

A LACANIAN DISCOURSE ANALYSIS OF THE  
CONSTRUCTION OF VICTIMHOOD IN THE SPEECH OF PATIENTS  
IN PSYCHOTHERAPY

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## ABSTRACT

### A LACANIAN DISCOURSE ANALYSIS OF THE CONSTRUCTION OF VICTIMHOOD IN THE SPEECH OF PATIENTS IN PSYCHOTHERAPY

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Based on social constructivist and relativist perspectives, this study conducted a qualitative examination of constructed victimhood in speech, specifically within the context of psychotherapy sessions. It is aimed to analyze both the construction of victimhood in speech and what this construction produces in sessions. The analysis of the results revealed the existence of subjective signifiers and variations in how victimhood is constructed in speech differently across various clinical structures. Additionally, the reinforcing effect of imaginary knowledge of self and others on the construction of victimhood in speech, positioning for recognition and repetition of victimhood in the therapist-patient relationship, active passivity, and resistance towards acknowledging responsibility of the unconscious were interpreted as central components of the victimhood emerging in the speech of patients. Furthermore, these analyses were discussed within the context of psychoanalytic perspective and praxis.

**Keywords:** Victimhood, Psychotherapy, Psychoanalytic Theory, Lacanian Discourse Analysis

## ÖZ

### PSİKOTERAPİDE HASTALARIN KONUŞMALARINDAKİ MAĞDURLUĞUN İNŞASI ÜZERİNE BİR LACANYEN SÖYLEM ANALİZİ

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Bu çalışmada, sosyal inşacı ve rölativist perspektiflerle, konuşmada inşa olan mağdurluk psikoterapi seansları bağlamında nitel olarak incelendi. Hem mağdurluğun konuşmada nasıl inşa olduğunu hem de bu inşanın seanslarda ne ürettiğini analiz etmeyi amaçlayan bu araştırmada sonuçlar öznel gösterenlerin kullanımını ve mağdurluğun farklı klinik yapılarıdaki farklı inşa biçimlerini ortaya koydu. Ayrıca, benlik ve başkaları hakkındaki imgesel bilginin mağdurluğun konuşmada inşasında pekiştirici etkisi, terapist-hasta ilişkisinde mağdurluğun tanınması ve tekrarı üzerine konumlanma, aktif pasiflik ve bilinçdışına dair öznel sorumluluğun reddi, hastaların konuşmalarında ortaya çıkan mağdurluğun merkezi bileşenleri olarak değerlendirildi. Bu analizler psikanalitik perspektif ve praksis bağlamında tartışıldı.

**Anahtar Kelimeler:** Mağdurluk, Psikoterapi, Psikanalitik Teori, Lacanyen Söylem Analizi

To life's myriad tales



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## CHAPTER 1

### INTRODUCTION

This thesis was conducted through a qualitative examination of victimhood that emerges in patients' speech during psychotherapy sessions. Grounded in social constructivist and discursive perspectives, the research aimed to analyze both the construction of victimhood in speech and what this construction produces in sessions. Furthermore, the constructed victimhood in the sessions was evaluated discursively within the context of psychoanalytic praxis.

Chapter I provides an overview, including a review of the available literature on victimization, the rationale of the current study, and research aims. Chapter II gives the psychoanalytic theoretical background from the perspectives of Freud and Lacan. Chapter III explains the methodological background and method used in the research. The analyzed results are presented in Chapter IV. Finally, Chapter V includes the discussion and evaluation of the research findings and contains a conclusion.

#### 1.1. General Overview and Research Background

##### 1.1.1. Definition of Victim, Victimization, and Victimhood

The word *victim* is originally derived from the Latin word *victima*, also known as *mağdur* in Turkish. *Mağdur (victim)*, which is commonly used in Turkish, is etymologically based on an Arabic word *gadr* containing meanings of “*cruelty, injustice, and tyranny*”, and its root is *gdr* in Arabic (Nişanyan Sözlük, n.d.; Etimoloji Türkçe, n.d.). *Kurban* is another word that means the same as *victim* in Turkish and is associated with religious sacrifice where the *kurban (victim)* is regarded as innocent and sacrificed by individuals to seek redemption or make amends.

These terms, *mağdur* and *kurban* are used interchangeably in Turkish (Baş-Bayraktaroğlu, 2020, p.527). In addition, the Turkish legal system also describes a victim as "a person who has been harmed due to a crime or tortious act" (as cited in Baş-Bayraktaroğlu, 2020). *Victimize* means treating someone intentionally unfairly, primarily because of their race, sex, beliefs, etc... At the same time, *victimization* refers to that process or act, and *victimhood* contains the state of being a victim (Cambridge Dictionary, n.d.).

To summarize, victimization/victimhood, as its etymology suggests, has a variety of connotations, including *injustice, innocence, sacrifice, helplessness, and passivity*. Therefore, these connotations could be considered when we say the presence of victimization in speech. Furthermore, in this current study, the term victimhood is preferred because the related position constructed in the patients' speech is more prominently focused on than the reality of the act experienced.

### **1.1.2. General Literature on Victimization/Victimhood**

Victimization is a significant topic that is constantly examined and studied. Numerous academic fields conduct studies to better understand victimization, investigate its causes, elaborate on victims' experiences, and explore the effects of victimization. In the field of law, focusing on the legal aspect of victimization supplies victims with justice, protection, and remedies. Reporting or not reporting victimization (Zinzow & Thompson, 2011; Winzer, 2016; Kelley et al., 2021) and secondary victimization through legal processes (Orth, 2002) have been popular topics in the last decades. When a case of victimization arises, it is required to disclose it to the appropriate authorities so that the justice process might start. Therefore, these studies focus on non-reporting issues or the secondary victimizing effect of the legal process on the victim after reporting. Besides, when considering a crime and its impact, it is crucial to distinguish between fact and fiction when there is an allegation of victimhood (Peace et al., 2012). In addition, the distinction between the perpetrator and the victim is critical in cases of victimization that are dealt with legally. Furthermore, researchers who study social issues such as discrimination, racism, gender inequality, and social justice could also work on victimization. In this

regard, victimization research might help comprehend inequality, advance justice, and engage in social change initiatives.

Furthermore, studies in numerous academic domains are being done in which victimization is discursively explored and examined from multiple perspectives. These studies investigate how victimization is communicated and portrayed by evaluating victim experiences and narratives. It will also discuss how society defines, shapes, and perceives victimhood. Yılmaz (2017), for example, explores the political dynamics and ramifications of victimization claims in the Turkish context. In another study, the United States and Turkey are used as case studies, with the debate concentrating on historical victimization as a defining aspect of modern populist discourse (Al-Ghazzi, 2021). Another study examines how collective trauma fosters a cohesive and consistent shared identity and a sense of shared vulnerability (Yıldız & Verkuyten, 2011).

Moreover, studies in the literature attempt to comprehend the impact of political, legal, or social media discourses relating to victims or victimization on the individuals identified in those discourses. For example, Leisenring (2006) has conducted a study that explores how battered women navigate victim discourses in shaping their identities, revealing that these discourses both empower and constrain women. According to a study, battered women face the complexities of victimization, agency, and responsibility as they construct their identities (Leisenring, 2006). In another study, results reveal a dissonance between public discourses of women who acquire HIV and women's accounts of heterosexual transmission (Persson, 2014). While studying individual stories, it is vital to remember that legal, political, and media discourses about victims and victimization may not always coincide with victims' experiences and narratives. Individuals may encounter ambiguity or confusion when constructing their own identities.

### **1.1.3. Psychology Literature**

In the psychology literature, where researchers concentrate on the social and psychological aspects of victimization, issues like the effects of victimization on

victims' psychology, victims' help-seeking behaviors, which situations can have a victimizing impact on individuals, recurrent victimization, victims' help-seeking behaviors, and social support channels can come to the fore. Numerous studies have concentrated on particular types of situations causing victimization, including sexual assault (Wright et al., 2010), war and terror experiences (Friedman-Peleg & Bilu, 2011), peer bullying (Kurtça et al., 2019), cyberbullying (Aktepe, 2013), intimate partner violence (Cherrier et al., 2023). If we were to interpret, we could say that the psychology literature focuses on victimization that can be defined and accepted in a legal context and situations where the perpetrator-victim distinction could be made legally. Due to the potential impact of victimization on individuals' psychological health, those victimized people might require increased access to psychological healthcare and exhibit a more evident presence within such services. In that case, how is victimization and its impact on people's psychological health evaluated and studied? How do these studies approach the subject? What are these studies' epistemological and ontological stances when assessing the subject and creating treatment or preventive programs? Along with these questions, how the issue of victimization is studied and what it is associated with, especially in clinical psychology literature, is given below.

When examining the literature in this context, "trauma" emerges quite prominently. In the field of clinical psychology, victimization is mainly viewed from the axis of trauma, and it is observed that literature and discourse emerge from it. The diagnosis of PTSD was included in DSM III for the first time, and in later versions, the definition was constantly changed, changing the scope and the disorder group under which it was included (Çolak et al., 2010). It is noteworthy that, by definition, in this diagnostic system, it is essential to refer to an external event or situation associated with victimization. In the literature, numerous studies focus on and emphasize the relationship between victimization and posttraumatic stress disorder (PTSD). Researchers investigate how victimization experiences contribute to the development or exacerbation of PTSD symptoms (Johson & Thompson, 2008; Uzunlar et al., 2022; Çakır-Parmaksızoğlu, 2011; Binay & Başgöl, 2022; Şimşek et al. 2011; Demir, M. 2008; Damka, Z. 2009). Posttraumatic growth following a traumatic experience is another theme in the literature, in addition to the connection between

PTSD and victimization (Parry et al., 2022; Guggisberg et al., 2021). Taking PTSD into the center and conducting DSM-oriented studies, it could be stated that the literature here is mainly in the framework of *Kraepelin's Diagnostic Model based on a positivistic epistemology and realistic ontology* (Baltacı, 2019).

Further, in a separate case study, Bayram et al. (2018) discuss the varied reactions observed in a mother and two children who experienced the same traumatic event. The study emphasizes that not every individual responds to potentially traumatic events, similarly highlighting the acknowledgment in psychological science of the individual uniqueness of each person (Bayram et al., 2018). Another study area in psychology literature is revictimization (Atmaca & Gençöz, 2016; Oruçlular, 2016), which examines repetitive victimization and associated factors.

Thus, research examples show that the *reality* of victimization is treated as a condition or a presupposition inside the research setting in the dominant clinical psychology literature. Overall, the primary purpose of these studies is to increase our knowledge about victimization to recognize its psychological impacts, assist victims in their recovery processes, develop practical solutions, and support individuals who have been victims from a positivistic point of view.

Apart from these, a few studies focus on victimization in speech, and several studies in literature contribute to understanding how victimization in speech manifests itself in the context of therapy. A notable example of relevant literature includes qualitative research by Patrika and Tseliou (2016) that examined the phenomenon of individuals assuming the role of the victim while engaging in what is commonly referred to as the "blame game". The study explores how individuals in family therapy sessions positioned themselves as victims and directed accusations toward others (Patrika & Tseliou, 2016). In another study, Dürü (2018) discusses the relationship between the expression "I am unlucky" emerging during therapy sessions and masochistic personality patterns based on two case stories from a psychoanalytical perspective. The researcher considers this statement a challenge that must be overcome during therapy (Dürü, 2018). In addition, in a discursive study of the concept of resistance in psychotherapy, the passive victim position was

evaluated as a type of resistance (Bıçakçı, 2019). Thus, while the construction of victimhood in speech has received more attention in other academic fields, it has not received much attention in psychology, particularly clinical psychology. It is worth emphasizing that the few studies included here, unlike the dominant literature, tend towards qualitative research methods and act from a relativistic point of view.

## **1.2. The Rational for the Study**

Various disciplines thoroughly investigate victimization/victimhood in its different dimensions. Reviewing the psychology literature reveals that these investigations are often based on real instances of victimization. Studies show that victims become more apparent in the therapeutic process, especially when criminal aspects are included, from the clinical psychology standpoint. Another noteworthy aspect is the prevalence of connections between victimization, trauma, and psychopathology in mainstream psychology research.

Additionally, despite being addressed in a limited number of studies, victimization/victimhood in discourse has yet to receive sufficient attention in the clinical psychology literature. Furthermore, the clinical psychology literature needs to comprehensively examine victimization/victimhood in speech in psychotherapy. As Georgaca and Avdi (2012) emphasize, the *discourse has a constitutive effect*. An individual's speech encompasses how they connect with others and their social position. How does victimhood in patients' speech interact with the process in psychotherapy, which represents a language-based process? This question must be thoroughly analyzed and elaborated within the clinical psychology literature using a linguistically oriented qualitative research methodology.

## **1.3. Research Questions and Aims**

The primary aim of this study is to investigate the *discursive construction of victimhood*, independent of the presence of any actual victimization, and examine the role of this construction in the psychotherapy process discursively. In this regard, the purpose of the study is determined as follows:

Aims:

- Investigating victimhood in patients' speech during the psychotherapy process
- Examining the functions of victimhood in speech and its impact on the psychotherapy process

Within the scope of the thesis, victimhood in patients' speech is examined by focusing on psychoanalytically oriented psychotherapy sessions. The functions of it and its impact on the process are considered and evaluated within the framework of psychoanalytic praxis. Thus, the present study is precisely centered on the following inquiries:

Questions:

- How do patients construct victimhood in speech during psychotherapy sessions?
- What is produced in psychotherapy through the constructed victimhood in the patients' speech?

## CHAPTER 2

### THEORETICAL BACKGROUND

This section explains theoretically how Sigmund Freud and Jacques Lacan's psychoanalytic approaches treat the themes of victimization/victimhood, trauma, and pathology, frequently associated concepts in the dominant clinical psychology literature. The conceptualizations of the human psyche, subjectivity, unconscious, and psychopathology by Freud and Lacan based on their praxis are also briefly discussed.

#### 2.1. Sigmund Freud

As Quinodoz (2015) summarizes, Freud specializes in brain anatomy and neuropathology while also researching the medical applications of cocaine. During his studies in physiology, he becomes acquainted with Joseph Breuer, who is interested in hypnosis. Breuer discusses with Freud a case from Vienna involving symptoms of hysteria, which caught Freud's attention. Motivated by this case, Freud applies for a scholarship to attend Charcot's lectures on hysteria at Salpêtrière Hospital. This experience becomes a pivotal moment for Freud and deepens his fascination with hypnosis. Later, he realizes that Charcot views hysteria only as a branch of neuropathology without intending to pursue further investigations. Following this, Freud takes action toward new opportunities and perspectives (Quinodoz, 2005).

In addition to working with Charcot, who later took a different approach to cases of hysteria, his use of hypnosis and catharsis served as a model for Freud in developing his psychoanalytic theory and method. Subsequently, as he begins to focus more on the theoretical foundations of his clinical work, Freud is the first to systematize and theorize the Psychoanalytic perspective. Undeniably, the prevalence of hysteria,



characterized by various somatic symptoms, functional losses, and transformed symptoms throughout Freud's life, plays a vital role in developing his theory (Rudinesco, 2016). These cases exist through stories of people experiencing psychosomatic problems that cannot be explained by medical knowledge of physiology, such as paralysis, muscle spasm, numbness, pain, vision or hearing impairments. Freud's encounter with these various manifestations of hysteria prompts him to explore the underlying psychological factors contributing to these symptoms. With this starting point, Freud works on the human psychic mechanism and continues to develop his theory throughout his life. During his studies, he presents two different models that examine the psychic mechanisms of human beings.

