



Introduction

TRUTH AND LIES: PSYCHOANALYTIC PERSPECTIVES

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I begin this introduction by offering thanks to all of the authors, individually and as a group, who have generously contributed to this Special Issue on *Truth and Lies*. Earlier versions of these papers, except for Civitarese's contribution which was invited later, were presented in the runup to or during the Thirteenth International Evolving British Object Relations Conference held online over two weekends in October 2022 and sponsored by Northwestern Psychoanalytic Society and Institute located in Seattle, Washington (USA). Given the pressing nature of the conference and Special Issue theme—there isn't a day that goes by without my reading a newspaper article or hearing a radio or television journalist reporting on the topic of truth and concerns over the spread of disinformation, deepfakes, and lies (including an alarming increase of fake studies in academic journals²)—it seems imperative to share these papers as a collection in a timely manner.

On the matter of timing, I'm grateful to *AJP* Editor-in-Chief Giselle Galdi for allowing me the opportunity to serve as Guest Editor and collaborate with esteemed psychoanalyst authors in order to expeditiously bring this special issue of the journal to print. Her professionalism, generosity of spirit, and good humor made the publication process from start to finish truly pleasurable. Additionally, I wish to thank Joseph Aguayo for kindly offering invaluable comments on an earlier draft of my own paper in this issue.

In the following section I comment on the relationship between truth and lies and suggest that it is far from straightforward. I then synopsise each author's contribution in the same order as they appear in the Table of Contents highlighting central themes, how each author defines truth and lies, and conclusions drawn, both theoretical and clinical. I conclude with some observations of the similarities and differences in how the authors engage the topic and suggest that this enriches our understanding of truth and lies as psychoanalytic concepts.

WHAT IS TRUTH?

The pursuit of truth, albeit ambivalently, for humankind is as ancient as recorded history. In a 2016 address titled “And the truth shall set you free: What is truth?” Nigerian Rev Chamberlain C. Ogunedo begins with the following biblical passage:

“You are a King then!” said Pilate. Jesus answered, “You are right in saying I am a King. In fact, for this reason I was born, and for this I came into the world to testify to the truth. Everyone on the side of truth listens to me. ‘What is truth?’ Pilate asked. With this he went out again to the Jews and said: “I find no basis for a charge against him” (John 18:37–38 NIV).

Pilate finds “no basis for a charge against” someone whose sole purpose in life is to “testify to the truth.” However, the New Testament tells us that the Roman governor of Judea exonerated Jesus only to reverse course and later condemn him to death. Was Pilate’s initial exoneration an expression of his *true* feelings or was it a *lie* as revealed by his subsequent actions? Or was Pilate’s ultimate conviction that Jesus should be crucified a violent reaction to his own unanswered, perhaps unanswerable question—What is truth? Psychoanalytically speaking, this antediluvian account might serve as a metaphor for an enduringly complex relationship between truth and lies in our encounters with one another at the societal level as well as within psychoanalysis as a profession and in our treatment relationships with patients.

TRUTH AS A FUNCTION OF THE ANALYST’S THEORETICAL ORIENTATION

Hanna Segal (2006) notes that psychoanalysis as a theory and practice has always aimed at the “attainment of truth” (p. 287). Yet, what truth means, and consequently what is considered untrue or false, varies depending on, among other factors, the analyst’s theoretical orientation. Although I will not comment on each of the major psychoanalytic orientations,³ I briefly touch upon orientations implicitly or explicitly employed by Special Issue authors to highlight how truth, as an analytic concept, is far from static, and relatedly the rich diversity of thinking evident in the authors contributing to this collection. At the same time, similarities emerge in how authors define and apply these concepts in their clinical work with patients despite theoretical differences. More will be said about these similarities and differences after summarizing each author’s contribution in the following section.

In the Freudian orientation the analyst acts as a receptive screen upon which the patient projects unconscious emotional experiences transferred

from relationships with primary objects. Truth dwells in the unconscious in the form of repressed thoughts, feelings, and emotions outside of conscious awareness. Lies, at an unconscious level, are explained by Freud's (1900, 1901) notion of *dream distortion* or the process by which unacceptable sexual and aggressive impulses are transformed into dream images tolerable to the conscious mind. Thus, the aim of treatment is to unmask hidden emotional truth through disciplined analysis of the patient's dreams, parapraxes, and symptoms transferred onto the analytic relationship.

In the Kleinian orientation analytic practice involves "grasping the truth of psychic reality and making it available to the patient" (Segal, 2006, p. 286). Tools for understanding the patient's psychic reality include Klein's (1946) concept of *projective identification* to describe how unconscious aspects of the self are ascribed to an external other. Bion (1959) extends Klein's definition suggesting that, in addition to its pathological significance, projective identification is part of normal communication in the mother–infant relationship and by extension in the analytic relationship. The significance of the development of these conceptual tools is that it redefines the analyst's role from receptive screen (Freudian) to an increasingly engaged participant in the analytic relationship (Kleinian/Bionian). Consequently, the lens through which the analyst observes psychic phenomena in an effort to discern analytic truth and lies can be seen to shift from patient and analyst defined as separate subjects to an increasingly relational perspective.

In a 2018 PEPWEB video, Ted Jacobs describes how he came to nominate the term *enactment* to the psychoanalytic literature in an effort to remove the pejorative connotation of the older term *acting-out* which he believes doesn't adequately portray the truth of what is occurring between analyst and patient. In some ways we might think of *enactment* as a natural extension of the concept of *projective identification* (i.e., in shifting from a focus on the individual to the group of two) wherein the patient is able to engage the analyst in performing often-traumatic relationship scenarios before they can be consciously recognized by either participant. This notion of performance, echoing Freud's (1901) concept of *dramatization* in dream-work, where unconscious thoughts and feelings are transformed into a theatrical representation, marks a further step in the analyst's willingness to consider her own unconscious participation in the treatment process as well as the relevance of enactment as a technical tool for discerning analytic truth and lies.

