LINKING OBJECTS AND LINKING PHENOMENA

A Study of the Forms, Symptoms, Metapsychology, and Therapy of Complicated Mourning

Vamık Volkan

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I shall rest, a loved one with him
whom I have loved, sinless in my
crime; for I owe a longer allegiance
to the dead than to the living: in
that world I shall abide forever.
—Sophocles, *Antigone*

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Preface to the reissue

As human beings, we constantly face the loss of loved ones and other significant losses. Mourning is a persistent psychological condition in our lives. Throughout human history, we have also shared collective losses, particularly after wars, war-like situations, and forced displacements. Today, we are once again witnessing devastating global events, such as the Russia–Ukraine and Hamas–Israel wars. Death, destruction, and suffering continue in other regions as well, including the ongoing civil war in Sudan, which has persisted since 2023.

Many books have been written on mourning, including this one, originally published over forty years ago. It is based on fifteen years of research conducted by my colleagues at the University of Virginia and me, working with patients struggling to cope with their losses. This book introduced new findings, such as the concept of linking objects and linking phenomena in individuals experiencing complicated mourning. It also provided clinical illustrations of "re-grief therapy," offering valuable insights into the therapeutic process.

In this new preface, I want to share what led me to study the psychology of mourning after becoming a psychiatrist.

I was born in 1932 to Turkish parents on the Mediterranean island of Cyprus. During my childhood, I was exposed to a diverse mix of

large-group identities, including Greeks, Turks, and, in smaller numbers, Armenians, Maronites, and those who identified as descendants of the Phoenicians. Additionally, the British were a significant presence, with all these groups living side by side. After finishing a Turkish high school on the island, I went to Turkey for my medical education.

In early 1957, I arrived in the United States of America with my medical degree and only fifteen dollars in my pocket. Fortunately, I had secured a job at a hospital in Chicago. A few years later, I became an American citizen. My move to the USA was part of the broader phenomenon known as the "brain drain," as the country faced a shortage of medical doctors and actively recruited professionals from around the world.

My arrival in the USA coincided with a turbulent time for Cypriot Greeks, who were engaged in a struggle against British rule in an effort to unite Cyprus with Greece. In the process, they began to oppress Cypriot Turks and launched attacks against both British forces and civilians.

During my final two and a half years in Turkey—first as a struggling medical student and later as a newly graduated physician—I shared a small apartment with another Cypriot Turk named Erol Mulla. Like me, he had come to Turkey for his medical education, though he was two years behind me in school. He affectionately called me "abi," meaning "big brother," and since I had only sisters, I came to think of him as the brother I never had.

Three months after my arrival in the USA, I received a letter from my father. Inside the envelope was a newspaper article with a photograph of Erol. The article described how he had traveled to Cyprus from Turkey to visit his ailing mother. While attempting to buy medicine for her at a pharmacy, he was shot seven times by Cypriot Greek terrorists. These killers targeted Erol—a bright young man with a promising future—simply to instill fear in the ethnic group to which he belonged.

When I learned of Erol's death, I felt numb. I did not cry. Alone in Chicago, in an unfamiliar country where I had no close confidants, I kept the news of his murder to myself. Even years later, during my personal psychoanalytic training, I did not deeply examine my grief over losing Erol. My mourning remained hidden, buried beneath the demands of my new life.

Looking back, I now realize that studying the mourning process in individuals and writing this book became my way of confronting not

only Erol's murder, but also the sorrow of leaving behind my family and friends in Cyprus. Later in my career, I spent over three decades working in various countries, facilitating unofficial dialogues between representatives of opposing groups, engaging with political leaders, and spending time in refugee camps. Through these experiences, I developed new theories on large-group psychology and introduced the concept of "chosen trauma" to describe its impact on tribal, ethnic, and national groups.

