

What makes the group an analytical device? Considerations by Freud and Lacan

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Abstract: The purpose of this article is to take up the discussion on clinical practice with groups, based on the psychoanalysis of Freud and Lacan, highlighting the psychoanalyst's ethics, its impasses and possibilities of being part of collective, public or institutional environments. The "collective" is an important aspect in psychosocial care and in the "extended medical practice (clinic)" proposed by the Unified Health System (SUS). However, innovative perspectives proposed by new groups in the field are often forgotten, in the emergence of groups in the clinical field and the predominance of mass care, which justifies our discussion. For this, we present counterpoints between the groupism concept in psychoanalysis and the Lacanian perspective on the collective logic and social bonds. Then, we return to some Lacanian works in different collective contexts and, finally, emphasize some considerations about clinical practice, in order to go beyond the imaginary effects of groups and privilege the subject and his uniqueness.

Keywords: psychoanalysis, groups, institutions, Freud, Lacan.

Introduction

The influence of psychoanalysis in institutions, public environments and in the social field is a theme widely addressed by different authors who point out the need to expand the reflection on the psychoanalyst performance in these contexts. Groups can be a useful tool for psychoanalytic practices nowadays, being a clinical and political device for social situations, which includes the increasing degradation of living conditions, segregation and increased individualism, as well as for clinical conditions, such as depressions, borderline, addictions, panic, among others, which often overlap, generating important impasses in subjectivity and in the possibilities of social bonds.

Despite not having been originally used in the clinical contexts, working with groups has become frequent in health institutions in the last decades. In times of political repression, in the mid-1960s and 1970s, the clinical field group brought an innovative perspective by providing a collective logic of reflection, resistance and transformation. Currently, however, this perspective has been losing strength and we have observed massification effects in healthcare, either in the clinical sphere, where groups are seen as way to reduce waiting lines, or in other institutional, social and political spheres, generally focused in the figure of a leader or an ideology, with its well-known effects of alienation, already described by Freud in 1921.

Thus, we try here to answer questions that commonly move psychoanalysts who work in this

context: how can psychoanalysis contribute to medical practices in groups, preserving the typical feature of psychoanalysis of embracing the dimension of the individual in his uniqueness and escape from the effects of massification? And what makes the group an analytical device? Our hypothesis here is that the rescue and the updating of the conceptual applicability of group theories in psychoanalysis, considering also Lacan's contributions on "collective logic", are essential to insert psychoanalysis in different collective contexts today.

In the psychoanalytic field, this topic has already been discussed by Pichon-Rivière, Bion, Anzieu and Kaës, to name some of the main "groupists" in psychoanalysis. Even considering their works, there are few studies in the Lacanian field theory to think about the group in clinical practice, perhaps due to a limit set by Lacan himself (1998), who warned about the harmful effects of alienation in the group. However, we will show that this is a topic of interest for Lacan. Lacanian research on the cartels, collective logic and theory of discourses in the social bond have been developed to think about the shared space between individuals, based on a strategy capable of reducing the group's alienating and imaginary effect. Such effects, described by Freud in "Group Psychology and the Analysis of the Ego" (1921/2006), would be derived from the regressive phenomenon in masses organized around a leader or an ideology.

As a starting point, we take up some group theories in psychoanalysis and make a counterpoint to them with some Lacanian considerations on the theme. This methodological option considers the fundamental difference in the conceptions of psychoanalysis schools

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in terms of the encounter with more than one “other” and their respective subjective exchanges.

The next step will show examples of group practices developed by Lacanian psychoanalysts that, although heterogeneous and located at different levels of clinical practice, show the relevance of Lacanian propositions for the construction of groups as clinical devices. We bring together aspects that help to think about the analyst’s position in the coordination of groups, beyond the imaginary, to question fixed positions of enjoyment and for the creation of new relationships and social bonds. Finally, we articulate theoretical elements about the collective and social bonds to establish tools for groups in the clinical context.

Groups in the clinic: a brief historical recollection

Group psychotherapy has been influenced by different theories. In the beginning, by psychoanalysis and Marxist ideas, then by Gestalt psychology and field theory and, later, by communication theory, which brought an interdependent vision between individual and group. Influenced by the concepts employed by Tarde and Le Bon for the study of the crowds and by the historical conjecture after World War I, Freud improved the understanding of masses by bringing theoretical contributions about the emotional and unconscious bonds that would permeate the concepts of imitation in Tarde and of mutual suggestion and prestige of leaders in Le Bon. In this way, Freud, in “Group Psychology and the Analysis of the Ego” (1921/2006), introduced a concept of the social bond constitution with the psychoanalytic thesis that the identification among individuals and the placing of a leader in the ideal place of the Self are supported by libidinal investments, also highlighting the conflict between narcissistic needs and group bonds and the state of primitive regression involved in mass psychology, similar to the symbolic myth of the primal horde (the primal father) that Freud describes in “Totem and Taboo” (1913/2006).

The concept of identification was central to understanding the nature of groups as it is through identifications that the individual is constituted. In the groups, two types of identification are predominant: the regressive identification, in which the leader is placed in the ideal place, and the hysterical identification with the other. Freud’s research followed two levels of analysis, the first focused on the psychology of the masses and their changes in the individual, and the second continued the metapsychological study carried out especially in “On Narcissism: An Introduction” (1914/2006); “Mourning and Melancholia” (1917/2006) and “The Ego and the Id” (1923/2006) (Penna, 2014).

Although Freud never worked directly with groups in the clinical context, his theoretical framework on large groups contributed to the first attempts to apply

psychoanalysis to small groups in the twentieth century, such as those carried out by Adler, who developed groups with workers before World War I and child-oriented clinics, and Ernst Simmel, who proposed treatment in group for war neurotics using the cathartic method. Jacob Moreno developed the psychodrama in Europe through the “theater of spontaneity”, opening space for the first therapeutic groups and also for the denomination “group psychotherapy” in the clinical scenario in 1931. In the United States, between the 1930s and 1940s, we have the notorious work of Kurt Lewin (1978), who associated the social sciences with *Gestalttheorie* to develop a theoretical framework about groups by looking at the difference between the sum of the parts and the group. That is, the group would have a dynamic totality and the whole would be more than the sum of the parts, adding to this statement the figure and background relationships to think about therapeutic groups (Penna, 2014).

Lewin’s ideas also have influenced psychoanalytic-inspired works after World War II. In English psychoanalysis, Foulkes conceptualized group analysis, and Rickman and Bion developed group psychodynamics in “work groups”. In Argentina, between the 1940s and 1950s, Pichon-Rivière created the task-focused operative group, which emerged from his intervention at the Las Mercedes Hospice, where he worked as a doctor for 15 years. More recently, we also have the works of the French School, with Didier Anzieu, who started in the 1960s the dynamics of Lewin to develop his first research with psychoanalysis and groups, and the work of his disciple René Kaës, who in the 1970s emphasized intersubjective relationships within psychoanalysis.

Bion (1961/1975), in his group theory, started from the idea of a topical regression to the primitive phases of mental life (protomental) belonging to the paranoid-schizoid phase described by Melanie Klein. The group, therefore, would be subjected to two levels of behavior: the group defended and depending on basic assumptions (dependence, fight-or-flight and mating) and the work group (producing something new). Even if the combination of these basic assumptions foresaw the displacement of a leader, or to a couple (mating), object, ideology, or task in common, as thought by Pichon-Rivière, the imaginary identifying figures would continue to operate.