A last-noted orientation employed by authors in this collection is post-Bionian field theory in which the analyst aims to intuit truth by attending to transformations occurring in the emotional field between analyst and

patient. Notably, in this orientation the unconscious is not seen as a function of the individual personality, but rather as a joint function of the analytic couple. Thus, the analyst interprets everything the patient feels, thinks, and says during the session as part of a co-authored waking dream emanating from the symmetrical level of consciousness. Another implication of this orientation is the principle of reversibility where feelings expressed by the patient are understood as unconsciously belonging to the analyst as well as (Civitarese, 2023a, p.10). For example, if the patient says, “I think you’re tired and don’t want to hear what I have to say,” the analyst needs to take seriously that the patient is accurately describing the nature of the unconscious emotional link between them; in this example referring to a sense of mutual fatigue and fear that an unrecognized emotional experience will remain unheard. Tools for intuiting truth and lies in this orientation include the analyst’s use of reverie, hallucinosis, and dreaming (Civitarese, 2023a, b).

AUTHOR CONTRIBUTIONS

Although the papers in this issue can be read in any order, according to readers’ interests, they are arranged in a sequence that, hopefully, lends coherence to diverse perspectives offered by these authors on the psychoanalytic meaning of *truth* and *lies*. Abel-Hirsch’s paper is positioned first as a reminder that no matter how receptive the analyst may be to new ideas and evolving psychoanalytic theory it is nevertheless impossible to achieve hindsight on the profession’s not-yet-known future. Put another way, the sagest Futurist is ever mindful of inevitable blind spots in trying to predict the future based on current conditions. The two papers that follow by Harrang and Civitarese, respectively, examine truth and lies through a predominantly theoretical lens followed by Eekhoff’s and Case’s papers foregrounding clinical material to elucidate their conceptual understanding of the topic. Finally, Winters’ paper, which includes both societal and clinical vignettes, illustrates the application of psychoanalytic concepts to the wider social context.

Nicola Abel-Hirsch: What Might Be in So Close That as Psychoanalysts We Miss It?

This provocatively penned paper explores the intersection of contemporary psychoanalysis and the prevalent ideology of liberalism, delving into how psychoanalytic practices and beliefs mirror certain features of this ideology. Abel-Hirsch (2023) poses questions about the potential blind spots psychoanalysts might have in our clinical encounters with patients and

identifies various characteristics of twenty-first-century psychoanalysis, including a focus on emotion, countertransference, and intuition.

The central theme revolves around the prioritization of subjectivity and feelings in both contemporary psychoanalysis and liberalism as described by Israeli author and historian Yuval Noah Harari (2011). Liberalism is characterized by the elevation of an individual's emotions as the ultimate source of authority, influencing politics, economics, art, and education. Abel-Hirsch draws parallels between these aspects of contemporary psychoanalysis and the prevailing liberal ideology, raising questions about the unconscious impact of societal beliefs on how the psychoanalyst engages with her patients in the clinical hour. Hence the paper's title suggesting that we might be *blind* as a profession to some of the ways in which we are impacted by ideologies circulating in the current social milieu and within psychoanalysis as a profession.

By positioning Abel-Hirsch's paper first, I suggest it may serve as a lens through which readers can consider all of the papers in this issue. That is, as a way to ponder what ideologies might be circulating within each of us—liberalism being only one possibility—influencing not only how we engage our patients, but also how we engage the ideas presented on the topic of truth and lies in this issue. Are we more likely to interpret an author's thesis and supporting clinical evidence as *true* when it aligns with our preferred theoretical orientation or when the ideas presented are already somewhat familiar to us? Conversely, when new or "wild thoughts" (Bion, 1997, p. 27) present themselves do we reflexively dismiss them as "ridiculous" (as described in Abel-Hirsch's clinical example in this issue) because "there is no possibility of being able to trace immediately any kind of ownership or even any sort of being aware of the genealogy of that particular thought" (Bion, 1997, p. 27)?

Returning to the paper, Abel-Hirsch discusses specific clinical examples from the work of Bion to illustrate her thesis. In one instance, Bion's supervision highlights the analyst's tendency to use *feeling talk* to excuse the patient's (and, possibly, the analyst's) behavior, instead of analyzing it. This echoes the tendency in liberalism to prioritize feelings over objective analysis. Another example explores how the analyst's attention to a patient's feelings can lead to the patient hallucinating a sense of love and care, which aligns with the manipulative mechanisms exploited by society, particularly by advertising [to which we might add certain instances of political advertising or messaging].

The author details a vignette from a long-term psychoanalysis to explore the dynamics of infantile feelings, oedipal realities, and the authority of the analytic process. The patient, referred to as "P," experiences difficulties in the analysis, feeling abandoned at the end of sessions and

struggling with a sense of responsibility and anxiety. Abel-Hirsch suggests that P's desire for the analyst's continuous care resembles an infant's need for constant attention.

Abel-Hirsch recalls a significant session where both P and the analyst independently associate to an image of a "babe-on-a-hillside," symbolizing Oedipal themes. This session marks a departure from the usual struggle for psychic dominance between analyst and patient. Instead, it introduces a shared experience within the analytic process, akin to a river where both parties are unconsciously participating. This watershed moment allows the analyst to recognize the authority within the analytic process itself, as opposed to granting it to individual feelings or personal understanding. This notion is contrasted with the prevailing ideology of liberalism, which assigns "supreme authority to feelings."