### **2.1.1. From Trauma to Fantasy**

*This means that when we wish to take up again studies on hysteria,  
we don't really know if we should begin by reading books about mathematics or novels ...  
It is to know if we are capable or not of getting out of hysteria!  
The question does not seem today to be clear-cut. Did Freud himself succeed? If we consider  
the reports of the cases he gave us, what we know about his entourage,  
even the women whom he privileged, we can think that no,  
We have not got out of it. It's a question that will always remain pertinent  
regarding the powers of our work..*

(Charles Melman, 2022)

#### **2.1.1.1. Trauma**

In the book *Studies on Hysteria*, which is the first to contain the fundamental ideas of psychoanalytic theory, Freud and Breuer (1895/2001) offer five cases to which Freud contributes four cases (Emmy von N., Lucy R., Katharina, and Elizabeth von R.), and Breuer contributes one (Anna O.). They stress the connection between personal symptoms and forgotten traumatic experiences and assert that *releasing repressed information will cause hysterical symptoms to go away* (Freud & Breuer, 1895/2001).

Initially, Freud believed that hysteria suffered from unresolved psychological traumas and that *trauma*, such as *experiences of violation*, was *real* (Melman, 2022, p.4).

### 2.1.1.2. Deferred Action (Nachträglichkeit)

During his early period, Freud considers that these *real traumatic experiences* play a significant role in the etiology of hysteria. According to Freud's theory of seduction, formulated in 1893, the origin of hysterical symptoms lies in a child being seduced by an adult (Quinodoz, 2005). Thus, he conducts techniques to help patients experience catharsis and relief by expressing their traumatic memories. The core idea behind the seduction theory is that the memories of these traumas had to be pieced together by analyzing the symptoms exhibited (Haute & Geykens, 2012), and he aims to reach a final resolution regarding the trauma through a process of cure. However, he observes that patients often return to their previous traumas through associations during the process. In other words, he observes that each hysterical symptom is triggered by a current trauma that revived a past traumatic event. Therefore, he introduces the concept of *deferred action*<sup>1</sup> term describes the process of pathology emerging from a trauma constituted by two distinct moments instead of just one (Haute & Geykens, 2012, p.34) to explain how symptoms formed in these patients. According to this notion, an initial event becomes entirely traumatic later in psychological development when a subsequent encounter reawakens it.

The early signs of what Freud would later use as "deferred action" could be observed in the case of Emma (Korkmaz, 2021; Bistoën et al., 2014). Emma starts having anxiety about going into clothing stores by herself when she is twelve. This dread is brought on by an incident in which she sees two salesmen laughing at her attire in a retail store, especially one of whom she found attractive. Emma's phobic fear is born due to the panic attack this incident caused. However, additional investigation shows that she went through a different event when she was just eight. At that age, she went to a store to purchase candy, but the store clerk abused her sexually by pinching her genitalia through her dress. The connections between these two incidents, such as the laughter of the store clerk, the presence of clothing, and being alone in a shop, help explain Emma's panic attacks. Freud claims that "a memory is repressed which has only become a trauma by deferred action" (Bistoën et al., 2014; Freud, 1895). Haute and Geykens (2012) interpret this retroactive process as when an individual

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<sup>1</sup> Nachträglichkeit in original.

experience a trigger that reminds them of a childhood trauma during their adolescent years or later, the traumatic memory resurfaces and generated sexual arousal that is not consciously perceived as such. This arousal manifests itself through symptoms of *anxiety or conversion* (Haute & Geykens, 2012). Furthermore, the presence of sexual traumas in the patients' narratives is persistently evident. Although Freud does not focus extensively on *Studies in Hysteria*, he emphasizes the relationship between traumas and sexuality in his early works. He states that this factor associated with sexuality is significant in the emergence of hysteria and influential in other neuroses (Quinodoz, 2005).

### **2.1.1.3. Fantasy**

The death of his father in 1896 leaves profound effects on Freud, leading him to initiate self-analysis. This self-analytical journey allows him to comprehend the significance of fantasies and prompts him to review his seduction theory. Additionally, he doubts the reality of patients' memories because he encounters his patients' fantasies when he is searching for real traumas they had experienced in the past. These two impact Freud's decisions to relinquish the seduction theory (Kluft, 2018; Korkmaz, 2021).

Over time, Freud comprehends that a traumatic event is not always necessary to develop hysterical symptoms and evaluates the possibility that fantasies, rather than actual memories of a traumatic event, may play a significant role in developing symptoms. According to Moncayo (2021), Freud considers fantasies a crucial aspect of the psychic mechanism, playing a significant role in developing neurotic symptoms (p. 253).

This change represents a significant transformation in Freud's thoughts and a departure from his previous views on the role of childhood sexual trauma in neurotic development. He eventually concludes that trauma is predominantly shaped by fantasies (Melman, 2022, p. 4) and makes a notable declaration, expressing his abandonment of the theory of seduction (Quinodoz, 2005). In letter 139, addressed to Wilhelm Fliess on September 21, 1897, he explicitly stated, "*I no longer believe in my neurotica (theory of the neuroses)*" (Freud, 1887-1904/1985, p. 264).

Following that, Freud suggests treating reality and fantasy equally is essential rather than initially making *any effort to differentiate between them* (Quinodoz, 2005). He believes that fantasies hold significance and are essential to childhood experiences. Laplace and Pontalis (1985/2002) indicate that the discovery of fantasy opened the door to the Oedipus complex, and Freud used fantasy to reveal the hidden facets of childhood sexuality.

In their study, Knockaert et al. (2004) discuss the historical development of Freud's theories on trauma. According to them, after abandoning the seduction theory, Freud revised his understanding of trauma and viewed it as a confrontation with certain aspects of the drives. Initially, he characterizes the drives as inherently overwhelming and traumatizing, emphasizing the passive position of individuals who cannot actively process them. However, in his later conceptualizations, Freud introduces the death drive and the compulsion to repeat, expanding trauma's complexity beyond its purely sexual dimension. In his later works, Freud refutes the idea that drives are inherently traumatic and argues that drives become traumatic when they are at risk of remaining unsatisfied due to obstacles, provoking anxiety (Knockaert et al., 2004).

In conclusion, when commenting on Freud's emphasis on fantasy, it is essential to be careful here. He emphasizes that fantasy plays an equally significant role in the formation of neuroses. Rather than saying that the importance of what is real is irrelevant to an individual, it highlights the significance of internal mechanisms alongside external factors that are active in the psychological realm. Given the information above, it is evident that Freud's perspective takes a critical position towards perspectives that directly associate traumatic events from the external world with psychopathology. Thus, it can be concluded that psychoanalytic theory has a different understanding of human psychic mechanisms. I will now go through how Freud addresses psychic mechanisms in his theory.

### **2.1.2. Freudian Topography**

Richards (1984), in the editorial note of "On Metapsychology The Theory of Psychoanalysis," which is a collection of Freud's several works such as "The Ego

and The Id”, “Beyond the Pleasure Principle” etc., notes that Freud's early scientific endeavors are entirely devoted to physiology. He initially tries to explain psychopathological phenomena from a neurological standpoint (Freud, 1984, pp.163-164). Additionally, all his writings throughout his time working with Breuer are built around this strategy. Intellectually, Freud is intrigued by the prospect of creating a psychology of the mind solely based on neurological data, and he works diligently toward this objective in 1895. Several years later, the neurological explanation of the psychology of the mind disappeared with "The Interpretation of Dreams" (1900). Freud concentrates on defining and reinforcing the idea of the *unconscious*, which eventually became the core of his new theoretical framework. Therefore, his emphasis on the unconscious mind can characterize Freud's theory of the psychic mechanism. Whereas the focus is primarily on observable and measurable elements in psychology and psychiatry, psychoanalysis offers a distinctive perspective by emphasizing the unconscious. Consequently, psychoanalysis reveals that individuals do not have complete mastery over their minds, as the unconscious interacts with consciousness.

In Freudian theory, two distinct models are used to describe the structure and functioning of the mind. The first model is known as the *topographic model*. In his text named "The Unconscious", Freud (1915/1957) deals with the concepts of conscious, unconscious, and preconscious<sup>2</sup>, which are the components of this topographic model, and addresses the transitions and processes between them. Although the conscious represents the mental processes that the human is aware of, the unconscious refers to the mental processes that one is unaware of but are effective in psychic mechanisms. In contrast, unlike the unconscious, the preconscious includes mental processes that can become conscious more easily. Besides, he asserts that “psychical topography has for the present nothing to do with anatomy; it has reference not to anatomical localities, but to regions in the mental apparatus, wherever they may be situated in the body.” (Freud, 1915/1957, p.175).

However, as time progressed, Freud (1923/1960) thinks that the first topographic model has limitations and needs to be improved in practical applications (p.8). In

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<sup>2</sup> Original use of Freud: Conscious (Bewusstsein - Bw), Preconscious (Vorbewusstsein - Vb), and Unconscious (Unbewusstsein - Ub).

addition to the topographic model, Freud presents his structural model, which elaborates on how the mind is organized. This model emphasizes how the id, ego, and superego interact. Tura (1996) describes the second model of Freud and summarizes the dynamics between id, ego, and superego in his book titled in Turkish “Freud’dan Lacan’a Psikanaliz” “(From Freud to Lacan: Psychoanalysis)” (pp.44-45).

The id stands for primary, unconscious wants that are motivated by pleasure. The essential component is the id, often associated with the unconscious, which functions on the pleasure principle<sup>3</sup>. It is distinguished by a fundamental process that disregards space, time, and reason. The ego acts as the conscious, logical intermediary, negotiating between the id's desires and reality's limitations. Reality principle<sup>4</sup> frames the ego, which is in charge of suppressing violent and sexual propensities. It aims to strike a balance between the pleasure that needs to be driven by both reality and the id. The secondary process, connected to conscious cognition, is the dominating process. Both consciously and unconsciously, the ego's mechanism is in operation. For instance, defenses are unconscious, yet reasoning necessitates conscious functioning. The superego represents internalized societal values and moral standards. The superego also contains both conscious and unconscious parts. This structural model offers a different understanding of how these mental forces interact to shape our thoughts, behaviors, and overall personality (Tura, 1996) from the first model. Freud states that:

*We have formed the idea that in each individual there is a coherent organization of mental processes, and we call this his ego. It is to this ego that consciousness is attached; the ego controls the approaches to motility - that is, to the discharge of excitations into the external world; it is the mental agency which supervises all its constituent processes, and which goes to sleep at night, though even then it exercises the censorship on dreams. From this ego proceed the repressions, too, by means of which it is sought to exclude certain trends in the mind not merely from consciousness but also from other forms of effectiveness and activity. In analysis*

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<sup>3</sup> According to Freudian Perspective, the pleasure principle encourages people to look for pleasure and stay away from suffering.

<sup>4</sup> The reality principle, which also seeks to pleasure, provides pleasure delayed and diminished manner due to the obstacles of reality. It momentarily stops the discharge of the id's energy until a proper time and place, forcing us to think about the risks, requirements, and potential outcomes as we make decisions. To put it another way, the ego works to make sure that the id's demands are met in a way that is safe, appropriate, and practical.

*these trends which have been shut out stand in opposition to the ego, and the analysis is faced with the task of removing the resistances which the ego displays against concerning itself with the repressed.*

(Freud, 1923, The Ego and the ID, p. 8)

In conclusion, the topographic model focuses on the conscious and unconscious aspects of the mind, while the structural model highlights the interplay between the id, ego, and superego. While these two models offer different perspectives on the mind, Freud does not view them as mutually exclusive. Instead, he considers them complementary and believes that both models contribute to our understanding of mental processes (Freud, 1923/1960). Gay (1989) articulates in the preface of the book:

*This new scheme did not lead Freud to abandon his classic characterization of mental activity - emphasizing the distance of thoughts from awareness - as either conscious, or preconscious, or wholly unconscious. However, he now made the decisive point that many of the mental operations of the ego, and of the super-ego as well, are inaccessible to direct introspection.*

(Freud, The Ego and the ID, pp. xxii -xxiii)

According to the interpretation of Quinodoz (2006), if the goal of the analysis is to bring the unconscious into consciousness, as stated in the first topographical model, the same objective can be expressed in terms of the second structural theory with the phrase "Wo Es war, soll Ich werden" ("Where id was, there ego shall be"). This signifies the transformation of unconscious desires into conscious awareness (Quinodoz, 2006).

Freud (1923/1960) writes in the chapter "Conscious and What is Unconscious" of "The Ego and the Id":

*For our conception of the unconscious, however, the consequences of our discovery are even more critical. Dynamic considerations caused us to make our first correction; our insight into the structure of the mind leads to the second. We recognize that the Ucs. does not coincide with the repressed; it is still true that all that is repressed is Ucs., but not all that is Ucs. is repressed. A part of the ego, too - and Heaven knows how important a part - may be Ucs., undoubtedly is Ucs. 6 And this Ucs. belonging to the ego is not latent like the Pcs.; for if it were, it could not be activated without becoming Cs., and the process of making it conscious would not encounter such great difficulties. When we find ourselves thus confronted by the necessity of postulating a third Ucs., which is not repressed, we must admit that the*

*characteristic of being unconscious begins to lose significance for us. It becomes a quality which can have many meanings, a quality which we are unable to make, as we should have hoped to do, the basis of far-reaching and II inevitable conclusions. Nevertheless, we must beware of ignoring this characteristic, for the property of being conscious or not is in the last resort our one beacon-light in the darkness of depth-psychology.*

(pp. 9-10)

## **2.2. Jacques Lacan: “Freud, return to”**

*The meaning of a return to Freud is a return to the meaning of Freud. And the meaning of what Freud said may be conveyed to anyone because addressed as it is to all, it concerns each individual: to make this clear, one has only to remember that Freud’s discovery puts truth into question, and there is no one who is not personally concerned by the truth.*

(Jacques Lacan, 2005, pp. 88-89)

The science of psychoanalysis is significantly benefited from the work of French psychiatrist and psychoanalyst Jacques Lacan (1901–1981) raised in Paris and completed psychiatric training after studying medicine (Homer, 2016). First, Lacan joins the International Psychoanalytical Association (IPA) and is initially captivated by Freud's theories. However, he later comes up with his unique method of psychoanalysis, which caused friction with the Freudian school (Evans, 2006). He interprets Freud’s theory uniquely and develops a distinct theory through the movement of his return to Freud and believes himself to be a faithful interpreter of Freud's theories.

Lacan proposes a threefold divide in the evolution of psychoanalysis, according to Samuels (1993). He asserts that the first period embodies “Freud's initial discovery”, the second period encapsulates “the repression of Freud's ideas by ego psychology”, and the third period represents Lacan's own "return to Freud" to meticulously analyze and interpret Freud's work (Samuels, 1993). Vanheule (2017) emphasizes how Lacan's strategy differs from the viewpoints of ego psychology and object-relations theory, particularly in how they interpret Freud's work and prioritize the structural model above the topographical model. Lacan's theory challenges non-Lacanian post-Freudian approaches and criticizes focusing on the second model because that model undermines the centrality of the unconscious. Essentially, ego psychologists and



object-relations theorists' misinterpretations of "The Ego and the Id" redirect the focus away from the unconscious and toward one or more of the agencies within the structural model (Vanheule, 2017).

One of Lacan's most remarkable contributions to psychoanalytic theory is the inclusion of linguistic concepts (Homer, 2016). He emphasizes language and the unconscious to characterize the linguistic and social norms that impact our lives. He proposes the idea of the symbolic order, which he claims is that "*the unconscious is structured like a language (Lacan, 1964/1998)*" (as cited in Homer, 2016).

Lacan proclaims that Freud's clinical practice, founded upon his analysands' free associations, namely their speech and linguistic articulations on the analytic couch, is where psychoanalytic experience and the theories to which it gives rise first emerged (Vanheule, 2017). Lacan's emphasis on language, rooted in Freud's clinic and his analysands' speech, receives criticism for allegedly neglecting non-linguistic elements (Vanheule, 2017).