A chosen trauma is the shared mental representation of a historical event in which a large group suffered catastrophic loss, humiliation, and helplessness at the hands of its enemies. When members of a victimized group are unable to mourn such losses and overcome their humiliation and helplessness, they pass on to their offspring the images of their injured selves and the psychological tasks that remain unresolved. This process, known as the "transgenerational transmission of trauma," ensures that each subsequent generation inherits references to the same historical event. Over time, the mental representation of this event becomes a defining element of the group's identity, linking all its members across generations.

A chosen trauma reflects the "infection" of a large group's mourning process, and its reactivation serves to unite its members. Political leaders can exploit this reactivation to fuel new large-scale societal movements, some of which may be destructive and malignant. While this book does not focus specifically on the psychology of large tribal, ethnic, or national groups, I hope that its detailed descriptions of individual mourning processes will also provide deeper insights into many world events.

Vamık Volkan

Acknowledgements

During the fifteen years of clinical study of complicated mourning that led to the writing of this book, I was joined by a number of colleagues for varying periods of time, each of whom I would like to thank for his contribution to the study. I cannot name here all those who helped me in my investigations, but I want to express special appreciation to colleagues who shared material from their clinical experience for inclusion in this book. Although their names appear at appropriate points in the text, I should like to acknowledge here those to whom I am so indebted.

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Thomas Sarvay, M.D., for his account of the re-grief therapy of a young man whose linking object was his father's ring.

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About the author

Vamık Volkan, MD, DFLAPA, received his medical education at the School of Medicine, University of Ankara, Turkey. He is an emeritus professor of psychiatry at the University of Virginia, Charlottesville and an emeritus training and supervising analyst at the Washington Psychoanalytic Institute, Washington, DC. In 1987, Dr. Volkan established the Center for the Study of Mind and Human Interaction (CSMHI) at the School of Medicine, University of Virginia. CSMHI applied a growing theoretical and field-proven base of knowledge to issues such as ethnic tension, racism, large-group identity, terrorism, societal trauma, immigration, mourning, transgenerational transmissions, leader–follower relationships, and other aspects of national and international conflict. A year after his 2002 retirement, Dr. Volkan became the Senior Erik Erikson Scholar at the Erikson Institute of the Austen Riggs Center, Stockbridge, Massachusetts and he spent three to six months there each year for ten years.

In 2006, he was Fulbright/Sigmund Freud-Privatstiftung Visiting Scholar of Psychoanalysis in Vienna, Austria. Dr. Volkan holds honorary doctorate degrees from Kuopio University (now called the University of Eastern Finland), Finland; from Ankara University, Turkey; and the Eastern European Psychoanalytic Institute, Russia. He was a former

president of the Turkish-American Neuropsychiatric Society, the International Society of Political Psychology, the Virginia Psychoanalytic Society, and the American College of Psychoanalysts. Among many the awards he received are the Nevitt Sanford Award, Elise M. Hayman Award, L. Bryce Boyer Award, Margaret Mahler Literature Prize, Hans H. Strupp Award, the American College of Psychoanalysts' Distinguished Officer Award for 2014, and the Mary S. Sigourney Award for 2015. He received the Sigmund Freud Award given by the city of Vienna, Austria in collaboration with the World Council of Psychotherapy. He also was honored on several occasions by being nominated for the Nobel Peace Prize with letters of support from twenty-seven countries. Dr. Volkan is the author, co-author, editor, or co-editor of more than fifty psychoanalytic and psychopolitical books, including Enemies on the Couch: A Psychopolitical Journey through War and Peace. Currently Dr. Volkan is the president emeritus of the International Dialogue Initiative (IDI), which he established in 2007. He continues to lecture nationally and internationally.