Ultimately, the author suggests that contemporary psychoanalysts need to be vigilant about the influence of ideologies, like liberalism, which emphasize subjective feelings and offer tools to examine their practice and beliefs more analytically. This involves recognizing the potential for narcissistic gratification, the risk of mistaking *feeling talk* for genuine analysis, and the necessity for maintaining a balance between empathy and objective inquiry. By critically examining these aspects, Abel-Hirsch suggests psychoanalysts can navigate the interplay between their practice and the prevailing ideological currents of a given society.

Not addressed in Abel-Hirsch's novel application of Bion's supervisory observations is how *feeling talk* when it is serving a defensive function in the analytic relationship contrasts with Bion's (1962) view that an individual's sense of self develops through a container-contained relationship, the essence of which is defined by emotional experience. Perhaps a topic for another paper.

Caron Harrang: On Grotstein's 'Truth' in Bion's Theory of 'O'

This paper artfully examines Grotstein's (2004) "The Seventh Servant: The Implications of a Truth Drive in Bion's Theory of 'O'" and its relevance to our understanding of *truth* and *lies* as psychoanalytic concepts. Harrang (2023) interrogates whether the concept of a "truth drive" adds anything to the analyst's theoretical and technical tool kit not already provided by Bion's notion of a K-link or Klein's notion of epistemophilia.

Harrang proposes that Grotstein's discovery of a truth drive in Bion's texts *does* offer something not already accounted for by the concept of an epistemophilic drive and that it can be understood as part of an ongoing paradigmatic shift in psychoanalysis from focusing on what can be *known about* our patients (epistemology) to an experience of *being with* them

(ontology). As such, what it means for the analyst to be “committed to truth” as the central aim of psychoanalysis (Bion, 1970, p. 99) requires a greater degree of emotional engagement on the part of the analyst than previously recognized. Grotstein suggests this entails tolerating ignorance and being open to new thoughts and evolving emotional realizations in the clinical encounter. Based on her reading of Grotstein’s text and other sources, Harrang suggests this engagement also requires a willingness to be disturbed by bodily sensations and proto-emotions before knowing whether these experiences *belong* to the patient or the analyst (or to both). Relevant to the treatment situation, Grotstein proposes that the existence of a truth drive explains why patients can accept the analyst’s interpretations even as they often reveal painful psychical realities.

Grotstein (2004) connects Bion’s ideas to Heidegger’s concept of “Dasein” and “Aletheia,” as further evidence of the shift in psychoanalysis toward a focus on ontology and the process of *being with* the patient. Harrang expands on Grotstein’s observation by showing a link between the concept of Aletheia, meaning truth and factuality in Ancient Greek, and “Parrhesia” or the relational act of truth-telling as elucidated by Foucault (2008) in the 1980s. She suggests that Foucault’s work—although seemingly unnoticed by both Bion and Grotstein—validates and increases the significance of Grotstein’s discovery of a truth drive.

While not mentioned in Grotstein’s paper, Harrang cites Bion’s observations described in “On Arrogance” (1958) pointing to anxieties stimulated by the pursuit of truth “at any cost” revealing an unconscious attitude of arrogance and its underbelly, stupidity. How then, she wonders, does the analyst differentiate the healthy expression of a truth drive from its pathological manifestation? Responding to this question, Harrang describes a gripping clinical vignette from Grotstein’s paper involving his encounter with a female patient whose strange behavior and a 20-minute silence evoke sensations of “dying” in the analyst. The session revolves around the patient’s history of early losses and emotional death resulting from her traumatic separation from her grandparents. At a certain point, the patient breaks their silence saying, “You’re dead!” Awakening from his somatic reverie, Grotstein to his own surprise interprets that the patient had emotionally “died” when she was separated from her grandparents, and their session coincides with the anniversary of this event.

The session’s wordlessness and shared bodily experience, Harrang suggests, enable a truth drive to unfold without interruption. A key element of Grotstein’s spontaneous interpretation is that it arose from a different register as a result of *not* saying what he’d consciously thought to interpret, (i.e., the analyst’s felt sense of *dying* as a projection of the patient’s experience of the grandparents’ deaths). One interpretation is not *truer* than

the other, although the emotional impact and clinical efficacy according to Bion—and Grotstein agrees—are vastly different. Bion gets at the difference saying, “If the interpretation is made mainly because it is [consciously] available it is a Column 2 statement [denial or lie] intended to prevent ‘turbulence’ in the analyst” (1965, p. 167).

One of the difficulties of reflecting on Grotstein’s vignette stems from the fact that recognition of a *lie* represented by the interpretation the analyst withheld occurs unconsciously. Intuitively, Grotstein went with an interpretation that arose spontaneously when he began speaking based on *becoming* the analysand’s endeavored self. This prompts Harrang to wonder if it is possible for the analyst to consciously recognize her resistance to *becoming* O of the session, thereby allowing a previously unknown truth to emerge. A vignette from Bion’s (1965) work with a male patient described in *Transformations* illustrates the analyst’s disciplined ability to resist interpreting the patient’s (quite obvious) delusional thinking; instead, *becoming* the patient’s confusional truth and in so doing facilitating a transformation in O.

Harrang touches on, in her view, Grotstein’s brilliant clarification of Bion’s perplexing observation that *all thoughts, as they are ordinarily known, are lies*. For Bion, the only *true* thought is one that has not yet been contained by a thinker (1970, p. 117). In this regard, thoughts not yet contained by a thinker are synonymous with O. Grotstein says that *falsification* results from alpha function and dreaming which is necessary for transforming absolute truth into emotionally tolerable personal truth (2004, p. 1095). Put simply, falsification allows us to recognize that the word *orchid* is not the same thing as the flower itself. A lie, in the psychoanalytic sense, as opposed to the creative act of falsification, refutes, or fails to recognize this distinction.

