

[F]aith cannot be justified by any inductive generalization. It springs from direct inspection of the nature of things as disclosed in our immediate present experience... To experience this faith is to know that in being ourselves we are more than ourselves: to know that our experience, dim and fragmentary as it is, yet sounds the utmost depths of reality...

Alfred North Whitehead *Science and the Modern World*

Reading Levinas is, for me, like watching a play through a translucent veil that parts periodically, momentarily. One might say this is like the life process itself. It also reflects my experience as a psychotherapy patient, and I imagine it is what sitting with patients in the therapist role will be like. The fact that Levinas's philosophy is fundamentally phenomenological and experience-near is not always self-evident when reading *Totality and Infinity*. The language he uses obscures and veils, forcing us to decipher the text like archeologists poring over mysterious hieroglyphs—painfully difficult at times but ultimately rewarding. So it is when we try to tease meaning out of poetry, to get past the words to the naked experience, felt more than thought, glimpsed through the filters of our experience and upbringing.

The psychotherapeutic situation can be seen as ethical at its core, since at least implicitly the role and goal of the therapist is to act in the best interest of the patient in an intersubjective interpersonal relationship. Given that Levinas addresses the fundamental nature of intersubjective human relations, what are some of the key components and issues that arise in therapy that lend themselves to a "Levinasian" approach to understanding. The purpose of this essay is to examine some of the elements of psychotherapy in light of concepts drawn from *Totality and Infinity* to help me gain a clearer understanding of the phenomenological,

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experience-near nature of these ideas and clarify an ethical stance toward the patients I will be seeing next year in my internship and beyond.

Before I can take an ethical stance in the world and respond to the Other I must have a home, a place where I can “recollect” myself: a safe place, a place of refuge. Here I can gather my thoughts, review the events of my life, and plan for the future, away from the hustle and bustle, the demands and distractions of the outside world. It is nearly impossible for a homeless person to take an ethical stance to others in the Levinasian sense when their needs for shelter, food, safety, and even storage are not met. As Bertold Brecht bluntly put it: “Zuerst kommt das Fressen, dann kommt die Moral” (“First comes the fodder, then comes morality”). The same applies to a range of individuals suffering from certain psychological disorders.

This idea of “safe haven” is one of the core concepts of psychotherapy. Although I can never know how another person will think or react, I can think about the environment I want to create for patients based upon my own experiences as a patient. As I enter the office of a therapist, I immediately search out the feeling of the place and gauge how it strikes me visually. Is there anything disturbing about it? Do the elements of the room clash in color or style? What does the room say about the therapist? When a person decorates a room, he projects his inner self in forms and colors. Most importantly, is there room for me here? If the therapist has filled the rooms I am to be welcomed into with photographs or other artifacts of his world, I may not feel like I can really share the space with him.

The tone of a relationship is also established by the way I am welcomed into this room. Levinas evokes the gentle nature of a warm welcome by referring to the feminine. This is the welcoming into a home, to a place where we are not called into question by the other, where we can be ourselves in a way otherwise not possible. The kindly and respectful attitude of the

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therapist is an important part of this welcoming. We will have patients coming into our office who perhaps have no other safe haven, no real home of their own. There will be others who are unable to leave their homes easily because of fear and anxiety, unable to use their home as a springboard to the world outside. I hope my office, as a space for healing, can provide all my patients with the safe place they need to “charge their batteries” and overcome their difficulties.

In our original experience of others there is a sense of mystery. I remember that, especially as a child, I was often curious about and drawn to the faces of new acquaintances. Who were they, really, behind the way they appeared, their gestures, posture, and expressions. Perhaps I was trying to gauge the similarities and differences between them and my family members. But even with those closest to me, I never felt I knew or could predict what they would say or do.

Separation is the phenomenon in which Levinas sees our fundamental interiority and isolation as well as the way we are connected, as a body of water connects two shores. It is that which opens the infinity of the other to me, made possible first because we are separate. The other is not my alter ego, he is not another me: “He remains a stranger inhabiting an alien world of his own.” (*Totality and Infinity*, p.13) As a therapist, I cannot presume that I know what would be best for him as that would be an act reducing him to a totality, a nothing-more-than my idea of him. Yet he is not totally alien, either. If he were, there would be no way to communicate with him. I can establish a connection with him by being attentive and respectful, responding to his needs to the best of my ability.