Foreword

For several years I have admired greatly the work of Vamık Volkan, and I feel, therefore, pleased as well as privileged in writing the Foreword to this, his third published book. Among his various outstanding qualities, I wish to cite, first, his scholarship. It is unfailingly impressive to me how conscientiously this abundantly talented and, in the best sense of the phrase, professionally ambitious man cites the contributions of other workers in his field and related fields. Dr. Volkan's contributions are all the stronger and deeper by reason of their grounding in the related contributions of others. He is respectful of others' contributions without being self-effacing. Whereas, in my view, his first book leaned considerably upon the admittedly brilliant contributions of Otto Kernberg, here, in this third volume, Volkan emerges as very much, and powerfully, his own man.

One of the strengths of his work derives not merely from the kind of library scholarship that is among his interests, but more than that, from the fact that so much of his work itself is done in collaboration with colleagues in academic and similar settings. Dr. Volkan writes as one whose work has been subjected, ongoingly, to searching discussion with colleagues. Work that survives such rigorous scrutiny by fellow experts tends to emerge as reliably strong and enduring in value.

His' writing is always, for me, a pleasure to read; he writes in a lively style and with enormously helpful lucidity of thought. I have learned much from his clear theoretical presentations not only of his own views, but of the writings of earlier contributors to psychoanalytic theory. The reader will find in. this volume memorably lucid discussions of—as examples—introjection and introjects, identification, projection, and externalization. Dr. Volkan helps the reader to a deeper and clearer understanding of these concepts, which, applicable to the most basic processes of human personality formation and functioning, will illuminate the therapist's work with both current and previous patients, not merely with those patients who are, or have been, involved in reactive depression or established pathological mourning.

I found the quotable, and otherwise excellent, ideas contained in this book to be so numerous that I shall mention a number of them more or less at random here, as examples of Volkan's characteristically thought-provoking, stimulating presentation. He writes of "complicated grief as a seal over other psychopathology." He observes that "Throughout our lives we are influenced not only by interaction with important living people, but also by representations of the dead that reside within us, in the form of identifications or of separate 'presences' (introjects) either in ourselves or in those with whom we interact."

He introduces the excellent concept of "living linking objects," describing how a mother may "deposit in her child's self-system the concept that he is the dead person's representative." He draws valuable diagnostic differentiations between complicated grief, neurotic depression, and unduly protracted "normal" grief reaction.

He states, with his usual vivid clarity, "If the dead person is too greatly idealized to be 'killed,' the expected process of mourning may … not be initiated." At another juncture he writes, "Besides the hallucinations of the deceased, two other phenomena—introjects and linking objects—are used by mourners to enable them to keep in touch with the images and representations of the dead and to maintain the illusion of absolute control over such images and representations. The existence of introjects and linking objects provides important clues in the diagnosis of established pathological mourning."

He presents a discussion, of the widest applicability and significance, of the role played in creativity by linking objects and other linking phenomena.

I find admirably clear his comparisons between linking objects and transitional or fetishistic objects. His discussion of how unassimilated object or self-representations located, so to speak, within the mother can be deposited within the child during early mother–child interaction, while acknowledgedly not a concept original with Volkan, is presented with rare, if not unprecedented, simplicity and clarity—a typical example of one of this book's great values for the reader.

Time and again, this book conveys, remarkably effectively, an immediate sense of the psychoanalytic process at work, as when he says, of certain patients whose treatment he has been describing, that, "Each used her character neurosis as a defense against confronting her grief. Character pathology 'contained' their grief, so that initial attempts to analyze the character neurosis failed until it was approached as a resistance to grieving."

As one who has worked much (largely in past years) with schizophrenic patients, I found especially valuable Volkan's observation that complications in the mourning process often lead mistakenly to a diagnosis of schizophrenia. He reports, for instance, that, one of his cases "provides an excellent example of the importance of postponing the diagnosis of severe conditions such as schizophrenia until it can be established that the disturbance in reality testing is based on more than denial of a loss by death. Clyde was by no means the only example encountered in our research of a patient who exhibited behavior that seemed psychotic but was in fact focalized and uniquely related to a fixation in the work of mourning."