Giuseppe Civitarese: On Bion’s Concept of Truth in an Extra-Moral Sense

Civitarese (2023c) begins this refreshingly original paper noting Bion’s “idiosyncratic use of the concept of truth, and correspondingly, of the concept of lies or falsehoods.” Despite frustrations this may pose for readers, he insists that comprehending Bion’s usage of “truth” is crucial for understanding his ideas and their influence. Bion views truth as central to the psychoanalytic endeavor: he associates it with the instinct for growth, emphasizes its role in analysis, integrates it into his theoretical framework (e.g., theory of thinking), links lies to thinking but not to truth, and suggests that the treatment of liars is possible due to shifting definitions of truth and lies. These concepts are further developed in the theory of the analytic field, aligning with non-moralistic perspectives suggested by Nietzsche (who

coined the term “extra-moral” and suggests that the search for truth originates in an artistic impulse) and existentialist philosophers such as Husserl.

Civitarese discusses Bion’s perspective on truth and lies, homing in on his theory of thought. Lies require an audience, and in the treatment context, the analyst must consider the patient’s false statements as representing unconscious truths, calling for interpretation of meaning on multiple levels. Bion contrasts falsehood with authentic thought: falsehood demands effort from the thinker, while true thoughts exist independently of the thinker. However, the subject’s unconscious truth-speaking and the role of language and sociality blur these distinctions.

In what I find the most intriguing section of his paper titled “Column 2 of the Grid,” Civitarese discusses Bion’s theory of mind focusing on Column 2, which represents falsehood or lies. He explores how different elements along the genetic axis can be used to lie, evade emotions, and exist in an inauthentic manner. The grid is depicted as a dynamic representation of thought, highlighting the multiple ways in which psychic content (including bodily sensations or beta elements) can be utilized. Experienced by many analysts as a maddeningly abstract analytic tool, Civitarese brings it vividly alive when he writes:

Normally, we see thought as an ascent towards abstraction. However, Bion reverses the direction, just as he reverses the concept of falsehood. Indeed, after a long and tortuous journey, we realize that C2 [dream + falsehood/lies] exists to remind us that no one can be entirely in O, in absolute reality, except perhaps in death. ... So, truly, to exist means to deviate from the second law of thermodynamics, to take from the infinite, to tear something from it, to become finite. In this sense, *lying becomes a prerequisite for becoming a subject*. The term ‘persona’ in Latin means mask. The mask isn’t glued to the skin of the face, it’s not the face, it can be removed and changed (Esposito, 2014). Compared to the face it covers, whose essence belongs to O, the mask ‘minds’, just like the clothes we wear, but also the ideas we embrace or formulate. And yet, we can only be ourselves thanks to these necessary falsehoods.

This evocative paragraph echoes Grotstein’s (2007, p. 284) observation that Column 2 is where dreaming begins (see also Harrang, 2023).

In the final section titled “The Concept of Truth in the Post-Bionian Theory of the Analytic Field” truth takes on a distinct perspective. Building on Bion’s work, this theory—which Civitarese has written about extensively—emphasizes a shift from an “I/you” perspective to a “we” perspective in analyzing unconscious dynamics. The unconscious dialogue between the analyst and patient, or the analytic couple/group is seen as a joint text, eliminating the need to question whether the patient is lying or

telling the truth. This applies even when patients *intentionally* lie, as their unconscious speech reveals another layer of truth. Truth is no longer confined to content but is understood as emotional attunement to the quality of the intersubjective bond between analyst and patient.

In this framework, truth is perceived in the successful or unsuccessful coupling of emotional processes rather than as a matter of factual accuracy. The focus in analysis, Civitarese argues, is not on investigating causes but on providing an ongoing “weather report” of the analytic situation to mitigate anti-growth (-K) effects. This approach contributes, he suggests, to restoring trust in the analytic process and validating the patient’s emotional experiences. By adopting a “we” perspective, the analyst is able to sense shared emotions, thus ameliorating destructive emotional atmospheres within the analytic field.

Conclusions drawn from this exploration of Bion’s concept of truth and lies highlight a multi-faceted approach to the concept. Civitarese, in agreement with Bion, critiques the positivism and scientism sometimes evident in psychoanalysis. He suggests that Bion revolutionizes our metapsychological understanding of truth as emotional resonance and mental nourishment (food for the mind) in contradistinction to the arrogance of pursuing truth “at any cost.” In the post-Bionian model this understanding of truth translates to a process of “syntonization” and recognition between analyst and patient in the Nietzschean sense of a morality no longer focused on content, but on consciousness understood as a function of the analytic couple/group.

Interview with Giuseppe Civitarese, MD, FIPA, July 2014

As an addendum to Civitarese’s contribution in the Special Issue, we include a 2014 interview with the author conducted by Caron Harrang (Harrang & Civitarese, 2023) in advance of the Tenth International Evolving British Object Relations (EBOR) Conference: *From Reverie to Interpretation: Translating Thought into The Action of Psychoanalysis*. The interview contextualizes the development of Civitarese’s thinking as well as documenting his involvement with Northwestern Psychoanalytic Society and Institute’s EBOR conference which served as an impetus for all of the papers in this issue of the journal.

Judy K. Eekhoff: Between the Real and the Imaginary: Truth and Lies in the Psychoanalytic Encounter

In this highly imaginative paper Eekhoff (2023) explores the interplay between the real and the imaginary in the psychoanalytic encounter,

emphasizing its role in our perception of truth and how lies impact this dynamic. She defines truth as the interweaving of emotional and somatopsychic realities, filtered through imagination and sensory perceptions. The real and imaginary coexist but need to be differentiated to maintain sanity. Lies, rather than conscious manipulations, refer to unconscious disguises used to avoid confronting unbearable emotional truths. Additionally, lies disrupt the healthy balance between reality and imagination, distorting the perspective required for meaning-making. Eekhoff presents Bion's perspective, where minds require truth to develop and grow, highlighting the role of emotional contact with others in shaping a mind capable of thinking one's most disturbing thoughts. In Eekhoff's view, the dreaming process (while awake or asleep) acts as a bridge between emotional experience and language, fostering communication.