When I respond to the other in a way that respects his individuality, a sense of infinity may open up for both of us, a feeling of closeness and recognition, even intimacy. But there is

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also a feeling of distance, that I really cannot ever fully know the person sitting across from me. “Limitation is produced only within a totality, whereas the relation with the other breaks the ceiling of totality” (*Totality and Infinity*, p.171). The way we bridge the gap between us yet let the other remain in the infinite distance is through use of language.

Speech is an incomparable manifestation: it does not accomplish the movement from the sign to the signifier and the signified; it unlocks what every sign closes up at the very moment it opens the passage that leads to the signified, by making the signifier *attend* this manifestation of the signified. This attendance measures the surplus of spoken language over written language, which has again become signs. Sign are a mute language, a language impeded. (*Totality and Infinity*, p. 182)

Psychotherapy is a “talking cure”, not a “correspondence cure.” The face-to-face conversational relationship is central and fundamental to therapy as we practice it. Even an essentially internal process like Eugene Gendlin’s “Focusing” is greatly enhanced by the presence and gentle guiding of another person. As Levinas states, “Thought can become explicit only among two.” (*T&I* p.100) True discourse, when one carefully listens to and responds authentically to another, generates meanings that were not apparent or even suspected. Another way to describe this emerged in class discussion: The two persons engaging each other are using their consciousness to illuminate the world for each other. If the center of myself is not in myself but rather in the other, he becomes my teacher and master, and if I relate to him ethically I learn something about his world. I am then called to respond to that person.

This response-ability is a crucial aspect of the therapeutic relationship. I believe this is where healing and growth begins to take place. We will sit with patients for whom this type of

relationship will be an entirely new experience; there are many persons in the world, perhaps a majority, who have never truly been met in this kind of ethical relationship by another. We may be the very first person who might take the time to respect their "Face", their humanity, their intrinsic goodness. Our mental health care system (and society at large) tends to see us in terms of the category or categories we seem to fit most easily into. For persons in emotional distress, this categorization often takes the form of a diagnostic label. To resist this and do otherwise, to see a patient as Other, is an act of humanity and generosity that benefits us as well as the person who stands before us! It can be an expression of Desire that the Other calls out from us and makes possible for us. This situation can potentially free us from the egocentricity of our personal freedom and bring us into the ethical freedom of serving the Other. Being brought into an ethical relationship with another human being can perhaps be seen as a benefit to us as a result of serving others as a therapist engaged in this special relationship called psychotherapy. To quote Dr. Steen Halling, "The therapy situation may be one place where we can hope for genuine discourse to take place, at least occasionally, and where the hours of rhetoric may be interrupted by moments of conversation. The hope resides not in the wisdom and cleverness of the therapist, but in the fact that we are in the presence of someone who may dispossess us of our understanding, our comprehension, and allow us to hear and to speak." (Halling, 1975) Perhaps it is in this hearing and speaking that healing and growth can occur.

Pathology involves, by definition, pain and suffering. Even the DSM-IV places the word "distress" first in its description of mental disorder. I find that Levinas's concepts help me understand some of the core issues of psychotherapy. One is the power of the Face-to-Face relationship in promoting change, growth, and healing. Related to this, I find his illumination of

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the concepts of totality and infinity particularly helpful in looking at two key psychological issues that, in my estimation, figure into nearly every therapy: suffering and forgiveness.

Suffering is isolating, and isolation, the inability to relate to others, is at the root of most psychopathology. "Suffering is at once what disturbs order, and this disturbance itself" (*T&I*, p. 156). Temporality is altered and distorted, the past seems filled with pain and the future inevitably filled with more of the same. Suffering can consume our awareness and distort our perceptions of the world. In a passage that certainly rings true to me, Levinas describes suffering as extreme passivity, impotence, abandonment, and solitude. This isolation draws us into an awareness of the *apeiron*, the "there is" of existence, the abode of mythical gods of darkness who inspire the fear of the unknown and the sense of existential loneliness.

This inability to relate to others also affects the way in which we relate to ourselves. I find that in trying to understand both suffering and forgiveness that the ideas of totality and totalizing are key concepts. The suffering person, living in the disturbed temporality mentioned above may have difficulty in seeing beyond his suffering and himself as the carrier of his misery. In the helplessness and hopelessness of many pathologies, one becomes locked in a small, totalized world. This self-perpetuating vicious circle quickly emerges.