However, Lacan argues that these elements gain meaning through their connection with the free-associative speech of analysands. He cautions against relying only on nonverbal fragments to reveal unconscious truths and that the analyst bases his interpretations on what has been uncovered (Vanheule, 2017). As Gasperoni (1996) suggests, Lacan's theory can be understood as a response to the divergence of post-Freudian theorists from the authentic objectives of psychoanalysis, presenting a counter position to the conventional and reality-centered focus of ego psychology.

Additionally, topology -the branch of mathematics that studies spatial properties and transformations - is extensively used in Lacan's work. Lacan's use of topology, according to Ragglund and Milovanovic (2004), "indicates the complexities caused by the functioning of (seemingly contradictory) paradoxes in human mental life." By employing topology, Lacan is able to demonstrate the intricate and non-linear character of human subjectivity (Ragglund & Milovanovic, 2004). Lacan states in his seminar XIII in 1966:

*[t]opology is not something that [the analyst] must learn as an extra ... [W]hether he knows it or does not ... from the moment that he does psychoanalysis, this is the stuff*

*[l'étouffe] into which he cuts ... [but] if his topology is constructed in a mistaken way, [it] will be at the expense of his patient.*

(as cited in Greenshields, 2017, p. 8)

### **2.2.1. From Fantasy<sup>5</sup> to Real**

According to Evan's (2006) argument, Freud's realization that fantasies may be the cause of memories of seduction marks a significant shift in his philosophy. Because it emphasizes how unconscious desires constantly reconstruct memories and fantasy's crucial role in creating symptoms. Lacan gives importance to Freud's thoughts on fantasy; however, he raises concern regarding post-Freudian psychoanalysts who emphasize the imaginary aspect of fantasy. Although he accepts the power of the imaginary in fantasy, he underlines that this is not due to any intrinsic qualities in the image but to the place it occupies in a symbolic framework (Evans, 2006). Understanding this criticism's rationale necessitates reviewing Lacan's three registers: the Imaginary, the Symbolic, and the Real, and their topology.

#### **2.2.1.1. Borromean Knot as Structure of the Subject**

In Lacanian theory, the structure of the subject is explained topologically by the Borromean knot in which symptom or *sinthome*<sup>6</sup> has a function of tying together three registers. This knot, or knot structure, consists of three rings corresponding to the imaginary, symbolic, and real. No two rings are joined together directly in a "classical Borromean knot"; instead, a third ring holds the two rings together. As a result, if you cut any of the rings, the other two will come apart and separate from one another (Lacan, 1972-1973/1999). The subject's position in relation to the Other

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<sup>5</sup> Lacan critiques Klein's use of "fantasy" only in the imaginary dimension because the meaning she gives the term differs from Freud's conceptualization (Lacan, 1957-1958/2017, p. 200). Therefore, he differentiates Kleinian "phantasy" and Freudian fantasy and forms his theory on Freudian fantasy (Fink, 2009, p. 388-389)

<sup>6</sup> The description of the symptom has evolved over time from an analyzable message from the unconscious to a message containing unconscious pleasure. Starting from the idea that there is one kind of *jouissance* comes from the symptom, the term *sinthome* was coined (Lacan, 1975-1976/2016), which describes the establishment of another kind of relationship with this symbolic resistant enjoyment. *Sinthome* exists topologically as the fourth ring of the knot through identification with the symptom, and by offering a special way of organizing *jouissance*, it still opens the way to experience this *jouissance* (Evans, 2006).

and lack determines the subjective structure. According to the Lacanian perspective, a person can be found in one of three structures defined as neurosis, perversion, and psychosis, and this structure does not change over time after formation.

### *Imaginary*

Imaginer register can be considered an area where the world of “images and imagination, deception, and illusion” dominates (Knockaert et al., 2004, p. 3). In the context of Lacanian theory, the *formation of the ego* is the conceptual cornerstone for the concept of the *imaginary* component. The ego is created through the process of becoming identified with the reflection that one sees in the mirror and recognizes as the self (Evans, 2006). Lacan (1949/2005) describes it as the Mirror phase, and this phase as occurring between six and 18 months. At this time, newborns become fascinated with their reflection in a mirror or other reflective surface (a metaphorical interpretation of mirror and reflective surface is possible). A feeling of completion and pleasure is drawn from initially erroneously the reflected image. The infant's experience of the integrated being is shaped mainly at this stage, implying the illusion that they have finally mastered their body before adequate motor abilities have developed. Lacan (1949/2005) states:

*This event can take place, as we have known since Baldwin<sup>7</sup>, from the age of six months<sup>8</sup>, and its repetition has often made me reflect upon the startling spectacle of the infant in front of the mirror. Unable as yet to walk or even to stand up, and held tightly as he is by some support, human or artificial (what, in France, we call a 'trotte-bébé'), he nevertheless overcomes, in a flutter of jubilant activity, the obstructions of his support and, fixing his attitude in a slightly leaning-forward position, in order to hold it in his gaze, brings back an instantaneous aspect of the image.*

(p. 93-94)

As the image gets intertwined with the sense of self, it results in an *alienating identification*. Thus, Lacan asserts that the ego keeps functioning by *misrecognition*<sup>9</sup>,

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<sup>7</sup> Although Lacan claimed that Baldwin invented the "mirror test," Henri Wallon initially introduced it in 1931 (Evans, 2006, p.117).

<sup>8</sup> Lacan initially defined it as a phase or stage in the development, later he focused on the illustration of “conflictual nature of dual relationship” (as cited in Evans, 2006).

<sup>9</sup> Originally, *Méconnaissance* in French. It comes from the term *connaissance*, which is described as knowledge of ego by Lacan. It is “an imaginary misrecognition of a symbolic knowledge”, which is the knowledge of the subject (*savoir*) (Evans, 2006, p. 96, p.112).

and *refusing to acknowledge fragmentation and alienation*. As a result, he is critical of ego psychology's willingness to prioritize the ego over unconscious processes and equation ego with the subject (Homer, 2016), and “introduced the concept of a subject distinct from the ego” (Schneiderman, 1980), a subject of the unconscious. In conclusion, in order to construct its identity/self/ego, the subject must relinquish itself.

### ***Symbolic***

The symbolic register is a language dimension, while the signifier is the symbolic dimension of language (Knockaert et al., 2004, p. 3), constituting the core of our unconscious. Owing to the infant becoming aware that they are different and separate from their mother, the infant is subsequently motivated by a relentless search for completeness; however, the child must use language for this search at a certain point inevitably (Lacan, 1953/2006). The instincts that the infant cannot escape forces to make noises, shout, and cry towards the outside world. Where this shout is directed and reaches, another human being, an adult, interprets the infant's cry *through language, thus determining* the baby as the subject of a language and thus a social bond. In this way, nutritional needs are determined retrospectively by the framework and limits of language, and therefore, drives<sup>10</sup> comes to the play rather than instincts. Thus, Lacan defined language as the Other in his description of the unconscious as the discourse of the Other (Homer, 2016; Dor, 1998; Lacan, 1961-1962/2010). The symbolic order structures the child's *imaginary world through language*, shaping their perceptions and understanding of the world around them. Thus, Symbolic has a constructive power over the Imaginary. Additionally, while the *signifier* is at the base of the symbolic register, the Imaginary incorporates *signified* and signification (Evans, 2006, p. 84). Language sets the child up in the symbolic.

Through the Mirror Phase, the foundations of the divided subject (\$), divided between body and language (Verhaeghe, 2008), are laid. This subject emerges as the subject of the unconscious via the agency of both imaginary and symbolic elements.

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<sup>10</sup> *Instinct* refers to biological and inborn characteristics that humans and other animals share. In contrast, *drive* is associated with the unconscious and is defined by a constant, insatiable need unrelated to particular acts or objects.

Fink (1996) affirms that alienation is followed by *separation*, which involves the infant's attempt to align their lack of being with the Other's lack (typically the mother). Introducing the Name-of-the-Father - a signifier of Mother's desire<sup>11</sup>, disrupts this attempt, creates a gap between the infant and the mother, and allows the infant to establish their subjectivity. With the aid of the symbolic, the infant also internalizes *the law and norms of society*, which the Name-of-the-Father represents. Therefore, the infant can establish its own space and subjectivity through symbolic order. This process is crucial for the infant's development and formation of desire (Fink, 1996, p. 55-58).

### ***Real***

The Real register is fundamentally beyond the symbolic and cannot be fully assimilated into it (Knockaert et al., 2004, p. 3). Lacan (1973-1974) declares that Real is unknowable at the margins of the symbolic order rather than a material "thing" / object or reality itself. It is distinct from appearance or images and one of the three orders, separate from the symbolic and imaginary. It is unsymbolizable, closely linked to the body, and limits to symbolic and imaginary (Homer, 2016). It is beyond conceptualization and expression through language totally and is characterized by impossibility (Lacan, 1974-1975). Lacan (1974-1975/) states:

*What one wants to demonstrate does without saying, it must be impossible, a condition required for the Real. It ek-sists as impossible.*

(p. 170)

*the Real, not simply where there is a hole, is invented, but that it is not unthinkable that it is through this hole that we might advance into everything that we invent about the Real, which is not nothing because it is clear that there is a place where the Real works*

(p. 151)

Real is “internally excluded” rather than just outside discourse; therefore, it shapes and directs speech (Greenshield, 2017).

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<sup>11</sup> Object a represents the cause of desire, which originates from the Other's desire (usually represented by the mOther) and functions as the basis for the child's desire. The Other's desire, separate from the child's control, creates a rift between them, leading to the advent of object a. Object a can be understood as a remainder produced when the hypothetical mother-child unity breaks down, symbolizing the lost unity and serving as a substitute for it. This substitute pleasure, termed *jouissance*, becomes part of the subject's fantasy life and provides a sense of being and fulfillment. The separation between the subject and the Other results in the subject's expulsion from the Other and the introduction of the object a into fantasy scenarios. (Fink, 1996, p. 59-61)

### 2.2.2. Trauma in Lacanian Approach

*Unconscious does not discover anything, because there is nothing to discover, there is nothing to discover in the Real, since here there is a hole.*

Jacques Lacan, 1973-1974, Seminar XXI, p. 154

*The only people who enjoy this Real, are the mathematicians.*

Jacques Lacan, 1973-1974, Seminar XXI, p. 174

There is no Oneness; there is the knot of three separate but nested orders in the structure of the subject. Ragglan (1995) states that “*A palpable void lies at the heart of language, being, and body*” a constructive void in which the traumatic element is inherent to the structure itself (p. 87). Due to a lack of Oneness and the void (trou) in structure, the subject has to fall into a place of trauma rather than the harmony of the unavoidable founding contradictions of the imaginary, symbolic, and real. Therefore, *trauma is an organic trauma of humanness*. It is a fundamental and natural aspect of being human, deeply ingrained in human existence. In his 21<sup>st</sup> seminar, Lacan refers to this structuring void and its relation to trauma with a pun: *troumatisme* (Lacan, 1973-1974, p. 151).

Additionally, Homer (2016) asserts that, in psychoanalysis, trauma pertains to psychological disturbances resulting from an individual's confrontation with stimuli they cannot comprehend or master. He interprets that trauma highlights the *inability to fully absorb pain and suffering into language or the symbolic*, leaving an untransferable residue known as the real (Homer, 2016).

Thus, in analysis, the focus is on the residual experiences that act as stumbling blocks for the patient, while the goal is not to exhaustively symbolize every aspect of the real but to concentrate on the potentially traumatic fragments (Homer, 2016). The analyst's intervention can help the analysand speak the signifier associated with the traumatic one, leading to its "dialectization" and setting it in motion within the discourse (Fink, 1996, p. 26-27).

### **2.2.3. Critiques of Diagnostic Approach from a Lacanian Psychoanalytical Perspective**

In their articles, which discussed the definition of PTSD and the conceptual evolution of trauma in the Diagnostic and Statistical Manual of Mental Disorder (DSM) from DSM I to DSM V, Çolak et al. (2010) note there was a greater focus on providing more details in the definition of trauma and trauma-related disorders in the DSM-IV and DSM-IV-R periods. Also, in the 5<sup>th</sup> edition of the DSM, there has been a significant expansion in the range and definition of PTSD. This expansion includes the creation of an entirely new category known as “Trauma and Stressor-Related Disorders” (American Psychiatric Association, 2013).

A study conducted by Bistoën et al. (2014) demonstrates that this diagnostic definition assumes that it is associated with a specific clinical syndrome linked to a diverse but limited set of traumatic events. According to them, the DSM adopts a restrictive approach to determine the classification of an event as “traumatic” by setting specific requirements for stressors. However, they assert that the critical aspect is not the original event’s actual nature but how the experience affects the individual’s psyche. The effects of the so-called *traumatic encounter* are determined *by the subject’s response or reaction to the experience rather than the event itself*. Furthermore, they emphasize that empirical research also provides results supporting the claim that traumatic experiences are linked to an individual's response rather than being limited to certain external conditions. This calls into question the idea that the resulting trauma can be entirely explained by a straightforward dose-response connection or the external incident itself. This leads to the conclusion that *trauma is a unique and subjective experience that external sources cannot explain*.

Similarly, Moncayo (2008) asserts that each case of PTSD is based on a trauma background, yet not every traumatic experience results in PTSD automatically. This concept illuminates the connection between the psychological aspects of the unconscious mind. The development of PTSD necessitates the interplay between the trauma itself, unconscious fantasies, and specific stages of development (Moncayo, 2008, p. 186). This perspective also highlights the individual’s response to the significant external factors in determining the traumatic nature of an experience.

Furthermore, Wright published an article titled *Lacan on Trauma and Causality: A Psychoanalytic Critique of Post-Traumatic Stress/Growth* in 2020. The article highlights that the term trauma has garnered significant attention since the mid-20th century, and this interest has led to the emergence of the discipline known as "Trauma Studies". The concept of *trauma talk* is introduced in the article, referring to the utilization of the term *trauma* in ways that lead to tangible outcomes despite the absence of a clear and consistent reference. It is emphasized that despite the term's inherent ambiguity, trauma talk effectively spreads, triggering the activation of specific values and practices that align with larger neoliberal agendas. This term, trauma, becomes associated with the idea of victimhood and victims' rights within a culture of seeking compensation and eventually becomes entangled in the geopolitical realm of human rights.

Besides, the article highlights that within the context of diagnosing PTSD, a one-sided cause-and-effect conceptualization aligns with Freud's early theory, which he later abandoned prior to developing his psychoanalytic theory. This situation is interpreted as a consequence of an incomplete and misleading reading of early Freud. In conclusion, Wright (2020) argues that interventions for PTSD from this perspective may indeed alleviate suffering to some extent, but they unquestionably relegate subjects to a state of being more or less passive victims and asserts that Lacanian perspective enables a clinical practice that shifts away from automatically casting individuals as passive victims.

#### **2.2.4. Traversing the Fantasy and Psychoanalytic Praxis**

Lacanian theory introduces a distinction between Real and reality. Often associated with trauma, the Real represents the unknowable but present aspect of being. Lacan underscores that "Fantasy constitutes for each of us our window onto reality." in 1967 (as cited in Fink, 2007, p.227). This fantasy, he suggests, serves as "a solution to an original trauma" (Knockaert et al., 2004), concealing from the subject fundamental lack linked with the profoundly traumatic impact of castration. It functions as a mechanism for constructing social reality, melding the subject with language and culture (Homer, 2016).