The paper emphasizes that without mediation and the containment of another mind, the chaotic influx of reality can lead to distorted or delusional perceptions, blurring the boundary between truth and lies. Eekhoff's exploration of these themes underscores that internal and external realities often don't match (e.g., when her patient, Dennis, misperceives that his face is physically "distorted" after a traumatic emotional altercation with his father), causing psychic disturbance and the potential for self-deception. In her view the capacity to tolerate frustration arising from dissonance between inner and outer experiences is crucial for growth and the development of a thinking mind. Such tolerance creates opportunities for authentic pleasure, moments of intense satisfaction where the real and imaginary momentarily unite, integrating emotional links and fostering a connection with truth and beauty.

In the clinical section of her paper titled "The Patient Who Did Not Exist," Eekhoff explores the concepts of *truth* and *lies* through an arduous analytic journey with a patient she calls Natalie. Natalie initially presents with post-partum depression and a haunted feeling related to her second child's death. Eekhoff notes that Natalie's bodymind had been riddled with self-deception, which extends to her experience with the analyst. The patient's lies are understood as unconscious defensive mechanisms used to cope with unbearable emotional truths. The analyst, too, is for a time unintentionally deceived due to her own internal processes and countertransference.

The author's vignette demonstrates how Natalie's psyche was formerly entwined with her lies, preventing the patient from truly knowing herself and experiencing the reality of her existence. Eekhoff emphasizes the significance of emotional truth and the transformative potential of imagination. Natalie's images, both shared and private, help her to connect with internal pain and unravel the depth of childhood traumas. Eekhoff reflects

on how specific visual images arising in the analytic hour—"an image of a hungry baby at [the analyst's] breast" or the patient's image of herself "on the ground with my hands held up to my mother [who] is walking away"—can capture emotional truths that words may fail to convey.

As the analysis progresses, Natalie's relationship with the analyst shifts from a false-self, dissociative confusional state to a more differentiated, genuinely emotional connection. Natalie's progression from denying her own embodied existence to acknowledging vulnerability and dependence indicates movement towards a more authentic sense of self. Ultimately, this vignette illustrates how the interplay between lies, emotional truths, and transformative visual imagery and associated bodily sensations shapes the analytic process and the patient's self-discovery.

In the Discussion section, Eekhoff explores the coexistence of neurotic and psychotic aspects within individuals and how they can distort perceptions of internal and external realities. This misperception, she asserts, leads to faulty assumptions and false assertions, resulting in lies that aim to make psychic reality more bearable. Emotion is highlighted as the link within bodymind, essential for facilitating reality testing. However, if emotions aren't processed through dreaming (synonymous with thinking in Bion's model of mind) but are discharged through action, lies can emerge.

Eekhoff emphasizes that emotional awareness contributes to self-identity, where an embodied relationship with oneself fosters congruence between desires and behavior. Her discussion outlines how patients who've experienced significant trauma or neglect as children often lack this congruence and struggle with reactivity or passivity in relation to the perceived expectations of others. The analyst's role is described as a quest to contact the *mute* and *dying* infant within the seemingly functional adult, a process that requires the analyst's deep resonance with the patient's material and her own somatopsychic experiences.

Eekhoff concludes reiterating the importance of the concepts of truth and lies within the context of the real and the imaginary. Childhood trauma leading to emotional overwhelm may give rise to cognitive distortions between body and mind. Her paper underscores the analyst's need to fully immerse in the patient's imagery and emotions as part of participating in their struggles and transformative journey. Eekhoff closes by emphasizing the importance of emotional truth, imagination, and relational processes in developing a subjective sense of self and fostering authenticity. The case of Natalie's progress is used as an example of the intricate interplay between lies, emotional truth, and transformations occurring in the analytic process.

Stan Case: Weaving Deceptive Webs and Untangling Emotional Truths

The author, who is both a child and adult psychoanalyst, begins his examination of truth and lies observing that “The need to both *reveal and conceal* [emphasis added] who we are is at the core of our humanity.” In one stroke Case (2023) sets the tone for his approach in this paper that pays equal attention to, as Bion reminds us, the nutritive value of truth for growth of the mind and to the deceptive web of lies that can form in the face of “violent phantasies and emotions which have not been able to be woven together in the nest of a containing mind.” The concept of “psychic cocoons” is introduced, where healthy transformation of emotions occurs, but trauma can lead to the creation of webs of partial truths and lies around one’s identity. Case examines the risks for the analyst of becoming entangled in a culture of lies, turning a healthy analytic environment into a cult-like dynamic. At the same time, his clinical examples credibly demonstrate how the analyst must, to some degree, allow himself to become entangled in the patient’s “web of lies” before attempting to untangle emotional truths.

In a section titled “Mystery and Magic” Case invokes Bion’s (1970) concept of “acts of faith” to describe the analyst’s suspension of belief or what is already known about the patient. Setting aside conscious knowledge offers the analyst greater access to intuition as a tool for apprehending truth. At the same time, Case notes that the emergence of new thoughts unsettles the status quo in the analytic relationship, sometimes with “explosive force.” When this force cannot be contained individuals may resort to “magical thinking” for relief from unbearable truth in favor of “simplistic truths, concrete solutions, and unbending beliefs.” Magical thinking at the level of the group, Case calls “groupthink,” referring to a process whereby truth and truth-tellers are marginalized in favor of unilateral *thinking* and single-minded solutions imposed by an authoritarian or fascist leader. The author cites Hitler’s (1925) assertion that the bigger the lie the more people will believe it as a devastating example of groupthink.