"The suffering of the recollected being, which is patience in the primary sense, pure passivity, is at the same time openness upon duration, postponement with this suffering." (*T&I*, p. 165) The "recollected" person can reflect upon his suffering and live with it in anticipation of its alleviation. But what of the "un-recollected?" Those suffering from serious pathology, homelessness, the grieving elderly to whom death looks like the only solution to their suffering? I anticipate this to be a great challenge in doing psychotherapy in an agency setting next year, as it presents special difficulties. I do find a sense of hope in Levinas's observation that our basic

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state of being is enjoyment. Suffering, he says, is the absence of enjoyment, not the other way around. Perhaps this deep human knowledge is what brings us to therapy. The help and human contact that we and our patients seek in the therapeutic situation is indicative of some hope, however deeply buried or disguised, and can be the source of growth, change, and healing.

The other hopeful possibility I find in reading Levinas is a way to understand the healing power of forgiveness and its importance to emotional health. This process seems to be a movement from totality toward infinity. The hurt person, suffering as a result of a transgression of another, sees the transgressor as little more than “the one who inflicted pain upon me.” The sufferer, in the midst of his pain, also totalizes himself, as described above. The healing and growth of forgiveness begin when “one is freed from the status of being an object of another’s actions...No longer is there only one possible connection with the other person” (Rowe and Halling).

The therapeutic encounter can become conducive to healing in several ways. In maintaining an attitude of “disinterested interest,” the therapist can commit himself to avoiding the manipulation of rhetoric while welcoming the patient into a safe haven. In responding to the patient as an integral person, we create a Face-to-Face encounter where our truth and meaning are generated. Approaching the other with the respectful attitude of one who can learn from the patient in front of me, I have a better chance of being surprised out of my preconceptions and hearing what the patient is actually saying and what needs to be responded to. Or as Steen Halling puts it, “Maybe the good therapist is the person who remains willing to let the other person reveal himself to him. If that is the case, then separation is affirmed and relationship is possible.” (Halling, 1975).

If forgiveness of self and other is as important to psychological well-being as I believe it to be, then more and more of us may be seeking out therapists as time goes by. We live in an age of increasing isolation and confusion. The mobility required of us by our upside-down economic system isolates many persons from the traditional support systems of extended family, neighborhood, and life-long friendships. Even within those contexts, a stance of “disinterested interest” is rare. Levinas reminds us all, including therapists, that the Other is infinite and awakens our desire for their good, to end their suffering and neediness. I think this desire is the highest form of love and service. Rowe and Halling suggest to me a way to understand the healing nature of the therapeutic relationship: “The overall movement of self-forgiveness can be described as one from estrangement to feeling at home, from darkness to light, from deception and denial to honesty and acknowledgement... It is particularly important to experience some kind of loving acceptance from others, especially of those parts of ourselves that we find disturbing... [I]t may not be too strong a statement to say that what is misleadingly called ‘self-forgiveness’ always take place in the context of some variation of loving relationships with others” (p.29)

### **Conclusion**

It is nearly impossible for me to read and discuss the work of Levinas and not be affected by the experience. He alerts me, sensitizes me to the Face of the Other, which in turn further wakens me and sharpens my sense of what ethical behavior actually is. This is not a method or prescription, but rather a call to awareness and openness. I believe that the greatest service a therapist can provide is creating an atmosphere, the security, and the intersubjective preconditions for self-discovery. This requires me to be present and open to the Other in a discrete way, being careful not to be oppressive in my presence.



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As has been pointed out in class and other discussions, many patients are not able to enter into Levinasian ethical relationships without first tending to themselves and solving some of their own problems. I hope the patients I see will be able to find ways to do this with me, in the safe space I create for them. In a hand-written note on an article I recently read, Lane Gerber beautifully commented on the importance of the inter-human in freeing ourselves from the shackles of guilt and suffering: "The giving of the hand is an invitation to reconnect to the human community, and both people find themselves and their unique lives stimulated or inspired by this reconnection."

In the psychotherapeutic relationship, I will never know if I have truly succeeded in acting ethically. To know that would require totalizing the patient, seeing him as a being with a finite nature and finite needs. To sit with clients requires faith in the process of healing and forgiveness, and know "that in being ourselves we are more than ourselves." Two infinite beings encounter each other, and perhaps both benefit. Psychotherapy becomes an open-ended process in which healing and growth can take place in both therapist and patient when we are brought into the primordial, ethical relationship by seeing and seriously answering the call of the Face of the Other.

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