Each clinical structure uses a fantasy scenario to cover up the lack present in the Other. Grigg asserts (1989) that although there is a tendency to replace the discontent with a reality more suited to the subject's wishes in cases of neurosis and psychosis, a non-pathological subject also maintains fantasies that cover internal and external deficiencies, making the experienced reality more acceptable (as cited in Turner, 2017). Fantasy takes on the role of mediating between desire and the Real, thus assuming the processes of structuring and organizing desire. In other words, it holds significance for the subject in terms of relating their desires to the Other (Sharp & Turner, 2020, p. 189). Evans (2006) asserts that Lacan emphasized that fantasy serves a dual function. It enables the subject to maintain desire while also serving as a means through which the subject sustains themselves in relation to their fading or vanishing desire.

Lacan declares the existence of a fundamental fantasy in his later writings that serves as a compromised formation to sustain desire and *jouissance* (Sharpe & Turner, 2020). Individuals' fundamental fantasies share structural similarities due to the challenges of entering the language-based sociality and adopting gendered identities within the Symbolic. During the resolution of the Oedipus complex, individuals are prompted to identify with the Name-of-the-Father, symbolizing the prohibition of incest. Before this, the child's wish revolves around becoming phallus or the object of satisfaction for the mOther, but they must ultimately relinquish this pre-Oedipal longing.

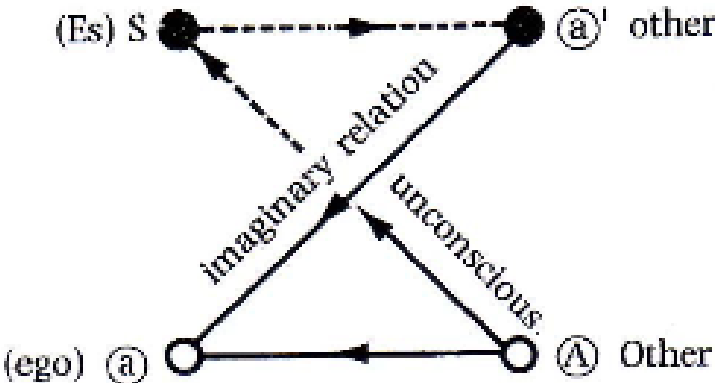
Lacanian psychoanalysis views the concept of castration not as the literal removal of the penis but rather as a symbolic loss or lack of *jouissance*, which goes beyond mere pleasure and implies pain and enjoyment together. Recognizing the lack is crucial for individuals to enter the realm of culture and shared meaning. The individual's fundamental fantasy plays a crucial role in reconciling this traumatic loss or lack, referred to as symbolic castration (Sharpe & Turner, 2020). Furthermore, fantasy serves as a supportive element within reality, acting as a defense mechanism against the intrusion of the Real into our everyday experiences (Homer, 2016).

The fundamental fantasy is worked on and finally reshaped through psychoanalysis, and Lacan refers to *traversing* to describe this process. This does not result in its

elimination; instead, a modified version emerges that is more tolerable. The psychoanalytic process involves reconstructing the patient's fantasy and subsequently aiming to traverse it (Fink, 2007, p. 227).

Moreover, Lacan criticizes the standard view of analytic practice as a *two-person situation* when this view was prevalent (Lacan, 1953/2006). What he means by a *two-person situation* here is that the analytic relationship is stuck in the imaginary. However, there is a distinction between the imaginary relationship between the ego and the Other and the symbolic relationship between the subject and the Other. This two-person situation seems compatible with a perspective that takes human nature and the workings of the therapy process linearly; however, the self/ego and the subject are not the same.

According to Kaçar (2018), to comprehend the non-linear characteristic of the individual, Lacan found it necessary to employ geometric configurations explicable solely through the field of topology. Schema L is the initial and fundamental approach to navigating this intricacy (Kaçar, 2018).



**Figure 1.** *Schema L*

*Note:* J. Lacan, Seminar on 2 February 1955, taken from “The Ego in Freud's Theory and in the Technique of Psychoanalysis” by J. Lacan (1991) (S. Tomaselli, Trans.).

Fliche (2016) summarizes that Schema L consists of two main axes: imaginary (between ego and other) and symbolic (between subject and Other). This schematic depiction gains importance because it illuminates the dynamics of the unconscious and speech. Therefore, an inquiry about the agents of discourse and their intended

recipients is essential here: who is speaking and to whom? However, when the schema is examined, it becomes clear that the imaginary axis is an obstacle to the uninterrupted progression of the symbolic axis towards the subject (S). As a result, the message originating from the unconscious is prevented from reaching the subject directly (Fliche, 2016). Soysal (2011) writes that we can comprehend that the symbolic axis that constructs the subject throws it into the unconscious and that it returns is only possible through the filter of the imaginary that wraps it like its skin, the identifications it establishes with the other. So, at this point, the same situation applies to the therapist, who is a human being. In a therapy process, both the patient's and the therapist's imaginary and symbolic axes may be active. For this reason, the training of the therapist/analyst includes the training of listening to the simultaneously functioning unconscious "while the subject cannot find anything to give us other than herself".

#### **2.2.5. Constructed Victimhood in Speech**

In the first chapter, the definition of victimization, the possible connotations of the word victimization, and in which areas and how it has been subjected to scientific examination are given. When the mainstream psychology literature is examined, trauma is considered a situation that causes victimization and suffering. From a Lacanian point of view, trauma is an existential element of being a subject. The subject can relate to the world in many ways through fantasy, and at this stage, there can be many sufferings and causes of these sufferings. Considering the victimhood constructed in the patients' speech during the therapy process, the speech of a person who has started a therapy process due to suffering is under scrutiny. In the Lacanian psychoanalytic approach, the term victimization/victimhood is not explicitly included in the theory. In line with this, this studied term victimhood takes its meaning from the connotations of its etymology: including *injustice*, *innocence*, *sacrifice*, *helplessness*, and *passivity*. Thus, the concept studied within the scope of this thesis should be understood as a person's relationship with the other and the Other through victimhood.

## CHAPTER 3

### METHODOLOGY

#### 3.1. The Reasons for Choosing Qualitative:

This thesis aims to examine the victimhood that emerges in patients' speech during psychotherapy sessions. Thus, the research focuses on individuals' subjective experiences and language in therapeutic settings. Therefore, I carried out the study using the qualitative research methodology.

In the study, which was planned to analyze the patient's speech in sessions with the therapist, I examined the subjective aspects of the patient's speech. I approached my research question from a social constructivist perspective. As Scotland (2012) noted, there is no objective truth in the world, and individuals construct their reality through language. In addition, there are various ways to access them (Scotland, 2012). Appropriate with qualitative research and its social constructivist epistemology, my perspective is based on the relativistic ontology, which emphasizes no singular reality. Within this framework, reality is continuously constructed and shaped through social interactions and language.

##### 3.1.1. Discursive Methodology

I thought discursive methodology was appropriate for the subject I was working with social constructivist epistemology and relativist ontology because language is taken as an object of research in this methodology. Also, discursive methodology accepts language as constructive (Georgaca & Avdi, 2012). Besides, according to Parker (2005), *the analysis of naturally occurring conversations or interviews* could be worked through discourse analysis. Thus, discursive methodology is suitable for using previously conducted therapy sessions as data.

### 3.1.2. Lacanian Discourse Analysis Perspective as a Research Approach

Parker proposes Lacanian Discourse Analysis as a discourse analysis method. It depends on the Lacanian perspective, and *Lacan was concerned with the speech of the 'analysand' in an encounter with an analyst* (Parker, 2005). Lacanian Discourse Analysis focuses on language's structural features, identifies critical anchoring points, and investigates the relationship between language, the unconscious, and subjectivity (Baltacı, 2022a). It questions standard interpretation approaches and seeks to reveal a new dimension of knowledge within discourse. There are seven points in Lacanian Discourse Analysis. These are “Formal Qualities of Text, Anchoring of Representation, Agency and Determination, The Role of Knowledge, Positions in Language, Deadlocks of Perspective, and Interpretation of Textual Material” (Parker, 2005; Baltacı, 2019; Baltacı, 2022a; Baltacı, 2022b). Below is a summary of these seven points from the text of Parker in 2005 and Baltacı in 2019.

- a. **Formal qualities of text:** An interpretation of a text does not aim to retrieve the concepts that assume hidden subconscious meanings. On the contrary, the focus is on the arrangement of these signifiers within the text, intending to attain the "absolute difference" (Lacan, 1979 as cited in Parker, 2005). The motif of the "absolute difference" involves identifying distinct patterns and connections among the signifiers while seeking variability in narratives (Potter & Wetherell, 1987). It is based on Lacan's (1979) statement, "A signifier is something that represents a subject" (as cited in Parker, 2005).
- b. **Anchoring of Representation:** Lacan's theory implies "repression," pushing signifiers out of speech or text and enabling metaphors to emerge, effectively relocating these signifiers beneath the surface. *The repetition of signifiers indicates the presence of quilting points and a signifier gaining value through interactions with other signifiers.* Lacan's mathematics also demonstrates a structure in which specific signifiers play a more dominant role throughout the text, and the process of signification occurs retroactively.
- c. **Agency and Determination:** According to Lacan, language serves as the foundation of the unconscious, and signifiers creatively arrange structures and shape human relations (Lacan, 1979, as cited in Parker, 2005). According to Lacan, language serves as the foundation of the unconscious. Analyzing

the "unconscious" entails looking for "gaps" and "lacks." This method assumes that certain things stay unsaid or unsayable at any particular time (Billig, 1999, as cited in Parker, 2005)), and the unconscious functions as an absence within the text in Lacanian discourse analysis. Therefore, *an overdetermination of meaning is also an overdetermination of the subject, and what is most 'inner' to the subject is what is outside.*

- d. The Role of Knowledge:** What defines a human subject is the impact of the act of speech and the systems of Language-Symbolic, Imaginary, and Real. Here, the process of how the subject is shaped by language is analyzed. While speaking to specific others, along the Imaginary line, the language system simultaneously transcends the individual and leads to communication directed towards the Symbolic realm, particularly the Other. Thus, in the text, points where attributed knowledge about the Other is presumed are analyzed.
- e. Positions in Language:** Lacan argues that the analyst's task is to receive the message sent by the subject and to send it back in its 'true meaning, reversed in form' (Lacan, 1979). Due to the nature inherent in language, the focus is *on the truth concealed within the original message.*
- f. Deadlocks of Perspective:** Entwined with the Real, Imaginary, and Symbolic is a third order. The Real is not a definable and explicable 'external' realm of discourse; rather, it operates at the point of distortion of representation, at the site of trauma or shock, and then is swiftly veiled, so that it can be spoken of. In a text, points that show the unspeakable, the unrepresentable, can be interpreted as encounters with the Real, and this is the closest we come to speaking about something 'outside of discourse' (Frosh, 2002, as cited in Parker, 2005). The point of contradiction between different types of speech signals an impasse and functions as the "real." Here the focus is on these contradictions, impasses, and deadlocks.
- g. Interpretation of Textual Material:** A researcher who adopts Lacanian discourse analysis avoids an interpretive approach that aims to uncover the conceptual 'signified' buried beneath 'signifiers,' and this also implies that it is not a form of 'hermeneutics' (Lacan, 1979). An analyst's task is to work 'above the Symbolic line' (within the field of text) and to open it up by distorting and disorganizing the text. The researcher, like the analyst,

approaches the text from the position of the analyst which Lacan describes in the discourse of the analyst.

Based on these seven principles that Parker presented so that the researcher could frame her/his own method, I created a method for the current study in order to trace and analyze victimhood that appeared in the patient's speech. Below I detailed the method and then explained the procedure I followed based on the social constructivist approach and the Lacanian Discourse Analysis Perspective.

## **3.2. Method**

### **3.2.1. Sampling Method and Data Collection**

Therapy sessions as data material were collected from psychotherapists from the Ayna Clinical Psychology Unit of METU Psychology. Before data collection, all the necessary permissions were taken from the Human Research Ethics Committee (protocol no: 279-ODTU-2020) in METU and Ayna Clinical Psychology Support Unit. The recruitment was based on the volunteerism of the therapists as a proper to convenient sampling method. They were informed that the research aimed to explore the victimhood in patients' speech in psychotherapy sessions and were asked to provide sessions where they thought victimhood in the speech of the patient was dominant. A total of eighteen sessions from six patients were collected, as provided by six therapists. Along with the session records, the therapists also provided demographic information, reasons for the patients' initial application to psychotherapy, and their observations regarding the subject position of each patient. The Table I below concisely presents all the gathered information, including the number of collected sessions.

When the table is examined, while two of the patients are male and the rest are female, the therapist with the code name T2 is male, and the other therapists are female. In addition, the age range of the patients varies between 25 and 55, it is seen that the age of the female patients is between 25 and 27, one of the male patients is 34 and the other is 55 years old. The reasons for applying in which patients' own statements are noted on the application form in the clinic are different from each

other. In addition, when the number of sessions of the patients in the therapy process is examined, it is seen that this is quite different from each other. Samples from the beginning of the therapy process to the 60th sessions are among the collected data. Finally, information on the clinical structures of patients based on their therapists' opinions is also included in the table. This information was included in the study because it might have had an impact on an impact on the therapy process with the patient. When this section is examined, it is seen that the clinical structure of one of the patients is psychosis, one of them is perversion, and the rest is thought to be neurosis. The hysterical neurosis structure was noted for all three neurotic patients, and hysterical defenses were dominant for the person who was thought to have a pervert clinical structure. Furthermore, the therapists have conducted these sessions within the scope of psychoanalytic-focused clinical psychology graduate education and have continued their therapy processes with the accompaniment of supervision.

**Table 1.** *Collected Sessions from the Therapists*

<b>Code name patient / therapist</b>	<b>Age/gender</b>	<b>Cause of application to psychotherapy</b>	<b>Collected sessions</b>	<b>Clinical structure information</b>
Aslı / T1	27 / Female	Problem of hate	59-62	Neurosis / hysteria
Bulut / T2	34 / Male	Advice for psychotherapy after the diagnosis of bipolar disorder	10	Psychosis
Canan / T3	25 / Female	Attention deficit and suspiciousness	38-39, 41, 43-46	Neurosis / hysteria
Diren / T4	25 / Female	Sexual violence	1 & 14	Perversion / dominant hysterical defense
Esat / T5	55 / Male	Unhappiness, failure issues	2-4, 7-9	Neurosis / hysteria
Hale / T6	26 / Female	Related to job	1	Neurosis

*Note.* The session of Hale / T6 was not included in the analysis

### **3.2.2. Procedure**

#### ***Nature of the Data and Transcription***

Data was comprised of the voice records of the sessions held in the Ayna Clinical Psychology Support Unit in METU, where sessions were already being recorded for



educational and scientific purposes. Patients were informed during their first sessions at the unit and signed a document accepting that their voice records would be used for educational and scientific purposes. After collecting voice records of sessions from psychotherapists, all recordings were transcribed according to the nature of the research methodology.

After verbatim transcription of the collected 18 sessions considering the connotations of victimhood and taking short notes, I chose 11 sessions in which victimhood was dominant in the patients' speech. However, only the first session of one of the patients (Hale) was available as data. I did not include this session in the analyzed examples, because it was the first encounter with the therapist and because there were no traces of dominant victimhood connotations in that session. As a result, following the guidelines of Georgaca and Avdi (2012), who suggest that "eight to twenty" interviews are sufficient for a publishable study, a total of eleven therapy sessions were included in this research. The Table II below contains details of the sessions included in the analysis.

**Table 2.** *Nature of the Analyzed Data*

<b>Code name patient / therapist</b>	<b>Gender patient / therapist</b>	<b>Age of the patient</b>	<b>Clinical structure information</b>	<b>Number / duration of sessions</b>
Aslı / T1	F / F	27	Neurosis	#59 / 20.20 m. #60 / 68.15 m. #61 / 38.10 m.
Bulut / T2	M / M	34	Psychosis	#10 / 48.20 m.
Canan / T3	F / F	25	Neurosis	#37 / 38.43 m. #41 / 33.42 m. #44 / 43.37 m.
Diren / T4	F / F	25	Perversion	#1 / 57.04 m. #14 / 41.30 m.
Esat / T5	M / F	55	Neurosis	#7 / 42.38 m. #9 / 47.30 m.