“Tell all the Truth but tell it slant” writes Dickinson (1945, p. 506); a line Case employs to remind himself (and us) that a “straight line to truth takes one too far too fast.” An “optimal learning curve” he says allows for truth to be encountered gradually and from different angles so as to be transformed into personal, subjective truth. The concept of time and the analyst’s timing in confronting lies and untangling emotional truths is further illustrated in Case’s four clinical examples.

Case highlights how group phenomena are relevant to understanding the patient’s psyche as well as the patient’s and analyst’s group consciousness. Bion’s (1961) theory of “basic assumptions” (fight/flight, dependency, and

pairing) is shown to be an effective tool for assessing ongoing dynamic tensions between truth and lies. The author's first and second case examples, briefly described below, illustrate fight/flight (*The Cult*) and dependency (*The Little Emperor*) forms of group relatedness.

The Cult

Case describes his treatment with *Bertha* who was raised in a cult characterized by a glorified leader and nihilistic rituals that left her internally tormented. Suffering from dissociative identity disorder, with twenty-two distinct personalities, each representing a fragment of her shattered self, *Bertha's* perception of truth and lies was deeply entwined with her traumatic experiences in the cult. "Instead of splitting her internal objects," Case comments, "she herself was split into multiple selves."

For a time, the analytic environment takes on a cult-like dynamic with the analyst feeling hypnotized by "the story of [*Bertha's*] dark life." When Case discovers that his patient carries a loaded gun, the threat of violence brings him to his senses, enabling him to recognize the "nightmare" they'd been sharing. When Case makes continued treatment conditional on *Bertha* agreeing to a safe storage contract for her firearm, she declines.

Case admits that the "terrors that tore [*Bertha*] apart were heart rending, but I was relieved when she chose not to comply with my conditions for continuing our work together." Although the analyst attempts to "locate *Bertha's* true self within a labyrinth of false selves and lies" some truths may prove unbearable for the analytic container. "The power of lies to corrupt," Case concludes, "as well as the truth of the limits of what we both could endure remains meaningful for me, and I hope for *Bertha* as well."

The Little Emperor

Case's analysis with 8-year-old *Andy* illustrates a child's omnipotent denial of truth employed in his play to ward off inner demons. Initially intolerant of any challenge to *Andy's* grandiose claims of being, for example, a "black-belt martial artist or a Romeo having sex with girls," the analyst must wait for opportunities to introduce a modicum of truth into their play. Employing an "optimal learning curve" the analyst, for a time, "plays along" with *Andy's* need to believe that he *never* loses at any of their games of checker or darts—despite clear evidence to the contrary.

A transformational moment appears in *Andy's* analysis, showing how the analyst playfully employs humor to "Tell all the Truth but tell it slant." Case (2023) portrays their exchange as follows:

Describing a movie he admired, *Andy* explained how Will Smith, the lead actor, sneezed and then said to someone, "I guess I'm allergic to bullshit." Later, when

Andy made a claim that was incredible, I said, "Should I sneeze at that?" Although my next few sneezes were coolly received, these playful confrontations helped to break the ice and paved the way for greater tolerance of emotional truth, in himself and between us.

Although these two clinical examples could not be further apart in their tenor and outcome, Case concludes that the analyst's desire for a particular treatment outcome is always anathema to the pursuit of emotional truth. Paradoxically, it is only when the analyst pays equal attention to truth and lies that a path toward growth is likely to evolve.

Nancy C. Winters: 'A Home to the Lie': The Contemporary (Per)version of Truth

In this evocatively titled paper drawing upon Bion's (1970, p. 303) observation that emotional upheaval associated with troubling or unbearable truth can unwittingly offer "a *home to the lie*," Winters (2023) addresses the contemporary distortion of truth in American society, noting a shift away from consensus based on factual information towards the acceptance of "alternative facts" and "fake news." She suggests this trend has intensified during the COVID-19 pandemic. Winters identifies a (per)version of truth characterized by an embrace of falsehood, where "the very notion of truth has been reversed and turned toward the lie." This concept is illustrated through instances such as the January 6, 2021, attack on the U.S. Capitol and the non-acceptance of the 2020 U.S. presidential election.

Utilizing Bion's metapsychology, Winters asserts that truth is crucial for individual and group wellbeing and security, yet its acceptance can be challenging due to potential emotional upheaval. The lie is used to evade this upheaval and is defined by Bion as deliberate falsification, requiring a thinker who knows they are lying. She invokes Hitler's (1925) concept of the "big lie," where a colossal falsehood gains credibility with individuals and groups susceptible to suggestion by a gifted liar. Winters picks up on Hitler's use of the phrase "a certain *force of credibility* [emphasis added]" (p. 134) to explain the liar's messianic power when emotion overwhelms the individual or the group's capacity for genuine thinking. The white nationalist fantasy of "replacement theory," alleging the replacement of Whites by minorities, is seen as a contemporary parallel to Hitler's manipulative strategies targeting Jews. Winters suggests that *any* ideology or system of ideas can be used defensively to "absolve us of our own responsibility to determine what is true and what is false." (Although not stated explicitly by the author, one wonders if Winters' caution might similarly apply to the defensive embrace of psychoanalytic theories or systems of ideas.)

Winters artfully weaves descriptions of social events and clinical vignettes to show how the ideas of Bion, Freud, and Matte-Blanco help us to understand the disturbing trend she identifies as an embrace of falsehoods in American society. She argues that Bion's notion of truth cannot be realized when external reality is distorted for narcissistic, hateful, or envious purposes. Despite these recognized difficulties, Winters' exploration gradually progresses toward a vision of how seemingly irreconcilable perspectives may be understood in a way that softens the divide between truth and lies. Matte-Blanco's (1975) theory of symmetrical logic in the unconscious is employed to illuminate instances of societal perversion of truth as well as laying the groundwork for a possible resolution of seemingly irreconcilable truths held by individuals or conflicting groups.

