

On the Old North Trail

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I modified Critical Incident Technique with colleagues to address complex contexts and index psychoanalytic concepts again modified in recognition of issues raised by Neuro-psychoanalysis. Psychoanalytic work outside the secure analytic office may lead to dramatic success or failure. The appreciation of underlying resistances, deeply held, bubbles up over a lifetime of experience disturbing the security of settled science but offering some clues of brain-plasticity and creative re-framing that stave off for the present fears of dementia. I argue for examining the philosophical assumptions of clinical psychoanalysis and for further exploration outside the box of average expectable clinical practice. The Tufte style of presentation is deliberately chosen to offer links to explore and at times a map of what otherwise would seem meaningless rambling. As a scout I think I find rather than other forks on the trail, as yet unexplored or worse seen but unreported, out of compassion fatigue, fear of shaming or isolation.

.Exploration

On the Old North Trail: a preliminary essay on applied analysis in A Time of Cholera.

I ask you to join me in exploration of territory. We shall look at some signs and trails and attempt to exist far from home in a beautiful but sometimes threatening environment. Instead of informants I will be dealing with patients and on the basis of experience I expect modification from my usual ways of working. Words, signs, gestures that convey the feeling of the spoken word may have different meanings. This complicates my understanding and lack of understanding may prevent useful contact. I may need to use interpreters. I am trying to fit what I experience into a Metapsychological Profile. A map both of persons, as individuals and a larger global map of the culture. Like for Lewis and Clark it may help others to explore and also correct where we have been and what we have seen.

The Reality Problem The psychoanalytically oriented anthropologist [La Barre] or the anthropologically oriented psychoanalyst [Boyer] are attempting to describe both a separate reality [Castenada] and also acts of perception involved in accommodation to a new cultural schema [Piaget].

When the psychoanalytic description lacks depth and breadth [thick descriptions - Ryle] there is a disturbing two-dimensional quality. The scientist may be limited by the jigs, frames, and language of

his discipline. The effort to be objective leaves out the emotional content of incidents. While the explorer, trapper, early settler or military man may be naive he often includes content of his or her immediate experience. [Lewis , Swan].

Since Descartes the description of events suffers when objective and subjective labels separate observation as opposites rather than complementing each other as two methods of observing the same events. [Solms, Rohner?]

<https://arxiv.org/pdf/1304.1186.pdf>

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Many others have ventured into this territory: among them, mountain men (McClintock, *On the Old North Trail*), fur trappers (Ewers, ref. *Indian Life on the Upper Missouri*) (Lewis and Clark, *Journals*), missionaries (De Smet, Ignatius), and educators (Schultz, Gold).

Personal reasons as well as the forces of western migration impelled these men to new and unknown (at least to them) and unexplored (at least to them) territories, · domain of the American Indian (who now may prefer to be called Native American.)

Surprisingly often, they wrote accounts of their contacts and adventures and of their considerable physical hardships. scientists came in hopes of recording or preserving the material culture, ethnography, and religion of peoples in a process of rapid change. (Ewers, Wissler, George Bird Grinnell, Oscar Lewis) .

Our encounter in the modern day has more in common with the trapper or military man in historical time than with a contemporary anthropologist. We are here to work.

We are brought here and allowed here by the necessity of our daily business; psychiatric consultation. The welcome of the anthropologist has passed some time ago—victim of misunderstanding. Residents of reservations have felt used as informants by the anthropologists need of raw data for science. Clinical necessity brings us here. Local mental health personnel request consultation. Small hospitals rapidly turn over their doctors, nurses and social workers, to the distress of their Native American patients. Local schools are concerned with the high dropout rates. The entire community is distressed.

A psychiatrist in these communities is an anomaly: Unknown or only as humorous figure from movies and television.

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by white medical personnel, medical care takes place in an area of

often unsatisfactory cross-cultural contact. One, then, cannot assume an initial positive transference (Freud, ref.), In practice I have found it useful to assume a history of unsatisfactory contacts with white physicians, and to explore with the patient their negative expectation that this contact will be another like experience. Records chart histories are influenced by the background and experience of the physicians and other health workers. The physicians usually are from far away, as are other mental health professionals. Nurses, and mental health workers and hospital staff are often local and of the same or different tribal backgrounds. Written records may reflect these differences and lack the emotion and gesture of spoken reports.

Trauma and habituation trauma allostatic overload and Merleau ponty habituation at bodily level PTSD.

Family history and individual history have a separate life in the community. The family doctor of our culture some generations ago did not require a family and social history as he already knew it. He had treated his patient's parents and brothers and sisters, and knew of family relationships and genetic trends. A Native American's history is likewise known, as matters are known in a small town: gossip friendly or malicious, public and external events, and shared experience. Why tell these to a stranger? Even if told, can a stranger understand the meaning and significance of these events to his patient? We also usually think of psychoanalytic history as individual history, and analysis is strongly individualistic, while perhaps the Native American culture may be more involved in group processes, (Footnote – self and object-separations/self and group separations)

Carlos Castenada, in describing his relationship with the Yaqui Indian medicine man, Don Juan, describes an incident in which Don Juan asks him to find his place. Carlos reacts rather literally (and compulsively). This task—to find one's place— or to be sure it —is another dimension of the profile as it is applied cross-culturally. In the security of my private office, I see my patients from a reasonably consistent vantage point—my chair. I have, literally, sat in this chair for years, and my points of reference are familiar. Against this consistent environmental ground, and applying the