Although the Bionian theory is not enough to resolve the impasse of the imaginary plane of identifications, it was important to the question of groups, drawing Lacan’s attention during his five-week stay in England in 1947, when he wrote the article “British Psychiatry and the War” (1947/2003). Lacan showed respect for the work of Bion, describing his technique as a “group without a boss,” which also contributed to his thinking about cartels in the collective logic, capable of subverting the relationship of the group with the leader.

Kaës (2010) and Anzieu (1993) started from the Freudian perspective on groups and imaginary representations, and from the regression in face of threats

that the group context would inflict on the integrity of the ego. Kaës (2010) thought the group through the phantasmatic circulation, projections and introjections of each one in the group; the presence of unconscious psychic organizers regarding object relationships, body image, originary fantasy, family complexes. Kaës (2010) conceives psychoanalytic work as the “work of intersubjectivity” (p. 225), which is related to the analysis of interpersonal transfers and the elaboration of transfers and counter-transfers in the group configuration. Anzieu (1993), on the other hand, emphasizes the imaginary dimension, observing what he called “group illusion” and the need to elaborate anguishes through the transition from “the group’s self” to “the groupal us”, similar to the work group developed by Bion. Although the imaginary is problematized by Anzieu (1993) and, in this sense, closer to what was sought by Lacan, it becomes at the same time dependent on the imaginary resources for the group, with conceptual organizers such as the “imago”, “proto-fantasies”, the “image of the own body” and the “Skin-ego” (Costa-Rosa & Pastori, 2011).

According to Costa-Rosa and Pastori (2011), these authors start, in their own way, from a hypothesis of a “group psychic apparatus.” Despite the merit of these theories, some ended up tied to imaginary relationships centered on a regressive process, both those predicted by Freud in the dynamics of the masses (proto-fantasies, ideal self, imaginary dimension of the dream) and those outlined by Melanie Klein (paranoid-schizoid position, projective identification and countertransference).

We will now think with Lacan, and his subject conception, theoretical developments that may contribute to the transition from the imaginary to the symbolic. This does not mean that the imaginary is not used, but that the symbolic horizon may be well established on the analytical horizon. This remark is fundamental, since in some works there is a dichotomy between the imaginary and the symbolic fields in the groups. Thus, we must emphasize the simultaneity of the work in the three areas. The imaginary field, of identifications, is fundamental for cases when it is impossible to the individual to recognize himself as belonging to a social bond. Some groups are not exactly analytical, but they play an important role in restoring social ties and bonds. This is the case of workshops, activity groups and even psychotherapeutic groups that stimulate the process of mutual recognition among members. But it is equally important to consider the analyst’s discourse, who sustains the discomfort aiming at a singular production.

Lacan’s theoretical bases to think about groups

Lacan (1945/1998) extracts from the Freudian text “Group Psychology and the Analysis of the Ego” (1921/2006) the idea that the collective scale is homogeneous to the individual’s subjective processes,

and that the group uses the same defense mechanisms that the individual uses in neurosis (Laurent, 2002). The Other and the culture are traumatic, and the Self is understood as an instance of alienation that distances the subject from his truth due to imaginary identifications that condense ideals. For Lacan, the Self always contains the “group effect” within itself, as an addition of obscenity to the imaginary and alienating effect. The external group, therefore, would reinforce this internal group effect, participating in the constitution of the individual as a divided subject (Cavalcanti, 2006).

Unlike the researchers from the English school, who conceive the recognition of the other from a dialectic view in the relationship between the internal and the external, for Lacan (1966/1998) the recognition of the other as a subject always occurs, because language precedes birth. Language is a symbolic place, composed of culture, family, society or what he has called “the big Other.” This divergence is not insignificant if we look at its implications for transference, both imaginary and symbolic.

In his first works, around the 1950s, Lacan (1995) used the term “intersubjectivity” as an essential dimension to think about a theory of recognition that qualifies the relationship between individuals mediated by language, by the place of the Other. In 1967, however, the term was eclipsed by Lacan, considering that the relationship between subjects is always a relationship between the subject and the Other (Porge, 1994).

Lacan (1967/2003) places then the psychoanalytic phenomenon of transference as an obstacle to intersubjectivity. The impossibility of coexisting subjectivities would take place according to the relationship of the subject based on a ternary constituent, that is, from an unconscious signifier introduced in the discourse regarding the Other. That is why for Lacan (1967/2003) the subject is assumed by another subject, because this individual is what a signifier represents for another signifier.

According to Quinet (2012), there are five modalities of the other in Lacan: the other, my equal; the Other, place of the unconscious; the object *a* cause of desire; the other of the social bond; and the Heteros, the Other of enjoyment. This gives us initial clues on how the dialogue between two “selves” does not involve only them; it involves the “self”, conscious and unconscious; the “other”, image and equal, and the “Other”, symbolic order. The Other, of which the unconscious is discourse, is also a historical and cultural variable, given that the subject is situated in relation to knowledge and the latter is influenced by values of a time, as proposed by Askofaré (2009).

In the group context, these dimensions of the other coexist. The subject is related to the small other, equal, and the big Other, symbolic representative of authority and of the Subject Supposed to Know in the analytical situation, insofar as the analysand supposes that the analyst knows something about his suffering, the truth about his symptom. Thus, the theme of the group in

Lacan (1998) seems to establish the issue of transference and its relationship with the Subject Supposed to Know, as he himself reflects when suggesting that the group structure articulated by Freud in “Group Psychology and the Analysis of the Ego” (1921/2006), whose main models would be the Church and the Army, favored the thoughts about imaginary identifications and the relationship with the Subject Supposed to Know. Throughout his work, Lacan presents articulations about the relational dimension in reference to the Other and the subjective importance of this place.

Logical time and collective logic

Lacan knew, in 1945, of the traumatic effects of mass psychology in the face of the horrors of Nazism and the blind praise of Hitler and, for this reason, he began to think of a possible type of collective that was outside the logic of the negative power of the signifier-master associated with the leader. Thus, Lacan develops the point that will be presented here first, which concerns how to favor horizontal identifications over vertical ones.

Porge (1994) considers that Lacan solves this issue in the text “Logical Time and the Assertion of Anticipated Certainty” (1945/1998), where he examines the reciprocal relationship of subjects in the absence of a master. The example is set in a prison, in which three prisoners must solve a logical problem in exchange for freedom. The prison guard is not present, he only communicates the problem: each one must discover the color of the disc on their own back, without communicating and knowing that there are a total of three white and two black. The problem is solved in three stages: instant of seeing (perception: “no one leaves, so there are no two blacks”); time of understanding (“from the movement of others, I suppose I am white”) and concluding moment (the affirmation of a subjectivity in an act that verifies the certainty of being white with the steps that other prisoners take towards the exit).

Collective logic is Lacan’s proposal for this type of grouping of subjects that differs from mass-type groups, in which subjects blur their differences by identifying themselves with the leader. It is a group without a leader, in which the subjects do not compete, because through the relationship with a vital cause, a common absence, they move in a singular way with the cause and conclude in an act that releases all the subjects together (Gallano, 2014). We see, from this, that there are two possibilities of group: mass-type group and collective-type group, as Lacan proposed about the relationship between prisoners.