### **3.2.3. Coding and Analysis of the Data**

In the method based on Lacanian Discourse Analysis Approach, unlike other qualitative methods, there are no coding styles such as specific subthemes, superordinate themes, or cross-case analysis. Based on the Lacanian Discourse Analysis perspective and following the main focus points of my study principles

determined in line with the research aims and questions, I took notes on Lacanian themes.

Following the transcription of sessions, I first repeatedly read them to get closer by pinpointing the speeches where connotations of victimhood are prominent. During these readings, which were carried out in the form of Lacanian listening, I kept the research aim and questions and the seven items identified by Parker were also in my mind. After a few readings, in line with Parker's suggestion for data analysis, I identified four main focuses to follow throughout the analysis of the sessions. These were 1. Key signifiers of victimhood, 2. Persistently known, 3. Relationship with the therapist / Other, and 4. Conflict points. Below, I highlighted what I paid attention to within these four main focuses.

### *Main Focuses of the Analysis*

- 1. Key signifiers of victimhood:** In this first main focus, I marked the areas where the patient complained to the therapist, paying attention to how they existed and indicated in the text. Through these markings, an analysis has been conducted on how the signifiers of victimhood manifest themselves within the patients' speech while talking to the therapist.
- 2. Persistently known:** The primary emphasis was placed on tracing the knowledge that patients possess about themselves and others in this main focus. This section covers the information that is explicitly mentioned and what is absent in their speech.
- 3. Relationship with the therapist as Other:** The third main focus revolves around marking how patients relate to the role they assign to knowledge, particularly in relation to the therapist as the Other, within the scope of victimhood. In this context, distinct aspects were identified and scrutinized to analyze instances where patients allude to knowledge during sessions.
- 4. Conflict Points:** In this main focus point the conflicts that emerged in language during the sessions were traced.

In addition, while listening throughout the transcription and reading process, I need to take some notes (laughing, crying, deep breathing, etc.) to explain some extra

points which is not in language directly. For this reason, I used double parentheses (( )) in order to give those explanations.

### **3.3. Reflexivity and Trustworthiness**

*It cannot be objected to us that subjectivity must be null and void, according to the ideal that physics lives up to. However, science attempts to eliminate it by using recording devices, although it cannot avoid responsibility for human errors in reading the results.*

*Jacques Lacan*

In the view of Morrow (2005), the trustworthiness of a study is contingent upon factors such as subjectivity, reflexivity, adequacy of data, and interpretations. Also, Gearing (2004) states that the researcher's subjective experiences and understanding of the world undoubtedly influence the entire research process. In qualitative research, the researcher acknowledges playing an essential role at every stage of the research process (Finlay, 2002). Therefore, in terms of the trustworthiness of the research, the researcher is aware of this effect on research and identifies and organizes this through reflexivity. For trustworthiness, I took notes from the beginning to the end as a reflexive and discussed the uncertainties in my head with a team when necessary. Precisely for this reason, instead of ignoring this effect, I addressed my own position in relation to this research process.

#### ***The Role and Background of the Researcher***

Before my university education, I grew up in an Anatolian city, where different ethnic identities coexist while preserving rural cultural elements. In this city with a multicultural history, I observed that the victim discourse is very dominant and used by everyone simultaneously. The geography we live in is heavily nourished by the arabesque culture and insistence on maintaining pain all the time at the surface. Also, accompanying praise of the victim and the victimization has been a subject that has occupied my mind, especially in recent years. Along with the psychoanalytic and, specifically the Lacanian psychoanalytic perspective, which I started to get interested in towards the end of my undergraduate education, I realized that I developed a different perspective while trying to understand myself and what was happening

around me. I carried out my Ph.D. education in the psychoanalytically oriented clinical psychology program of Middle East Technical University. With this training and all my clinical experience, which has a tradition in which the patient's discourse is studied, the way I hear and listen to the victim has changed. I also worked on it by hearing how I was related to the discourse I was in, thanks to the subjective psychoanalytic process I had been through.

In addition, I worked as a research assistant in the psychology department of a university in a relatively small city for about five years and gave certain courses. In my relationship with students and the institution, I thought this victimization issue proceeded very in line with the dominant discourse. Therefore, the issue still occupies a very fundamental place. For this reason, I believe that this fundamental issue should be studied repeatedly, with a critical view of the dominant discourse in general, to lead a life in harmony with a form of psychoanalytic discourse. My general motivation for doing this work is related to these issues.

While I listened and analyzed the data during the research process, I realized that my supervisor role could come into play as I was working in a session with the psychotherapist and the patient. For this reason, to act according to the study's purpose, I reviewed my focus points when needed and tried to use this role as a supporter of the analysis process rather than equaling it. Additionally, I kept a reflexive diary throughout the process to note my thoughts, emotions, and difficulties. I talked to my peers and discussed many of my thoughts on the subject I was working on, and when necessary, I discussed this with a research team. The thesis monitoring committee and my supervisor have allowed me to discuss these within specific frameworks and advance my research process. Lastly, with the death of the person I was very close to while writing this thesis, I have intensely thought about loss, life, real, and fantasy. Therefore, this has shaped my ties with life. Also, this gave some direction to my reading of the literature and impacted the subjects I read and conceptualized during the research process.

## CHAPTER 4

### ANALYSIS

In this chapter, firstly, to make the data analysis more readable, Table IV, which presents a summary of the results, including main focuses and highlighted notions that emerged from the analysis of the sessions, was included. Subsequently, essential passages from the sessions were provided for each highlighted notion.

**Table 3.** *Analysis of Victimhood in Patients' Speech in-Sessions*

<b>Main Focuses</b>	<b>Highlighted Notions</b>
1. Key signifiers of victimhood	1.1. Not being able to say no 1.2. (Cannot) be like others 1.3. To (be) upset 1.4. "Somehow..." 1.5. Falling for the trap: "Tezgah" 1.6. In/Justice 1.7. Anger
2. Persistently known	2.1. About me <ul style="list-style-type: none"><li>○ Inability</li><li>○ Reference to personality</li><li>○ Medical terms</li></ul> 2.2. About O/others <ul style="list-style-type: none"><li>○ Knowing the unknown other</li><li>○ Because of Other<ul style="list-style-type: none"><li>● Shame</li><li>● Validity</li><li>● Honor</li><li>● Unwritten rules</li><li>● Pathology</li></ul></li></ul>
3. Relationship with the therapist as Other	3.1. Demand for knowledge 3.2. Request for confirming victimhood 3.3. Formation of a victimizing therapist 3.4. I should / not 3.5. Speaking to convey
4. Conflict Points	4.1. Coexistence of contradictions <ul style="list-style-type: none"><li>○ Personal-professional</li><li>○ To want-not to want</li><li>○ To direct-to be directed</li></ul> 4.2. Subject-object positions 4.3. Endpoint of the session 4.4. W(h)o(man)

## 4.1. Key Signifiers of Victimhood

In the first main focus point, distinct highlighted notions were identified for each patient as key signifiers of victimhood: "*not being able to say no*" for Ms. Asli, "*(cannot) be like others*" for Mr. Bulut, "*to be upset*" for Ms. Canan, "somehow..." for Ms. Diren, and "*Falling for the trap: Tezgah*" for Mr. Esat. Besides, two common highlighted notions, "In/Justice" and "Anger," were identified as common highlighted notions for the patients. This indicates a convergence in patients' speech on these signifiers. Below, brief explanations along with passages from the sessions were given.

### 4.1.1. Not being able to say no

Ms. Asli expresses a complaint about *not being able to say no* to people, and this is a recurring problem for her. She describes saying no as a tough action for herself and thinks that people abuse this by insisting on their own desires. Upon examining the following excerpts, being unable to say no is first associated with *a lack of knowledge* about how to do so. Afterward, the act of saying no is brought up as an action that is *overshadowed by others*. In this context, *not being able to say no* emerges as a signifier which she complains about and affects her relationship with others in her context.

**A59**

(13) A: ...as a result when I think about my **inability to say no** to things I don't want I realize that happens a lot

T1: umm

A: but I still don't know how to say it exactly

(25) A: ... you came here you sat down but I mean I meant to say unnecessary later

T1: of course but you didn't say exactly

A: so again yes, yes, yes, I guessed that you will say exactly that

T1: huh

A: exactly no - I mean I can't say don't come after all

T1: huh

A: then when we were passing through the meeting room she came with us I think she's a total cheeky then only then but still and all I can't say it why do you come we will study a different lesson there

(51) A: for example someone said let's go there I said no I already think a thousand times to say no once when someone comes back to me with a counter-argument and

insists on immediately after I said no I get even more angry I want leave myself - to be left me I said no once I don't have the strength to say no to the second one anyway

**Original**

(13) A: ...sonuç olarak istemediğim şeylere **hayır diyemememle** ilgili düşündüğüm zaman bunun çok fazla gerçekleştiğini fark ediyorum

T1: huumm

A: aama yine de tam olarak nasıl söylicemi bilemiyorum

(25) A: ... sen geldin hani buraya geldin oturdun ama yani gereksiz **demek istemiş oldum** sonra

T1: tabii ama eeee tam da demediniz

A: yani yine zaten evet şî- eveet şimdi aynen tam sizin onu diyenizi evet tahmin ettim

T1: hu

A: tam hayır - yani gelme de diyemiyorum sonuçta

T1: hu

A: sonra toplantı odasına biz geçerken o da geldi bizimle tam bir arsız diye düşünüyorum işte o zaman ama gel gör ki bunu söyleyemiyorum niye geliyosun biz orda farklı bir ders çalışıcaz

(51) A: mesela diyelim ki u şuraya gidelim dedi birisi ben de **hayır dedim ben zaten bir kere hayır diyebilmek için bin kere düşünüyorum** ama ben hayır dedikten sonra hemen karşı argüman olarak tekrar bi ısrar üzerine geldiğinde daha da sinir oluyorum beni o sırada bırakmak - bırakılmasını istiyorum ben bi kere hayır demişim ikinciye zaten hayır demeye gücüm yok

#### 4.1.2. (Cannot) be like others

When I analyzed the session of Mr. Bulut, I noted his main complaint is "cannot be like others". Throughout the therapy session, he tells the therapist many examples of things that others can easily do that he cannot. While talking about these examples, he often attributes a meaning to the situation through "position".

**B10**

(81) B: ... **to defend my position on an issue** for example if we are going on duty, friends say that I don't go on Thursday I go on Friday for example if I should go Friday too defending that if I have to go on that day I am very incapable of defending my position against him/her

T2: your own position

B: **I can't resist myself people impose themselves but I can never impose myself I'm always in a passive position**

(85) B: ... let's talk to the teacher so that taking a decision that everyone go equally this is my position but I said let's not say anything anyway nothing will happen my wife picked up the phone and wrote to the group that this is not the case for friends everyone should go equally for example this is an example of imposing oneself I couldn't do it thanks to Ayşe I am able to do I am not able to do it normally but I mean it was a question of where to sit in the group everyone said someone said I will

sit in front of the window one said I will sit in front of the wall the other said I will sit in front of the other window **there is only one place left for me** this is okay I said I'd sit down there **so I stay passive while everyone puts forward their own demands** so **I can't impose myself** on such things I mean

T2: you remain passive while everyone else is putting forwards their demands

B: **I stay passive** when meeting with the professors the professors from the university call they say fifty things I listen to the end say that okay we do it like this professor we do it like that **our friends don't even care it they say no it's not like that** they close the topic immediately **but when it comes to me I mean I can't convince anyone in a way**

T2: you can't convince

B: I can't convince the subject is getting long and long so **I can't do it like friends** so friends immediately come up with a thought **they can easily get themselves out of that position but I can't get myself out**

### Original

(81) B: ... **bi konuda kendi pozisyonumu savunmak** mesela nöbete gidiyosak arkadaşlar siz arkadaş diyo ki mesela ben Perşembe günü gitmeyim de Cuma günü gidiyim mesela Cuma günü benim de gitmem gerekiyorsa o gün gitmem gerektiğini **savunmak onun karşısında kendi pozisyonumu savunmak konusunda çok acizim**

T2: kendi pozisyonunuz

B: **kendimi diretemiyorum insanlar kendini dayatıyo ama ben hiç kendimi dayatamıyorum hep pasif konumdayım**

(85) B: ... hocayla konuşalım herkes eşit gitsin diye karar alınsın **benim pozisyonum bu ama ya ben söylemeyelim neyse bişey olmaz diyodum eşim aldı telefonu yazdı gruba arkadaşlar böyle olmaz herkes eşit gelsin falan mesela kendini dayatmak konusunda örnek bu yapamamıştım Ayşe'nin sayesinde yapabidim normalde hiç yapamıyorum** ama yani grupta nereye oturulacağı konusu söz konusuydu **herkes dedi birisi ben dedi camın önünde oturcam ben dedi duvarın önünde oturcam öbürü dedi ki ben öbür camın önünde oturcam bana sadece bi yer kaldı** bu tamam ben de burda otururum dedim yani **herkes kendi talebini ortaya koyarken ben pasif kalıyorum** yani bu gibi şeylerde **kendimi dayatamıyorum** yani

T2: herkes talebini ortaya koyarken siz pasif kalıyorsunuz

B: **Pasif kalıyorum** hocalarla görüşürken üniversiteden hocalar arıyor allem ediyolar kallem ediyolar elli tane şey söylüyorlar ben sonuna kadar dinliyorum tamam şöyle yaparız Hocam böyle yaparız Hocam **bizim arkadaşlar hiç sallamıyo bile hayır bu böyle olmaz diyolar konuyu kapatıyolar hemen ama bana gelince iş yani ben uu yani ikna edemiyorum kimseyi yani bi şekil**

T2: ikna edemiyosunuz

B: **ikna edemiyorum** ne biliyim yani konu uu uzuyo da uzuyo yani **arkadaşlar gibi yapamıyorum** yani arkadaşlar hemen akıllarına bi düşünce geliyor **çok rahat kendilerini o pozisyonun içinden çıkarabilirken ben kendimi çıkartamıyorum**

### 4.1.3. To (be) upset

In the analyzed sessions, Ms. Canan frequently mentions *being upset* to the therapist and tries to position the therapist to sympathize with her by sharing the things that make her sad. This sadness, at certain points during the session, transforms into deriving *satisfaction or pleasure* from *upsetting someone* or from *someone else's*



sadness. Additionally, at some point, being upset transforms into something she fears.