My reading of this book proved, for me, to be of the most lively relevancy, both clinical and personal. As I read, I was reminded repeatedly of my years of work with a chronically schizophrenic woman, and with a number of borderline patients. I sensed the incompleteness of my own working through of some of the major losses of my adult life. I surmised that my work with the schizophrenic woman had been slowed, despite my best efforts at a conscious level, by her serving unconsciously for me as a linking object in my own pathologic grieving of the loss of my mother, despite my mother's having been vastly healthier than this woman has yet become. Volkan's book repeatedly enabled me to recall my own childhood in a different and clearer light. At times this was painful indeed; for example, when he wrote, of one patient, that "Her childhood fears that if she weren't good she would be sent to an

orphanage poured out," I was reminded poignantly of seeing my only sibling, a sister four years older, under precisely this threat from our tyrannical father. At times, particularly when Volkan was throwing new light, for me, upon incompletely worked-through losses on my own part and on the part of my now-deceased mother, I found his book, for all its innate readability, heavy going.

On the back of one page of the manuscript I made the following note:

> *Amusingly enough, as I closed this book-manuscript today, I felt how much attached I have become to it, and I sense it has become, for me, a linking object to Volkan (I first sensed it as equivalent to a security blanket, then—all within seconds—a linking object to Vamık Volkan) whom I admire, and whom I unconsciously wish dead on a murderously competitive basis.*
>
> [A few hours later on the same day] *Am struck at finding, in sessions with both J. and N. today, how relevant V. V. 's book is—it definitely is helping me to pick up more quickly such phenomena as pathological mourning.*

Volkan's case descriptions are written with a novelist's skill. They are succinct, vivid, often memorably dramatic—as when he describes the patient who "each night became a living tombstone"—and beautifully illustrative of his theoretical concepts. But more than this, his case descriptions are examples of remarkably effective psychoanalysis and psychoanalytic therapy. I find, for instance, beautiful and moving examples of successful grief work. In addition, he gives us, from the non-clinical realm, a fascinating psycho biographical analysis of Atatürk. It is rare, indeed, to encounter so scholarly a person who is, at the same time, so masterfully effective an analyst and therapist as is Volkan.

Volkan's technical versatility, whether in conducting psychoanalysis or in doing relatively brief re-grief therapy, is admirable. He is clearly activated by deeply humanitarian concerns in his persistent, and clearly often successful, endeavor to bring the insights and techniques of psychoanalysis into the relatively brief treatment of patients who need psychoanalytic therapy but who cannot, because of their circumstances, be in treatment more than a few weeks or months.

In his research methods I find, similarly, much to admire. This volume reports his having collected hundreds of dreams from persons fixed in the chronic hope of finding the one they have lost, while at the same time fearing to encounter him or her. One of the interesting findings from this particular study is that of the "frozen" dreams typical of some of these patients, expressive of their fixation in the mourning process. Your ordinary workaday analyst, no matter how effective in his daily work and no matter how articulate a writer he may be, is unlikely to be armed with a research basis so formidable as Volkan's. I cite not only the size of the sample he has studied, but his systematic usage of psychological tests to confirm his clinical findings.

On the negative side, I find that Volkan recurrently touches base with an analytic position that is, to my taste, perfectionistically classical, and that does not sufficiently acknowledge the myriad feelings, negative ones often prominent among these, at work behind the analyst's relatively neutral external demeanor. To my mind, these feelings on the part of the analyst, far from being mere imperfections, are essential to the analyst's task; they are commonly necessary, and deeply intuitive, responses to the patient's transference reactions to the analyst. Volkan seems, much of the time, to know this well. But I cannot accept certain statements, statements reflective (supposedly) of an inner dispassionateness impossible—were it even desirable—of human attainment: "As in all other therapies whether psychoanalytic or not, the therapist must convey his non-exploitative desire to heal, and encourage his patient to express himself directly without any fear of hostile, punitive, engulfing, or abandoning responses"; and "Without either attacking or protecting that therapist [the patient's previous therapist, toward whom Volkan had reason to feel much condemnation], I stated that I seemed to have a different way of dealing with patients." Similarly, in the reports, here, of re-griefing, the therapist's countertransference reactions are relatively inaccessible to the patient or to the reader of this book. That is, in re-griefing, the therapist is functioning conspicuously as the *healthy one*—a position that must inevitably prove, on close scrutiny, highly defensive. For instance, the re-grief exercise that Showalter and Volkan term "demarcation" seems to me to involve the therapist's unconsciously demarcating himself from the patient (unconsciously endeavoring, by this demarcating,