Although Lacan took a step back in relation to the notion of intersubjectivity, since each subject is related to another from his subjectivity and from different worlds, from the example of logical time, Porge (1994) repositioned the question of intersubjectivity in Lacan wondering what happens in the relationship between subjects when it goes beyond the mere encounter between signifiers. Is there

a common measure in the multiplicity of subjects that could, after all, establish intersubjectivity? The act of the prisoners in the logical time allows to establish, at the exit, in the act of the concluding moment, a “common measure”, reflects Porge (1994, p. 195).

In 1973, Lacan himself goes back to logical time with an unexpected theoretical development about the exit: “there is something there that I just valued the fact that something like intersubjectivity can lead to a healthy exit” (Lacan apud Porge, 1994, p. 116). On this point, Porge (1994) concludes that object *a*, manifested in a hurry to conclude (*a-hurry*), is the “extra link,” which only exists from a temporal path within a relationship between the three prisoners: “even if there are only three, it will be four” (p. 199).

Unlike the imaginary identity established through the mass leader described by Freud, Lacan puts into play in this proposal of collective logic a certain type of “healthy identification” as described by Cevasco (2014). Each prisoner is situated from their position of excluded (not knowing their color, not knowing who they are). Each of them relates from a common absence and not from a leader, a condition that establishes a collective experience that allows subjectivity, but not without the existence of the others.

Jasiner (2008), when thinking of the group centered on a task, brings a similar alternative to Porge’s by proposing that the center of the group (the task) is the object (*a*) that focuses on the subject, in its body, while a non-symbolic rest, which circumscribes the modes of enjoyment and, at the same time, moves the subjects in the same direction. The task with others, therefore, is to get around the hole that is in the center of the group. This is something fundamental to think about the experience with groups that share a type of absence; in fact, it is this sharing itself: object *a* and the forms of suffering most directly related to it.

Cartel as a tactic of collective logic and institutional relationships

Lacan (1998) started his first formulations about the cartel device in 1964 in the founding act of the Freudian School of Paris (FSP). Unlike a study group, the cartel should have, in the foreground, the intention of escaping from the logic of the masses, in which the leader would fill the place of the Other or the Subject Supposed to Know within the imaginary of groups. The identification of the leader, although satisfactory and comfortable to the subject, would inhibit the production of knowledge. In this sense, the Plus-One chosen by the group must work to subvert this logic and sustain the inconsistency of the Other (Pomponet, 2013).

In March 1980, Lacan intensified his reflections on the Subject Supposed to Know in structured relationships in psychoanalytic institutions, when he realized that the groups of his own psychoanalysis school had been

formed more by the logic of the masses than by that of the collective. Thus, amid the FSP dissolution, Lacan suggests the dissolutive cut strategy to minimize hierarchical effects, formalizing the cartel structure in the text entitled “D’Écolage” (Lacan, 1980), derived, on the other hand, from the experience acquired with the Cartel Days. The group would only have felt attached to a work whose dissolution was foreseen, and that would be the solution for any attempt at group work, which went beyond the limits of the school itself.

Lacan’s insistence with the cartel device is in line with a political bet that puts into question the mistakes that imaginary identifications promote in the relation that the subject establishes with his ideal. This glue effect in the group would make any kind of movement in relation to knowledge unfeasible. According to Gomes (2015), the cartel proposes precisely to work with the glue effects without buffering the real that permeates the groups.

Discourse theory

Lacanian discourse theory, exposed between 1969 and 1970 in the seminar 17 “The Reverse of Psychoanalysis,” consists of ways of thinking about the social bond. The bonds, according to Lacan (2006), are structured by language and the four forms of discourse (the Master, the hysteric, the university student and the analyst) order different ways of addressing the Other and enjoyment. The logic of the discourses is also distributed in four places separated by bars: agent/truth, other/production. The places are fixed, and the discourses are mutable, each of them is organized in a certain way about the places.

The Master’s discourse is one whose bond is based on power: the Master dictates what stands as an ideal, which orders the group’s knowledge and allows governability. In any case, it is true that the figure of the Master and its authority crosses social relationships and, in this sense, the Master’s discourse is an organizer of the society in which we live and, at the same time, a possible source of alienation. In the hysteric’s discourse, the subject of the unconscious with its symptoms turns to the Other (the Master), demanding that he produces knowledge about himself. That is why, regarding the analyst’s discourse, the relationship of mastery is also present, revealing itself in what the subject supposes that the analyst can offer them (Subject Supposed to Know): knowledge about his suffering. The difference is that the analyst subverts this relationship by not accepting the place of the Master and promoting the circulation of the Subject Supposed to Know, both in the relationship established in the individual and in the group treatment.

Jasiner (2008), as well as other authors, proposes that rotation in different discourses is intrinsic to practice in institutions, and a possible key to think about group logics and the way in which desire is articulated in the social bond. We will see later that the theory of discourses

has been essential to think about relationships, not only in relation to groups in a clinical situation, but also in the coexistence between the team of workers.

The not-all collective

In Seminar 20, given in 1972, Lacan (2008) presents an unprecedented and subversive theoretical organization to think about the difference between sexes based on two opposing logics: the logic of all-phallic for men and that of the non-all for women, also corresponding to two different forms of enjoyment, the phallic and supplementary. While men would inherit phallic support from castration, women would remain in search of their place, a specifically feminine demand. The establishment of this “non-all” quantifier, in the sense of undermining a claim of wholeness, does not only situate the sexual partition. The formula also opens two ways of thinking about the collective whole, as described by Cevasco (2014): the all with the exception of the male side and the non-all without exception of the female sexual position.

We saw how common is the tendency of a group seeking to recognize itself as a whole in the homogenization of the mass in relation to the ideal. Here we have the exclusion of the singular, referring to the imaginary of identifications in an “imaginary glue,” as Figueiredo (2005) puts it, referring to Lacan. On this point of view, Figueiredo (2005) also provides some of these indications of Lacanian psychoanalysis to think of a collective that cannot be sustained at all. “In a direction where Gestalt, which claims that the whole is more than the sum of the parts, we affirm that there is not the whole in the sum of parts” (p. 44). This means that the not-all collective, which does not close, is different from egalitarian collectivism, which often imposes itself as a guarantee for a group. Jasiner (2008) corroborates this position when thinking about the group from a logic of incompleteness, indicating that the coordinator will work knowing that there is no word or interpretation that can absolutely cover the real of the group.

The Lacanian topic and the group

The proposal to order group work appears in some works, such as those by Jasiner (2008) and Giraldo (2012). Resorting to Borromean logic helps the coordination task (Jasiner, 2008, p. 31) to identify dimensions in excess. Jasiner (2008) makes an approximation between the concepts of Freud and Lacan to describe the dimensions at stake: “imaginary narcissism, of the real enjoyment or symbolic super-self” (p. 34), the latter being generally manifested in the sacrificing positions assumed by some when they surrender to the superego itself.

Giraldo (2012) points out the importance of differentiating dialogues in the group and dialogues of the group, according to the position in the transfer, respectively imaginary or symbolic. In the dialogues in

the group, derived from the imaginary field, the members react to others and to the therapist from a position in the transference related to the relationship with their own ego, a product of the mirror stage, an image of themselves formed in the earliest childhood, an object from the first alienation in man in an image that works spontaneously in relationships. This is called “mirroring” in psychoanalytic theory and, for Lacan, refers to the relationship with the little other, a relationship that then implies the construction of an image of itself and the other as equals. The author differentiates the dialogue in the group, derived from the imaginary field of the relationship with the equal, from what he calls group dialogues, corresponding to the symbolic field and the relationship with the Other, which would mark the difference between the mirroring relationship for the singularity of the subject in its relationship with the Other.