### C37

(4) A: yes I had a fight with xxx ((boyfriend)) before I came here I think **I made him cry ((laughs))**

T3: you're happy you made him cry

A: yes

T3: huh

A: **I like his crying I mean I was upset but I was getting nervous a little bit upset my lover is not with me everyone's lover is with them my lover is far away ... I see my lover in limited time periods is it not a pity for me why I can't see my lover I got angry and was demoralized**

(128) C: he may say a word that annoy me he may behave act strangely he will do something but I don't know what to do so **I'm a little scared** usually it always happens like this

T3: what are you scared of

A: I mean he'll do something to upset me

T3: what can be something that will upset you

A: when do things he shouldn't do when he does things that dads shouldn't I get angry

### Original

(4) C: evet buraya gelmeden önce xxx'le ((erkek arkadaşı)) kavga ettim **onu ağlattım sanırım ((gülüyor))**

T3: mutlusunuz onu ağlattınız

C: evet

T3: hu

C: **hoşuma gitti onun ağlaması yani üzüldüm ama ben geriliyodum biraz üzülüyodum sevgilim yanımda yok herkesin sevgilisi yanında benim sevgilim uzaklarda ... bense sevgilimi kısıtlı zaman dilimlerinde görüyorum bana yazık değil mi niye ben sevgilimi göremiyorum sinirlendim moralim bozuldu**

(128) C: beni gıcık edecek bi laf söyleyebilir tuhaf bi davranışta bulunabilir bi şey yapıcak ama ne yapcak bilmiyorum o yüzden biraz **korkuyorum** genelde hep böyle oluyo

T3: neyden korkuyosunuz

C: yani beni üzcek bi şey yapmasından

T3: ne olabilir ki sizi üzcek bi şey

C: genelde yapmaması gereken bi şey babaların yapmaması gereken şeyleri yaptığı zaman sinirleniyorum

### C44

(171) A: Isn't it very funny it is

T3: funny huh

A: **it was fun i like it yes i am happy ((laughter))**

T3: huh what made you happy

A: I don't know **I like it so I like that they are unhappy**

T3: being unhappy what is there in the story you tell

A: **unhappiness**

T3: what comes to your mind and you laugh

A: ***I think of them being unhappy I am happy***

T3: married and in other relationships

A: actually **I'm upset** that **it's not something I like or want to live** but then **I look at those people and I think they deserve bad things**

(223) A: ...for example **I was happy I was pleaded I felt like laughing I liked it I mean I liked it I don't know why but **it gives me pleasure** so what can I do I mean **I wasn't upset** and **I didn't fall of my chair I wasn't surprised** when I heard about it it was something I expected from them because they are double-bagger (ugly in Turkish- not beautifull)**

T3: what do you like there

A: **it will give me pleasure that they will be unhappy they are upset**

**Original**

(171) C: **çok komik değil mi**

T3: komik hu

C: **eğlenceli geldi hoşuma gitti evet mutlu oldum ((kahkaha))**

T3: hu nesi mutlu etti sizi

C: **bilmiyorum hoşuma gitti yani hoşuma gitti mutsuz olmaları**

T3: mutsuz olmaları anlattığınız hikayede ne var

C: **mutsuzluk**

T3: nasıl bi şey aklınıza geliyo da güliyorsunuz

C: **onların mutsuz olduğu aklıma geliyo seviniyorum**

T3: evli olan ve başka ilişkileri de olan

C: **aslında üzülüyorum bunu hoşuma giden ya da benim yaşamam yaşamak isticeğim bi şey değil ama sonra bakıyorum o insanlar kötü insanlar ve kötü şeyleri hakediyo diye düşünüyorum**

(223) C: ...mesela **mutlu oldum sevindim gülesim geldi hoşuma gitti gitti yani hoşuma gitti neden olduğunu bilmiyorum ama haz veriyoyani n'apabilirim yani üzülmedim** ve bunu duyduğum zaman **ağzım açık kalmadı şaşırmadım onlardan beklediğim bi şeydi çünkü çirkin insanlar**

T3: ne hoşunuza gidiyo orda peki

C: **onların mutsuz olacak olması onların üzülmesi bana haz vericek**

#### 4.1.4. "Somehow..."

In this highlighted notion, there is a word cluster frequently used by Ms. Diren, in the analyzed sessions, which is "somehow". She, who expresses that she comes from a conservative family structure during the later parts of the session, frequently uses the phrase "somehow" when describing romantic and sexual feelings towards a man and their experiences together during the first years she left her family for university education. "Somehow" appears as an adverb that the patient often uses when trying to describe how the situations, she is complaining about happened. Also, she uses it especially when she shows that other people around her have a great impact on the situations she mentions.

## **DI**

(10) D: ... constant repetition of the eve-nts that I experienced that is when I look at the things that I am experiencing right now

T4: huh

S: constantly repetition or the same mistakes or encountering the same ((inhale) type of people somehow constantly - and against it - I am remaining passive

T4: huh

S: I mean **I couldn't keep doing it** created a kind of insecurity within myself

(12) D: ... I met a man in my twenties ... **somehow something that is crush there was a side that I like then the other party somehow started to communicate with me** mmh after that huh I started to listen to this person's problems all the time but no one around me knew about it

...

D: I mean **somehow I was with someone for the first time I was spending time like this and there was some kind of crush I was enjoying it**

(14) D: I liked what he did ((sigh)) then um **we got close somehow** in the process ...

D: then actually I'm trying to explain the thing this mm it was a long process for me **I see that I have come across this profile many times somehow I have been exposed to it many times** so I wanted to explain it in a little more detail

(16) D: ... actually I felt that he had a kind of approach to crushing me but I didn't feel that there was anything too much we had a little drink that evening then **somehow everyone around me left and my- stayed at home somehow I was made to stay there**

T4: you were made to stay there

D: so **it looks like it was arranged somehow everyone went**

(44) D: It didn't sound very normal to me that people were older **actually but because those people did not cut off communication with me somehow I created such a connection and somehow I felt that I liked it I mean lik- I wouldn't say liking it was something they did for example I liked it not the appearance but their successfulness in something or doing something somehow I was interested and I think that it is used now**

## **Original**

(10) D: ...yaşadığım olaylar- in sürekli tekrar etmesi yani şu anda bakınca yaşadığım şeylere

T4: hıhı

D: sürekli tekrar etmesi ve aynı hataları ya da aynı ((derin nefes alıyor)) tip insanların mm karşıma çıkması sürekli **bi şekilde-** ve **buna karşı- edilgen kalmam**

T4: hıhı

D: yani **bunu sürdüremiyor olmam** kendi içimde bi çeşit güvensizlik yarattı

(12) D: ... yirmili yaşlarımda bi adamla tanıştım ... **bi şekilde** bişey o bi hoşlantı bi hoşuma giden taraf vardı sonrasında **karşı taraf bi şekilde benimle iletişim kurmaya başladı** umm sonrasında u bu kişinin problemlerini dinler oldum sürekli ama bunu etrafımdaki kimse bilmiyodu

D: yani **bi şekilde ilk defa birisiyle birlikte oluyodum vakit geçiriyodum bu şekilde ve işte bi çeşit hoşlantı vardı hoşlanıyodum işte**

(14) D: yaptığı şey hoşuma gidiyodu ((iç çekiyor)) sonrasında umm süreç dahilinde **bi şekilde yakınlaşmamız oldu**

D: bi sonra aslında şeyi anlatmaya çalışıyorum bu mm bu uzun bi süreç oldu benim için bu profille birçok kez karşıma çıktığını görüyorum **bi şekilde buna birçok kez maruz kaldım** o yüzden biraz daha detaylı anlatmak istemişim

(16) D: ... aslında onun benden hoşlanır tarzda bi yaklaşımı olduğunu hissediyodum ama çok fazla bi bi şey olduğunu hissetmiyodum o gün akşam biraz içki içmiştik alkol almıştık sonra **bi şekilde etrafımdaki herkes gitti ve benim orda kaldım evde kaldım bi şekilde kaldırıldım**

T4: kaldırıldınız

D: yani **bi şekilde ayarlanmış gibi herkes gitti**

(44) D: kişilerin yaşının büyük olması beni çok normal gelmiyordu kulağıma aslında ama o insanlar da benimle **bi şekilde iletişimi kesmediği için** böyle bi bağlantı oluşturmuştum ve **bi şekilde hoşlandığımı hissetmişim** hoşlan- yani hoşlanmak demiyim de yaptıkları bişeydi mesela benim hoşuma gidiyordu görünüşü değil de onların bişeyde başarı olması ya da bişeyi yapıyo olması **bi şekilde ilgimi çekiyodu ve onun kullanıldığını düşünüyorum** şuan

#### 4.1.5. Falling for the trap: “Tezgah”

During his sessions with the therapist, Mr. Esat frequently provides numerous examples of people deceiving him behind his back. While referring to instances of being tricked, he highlights falling into traps ( in Turkish *tezgaha gelmek*) as a signifier of his victimhood.

E7

(44) E: *But here's the thing, I can't get rid of this, I mean, why am I falling into this handicap, I don't understand why I'm making so many mistakes, it's that simple, **the man has defrauded you**, you either get your money from that man or you can't, I mean, will you ever do business with him again? He can think like this, but he thinks that if this man doesn't call me to work, why should I go there, **he will definitely set a trap for me**, then **I can't think**, I wonder why?*

(156) E: *What needs to be corrected is, for example, I lived such an irregular life, for example, **I was with hundreds of women and hundreds of transvestites**, that period was very difficult, **my sexual desires were very high**, after that, I wanted to get married to put it in order, because I mean, I was tired of being with a woman on the street, I wanted to marry a woman I loved, a woman with whom I had regular relations, and **this was prevented. They prevented my marriage until I was 30.***

T5: how do you mean the girl on the street?

E: *Well, one of the girls with whom Esat had a relationship was a worthless girl. **Then, oh, now we have come to the point where things are going crazy, Hocam**, I don't know if you know this, then my sister... she went and said that my friend's uncle has a daughter, this girl wants to marry she said let's do it to my brother, I don't know what's going on here as a trap, I mean, xxx ((his sister)) why did she find a girl for me, where was this girl found, why was she found, I don't know how she was found, this girl is the mother of my eldest daughter, but unfortunately she is my eldest daughter, she is not my daughter.*

(162) E: I attributed this to something, I said, **I fell into the trap here**, mm this **kid my father because from time to time he would say sentences like this, thank God, this lineage has dried up, this was a very bad lineage, it was very good that this lineage dried up, etc.**

T5: Why did he say that?

E: My father wanted this lineage to dry up...

#### **Original**

(44) E: Ama burda şu var u ben şeyden kurtulamıyorum yani **bu handikapa niye düşünüyorum bu kadar u niye hata yapıyorum onu anlayamadım** yani bu kadar basit **adam seni dolandırmış** sen o adamdan artık ya paranı alırsın ya da alamazsın yani bir daha bunla iş yapılır mı yapılmaz **adam böyle düşünebiliyor da bu adam beni işe ça çağırmaz almaz ben niye gideyim bunun yanına kesin beni tezgaha getirecek diye düşünüyör** ondan sonra **ben düşünemiyorum neden acaba**

(156) E: Düzeltilmesi gereken mesela ben u ben o kadar **düzensiz bir hayat** yaşadım ki **mesela yüzlerce kadın yüzlerce travesti ile beraber oldum** yani o dönemim çok ağır geçti benim çok - u **cinsel isteklerim çok yukardaydı** ondan sonra yani **bunu düzene koymak için evlenmek istedim** çünkü yani sokakta herhangi bir kadınla birlikte olmaktan u artık gına gelmişti **sevdiğim bir kadınla onu ilişkilerimin u düzenli olduğu bir kadınla evlenmek istedim buna engel olundu** ben taa 30 yaşına kadar **benim evliliğime engel oldular**

T5: nasıl yani sokakta bulunan kız ne demek

E: Ya yani Esat 'ın ilişki yaşadığı u kızlardan birisi kıymeti olmayan bir kız sonra **ah işte şimdi geldik şeyin zurnanın zırt ettiği yere Hocam** bunu biliyor musunuz bilmiyorum sonra benim kız kardeşim ... gitti dedi ki benim arkadaşımın bi amcasının kızı var u bu kız evlenmek istiyor **bu kızı abime yapalım dedi burda ne tezgah döndü bilmiyorum** yani xxx ((kız kardeşi)) **bana niye kız buldu bu kız nerden bulundu niye bulundu nasıl bulundu bilmiyorum bu kız benim büyük kızımın annesi ama ama benim büyük kızım maalesef benim kızım değil**

(162) E: ben bunu şeye bağladım **dedim ki ben burda bir tezgaha geldim** u bu çocuk **babam çünkü zaman zaman şöyle cümleler kurardı benim yarabbi şükür bu soy kurudu bu çok kötü bir soydu bu soyun kuruması çok iyi oldu falan derdi**

T5: Niye öyle diyordu

E: Babam bu soyun kurumasını istiyordu...

#### **4.1.6. In/Justice**

The "Justice" (in Turkish hak) signifier has found its place in the speech of all patients, different from the previous five headings. As a connotation of victimhood, the common presence of this signifier in patients' speech is quite expected. However, each of them relates to this signifier, and the areas it raises in speech are different from each other. Thus, the passages in which these differences take place were given below.

Ms. Aslı is referring to justice through someone's tendency to react strongly to everything. She is highlighting the existence of an absolute right that she lacks.

Additionally, it is noteworthy that she brings up the concept of justice immediately after using expressions like "completely" "complete/most (in Turkish *tamam/en*)," and "every/thing" in her speech.

**A59**

(25) A: because yes so you know totally like tha, I'm not totally anything about it ... she trips about everything she thinks she has the right to trip about everything

**Original**

(25) A: çünkü evet yani hani tamamen böyle hani bu konuda tamamen şey de değilim ... her şeye trip atıyo her şeye trip atma hakkı varmış gibi düşünüyö

Mr. Bulut is questioning the negative situations that happened to him and indicating that what has been done to him is unjust. His fundamental question is "Why was this done to me?"

**B10**

(71) B: so this thing is right – comes to my mind why it was done to me like this the question is why is it unfair to me why so what could I have done I mean mm I think about things like this all the time or why are we in this situation as a family why are we not in prosperity we are always worried I think about such things so I always think about it

**Original**

(71) B: yani bu şey hak - aklıma geliyor bana neden böyle yapıldı soru bu yani bana neden haksızlık yapıyo neden yani ne yapmış olabilirim bi insan niye bunu yapar yani u bu gibi şeyleri düşünüyorum hep ya da biz niye bu durumdayız aile olarak niye refah içinde değiliz hep kaygılıyız ya bu gibi şeyleri düşünüyorum yani hep aklıma geliyo yani

Additionally, Mr. Bulut defines asserting his rights means imposing his own position but states that while others could be in such a position, he himself is not in that position

**B10**

(121) B: Either xxx ((his wife)) is someone who can stand up for herself I mean she is very easy to be quick-witted I mean it completes me like that I'm the exact opposite of her in those aspects she says to me for example someone came and I said this and that she asks me what you said and I said this see if you can say something like this you need to say something like this look she corrects me a lot she's very quick-witted. She fights for her rights she does not give up her rights anywhere she narrows down – insists on her own position very well she imposes herself she gets her rights that is to say I am a wimp they always call me that you are a wimp Bulut is a wimp he is shy Bulut is touchy I also show touchiness

**Original**

(121) B: ya xxx ((eşi)) **kendisini diretebilen birisi** yani çok rahat hazırcevap yani böyle **beni tamamlıyo** o açılardan **ben onun tam tersiyim** o bana der ki mesela birisi geldi ee şöyle şöyle dedim sen ne dedin bana soruyo e ben de şöyle dedim şöyle söylenir mi bak şöyle söylemen gerekiyor falan bak çok düzeltir beni o çok hazırcevap hakkını arar hiçbi yerde hakkını bırakmaz kendi pozisyonunu çok iyi dara - diretir dayatır kendini hakkını alır yani ben pısırik ya bana hep öyle derler pısıriksın Bulut pısıriktır çekingendir Bulut alıngandır alınganlık da gösteririm

Also Mr. Bulut says that when he encounters people who always think they are right, he becomes a “trembling human” or in a state where "his hands start to tremble".

**B10**

(53) B: ... I am a person who **trembles** even in discussions there were meetings in the apartment **even when people were trying to defend an unfair argument**. I mean, there are people like that in our apartment, **they are always right**, there are always people **who take positions** to their advantage, so when I met them in the meeting, **my hands were shaking** a lot. They even made fun of it like this

**Original**

(53) B: ...ben tartışmalarda bile **titreyen** bi insanım apartmanda apartman toplantıları olurdu tartışma insanlar **yani haksız bi argümanı savunmaya çalıştuklarında bile** vardı yani bizim apartmanda var yani böyle insanlar **hep kendilerinin haklı olduğunu** hep kendilerinin avantajına çıkarına olacak şekilde **pozisyon alan** insanlar oluyo yani ben bunlarla toplantıda karşılaştığımda çok **elim titriyodu** falan böyle hatta dalga geçmişlerdi

Ms. Canan discusses the concept of deserving and connects it to notions of goodness and badness, the occurrence of bad things. She also refers back to the religious concept she previously associated with.

