involving voluntary de-briefing interviews of institute members after resolutions of two ethics investigations. The first paper addresses the multiple faces of care in the case of ethical violations: care for the directly violated patient, care for other patients as well as supervisees and students, and care for the community. The panelist proposes that breach of confidentiality is equivalent to a sexual violation, as both break open the analytic container and pervert the trust based on the respect of generations difference, that is of its asymmetric responsibility, so essential to psychoanalytic practice as well as to psychoanalytic formation.

The second paper explores how serious ethical violations interfered with containing and holding functions in the institute under discussion. The necessary—at times, overly restrictive—lack of transparency stimulated primal scene fantasies, as institute members were left to imagine the nature of the collapse of the analytic couple. Incestuous desires found their way into individual and group consciousness, as the un-thinkable, the normally well enough repressed *Sexual* (polymorphous sexuality), became a perverse reality. Survival-level anxieties and primitive defenses permeated the institute. The paper identifies diminished symbolic thinking, blurring of fantasy and reality, and confusion of meaning between confidentiality, privacy, and secrecy.

Reference:

Chetrit-Vatine, V. (2014). *The Ethical Seduction of the Analytic Situation; the feminine-maternal origins of responsibility for the other*. London: Karnac/ Ipa.pub.

Learning Objectives:

1. Participants will be encouraged to apply the ethics of care conceived as asymmetric responsibility towards the other, not only during psychoanalytic practice - concerning the analytic couples - but as part of the entire functioning of the community, not only during regular functioning but also and particularly after ethical violations.

2. Participants will be reminded how analytic practice and the all institution in charge of formation and teaching are unavoidably loaded with unconscious and preconscious infantile sexuality (*Sexual* or polymorphous sexuality) and as such how ethical violation committed by a senior analyst will necessarily provoke primitive level anxieties and defenses in the institute community group functioning

3. There has been no systematic data on the impact of ethical violations on analytic institutes. The presentations of this panel are based on qualitative research data from institute-wide

voluntary interviews of members after two ethics investigations. Additionally, most of the literature on ethical violations focuses on the impact on the analyst/patient pair, but the data from interviews demonstrates how necessary it is to consider impacts on the whole community at multiple levels.

4. Participants will be able to improve their approaches in handling ethical violations in their institutes, when and if they occur. They will recognize tensions in the community as group symptoms of primitive anxieties and defenses, in order to diminish tensions and conflict among groups and sub-groups. They will accept that an ethical community is not only the leadership responsibility or an ethics committee responsibility but must be sustained by this community every member.

5. A panel format will model the approach that ethical dilemmas are best addressed by "discourse partners." Open discussion is an important element in managing ethical matters, but in many cases, violations in institutes are handled by silencing. The panel discussion and the audience discussion are meant to counteract the typical veil of silence that inhibits talking about ethical violations in an institute.

6. This session is intended to increase participants' professional competence in addressing ethical violations. It will improve participants' awareness of the damaging impact of ethical violations by professionals who should be guided by the ethics of care for patients. Awareness of the underlying issues that create tension in an institute after ethical violations should improve teamwork within and between groups.