In the imaginary space, the group recognizes itself as part of a whole and, if we consider its most primary aspect, in an illusion of unity with the mother. The narcissistic preservation attempts of the group are exemplified in the statements that appear in the group: “I know how you feel,” “I feel the same way”.

The concept of Real is associated with pulsion, trauma and the unrepresentable. The reference to enjoyment situates the pulsion dimension in the field of satisfaction and the way the subject relates to object *a*. Pulsion satisfaction is not equivalent to pleasure and, for this reason, it encompasses the most gross form of enjoyment, anguish. According to Giraldo (2012), the Real permeates the group, and work on the pulsion can create new conditions for parasitic enjoyment. The analyst’s role in the group is to operate between enjoyment and desire through the field of language, the symbolic. We often see the signs of the Real through generated anxieties, discomforts, and anguish in a group event. The forms of enjoyment also concern the subject’s mode of social bonding and, in these examples, we see different ways in which each one places itself as an object of enjoyment for the Other, that is, how the subject determines its openness to the Other. The group, therefore, can be powerful in questioning these positions of enjoyment for new ways of relating in the social bond.

Works with Lacanian groups

Despite the fruitfulness of Lacan’s thinking on groups, construction and practice with clinical devices began only with his followers, especially by those who sought to develop their ideas at institutional level.

One of them was Francesco Tosquelles who, influenced by Lacan’s thesis on paranoia (1932/1975), proposed psychoanalysis for the treatment of psychotics at the Saint-Alban Psychiatric Hospital in the south of France during World War II (Kupfer, Faria & Keiko, 2007). Among the devices created by Tosquelles, “the therapeutic club”, which later served as inspiration for Jean Oury and Felix Guattari at La Borde Clinic, consisted of a set of

free activities and co-management among patients who subsequently took advantage of the French law that in 1958 started to allow associative activities in the asylum (Ruiz et al., 2013).

Other psychoanalysts of the French School, concerned with the links between clinic and institution, were Maud Mannoni and Robert Lefort, who investigated the institutional treatment of childhood psychoses with the founding of the Bonneuil Experimental School in 1969, a mixed institution (school and day hospital). Currently in France, Bernard Penot coordinates a day hospital for adolescents in Parc Montsouris in Paris, the *Centre de Réadaptation Psychotérique* (CEREP), founded in 1964 for the treatment of severe psychopathologies in adolescence. In an interview carried out in 2001, the psychoanalyst discusses the impasses of the treatment of cases in which the pre-subjective, relative to the Lacanian real, moves between what is not imaginary and what is not symbolic. In this clinic, it is emphasized what happens in the group, which goes far beyond the interpretive act, since the situations manifested in the group need to be experienced by everyone, patients and staff, before being worked on. Penot uses “The purloined letter” to better explain the idea that the team experiences transference distribution before carrying out any clinical synthesis (Penot, 2002).

In Argentina, Jasiner (2008) has contributed strongly to the reflection on group work for “edge pathologies” as he refers, making an articulation between the proposals of Pichon-Rivière and Lacan. To the task-centered groups (TCG), explored by Pichon-Rivière (2000), the psychoanalyst adds the Lacanian borromean approach and the theory of discourses for clinical work with groups.

In London, Giraldo (2012) also takes advantage of the Lacanian topic to develop his thinking about working with groups in the clinical practice, differentiating what he called dialogues in group (imaginary register) from dialogues to the group (symbolic register).

In Spain, in 2013, the emerging social movements brought together some psychoanalysts willing to think about Lacan’s collective logic in the face of horizontal groups and without a party of young people protesting on the streets. The result of these reflections was presented at the event on subjectivity and collective logics and in the book *Política de lo real: nuevos movimientos sociales y subjetividades* (Gallano, 2014a). Gallano (2014b) considers logical time the key to the processes of creative subjectivity as opposed to alienated ones. Faced with the mechanisms of power and symbolic collapses, the notion of collective logic in Lacan can serve as a guideline for thinking about the bond between the singular and the common, in which the subjects relate without a boss, on an equal term and around a common task: a solution for a social problem.

In Brazil, some proposals have been considered in different clinical perspectives that seek new treatment alternatives through groups in clinical situations that place a limit on the approach in offices.

Following the democratic system established since the 1980s in Brazil and the current policies in healthcare based on the guidelines of the Unified Health System (SUS) and the psychiatric reform, most of the mental health services, public or private, support clinical practice from collective spaces. Figueiredo (2005) argues that the use of the collective is a privileged characteristic of Psychosocial Care Centers (CAPS) and an already defined feature of “extended medical practices.” According to the author, collective work takes place through different intervention proposals, such as therapeutic workshops, patient groups, family groups, joint leisure activities, assemblies, etc.

Some psychoanalytic institutions also sought to accompany the transformation of the psychiatric model in Brazil, such as the day hospital A Casa, founded in 1978, which proposed a new model of care for psychotic patients based on French-inspired psychoanalysis (Lacan, Aulagnier, Fedida), in the group clinic in Argentina, from Pichon-Rivière, and in the theory of institutional analysis, from Deleuze and Guattari (Okamoto, 2017). Lugar de Vida (Place of Life), an institution dedicated to the treatment of psychotic and autistic children, uses Lacanian theoretical contributions to think about the group clinical device in the treatment. Associated with University of São Paulo, Lugar de Vida enabled Kupfer and other researchers to think of groups as a treatment device capable of producing extensions in the child’s primary registers and as a productive field to treat the Other. Initially adopted by a Belgian institution, the treatment of the Other was thought by Zenoni (1991) based on the analysis of the subjective incidence of the Other in the institutional dimension (Kupfer, Faria & Keiko, 2007).

The practice of work teams has also been considered by different Lacanian psychoanalysts. Rinaldi (2013), for example, considers that the insertion of the psychoanalyst in institutional spaces has two interwoven dimensions: on the one hand, “psychoanalysis in intension,” which concerns the singular clinic of each subject, in which also the real psychosis or severe neurosis adds to psychological and social helplessness; on the other hand, with “psychoanalysis in extension,” psychoanalysts operate based on their ethics, which puts the subject and its desire in the foreground amid “practice among several,” teamwork.

For Rinaldi (2013), the rotation of the four discourses, pointed out by Lacan in “Radiophone” (1970), is an important tool in the clinic, insofar as it brings up the gaps in the discourses, the impossible of the real that it is presented and also the possibility of sustaining this gap in knowledge and the inventiveness of each subject’s clinic. Other authors who also consider discourse clinic to be an essential tool for institutional life are Moretto and Prizskulnik (2014), who based themselves on discursive rotation to think “the insertion and place of the psychoanalyst in health teams”; and Dunker and Neto (2015), as the theory of discourses in the institution contributes to thinking about the transfer management.

Figueiredo (2005) highlights the Lacanian conception of the non-whole collective and the transfer of work to think about the real of the clinic, manifested in the daily situations of health teams. The treatment of the Other, proposed by Zenoni (1991), also guides the work of the team that, according to Kupfer, Faria and Keiko (2007), can provide a range of intervention possibilities in the style of each professional of the team, if there is a place for the subject “supposed not to know,” in opposition to the unbearable that is the intrusion and dependence of the Other.