**C44**

231) C: ... I say, they are like this, **they deserved what happened to them**, so what did I do to deserve it, why, you know, this is not about deserving, after all, people cannot choose where they are born.

(235) C: I don't know, if you do bad things, it's natural for bad things to happen to you, if you do harm to people and make them unhappy, worse things will happen to you.

T3: Oh, you were explaining like there's such a thing in religion.

C: Yes, I really believe in this too. There's such a thing in religion. I wonder if I was raised religiously.

**Original**

(231) C: ... onlar böyleler **başlarına gelmeyi hak ettiler** diyorum e peki ben naptım da hak ettim niye yani **hani bu hak etmekle alakalı bi şey değil insan doğcağı yeri seçemiyo sonuçta**

(235) C: ne biliyim **kötü şeyler yaparsanız başınıza öyle şeylerin gelmesi doğaldır** insanların kötülüğüne kötülük yaparsanız mutusuz ederseniz sizin başınıza daha kötüsü gelir

T3: **hı dinde öyle bi şey var diye anlatıyodunuz**

C: evet ben de **buna çok inanıyorum dinde böyle bi şey var ben de dindar mı yetiştirildim acaba**

Ms. Diren, while describing her stance in the face of being unjustly perceived by someone else for something she has done, delves into the concept of a "rule," "knowing the rule," and "being warned." She then transitions into discussing concepts like "knowingly doing something wrong".

#### D14

(146) D: Or I'm sure that type of person **doesn't follow any rules** in his life, you know.

T4: huh

D: It made me very angry that such a person **warned me** with such a language at that moment.

T4: huh

D: I felt bad when he said such things like I had ruined the place and done something very bad, I didn't want to do anything, I don't normally answer, I could have said **okay, you are right**.

(271) D: Well, I thought about that too, **was it unjustly angry or something**, I thought, was it inappropriate for me to react like that after what happened, why did I do something like that, but the s-well argument seems very strong to me for some reason, yes, there are many rules in daily life, but not everyone abides by these rules.

(322) D: Well, the behavior I did there was seen as **unfair by that person**, I shouldn't have done it, what I did was also **a way of protecting myself**, you know, I do it, **but it doesn't do any harm, I know it's a rule, I know it's unfair, but it doesn't cause anything. I'm aware that it doesn't cause any harm, I'm doing this on purpose**, I say.

T4: So I know the rule and I violate it knowingly, like now?

D: Well, I actually said something like that, but it's just that, because I thought it **could be a normal thing in daily life, I normalized it inside myself**.

#### Original

(146) D: ya da o tipin mesela hayatında **hiçbir kurala uymadığına** eminim böyle hani

T4: hu

D: öyle bi insan da beni böyle bi dille **uyarması çok sinir etti** o anda hani

T4: hu

D: ben böyle çok hiçbir orayı mahfetmişim çok kötü bişey yapmışım gibi böyle şeyler söylemesi kötü hissettirdi ben de şey yapmak istemedim hani normalde cevap vermem hani **tamam haklısınız** da diyebilirdim

(271) D: ya o şeyi de düşündüm hani ben **haksız yere mi kızdım** filan düşündüm hani şeyden sonra böyle bi tepki vermem yersiz miydi niye böyle bişey yaptım diye ama s-



şey argümanı çok kuvvetli geliyor bana nedense gündelik hayatta evet **birsürü kural vardır ama herkes bu kurallara riayet etmez hani**

(322) D: yani orda hani benim yaptığım davranış **hani o kişi tarafından haksız görülüyordu** onu yapmamam gerekiyordu benim yaptığım şey de **kendimi koruma şeklim** de şeydi hani **bunu yapıyorum ama bunun herhangi bir zararı yok** u hani **onun kural olduğunu biliyorum onun haksız birşey olduğunu biliyorum aslında ama bunun herhangi birşeye zarar vermediğinin farkındayım bunu bilerek yapıyorum zaten** diyorum

T4: yani kuralı biliyorum ve bilerek ihlal ediyorum şu an gibi mi

D: yani öyle birşey demiş oluyorum aslında ama o çok **hani günlük hayatta normal birşey olabilir diye düşündüğüm için bunu normalleştirdiğim için kendi içimde**

Mr. Esat intertwines the signifier of justice with terms such as "honor, morality, dignity, and big" alluding to the idea of "smallness" within the framework of "depriving someone of their rights".

**E9**

(233) M: *It is a very small behavior, it has no dignity, it has no dignity, it has no honor, it has no glory, it has no morals, it has no basis, it has nothing, it is a very small behavior.*

T5: *No dignity, small behaviour, great behaviour*

E: *Great behavior Great behavior, everyone enters the tender, whoever has the right, wins, mm delivers the work properly, gets paid, it's that simple.*

T5: *Well, whoever has the right wins, how is the right in this small, very small one?*

E: *There is no right there, there is no right there there is bribery and violation*

T5: *Who's right is violated?*

E: *everyone's right is violated so if there is a theft involved, is the state's money the people's money isn't it the money collected, so everyone's right is violated.*

**Original**

(233) E: *Çok küçük bi davranış asaleti yok asaleti yok namusu yok şerefi yok ahlakı yok dayanağı yok hiçbi şeyi yok çok küçük bi davranış*

T5: *Asaleti yok küçük bir davranış büyük davranış*

E: *Büyük davranış büyük davranış herkes girer ihaleye hakkı olan alır kazanır u işi de hakkıyla teslim eder parasını alır bu kadar basit*

T5: *Hu hakkı olan kazanır peki bu küçük çok küçükte hak nasıl oluyor*

E: *Orda hak yok orda hak yok orda orda rüşvet ve u hak yeme var*

T5: *hak yeme kimin hakkı yeniliyor*

E: *herkesin hakkı yeniyor yani işin içinde bir hırsızlık varsa devletin parası milletin parası değil mi toplanan parası değil mi dolayısıyla herkesin hakkı yenmiş oluyo*

#### 4.1.7. Anger

"Anger" which is identified as the final highlighted concept of the first main focus, frequently emerges in the speech of all patients except Mr. Bulut. The signifier of anger occasionally finds its way into speech in connection with the notion of justice from the previously highlighted notion. Additionally, it emerges in relation to rules

and reminders. Moreover, it can be accompanied by physical reactions such as laughter on specific occasions. In contrast to these instances, Mr. Bulut, as previously mentioned, introduces the idea of a physical reaction as "trembling, shaking hands" and immediately follows with details about his childhood stuttering.

**A60**

(62) A: ...**I said no** to twice a week, but then there's we want to meet twice a week and we're seeing each other for 20 minutes, this makes me angry

T1: huh

A: because I realized **that I want to be valued**

T1: hiiiiii

A: but I guess I'm naming this thing on mmm **worthlessness** I guess

T1: yes

A: Because **I think you didn't want to do therapy** when we stopped therapy, **or maybe you got angry** because I kept saying the same things and didn't change my behavior.

T1:hmm

(106) A: ... because **I think that the other party will be very angry with me and the relationship will completely break down**, for example, I think that this therapy may be the last for us and we will not continue it anymore.

**Original**

(62) A: ...haftada ikiye **hayır demiştim** ama sonrasında da işte bu hem haftada iki kere görüşmek istiyoruz hem de yirmi dakika görüşüyoruz bu beni sinirlendiriyö

T1: hu

A: çünkü uuu **değer görmek istediğimi** fark ettim

T1: huuuu

A: ama sanırım bu şeyi uü **değersizlik** üstüne adlandırıyorum sanırım

T1: evet

A: çünkü terapiyi kestiğimizde **sizin terapi yapmak istemediğinizi** ya da ben sürekli aynı şeyleri anlattığım için ve davranış şeklimi değiştirmedğim için **belki de öfkelenmişinizi** düşünüyorum

T1:hmm

(106) A: ... **karşı tarafın bana iyice sinir olacağını ve ilişkinin tamamen bozulacağını** düşündüğüm için mesela bu terapinin belki de bizim için son olucanı ve artık devam ettirmicemizi düşünüyorum

Despite the fact that Ms. Aslı said no to the therapist's suggestion to meet twice a week, she attributes a meaning to the therapist's technique and states that she feels worthless and gets angry. Then she says she thinks the therapist gets angry with her. Also, in same session, she says she thinks the therapist will get even more angry with her and that's why that session will be the last.

**C37**

(8) C: is it not a pity for me, why can't I see my lover, **I got angry and I upset**

(174) A: **If he's cheating, I just want to know if I'm being cheated on**

T3: if he is cheating

A: I don't want to not know this, I want to know if I'm being deceived and then I can decide for myself what to do.

T3: knowing you have been deceived

A: Yes, I want to know, **I haven't encountered any obvious clues** so far.

T3: you are looking for it but you are telling as if you want it now

A: yes **if I find it I'll say huh ohhh I'm relieved** ((laughs))

T3: what relief will this be?

A: **I have a search, it will be over**, I guess I won't need to mess with anything anymore because it's not easy to tamper with something and it's not nice.

T3: what will comfort you

A: I feel as if **I would be relieved if I knew that I was cheated on**.

T3: what will happen when you are cheated on?

C: I had a dream the other day about it ... **he is cheating on me** like this, he's talking to a girl like this, etc. I say "me you're doing this like this xxx" **he doesn't care at all, he says yes, I did it, he says, "So what? Are you telling me this?"** He found it very normal, I saw this in my dream, **I was very angry, I woke up from my sleep, I was so angry.**

### **Original**

(8) C: bana yazık değil mi niye ben sevgilimi göremiyorum **sinirlendim moralim bozuldu**

(174) C: **aldatıyorsa aldatıldığımı bilmek** istiyorum sadece

T3: aldatıyorsa

C: bunu bilmemek istemiyorum **aldatılıyosam biliyim** ondan sonra ne yapacağıma kendim karar veriyim istiyorum

T3: aldatıldığınızı bilmek

C: evet bilmek istiyorum şu ana **kadar bariz bi ipucu bi şeyle karşılaşmadım**

T3: onu arıyorsunuz ama sanki onu istiyo gibi anlatıyorsunuz şimdi

C: evet **bulsam sanki huh ya dicem ohhh rahatladım** ((gülüyor))

T3: neyin rahatlaması olacak bu

C: **bi arayışım var o bitmiş olacak** herhalde sanki artık bi şey kurcalamama gerek kalmıcağ çünkü bi şey kurcalamak da kolay değil ve hoş değil

T3: ne rahatlatcak sizi

C: **aldatıldığımı bilsem karşıma çıksa sanki rahatlıcağım** gibi hissediyorum

T3: ne olacak peki siz aldatılınca

C: geçen gün **rüya gördüm** bunla ilgili ... **böyle beni aldatıyo** böyle bi kızla konuşuyo filan u diyorum ki beni diyorum böyle böyle yapıyosun xxx **diyorum hiç umursamıyo evet diyo yaptım nolmuş yani diyo** bunu mu söylüyorsun bana diyo çok normal karşıladı rüyamdan bunu **çok sinirlendim uykumdan uyandım o kadar sinirlendim**

Ms. Canan brings together her anger and being upset. Additionally, she discusses an issue related to being cheated on, where the situation she mentioned as causing anger reappears, but this time within a dream. She mentions that in her dream, she saw herself being cheated on. Upon confronting her partner about it in the dream, she gets very angry when he admitted to the infidelity but did not seem to care. In another session, she talks about a situation where she feels aggressive again. In this case, the trigger for her anger is when she is having coffee and her mother brings her tea, causing confusion in her mind.

#### C44

(53) C: *It makes me so angry that he brings tea I just bring tea to my room, but this makes me very angry because I drink coffee or if you bring tea while I drink coffee, I get confused. I say should I drink tea or coffee? i will drink*

#### Original

(53) C: *çay getirmesi beni o kadar sinirlendiriyo ki altı üstü çay getiriyo odama ama bu beni çok sinirlendiriyo çünkü ben kahve içiyorum ya ben kahve içerken sen çay getirirsen benim kafam karışıyo diyorum ki ben çay mi içicem kahve mi içicem*

Ms. Diren, when she mentions anger, talks about instances where she did not follow a rule and the time when it was reminded of her. Additionally, the situation she experiences when she is angry seems so intense that the warner captures all of Diren's attention. She expresses that she remembers many details about that person who warned her.

#### D14

(112) D: *he's pretending to take care of his phone, so I got very angry, I said what are you saying, Hocam I said what's the problem here, he said why don't you follow the rules?*

T4: *huh*

D: *I'm so angry*

T4: *huh*

D: *I was going to say something later everyone is already following the rules*

(136) D: *I just went from place to place and didn't have any time and he scolds me like I did the worst thing in the world, so I got angry ((laughs))*

(176) D: *It happened too, I don't know somehow, I was very angry with that person, I mean, in every way when I look at it, I saw everything, you see the face of some people.*

T4: *huh*

D: *I examined everything, the phone, everything he held in his hand like this, his glasses were a mange type, it bothered me*

#### Original

(112) D: *böyle telefonuyla ilgileniyomuş gibi yapıyo ben de çok sinir oldum ne diyosunuz beyefendi dedim burdaki sorun ne dedim kurallara niye uymuyosunuz dedi*

T4: *hu*

D: *ben çok sinir oldum*

T4: *hu*

D: *sonra şey diyectim herkes zaten çok uyuyo kurallara*

(136) D: *sadece ordan oraya geçtim ve herhngi bir zamanım da olmadı ve bunu bana karşı böyle sanki dünyanın en kötü şeyini yapmışım gibi azarlıyo yani bi sinir oldum ((gülüyor))*

(176) D: *o da oldu yani bi şekilde bi de bilmiyorum o kişiye çok sinir oldum yani her haliyle hani bir anda baktığımda her şeyini gördüm bitek yüzünü görürsünüz ya bazı insanların*

T4: *hu*

D: **her şeyini inceledim** telefon elinde tuttuğu her şey böyle gözlüğü uyuz bi tipti beni rahatsız etti

Lastly, Mr. Esat states that he gets angry when he cannot get answers to his questions from the therapist.

**E9**

E: *You don't answer the questions anyway, Hocam ((laughs)) en-any sentence with a question mark at the end has no equivalent, so **I get overwhelmed here** and you still don't say anything.*

T5: *What do you feel when there is no response?*

E: *I'm going crazy, I'm getting angry, I'm getting nervous*

**Original**

E: *Siz zaten sorulara cevap vermezsiniz Hocam ((gülüyor)) so-sonunda soru işareti olan hiçbir cümlemin karşılığı olmaz yani **ben bunalırım burda** siz gene bir şey demezsiniz*

T5: *Hu karşılığı olmayınca siz ne hissediyorsunuz*

E: **Çıldırtıyorum Hocam sinirleniyorum geriliyorum**

## 4.2. Persistently Known

*Curiosity is for some a passion,  
and when people stop questioning established knowledge,  
the lack of this passion might very well open new doors to ignorance.*

Renata Salecl

The two highlighted notions in this main focus contain quotations in which individuals express their thoughts and perceptions about themselves and others and Other while justifying their victimhood.

### 4.2.1. About me

#### ***Inability***

It is remarkable that the patients stated that they could not do anything while discussing the issues they complained about and felt they were victims of, and expressed this as a general and unchangeable truth. Here are the passages in this section in which they express these concerns:

#### C44

(19) A: I guess **I'm a person who usually doesn't say my demands anyway**

T3: What did you do, you did something here instead of saying because you have something about that request.