In a vignette titled "The Church of Antivax" Winters describes her analytic work with *Lucy* who encounters two women aggressively advocating anti-vaccine beliefs, leading to a confrontation between her trust in medical recommendations and their rejection of mainstream medical views. The vignette underscores the power of projections and anxieties, examining how antivaxxers project their fears onto the *unfortunates* they deem ignorant in an effort to deny their own vulnerability. Bion's concept of the liar and the lie as a parasitic container-contained relationship is explored, suggesting that both the lie and the liar are ultimately destroyed by parasitic dynamics. Winters cites as an example of this dynamic the media personalities and clergy (e.g., American televangelist Marcus Lamb) who preached against the COVID-19 vaccine and later died of the virus. Her discussion examines how conspiracy theories, such as QAnon, connect unrelated information (e.g., Democrats, pedophilia, Satan-worshipping, and mask mandates) and contrasts this with Bion's (1963) notion of "selected facts" that give coherence to known but previously unconnected information. (For example, Freud's [1901] intuitive recognition of the unconscious significance of dreams, although a previously known phenomenon, added coherence and meaning to the understanding of human consciousness and conduct.)

In additional clinical vignettes, Winters resourcefully utilizes Matte-Blanco's bi-logical theory of mind to show how intersubjective psychic realities allow for multiple co-existing truths. For example, in the case of *Julia* who "recognizes that although *she* has cancelled the rest of her sessions for the week, she felt abandoned by *me* [the analyst] over the weekend." In what Matte-Blanco (1975) calls the "symmetrical" layer of the unconscious, Julia leaving the analyst is the same as the analyst leaving her. When Julia realizes that she feels both abandoned by the analyst *and* eager for her upcoming vacation, she feels less disturbed by the multiple, not singular, nature of truth. For Winters, an implication of this way of thinking

is that “truth is [always] informed by the multiple ‘truths’ of the unconscious but not dominated by defensive purposes of the lie.”

In the final pages of this absorbing application of psychoanalytic concepts to some of the disturbing sociopolitical developments in current-day American life, Winters reflects on the susceptibility of individuals and groups to lies and gifted liars, particularly in the search for messianic figures to provide a sense of security amidst existential anxieties. The readiness for the messianic idea, as noted by Bion (1970), can lead to an embrace of lies that promise rescue from overwhelming fears, even as these lies are ultimately detrimental. Winters concludes that psychoanalysts can contribute, both as clinicians and as citizens, through “our understanding of the role of the unconscious on conscious life, illuminating the impact of catastrophic change such as global warming on the collective psyche.” In keeping with Matte-Blanco’s bi-logical theory, she suggests that by creating opportunities for dialogue that gives equal weight to conscious (asymmetrical) and unconscious (symmetrical) modes of thinking we “may render American society a less hospitable home to the lie” thus helping to (re)establish a culture of truth.

EMERGING TRUTHS FROM THE AUTHORS VIEWED AS A GROUP

In that all of the Special Issue papers were independently conceived, viewing them as a whole offers a unique perspective on how *truth* and *lies* are defined as psychoanalytic concepts and employed in the clinical situation. Immediately what stands out is that there is no single, universally agreed upon definition of truth as a psychoanalytic concept, except perhaps, that *absolute* truth (Kant’s [1781] thing-in-itself as opposed to observable phenomena) is unknowable and beyond human comprehension. At the same time, there seems to be agreement amongst the author group, stated explicitly or implicitly, that the pursuit of truth is a central aim of psychoanalysis. There also seems to be consensus regarding the multiplicity of unconscious forces motivating individuals and groups, including the analytic group of two, toward and away from “the statement known to be untrue” (Bion, 1970, p. 99 as cited in Harrang, 2023). Or, as stated in the opening of Case’s paper (2023), “The need to both reveal and conceal who we are is at the core of our humanity.”

As it pertains to analytic truth, Abel-Hirsch draws attention to the ways in which liberal ideology focused on feelings can, paradoxically, occlude the analyst’s attention to how the analytic couple are experiencing being in the room together. Winters similarly draws attention to the risks posed by the fervent embrace of *any* ideology, which she suggests “can be used to

absolve us of our own responsibility to know what is true and what is false." Both authors suggest that ideologies can function, for individuals and groups, as a defense against uncertainty and anxieties associated with catastrophic change. Relatedly, in Harrang's paper Grotstein (2004) and Bion (1965, p. 167) are cited to illustrate how the analyst's theories (e.g., interpretations based on what is previously known about the patient) can be used to circumvent emotional turbulence associated with evolving 'O' of the session. When employed defensively, psychoanalytic theory, like any system of ideas, can function as an obstruction, interfering with the analyst's capacity for intuiting analytic truth.

As mentioned earlier, I suggest that the analyst's theoretical orientation can influence how truth and lies are perceived in the analytic context. Civitarese (2023c) arrives at a similar conclusion and gives as example the analyst's opinion on whether patients who lie can be treated in analysis. "Some analysts," he says, "would say you cannot; others that lying is not a problem if it is seen as a symptom, especially if the analyst treats it as if it were dream material from which to deduce not the factual or nonfactual truth quotient of the patient's assertion, but the basic assumption that pervades the analytic couple at a given stage of analysis." This view of the lie as a symptom reflecting the basic assumption of "dependency" is nicely illustrated in one of Case's (2023) clinical vignettes when a child patient's lies are understood as an "omnipotent denial of truth employed... to ward off inner demons." In interpreting lies as a symptom, Case interprets that his patient "needed me to believe in his make-believe self before he could feel safe enough to bare his true vulnerabilities."