One last example about the teams, formalized with the principles of Lacanian psychoanalysis, is Clínica Aberta de Psicanálise (Psychoanalysis Open Clinic) project, a free initiative that takes place in public spaces in São Paulo since the end of 2016. Its three versions (psychoanalysis open clinic at Vila Itoioró and open clinics at Casa do Povo and Praça Roosevelt) consist of a device based on the transfer of the subject with a group of analysts that supports a common desire in the analyst’s function, based on a lack in terms of knowledge (Marino, Coaracy & Oliveira, 2018). The creators and participants of the project consider that the device avoids identity effects around the Ideal of Self of the mass-type groups or even the dual office situation, formed from the binomial of the mass (self and ideal self).

We also mention how groups in the legal field that work with families are associated with group work. Cerruti (2007), describing the experience with groups in the field of family mediation, considers that the monitoring by other peers dilutes the authority of the coordinator and shows the exchange of experiences with those who share the same codes (in this case, low-income populations). Moreover, directing opinions, such as “you must do this” or “this is wrong,” do not cause embarrassment, but associations between the members that offer subsidies so that the phantasmic universe of each one emerges.

Another scenario in which psychoanalysts are thinking of the group based on Lacan’s ideas is that of critical social situations, situated on the edges of clinical and social intervention. The project “Migrants, immigrants and refugees: vulnerability and social ties,” developed by the Institute of Psychology at University of São Paulo, was one of the works visited to think about the nexus between psychic vulnerability and the collective apparatus. The work of this group highlights the importance of strategies for the collective elaboration of trauma in the face of exclusion, wandering, abandonment or misery. It is a non-place in the discourse, as described by Rosa (2002).

The Casa dos Cata-Ventos project, a partnership between the Institute of Psychology of University of Rio Grande do Sul and Institute of the Psychoanalytic Association of Porto Alegre (APPOA) also brings a proposal to welcome people in situations of extreme socioeconomic precariousness and social exclusion.

This work proposes the possibility of including and recognizing through a clinical and political act, betting on the existence of a subject of desire who can narrate his story (Gageiro et al., 2015). Psychoanalytic action in extreme social situations also led Broide (2010) to carry out various experiments with groups under the theoretical framework of Enrique Pichon-Rivière, Freud and Lacan. The group, according to the author, is a porous space that brings into play the subject's conflict with the Other, and can be a source of "alienation of the subject in the mass, or of appropriation of the desire by the subject in the encounter with the Other" (Broide, 2010, p. 44). The focus on the group context that places the therapeutic value of public testimonies about traumatic experiences is also present in *Clínicas do Testemunho* (Testimony Clinics) project. The testimony clinic is based on the treatment of the presentification of the traumatic real that cannot be symbolized, a treatment that is based on the subject's statement about this intrusive enjoyment. Lacan suggests, in Seminar 20 (2008) that the testimony concerns the subject of the unconscious, in the encounter with the enigma of the Other, whose invasive presence continues to be felt in an unbearable way for the subject and that this is the enjoyment that needs to be declared to the other. According to Ocariz (2015),

When there is still no word, there is much unthinkable anguish. Sharing feelings, expressing ideas and thoughts relieves pain. When we share with the Other, we find a place within us and we can then give creative and constructive destinations to the *libidinal quantum* linked to a traumatic experience. (p. 36)

Corroborating this idea, the project formed support and psychological care centers in São Paulo, Rio de Janeiro, Porto Alegre and Recife to those affected by social trauma and violence by the State and authoritarian governments.

Several events also took place in Brazil to address the insertion of psychoanalysis in the political field and in social movements, intensified in the face of the growing degradation of social conditions. In June 2018, Maria Rita Kehl, Tales Ab'Saber and Guilherme Boulos (2018) organized an event called "The fight that heals: the therapeutic function of social movements." According to the authors, activism helps the subject to move from a narrative of suffering and impotence to a position of fight and resistance.

Groups in clinical practice

To operate in a psychotherapeutic group beyond the imaginary, Costa-Rosa and Pastori (2011) propose the same bases of individual analysis for the group, but with some modifications. It begins with preliminary interviews adapted to the group situation, composed

of three functions, as highlighted by Quinet (2005): symptom, transference and diagnosis. In the symptomatic phase, the subject must speak, and the analyst relaunch the analysand's discourse, in order that the complaint becomes a symptom to be questioned. In the group, this should happen in the same way, and the new members have the addition of the other members in the first listening.

From the questioning of the symptom, the subject incarnates in the analyst the function of Subject Supposed to Know, establishing the transference, a necessary condition for the analytical work. Taking the theory of discourses, the establishment of transference also refers to the hystericization of discourse, in which the subject goes to the Master to produce knowledge about himself, constituting an imaginary dimension of transference. The symbolic dimension consists of shifting the assumption of knowledge from another to the big Other as symbolic. Thus, the subject can deal with the relationship with the Other and with the suffering derived from it. The path from imaginary to symbolic transference depends on the suspension of mastery and the place of supposed knowledge occupied by the analyst. Only in this way it is possible to avoid stagnation in the imaginary transfer and allow the shift to the "work transfer" within the collective logic of the groups. What characterizes the analytic in the group, therefore, is the work with transference, that is, the symbolic extraction of what is being put in reality with people.

When suspending mastery and responses, the analyst favors openness to the unconscious, allowing the appearance of new knowledge by returning the question to the subject about himself. The transition from imaginary transfer to work transfer is also the discursive transition from the Discourse of the Hysteria (analyst in the place of the Master) to the Discourse of the Analyst. In the latter, the analyst operates from "learned ignorance," as an agent, semblant of the object (a) (as a cause, one who "makes" the other speak), as conceived by Lacan (1998) and the subject is in the workplace (Costa-Rosa & Pastori, 2011).

Concerning lateral transfers, some members of the group can also be put in the Master's place by others. It is common for some patient to act as a co-therapist and, therefore, it is important that the therapist takes care that the offer of ready answers does not prevent the subject from finding his own senses, as reiterated by Costa-Rosa and Pastori (2011), "the meaning produced by the subjects themselves is the only one capable of accounting for the enjoyment at stake in suffering or in the symptomatic formations that made them come to the therapy" (p. 10).

Lacan sought to refocus the psychoanalytic theory on the plane of desire. The desire is sustained by a fantasy about another imaginary that deceives the desire to cover up the lack-to-be (incompleteness). With this, Lacan established a relationship between the desire based on the recognition of the other (or desire of the Other's desire) and the unconscious desire (the realization in the Freudian sense) (Roudinesco & Plon, 1998). Thus,

the direction of treatment within a clinical group is to contribute to the slide from the desire for recognition (alienation to the Other's desire) to the recognition of one's own desire (separation from the Other's desire), a process in which it is necessary that the analyst's desire contemplates the project that the subject produces his difference and singular mark when rescuing alterity in a form of unprecedented bond.

We saw that the Plus-One is the Lacanian proposal for the organization of a group marked by the absence of a significant Master who commands it. The role of the Plus-One is to maintain lack of knowledge and lack of power in each one. The solution, on the other hand, depends on the act of each one, but that only exists in the face of a reciprocal act by the others. That is why the collective logic proposed by Lacan is anti-alienating, in the sense of masses alienation, and anti-individualistic.