to protect himself from the patient's grief and from his own grief projected onto the grieving patient).

Similarly, when Volkan says that "I explained [to a patient] that silence on my part would mean that I was listening to her," this statement is a disavowal that an analyst's or therapist's silences may have as myriad meanings and affective tones as do the silences on the part of a patient—ranging all the way from tones of loving oneness to antagonism to basically autistic unrelatedness, and so on, from one time to another.

In keeping with the relatively classical-psychoanalytic tone of the book, the reader finds here less of autobiographical data, concerning Volkan himself, than one would wish. The few bits of autobiographical material that he provides are most welcome. He says at one point, for instance, that he was "dealing also at that time with some personal losses of my own"; but a more than merely tantalizing, that is, a relatively informative report of some of his own mourning experiences, and the difficulties that he himself encountered in accomplishing such work of mourning, would be most welcome to his readers and would not complicate—I feel confident of this—his work with current and future patients. Further, such relatively abundant autobiographical data would help to dispel an air, which appears from time to time in this book, of his dwelling in a realm somewhat above that of his patients.

But it would be grossly unfair of me to emphasize that last point too heavily. Volkan is miles ahead of most classically psychoanalytic writers in this regard—namely, in depicting his own humanness as well as that of the patient. On the one hand, it seems to me that, at this stage in his personal and professional development, he is still a bit shy or guarded, unnecessarily, in this regard. On the other hand—and here may be the proof of the pudding—it seems clear that his patients, colleagues, and students are relatively well able to identify constructively with him—and all these persons could not identify so healthily with an analyst (or therapist or teacher or colleague) who held himself, more than fleetingly, in the position of a paragon.

Volkan devotes, throughout his book, such careful and well-reasoned attention to the published contributions of his contemporaries and predecessors that the question may arise in the minds of many readers, as it did in mine, "Precisely what is to be regarded here as being an original contribution of Volkan's?" By way of reply, it seems clear that

he himself regards the concept of established pathological mourning as being a relatively original contribution of his own. Further, in my own view, excellent and, so far as I know, original concepts of his are reflected in such cogent statements as this: "I maintain that the mourner is *protected* from attempting suicide when he has a stable linking object through which he can maintain external contact with the representation of the dead, and a stable introject that enables him to maintain internal contact with it."

Volkan has developed and integrated in this volume many concepts that have already been touched upon by previous contributors to the literature; but he has found new gestalts, new patterns, for some long-familiar theories and clinical phenomena. Much more importantly, his overall influence in the field of psychoanalysis and psychoanalytic therapy is—as measured by this present book, for example—authentically original in the best sense of the word. Few, if any, other contributors to this field possess his scholarship, his technical mastery as analyst and therapist, his ability to work with colleagues in investigative and clinical work, his interest in developing clinically fruitful research projects, and his ability to report his findings in absorbingly readable and lucid writing. Many colleagues possess one or another of these abilities, and a few may possess this entire range of strengths; but none in this latter connection comes to my mind. Above all, Volkan uses his formidable talents and capacities in bringing to bear upon complex theoretical issues, and enormously challenging treatment endeavors, a point of view that is uniquely his own.

Harold F. Searles, M.D.