From a different vertex, Civitarese (2023c), suggests that lies can be understood, not as a symptom belonging to the patient, but rather as an aspect of the relational field. That is, "from a radical intersubjective angle, it would not, strictly speaking, be the patient (who lies) or the analyst. Rather it would be the couple, in their oneness, who can or cannot come into contact with the truth of the emotions they feel." And whereas, both Case and Civitarese (and all of the authors in this volume) are unquestionably committed to truth as a central aim of psychoanalysis, how truth is conceived, and therefore lies, is not identical. For example, Winters' (2023) focuses on Bion's definition of lying (Column 2) as a defense against unbearable truth and fears of catastrophic change whereas Civitarese (2023c) and Harrang (2023), while not ignoring the definition Winters' cites, draw attention to Grotstein's (2004) observation that the process of falsification (Column 2) is part of dreaming which is essential for transforming 'O' or absolute truth into personal truth. Civitarese goes further stating that "*lying* [meaning the psyche's capacity to falsify] *becomes a prerequisite for becoming a subject* [original emphasis]." Yet, as Winters

points out, citing Matte-Blanco's (1975) bi-logical theory of mind, seemingly contradictory truths can coexist at the symmetrical level of consciousness (e.g., lies can serve a defensive function and be part of a healthy process of dreaming and subjectification) even as these truths may appear irreconcilable at the asymmetrical level of consciousness.

Interestingly, Hitler's (1925) notion of the "big lie" is referred to by both Case (2023) and Winters (2023) in defining how lies can gain credibility with individuals and groups susceptible to suggestion by a so-called *gifted* liar. Winters' focus is on the liar's messianic power over members of a societal group when emotion overwhelms the individual's capacity for thinking, mentioning as a contemporary example former President Trump's employment of the demagogue's tactics and terminology. Case, on the other hand, links group members' propensity to embrace the "big lie" with the concept of "groupthink" when "imaginative thinking is shunned while unilateral thinking and single-minded solutions are enshrined" and contrasts this with the analyst's capacity for "acts of faith" or setting aside what is already known in order to apprehend analytic truth.

A final observation of the authors contributions viewed as a group (although there are countless others) is the role played by reverie and visual imagery as tools for intuiting analytic truth illustrated in their clinical vignettes. For example, Abel-Hirsch (2023) recalls a transformative moment in an analytic treatment when it is discovered that analyst and patient are both experiencing visual imagery of a "babe-on-a-hillside." Beyond the meaning made of the particular image (symbolizing Oedipal themes), the author interprets the patient's and analyst's shared reverie as mutual participation in a process that transcends individual subjectivity. Similarly, Eekhoff (2023) describes a closeup image of her patient's mouth onscreen (the analysis at this point being conducted online) evoking a reverie of "a hungry baby at my breast." This, combined with the patient's reverie (reported moments later) of herself as a baby reaching for her mother who is walking away, paints a picture for the analyst of physical and emotional hunger, abandonment, and neglect—a relational truth previously denied by the patient. Eekhoff suggests that contact between analyst and patient (whether the analysis is conducted in person or online) stimulates visual imagery and other sensory experiences that, under favorable circumstances, facilitates the analyst's reverie or waking dream thought. Harrang (2023) describes Grotstein's experience of "dying" in his report of a critical moment in the analysis with his patient as a formidable "somatic reverie" highlighting that the experience of reverie or waking dreaming requires a willingness to be disturbed (even terrified) by bodily sensations and proto-emotions before having any idea what they may represent symbolically. Civitaresse (2016, p. 47–48) suggests that "reverie lends itself to being used

as a manageable tool in clinical practice... if we are able to stand the pain and sense of guilt born from waiting and renunciation of the desire to saturate meaning with something that we are not yet able to understand.”

To conclude, each of the authors in this collection imaginatively investigates the psychoanalytic meaning of truth and lies applied to the clinical situation, and in Winters’ paper, to the wider social context. It is hoped that the diversity of perspectives offered by these authors inspires additional dialogue within the profession on an important topic, enhances the usefulness of these concepts as technical tools, and nurtures “a culture of truth” (Winters, 2023) in our engagement with one another at the societal level.

NOTES

1. Caron Harrang, LICSW, FIPA, BCPsa, is Board Certified Psychoanalyst with a Fulltime Private Practice in Seattle, Washington (USA). She is an IPA Training and Supervising Psychoanalyst with Northwestern Psychoanalytic Society and Institute. Recent publications include “River to Rapids: Speaking to the Body in Terms the Body Can Understand” in C. Harrang, D. Tillotson, & N. C. Winters (Eds.), *Body as Psychoanalytic Object: Clinical Applications from Winnicott to Bion and Beyond* (2021) [see Sheehy, 2023] and “Possibility Clouds Arising from a Close Reading of Civitarese and Berrini’s ‘On Using Bion’s Concepts of Point, Line, and Linking in the Analysis of a 6-Year-Old Child’” (2022).
2. In a recent NPR interview (Rascoe, May 14, 2023) of psychologist, neuroscientist, and journal editor Bernhard Sabel, lead author of a study investigating the preponderance of “fake studies” in academic journals, it was found that 28% of 2 million papers published in 2020 contain false or completely fabricated data, or the studies are entirely fake and generated by AI. Sabel suggests that the problem, which he describes as “the biggest science scam ever,” is rooted in scientists feeling pressured to publish as well as the ease of purchasing ready-made fake scientific papers generated by AI. He suggests that this trend, if ignored, will have a massive impact on society and on public health. (Also see: Brainard, 2023.)
3. Seligman (2017) has created a timeline of psychoanalytic orientations presently constellated as contemporary Kleinian, contemporary Freudian, Bionian field theory, relational psychoanalysis, and French psychoanalysis.

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