The grouping occurs in the imminence of two discourses (from Hysteria and the Analyst). At first, one has the impression that problems are common. The analyst, located transferentially in order to relaunch the enunciation, contributes so that the meeting of two signifiers coming from different subjects in the group allows a third party to sanction a singular meaning and displace his position in relation to the symptom. It is a joint work that depends on the circulation of the word (significant association) and the relaunch of utterances (individual and transindividual) to produce the dimension of the utterance, capable, in turn, of producing a subjective repositioning (Costa-Rosa & Pastori, 2011). Here we must mention an illustrative anecdote.

Resonance of signifiers: the function of equal in the group

The constant balance of the group between mass effect and subject effect can find in the resonance of signifiers among subjects a productive encounter for work in the singular, especially in cases in which the ability to access the symbolic is reduced. An example is set in a group where a woman complained of being "tortured" in a delusion of persecution. In another group, in the absence of this woman, a young woman says that she also feels "tortured" when she was in crisis, asking if this would be a common thing for people in crisis. The therapist then asks her about the torture. The woman then says she has a feeling of being "tortured" by others, but when she sees the other woman, she now thinks that it could be "something of mine that consumed me in the moment of crisis."

We see in this simple clinical fragment that the equal played a role in the group from the resonance of a signifier, in this case "torture" (someone who suffers like me). The elaboration proceeds from the moment the therapist sends the signifier back to her, which, although it was not originally said, opens her own signifying chain. There was then a direction that contributed to a change

in the position of the Other's enjoyment object (being tortured) to something possible to be faced by the subject (torture in me).

If we refer again to logical time, we see a reciprocal relationship between equals that questions the view of this group about temporal scansion: seeing the other in his suffering, understanding in the other a point of resonance and concluding, from the relationship of reciprocity, what happens to oneself. The role of the group coordinator is fundamental in the work of conducting the resonances to singular production, operating so that the members of the group try to move from an attempt to "help" the other to an association with their own history. The group fluctuates in the power of identification and the coordinator helps through "symbolic surveillance," as pointed out by Giraldo (2012, p. 98).

Diagnosis in the group

Finally, the diagnostic function is essential to define the direction of treatment. This is also possible to be done in groups, since it is carried out under transfer. However, can we, through words, place different psychic organizations in a group to operate the appropriate treatment direction for each subject?

The signifier of the law, the Name-of-the-Father, establishes a central organizing function in neurosis, the symbolic castration, but it is out of reach in psychosis. The effect of the foreclosure of the Name-of-the-Father, which fulfills the function of point of need in neuroses, is an Other without the signifier of the law and, therefore, an absolute Other to which the psychotic individual is subjected. That is why in psychosis, as Quinet (2006) states, the analyst must use transference with the strategic objective of blocking the enjoyment of the Other.

Neurosis and psychosis: a tension that is established in the group

There are several tensions in a group derived from the coexistence between different structures. Giraldo (2012) points out that the "unconscious in the open" (Lacan, 1958b/1998) in psychosis, not mediated by the symbolic, brings to light the dimension of the Real that causes anguish to neurotics. Neurotics end up taking the psychotic as irrational, as it disorganizes their symbolic system. In contrast, in psychosis, neurotic discourse can be invasive. It is common in a group for a psychotic subject to feel persecuted by another or invaded when there is physical contact, such as, for example, a patient in a group who, when touched, considered that people had read his thoughts. On the other hand, the example takes place in a therapeutic workshop, where, faced with a common task, a neurotic individual was irritated by the lack of progress of the project, tried to organize everyone's tasks and felt frustrated with the lack of engagement of those who were not subject to the phallic norm.

The analyst's work in the group must take these differences into account. Interpretation, in neurosis, contemplates at the same time the significant opening to the meaningless and the effects of meaning, in order to change the subject's position in relation to suffering. In psychoses, the analyst must act with caution not to interpret the delusion such as in neurosis, since the possibility of symbolization does not operate in the same way.

Mental health workshops and activity groups

Groups involved in an activity have always been a widely used resource in the history of mental health. Therefore, it is important to bring some specificities to the psychoanalyst's clinical practice in these groups that involve an intermediate object or a common task. Occupational therapy groups, therapeutic workshops and thematic groups are generally evoked when talking about treatment proposals arising from a psychiatric reform. In this universe, there is no definite way of intervention. Such devices are always supported by different ways of production and creation from a multiplicity of languages, which can include artistic and intellectual production, collective work, among others.

Unlike verbal groups, or "egotherapeutic" as Kaës (2010) puts it, the function of discourse in these groups comes after the experience with the object or with the work. In this sense, the coordinators abstain from the interpretive objective, under the condition that the speech arises in a secondary way and may facilitate the elaboration activity as a result of the pulsion experience. It is the mediating object that triggers the associative process regarding both the relationships between subject and object, as well as what involves the relationships between the objects of each and the other with their own.

Thinking with Lacan, the groups that involve an activity have a double register through the creative act: the subject and its creation, and the creation of the subject with others. Mediating objects function as a "means," a strategy to access the symbolic. The creative act is not necessarily linked to artistic creation, but to creativity. For the analyst, the analytical act involves creativity, and for the analysand it prompts the elaboration work, which can lead to the creative act, in an articulation between analytical work and sublimation and, also, between sublimation, creative act and subjectivity. The creative act with others is the event that can be set up so that there are the best conditions for the subject to speak in his own name.

A brief comment on the theme of sublimation in psychosis is appropriate here. It is not the focus of our discussion here, but to point out that there is a parallel between sublimation in neurosis and symptom in psychosis, a substitution of the "father" sustained from the invention and the singular production of the subject. Still, authors like Pommier (1990), who make a parallel between sublimation and symptom, emphasize

the possibility of sublimation in psychosis in terms of subjective support.

Thinking about creation with others, via sublimation, also brings us to the notion of testimony, that is, a recognition of the Other that has the function of promoting the social bond. Sublimation appears not only as a deviation from sexual purpose, as renunciation or as a change of pulsion destiny. As Jasiner (2008) states, sublimation also supposes an appreciation of the collective, "a work of the collective on pulsion" (p. 42). Even so, she stresses that one must not lose sight of the articulation between what is produced in the collective and the traced in singular marks, which is proper to psychoanalysis. Based on Lacan, the author complements that creation finally "produces a symbolic that processes the impossible of the real in a soothing way" (Jasiner, 2008, p. 43). Corroborating this idea, Costa (2015) points out that in situations where there is a shared experience of art, social support is instituted in relation to enjoyment.

In conclusion: why think about the group from the Lacanian framework today?

It is by contemporary discomfort that we can infer, more than the dynamics of the group itself, the importance of the group in the clinical work to articulate between what touches the most intimate dimension of being, desire, with the collective dimension, represented by the group field. The exacerbation of individualism, the lack of subjective references for the identification and the degradation of working conditions and social rights makes the group a clinical and political instrument, both for extreme social situations, in which social precariousness is added to precariousness of the possibilities of subjectivation, as well as for extreme clinical situations, which include psychoses, depression, drug addiction and other borderline pathologies. The psychic vulnerability under the excess of unsymbolized real makes the support operated by the groups an example of productive substitution within the clinical approach.

It is ethics, not analytical setting, that governs the analyst's actions, as pointed out by Lacan (1958a/1998) when emphasizing that the psychoanalyst's politics and ethics frame tactics and strategies. According to Quinet (2009), Lacan evokes the policy of psychoanalysis as an antidote to the power of transference: "There where the analyst could exercise power – power that the transference confers on him – he exercises the lack" (p. 43). The policy of lack-to-be is finally engendered in the ethics of psychoanalysis, which is the ethics of desire.

The project of studying the elements that can serve as a basis for thinking about groups based on Lacanian psychoanalysis placed us before the task of extracting certain bases of thinking about the collective. In this sense, a statute was produced for the group with the concern to understand how to intervene in the suffering of a subject who escapes the social body, taking advantage

and moving away from the imaginary field, operating clinically, and constantly, a change in the demand for recognition, of the fixed positions of enjoyment, for the creation of new forms of social bond based on the recognition of one's own desire. Groups, like other clinical devices, are neither better nor worse than individual

analysis; they have a function that depends on how the device is operated and constructed, how the tensions between the imaginary effect and the subject effect operate, between different clinical structures, how the Master's place is questioned and how the enjoyments are reordered from these operations.

O que faz do grupo um dispositivo analítico? Considerações de Freud e Lacan

Resumo: O intuito deste artigo é retomar a discussão sobre a prática clínica com grupos a partir da psicanálise de Freud e de Lacan, tendo como horizonte ressaltar a ética do psicanalista, seus impasses e suas possibilidades de inserção em espaços coletivos, públicos ou institucionais. O recurso ao coletivo é uma característica privilegiada na atenção psicossocial e na "clínica ampliada" preconizada pelo Sistema Único de Saúde (SUS). Contudo, vê-se com frequência a diluição da perspectiva inovadora proposta no surgimento dos grupos no campo clínico e o predomínio do atendimento massificado, o que justifica esta retomada clínica. Para isto, apresentamos contrapontos entre os grupálistas no interior da psicanálise e a perspectiva lacaniana acerca da lógica coletiva e do laço social. Em seguida, retomamos alguns trabalhos de extração lacaniana em diferentes contextos coletivos e, por último, enfatizamos algumas considerações sobre a prática clínica, tendo como norte atravessar os efeitos imaginários do grupo e privilegiar o sujeito e sua singularidade.

Palavras-chave: psicanálise, grupos, instituições, Freud, Lacan.

¿Qué hace del grupo un mecanismo analítico? Consideraciones de Freud y de Lacan

Resumen: El propósito de este artículo es retomar la discusión sobre la práctica clínica con grupos a partir del psicoanálisis de Freud y de Lacan con el fin de resaltar la ética del psicoanalista, sus impasses y posibilidades de inserción en espacios colectivos, públicos o institucionales. El recurso del colectivo es una característica privilegiada en la atención psicossocial y en la "clínica ampliada" recomendada por el Sistema Único de Salud (SUS). Sin embargo, suele haber una dilución de la perspectiva innovadora propuesta en la emergencia de grupos en el campo clínico y el predominio de la atención masiva, lo que justifica esta reanudación clínica. Para ello, se presenta contrapuntos entre los grupos del psicoanálisis y la perspectiva de Lacan sobre la lógica colectiva y el lazo social. Después, se vuelve a algunos trabajos de extracción lacaniana en diferentes contextos colectivos para, por último, enfatizar algunas consideraciones sobre la práctica clínica, con el objetivo de atravesar los efectos imaginarios del grupo y privilegiar al sujeto y su singularidad.

Palabras clave: psicoanálisis, grupos, instituciones, Freud, Lacan.

Qu'est-ce qui fait du groupe un dispositif analytique ? Considérations de Freud et Lacan

Résumé: Cet article aborde la pratique clinique avec des groupes basé sur la psychanalyse freudienne et lacanienne, en visant à souligner l'éthique du psychanalyste, ses enjeux et ses possibilités d'insertion dans des espaces collectifs, publics ou institutionnels. L'appel au collective est une caractéristique privilégiée du soin psychosociale et de la « clinique élargi » conçu par le Système de Santé Unifié (SUS). Cependant, nous constatons souvent la dilution de la perspective innovatrice proposée dans l'émergence de groupes dans le domaine clinique et la prédominance des soins en masse, justifiant cette reprise clinique. Pour ce faire, nous présentons des contrepoints entre les groupistes au sein de la psychanalyse et la perspective lacanienne sur la logique collective et le lien social ; ensuite, nous reprenons quelques études d'extraction lacanienne dans différents contextes collectifs. Enfin, nous soulignons quelques considérations sur la pratique clinique, en cherchant à franchir les effets imaginaires du groupe et à privilégier le sujet et sa singularité.

Mots-clés: psychanalyse, groupes, les institutions, Freud, Lacan.

References

- Askofaré, S. (2009). Da subjetividade contemporânea. *A Peste*, 1(1), 165-175.
- Anzieu, D. (1993). *O grupo e o inconsciente (o imaginário grupal)*. São Paulo, SP: Casa do Psicólogo.
- Bion, W. (1961/1975). *Experiências com grupos*. Rio de Janeiro, RJ: Imago.
- Broide, J. (2010). *A psicanálise nas situações sociais críticas: violência, juventude e periferia em uma abordagem grupal*. Curitiba, PR: Juruá.
- Cavalcanti, A. (2006). Ser brincando: sobre a psicanálise em grupo com as crianças. In P. S. Rocha (Org.), *Cata-ventos: invenções na clínica psicanalítica institucional* (pp. 133-155). São Paulo, SP: Escuta.
- Cevasco, R. (2014). Acto y saber en la lógica colectiva de Lacan. In C. Gallano (Coord.), *Política de lo real: nuevos movimientos sociales y subjetividad* (pp. 115-144). Barcelona: Ediciones S&P.
- Cerruti, M. (2007). *Bate-se em uma mulher: impasses da vitimização* (Doctoral dissertation). Instituto de Psicologia, Universidade de São Paulo, São Paulo.
- Costa, A. (2015). *Litorais da psicanálise*. Rio de Janeiro, RJ: Escuta.
- Costa-Rosa, A., & Pastori, F. (2011). O grupo psicoterapêutico para além do imaginário: a psicanálise de Lacan, laços sociais e revoluções de discurso. *Revista de Psicologia da Unesp*, 10(1), 1-23.
- Dunker, C., & Neto, F. (2015). *Psicanálise e saúde mental*. Porto Alegre, RS: Criação Humana.
- Figueiredo, A. (2005). Uma proposta da psicanálise para o trabalho em equipe na atenção psicossocial. *Mental*, 5(3), 44-55.
- Freud, S. (2006). Totem e Tabu. In *Edição standard brasileira das obras psicológicas completas de Sigmund Freud* (J. Salomão, trad., Vol. 13, pp. 21-168). Rio de Janeiro, RJ: Imago. (Original work published in 1913).
- Freud, S. (2006). Sobre o Narcisismo: uma introdução. In *Edição standard brasileira das obras psicológicas completas de Sigmund Freud* (J. Salomão, trad., Vol. 14, pp. 81-113). Rio de Janeiro, RJ: Imago. (Original work published in 1914).
- Freud, S. (2006). Luto e Melancolia. In *Edição standard brasileira das obras psicológicas completas de Sigmund Freud* (J. Salomão, trad., Vol. 15, pp. 245-265). Rio de Janeiro, RJ: Imago. (Original work published in 1917).
- Freud, S. (2006). Psicologia de Grupo e Análise do Ego. In *Edição standard brasileira das obras psicológicas completas de Sigmund Freud* (J. Salomão, trad., Vol. 18, pp. 79-145). Rio de Janeiro, RJ: Imago. (Original work published in 1921).
- Freud, S. (2006). O ego e o id. In *Edição standard brasileira das obras psicológicas completas de Sigmund Freud* (J. Salomão, trad., Vol. 19, pp. 27-72). Rio de Janeiro, RJ: Imago. (Original work published in 1923).
- Gageiro, A., Tavares, E., Almeida, R., Almeida, R. M. C., & Torossian, S. D. (2015). Casa dos Cata-Ventos: uma estratégia clínica e política na atenção à infância. *Correio Appoa*, 247. Retrieved from http://www.apoa.org.br/correio/edicao/247/casa_dos_cata_ventos_uma_estrategia_clinica_e_politica_na_atencao_a_infancia/226.
- Gallano, C. (Coord.). (2014a) *Política de lo real: nuevos movimientos sociales y subjetividad* (pp. 15-34). Barcelona: Ediciones S &P.
- Gallano, C. (2014b). Subjetividad y lógicas colectivas. In C. Gallano (Coord.), *Política de lo real: nuevos movimientos sociales y subjetividad* (pp. 15-34). Barcelona: Ediciones S&P.
- Giraldo, M. (2012). *The dialogues in and of the group: lacanian perspectives on the Psychoanalytic group*. Londres: Studio.
- Gomes, L. (2015, 19 de outubro). *O cartel como aposta política de Lacan*. Retrieved from <http://verdadelacanianana.blogspot.com.br/2015/10/o-cartel-como-aposta-politica-de-lacan.html>
- Kaës, R. (2010). *Um singular plural: a psicanálise a prova de grupo*. São Paulo, SP: Loyola.
- Kehl, M. R., Boulos, G., & Ab'Saber, T. (2018, 27 de junho). *A luta que cura: a função terapêutica dos movimentos sociais* [Vídeo]. São Paulo, SP: TV Boitempo. Retrieved from <https://www.youtube.com/watch?v=da9bcXpoCh0>.
- Kupfer, M., Faria, C., & Keiko, C. (2007). O tratamento institucional do Outro na psicose infantil e no autismo. *Arquivos Brasileiros de Psicologia*, 53(2), 156-166.
- Jasiner, G. (2008). *Coordinando grupos*. Buenos Aires: Lugar.
- Lacan, J. (1932/1975). *De la psychose paranoïque dans ses rapports avec la personnalité*. Paris: Seuil.
- Lacan, J. (1980). D'Écolage. *Revista da Letra Freudiana*, 1.
- Lacan, J. (1995). *O Seminário livro 4: a relação de objeto, 1956-1977*. Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1945/1998). O tempo lógico e a asserção da certeza antecipada. In J. Lacan, *Escritos* (pp. 197-213). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1958a/1998). A direção do tratamento e os princípios de seu poder. In J. Lacan, *Escritos* (pp. 591-652). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1958b/1998). De uma questão preliminar a todo tratamento possível da psicose. In J. Lacan, *Escritos* (pp. 537-590). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1966/1998) Função e campo da fala e da linguagem em Psicanálise. In J. Lacan, *Escritos* (pp. 238-324). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1998). *O seminário, livro 11: os quatro conceitos fundamentais da psicanálise, 1964*. Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1947/2003). A Psiquiatria inglesa e a guerra. In J. Lacan, *Outros Escritos* (pp. 106-126). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (1967/2003). Proposição de 9 de outubro de 1967. In J. Lacan, *Outros Escritos* (pp. 248-264). Rio de Janeiro, RJ: Zahar.
- Lacan, J. (2006). *O seminário, livro 17: o avesso da psicanálise, 1969-1970*. Rio de Janeiro, RJ: Zahar.

- Lacan, J. (2008). *O seminário, livro 20: mais, ainda, 1972-1973*. Rio de Janeiro: Jorge Zahar.
- Laurent, E. (2002). Lo real y el grupo. *Cuatro+uno*, 4. Retrieved from <http://cuatromasuno.eol.org.ar/Ediciones/004/template.asp?Logicas-colectivas/Lo-real-y-el-grupo.html>.
- Lewin, K. (1978) *Problemas de dinâmica de grupo*. São Paulo, SP: Cultrix.
- Marino, A., Coaracy, A., & Oliveira, T. (2018). Uma experiência de clínica aberta de psicanálise. *Lacuna*, 5. Retrieved from <https://revistalacuna.com/2018/06/04/n05-04/>.
- Moretto, M. & Prizskulnik, L. (2014). Sobre a inserção e o lugar do psicanalista na equipe de saúde. *Tempo Psicanalítico*, 46(2), 287-298.
- Ocariz, M.C. (2015). *Violência de Estado na ditadura civil-militar brasileira (1964-1985): efeitos psíquicos e testemunhos clínicos*. São Paulo, SP: Escuta.
- Okamoto, M. (2017). *Revisitando Enrique Pichon-Rivière: grupo interno, história de origem e contexto social* (Doctoral dissertation). Pontifícia Universidade Católica de São Paulo, São Paulo.
- Penna, C. (2014). *O inconsciente social*. São Paulo, SP: Casa do Psicólogo.
- Penot, B. (2002). O CEREP e o hospital-dia para adolescentes do parque Montsouris [Entrevista cedida à Gislene Jardim]. *Estilos da clínica*, 7(12), 64-75.
- Pichon-Rivière, E. (2000). *O processo grupal*. São Paulo, SP: Martins Fontes.
- Pommier, G. (1990). *O desenlace de uma análise*. Rio de Janeiro: Zahar.
- Pomponet, R. (2013). O cartel na Escola de Lacan. *@gente: revista de psicanálise*, (8), 24-30.
- Porge, E. (1994). *Psicanálise e Tempo: o tempo lógico de Lacan*. (D. D. Estrada, trad.) Rio de Janeiro, RJ: Campo Matêmico.
- Quinet, A. (2005). *As 4 + 1 condições da análise*. Rio de Janeiro: Jorge Zahar.
- Quinet, A. (2006). *Teoria e Clínica da Psicose*. Rio de Janeiro, RJ: Forense.
- Quinet, A. (2009). *A Estranheza da Psicanálise*. Rio de Janeiro, RJ: Zahar.
- Quinet, A. (2012). *Os outros em Lacan*. Rio de Janeiro, RJ: Zahar.
- Rinaldi, D. (2013). Clínica, ética e política: a prática do psicanalista na instituição de saúde mental. In R. Barros (Org.), *Psicanálise e Saúde: entre o estado e o sujeito* (pp.115- 123). São Paulo, SP: Companhia de Freud.
- Rosa, M. (2002). Uma escuta psicanalítica das vidas secas. *Textura*, 2(2), 42-46.
- Roudinesco, E., & Plon, M. (1997). *Dicionário de Psicanálise*. (trad. V. R. Magalhães) Rio de Janeiro, RJ: Zahar.
- Ruiz, V., Athayde, V., Nogueira Filho, I., Souza, P., & Athayde, M. (2013). François Tosquelles, sua história no campo da Reforma Psiquiátrica / Desinstitucionalização e suas pistas para uma abordagem clínica do trabalho centrada na atividade. *Estudos e Pesquisa em Psicologia*, 13(3), 855-877.
- Zenoni, A. (1991). “Traitement” de l’Autre. *Préliminaire*, 110(3), 101-110.

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