C: Now a person gives me something **without asking my request my demand** information cart curt buckle everything can happen but I didn't want it either I didn't want it I think I'm trying to turn this situation into the way I want **at least** while she was trying to tell me a question there eda, you stay here, close the solution to the problem, so I said I'll solve the question, but **I didn't know how to express myself** there

#### Original

(19) C: **ben zaten genelde taleplerimi söylemeyen bi insanım** galiba

T3: naptınız peki söylemek yerine burda bi şey yapmışsınız çünkü o taleple ilgili bi şey var sizde

C: şimdi bi insan **bana isteğimi sormadan talebimi sormadan** diyelim **bana bi şey veriyö** bilgi cart curt toka her şey olabilir ama ben de istemeidm ben naptım bu durumu kendi istediğim şekle çevirmeye çalıştığımı düşünüyorum **en azından** o bana orda soru anlatmaya çalışırken eda sen burda dur sorunun çözümünü kapat ben soruyu çözüyüm dedim yani ama orda **kendimi nasıl ifade ediceğimi bilemedim**

Ms. Canan states that *not knowing how to express herself*. In this section, she complains about giving something to her without being asked for her consent or request. In a similar vein, there is a passage where Ms. Canan describes feelings of anger and confusion when her mother brings her coffee while she is already drinking tea. Indeed, it seems to highlight the confusion between what someone else wants from her and what she wants herself.

#### D1

(110) H: For example, in my relationship with xxx, we didn't tell anyone anything, just both of us are aware - it was something he knew, we were only together sexually and we weren't walking hand in hand outside, for example, or we didn't have any kind of relationship I told him that too. somehow **I couldn't speak** clearly about why it wasn't that way it was like going with the flow

#### Original

(110) H: mesela xxx'le ilişkilennemmede de kimseye bişey anlatmıyoduk sadece ikimizin farkında - bildiği bişeydi bu sadece cinsel anlamda birlikte oluyoduk ve işte dışarıda el ele yürümüyoduk mesela ya da bi şekilde herhangi bi ilişki kurmuyoduk bunu ben de ona açık bi şekilde **konusamıyodum** niye o şekilde olmadığına dair bi sürüklenme gibiydi

Ms. Diren indicates *lack of relationship* in her interactions (mostly sexual) with her partners when expressing her discomfort, stating that she does not share her relationships with the people around her. This *absence of connection* is a prominent aspect she highlights. The main aspect highlighted here is the *inability to talk* about

this issue with her partner. She emphasizes the fact that she is unable to discuss it with her partner.

**E7**

(60) M: **I can't say I can't sharpen my face and say it...** so now I can't say it while it costs 2 liras, while it costs one and a half liras, I come and pay 3 liras for it, I also host it in my own shop and I give you your food and I'll take a minute bro, we talked to you even I told you that you will sew it for 50 cents cheap, and you accepted it, **now I can't get you to get a job done at this price, I'm sorry I can't say I'm giving the woman's money**

**Original**

(60) E: ... **diyemiyorum yüzümü perkiştirip söyleyemiyorum** ... e ben şimdi bunu 2 liraya mal ederken ne bir buçuk liraya mal ederken gelip buna 3 lira veriyorum bir de kendi dükkanımda barındırıyorum bir de yemeğini veriyorum ve ben buna bir dakika kardeşim tamam biz senle konuştuk hatta ben sana 50 kuruş ucuza diyeceksin de dedim u bunu da sen kabul ettin şimdi **ben sana bu fiyata iş diktiremem kusura bakma diyemiyorum** ya takırt veriyorum parasını kadının

Mr. Esat expresses that when discussing work-related matters, he noticed a mistake or fault in the situation that developed between him and his employee. He states that as a result, he feels uncomfortable, but he is unable to articulate what needs to be done to resolve this victimhood. In addition to these, as mentioned in the initial main focuses, Ms. Aslı emphasizes her inability to say no. The most prominent aspect that emerges from her discourse is the *lack of ability to say no*. Similarly, the fundamental point in Mr. Bulut's speech, on the other hand, revolves around the *absence of being like others*. Therefore, it can be said that the things people relate to through their inability to do are included in the conversation with the absence of them.

**Reference to personality**

In this section, individuals attribute their victimhood to their personalities. Characteristics such as *being timid, thoughtful, sensitive, and accommodating* are some of the most prominent examples. Aslı expresses that she considers herself an *accommodating person* and acknowledges *the absence of a dominant personality*.

**A59**

(55) A: ummm **I should be** a more **dominant** character I guess I'm on a more **compatible side**

**Original**

(55) A: ummm daha **baskın** bi karakter olmam lazım ben **daha uyumlu** bi taraftayım galiba

Bulut describes himself as having a shy, timid, sensitive, and touchy personality. He mentions that people around him also express these traits about him. He also expresses that these personality traits are associated with being "girly" and that he has been told, "You're not acting like a man."

### **B10**

(93) B: For example, I am writing answers at length, do it like this, do it like this, I think it's a *sensitiveness*, I think it's *about being sensitive*

(121) B: I'm a *wimp*, that's what they always call me, you're a *wimp*. Bulut is a *wimp*, he's *timid*. Bulut is *touchy*, and I show *touchiness* too.

T2: who says

B: Oh, I can also be touchy, shy, wimp, they always call me a wimp. I mean they call me a *girl*, they even say you're like a girl, you're not like a boy, you're like a girl.

T2: Can you think of an example, who would call them?

B: my surroundings, my aunts, my mother, my sister xxx my wife all say so

T2: your aunt your sister your mother your wife

B: Yes, there are expressions like *onion man*, I mean whatever *onion man* means, a *man will be* what you call, he will be sociable, when he hits his fist on the table, he will do something like that, they don't see me like that, I am not that type of person, I am not someone who is quick to respond to something that gets into trouble, so I guess that's why.

### **Original**

(93) B: mesela uzun uzadıya cevaplar yazıyorum şöyle yapın böyle yapın yani ince bi yapım bence öyle yani ince olmakla alakalı bişey bu

(121) B: ben pısrık ya bana hep öyle derler pısrıksın Bulut pısrıktır çekingendir Bulut alıngandır alınganlık da gösteririm

T2: kimler der

B: aa ya alınganlık da gösteririm çekingen pısrık hep pısrık derler yani bana *kız* derler hatta kız kız gibisin yani erkek gibi değilsin kız gibisin derler

T2: aklınıza bir örnek geliyor mu kimler derlerdi bunları

B: çevrem teyzemler annem ablam xxx eşim hepsi de öyle söyler yani

T2: teyzeniz ablanız anneniz eşiniz

B: evet soğan erkeği falan gibi tabirler var yani soğan erkeği ne demekse yani erkek dediğin şey olucak ki girişken olucak masanın üstüne yumruğunu vurunca hani şey yapıcak beni öyle görmüyolar yani öyle bi tip değilim iş koparan bişeyin üzerine giden çok hazır cevap falan birisi değilim yani o yüzden heralde

In Ms. Canan's speech, there is a questioning regarding whether she is an *accommodating* person or not. Furthermore, a similar inquiry arises regarding whether she is a *wild person*. When readings are conducted between sessions, it becomes evident that the signifiers of "being accommodating" or "being wild" constantly shift positions between her and other individuals.



### C41

(61) C: *such a cute c that goes well with everything, for example punk*

T3: *you say you are going well with everything, you just talked about being a sheep after chasing someone, now you say harmony*

A: *I wonder if I'm a very compatible person, but there is something like this pink is a very sweet color, you can be a punk by wearing pink, for example, punks use pink, or you can be like Candy Candy*

### Original

(61) C: *çok böyle şeker her şeye uyumlu bi renk mesela pankçı*

T3: *uyumlu diyosunuz az önce de birisinin peşine takılmaktan koyun olmaktan bahsettiniz şimdi uyum diyosunuz*

C: *ben çok mu uyumlu bi insanım acaba ama şöyle bi şey var pembe çok tatlı bi renk pembe giyerek hem pankçı olabilirsiniz mesela pankçular pembe kullanıyo u şeker kız Kendi (Candy) gibi de olabilirsiniz*

### C37

(34) A: *I thought am I a wild person it's not normal to be so angry about something why am I so angry*

### Original

(34) C: *ben vahşi bi insan mıyım diye düşündüm bi şeye bu kadar çok sinirlenmem normal değil niye bu kadar çok sinirlendim*

While Ms. Diren does not make direct comments about her own personality, in the initial session, she does express to her therapist that she is a "very introverted" person. Additionally, she mentions that she can communicate comfortably with others but struggles with "self-disclosure" or expressing herself fully.

### D1

(10) T4: *Can you tell us a little bit about yourself?*

S: *I'm a little nervous so I'm a bit of an introverted person yes, I can communicate with people easily, I can convey, but I have difficulty in conveying parts about myself*

### Original

(10) T4: *kendinizden bahsedebilir misiniz peki biraz*

D: *birazcık gerildim yani kendim imm çok biraz içe kapanık bi insanım evet insanlarla rahat iletişim kurabiliyorum konuşabiliyorum aktarabiliyorum ama kendimle ilgili kısımları aktarmakta zorluk çekiyorum*

Below are passages exemplifying the moments when Esat shares with his therapist what others (such as his sister or father) have said about his personality or identity. Mr. Esat, instead of directly stating something about his personality during the sessions as his opinions, gives examples from other's standpoints or consistently asks the therapist about how he is perceived and labeled from the therapist's standpoint. He is curious about the terms used to describe him and makes efforts to obtain them.

### **E7**

(145) T5: Huh, how do you know that?

H: He said it's mine, he said you won't call my friends one day at all After that, they put something like **Esat sick** or something, they put something like **he has a psychological problem**, they shared it with the family, they shared it with my aunts and uncles, they shared it with their closest relatives, then they went and shared others

T5: What stamp did you get?

H: Crazy

T5: Crazy

H: **Crazy Esat**

T5: Hmm, you said they put it on, but you keep saying something here, What is the name of my disease? What is the name of my disease? you know you think you have a disease

(196)E: Doesn't this look like I'm trying to hire the guy who cheated me?

T5: Yes yes yes

E: **What is the name of it, Hocam, at least tell me this**

### **Original**

(145) T5: Hı hu bunu nerden biliyorsunuz

H: Benim dedi arkadaşlarımı aramayacaksın dedi bir gün hiçbi şekilde ondan sonra u bir de şey kondurdular yani **Esat hasta** falan gibi bir şey **psikolojik bir sorunu var** diye bir şey **kondurdular** bunu aileyle paylaştılar teyzelerimle amcalarımla paylaştılar en yakınlarıyla sonra onlar gittiler bir gömlek daha öteyle paylaştı u ondan sonra **ben damgayı yedim** ondan sonra

T5: Ne damgası yediniz

H: **Deli**

T5: Deli

H: **Deli Esat**

T5: Hmm onlar kondurdu dediniz ama burda da sürekli şey diyorsunuz hastalığının adı ne hastalığının adı ne hani bir hastalığınızın olduğunu düşünüyorsunuz

(196)E: Bu şeye benzemiyor mu u benim beni dolandıran adamı işe almaya çalışmama benzemiyor mu

T5: Evet evet evet

E: **Bunun adı nedir Hocam bari bunu söyle**

### **E9**

(146) E: **what is the name of it, Hocam, so what are you saying in your language in medical language**

### **Original**

(146) E: **bunun adı ne Hocam yani ne diyorsunuz siz dilinizde tıp dilinde**

## **Medical terms**

In this title, we see that the experienced victimhood is intertwined with medical terms and justified in this way in Mr. Bulut's speech.

### **B10**

(53) B: ... a little **pathological** situation

(58) T2: What did you attribute the shaking of your hand to?

B: It's a **psychosomatic** thing, after all I guess it's probably a **psychosomatic** thing, I mean, **my body reacts, I get excited**, for example, **I was stuttering** when I was a kid, I already have a **history of stuttering**.

(97) B: ...my psychiatrist also said that **this disorder** is more common in sensitive people. Is there any study on this subject? Probably, since the psychiatrist said this, according to the personality structure, since being more sensitive and more thoughtful, I don't know, something that tires your body, something that tires your brain, something that strains your mind a little more. Thinking too much about it etc. I don't know, this could be something that makes people more tired **or disrupts brain functions**.

(101) B: ...**my social phobia** might be related to that too

### **Original**

(53) B: ... birazcık **patolojik** bi durum olabilir

(58) T2: neye bağlamıştınız elinizin titremesini

B: ya **psikosomatik** bişey bu sonuçta herhande **psikosomatik** bişeydir öyle tahmin ediyorum u yani **bedenim tepki verir ben heyecanlanırım** mesela çocukken de **kekemeydim** zaten ben u **kekeme geçmişim** var yani

(97) B: ...psikiyatristim de dedi **hassas** insanlarda daha çok olur bu **rahatsızlık** dedi bu konuda çalışma var mı vardır muhtemelen böyle dediğine göre yani **psikiyatrist böyle dediğine göre kişilik yapısına göre** daha ince daha düşünceli olmak biraz daha ne biliyim vücudunu yoran bişey beynini yoran bişey biraz daha kafa yoran bişey bişeyle ilgili çok kafa yormak vesaire ne biliyim insanı daha yoran bişey **beyin işlevlerini bozan** bişey olabilir bu

(101) B: ...**sosyal fobim** de onla ilgili olabilir yani

## **4.2.2. About O/others**

In the previous section, there are examples where patients refer to their perceptions while explaining the situations they think they are victims of, while under this highlighted notion, their perceptions of others were included.

### **Knowing the unknown other**

They think that they know others approach them with malicious intent to use and deceive them. There is a way of knowingly expressing the opinions of others as if they were their own. The passages containing these thoughts are listed below.

### **A59**

(24) A:... **because I know that a girl is a very touchy type to take a girl ... I think she's a total cheeky thing then**

**Original**

(24) A: **çünkü biliyorum ki kız alınacak çok alingan bi tip ... tam bir arsız diye düşünüyorum**

**B10**

(111) H: I have an **automatic thought** I think there is a car here, you can't park this car here, forget about you, on the other hand, I wondered if this person could be in the coffee shop, I was looking at the coffee shop, three or four people are standing next to each other, it's about me now say something - do they think

T2: huh what do they think

H: **I mean, that's what I'm thinking, this is a novice or something.**

T2: novice

H: **He's a novice, he can't park in that coffee shop because he knows I'm a novice because there have been a few incidents.**

**Original**

(111) H: ya aklımdan **otomatik düşünce** geçiyo aklımdan dyorum ki burda araç var bu aracı buraya parkedemezsin seni unut bi yandan da dedim ki acaba bu kişi kahvehanede olabiir mi kahvehaneye göz atıyorum üç dört kişi yan yana duruyo falan ya benimle ilgili şimdi bişey söyle- düşünürler mi

T2: hu ne düşünürler

H: **yani aklımdan o geçiyo işte bu da acemi falan**

T2: **hi acemi**

H: **acemi işte park edemiyo o kahvehane çünkü benim acemi olduğumu biliyo çünkü birkaç defa vukuat da oldu**

**C41**

(15) A: **It is obvious that she has a flute background** that no one says, "Stop, buy a flute" on the way home, you know, you can buy a plate, but you can't give a billion to the flute and not buy it It would be ridiculous, so this girl has a flute background and auditioning with me. wanted

T3: what did you think might cause

A: **I think she wanted this to get elected** because everyone gets into pairs, I don't know anything, **she thought that if she walks in with me, she will definitely be elected**, because why would he want to go in with me? **I'm a person she doesn't know at all.** I tell her that I don't have a flute and I have no idea about the flute. He asks me, "Should we go in?"

T3: so you won't be selected

A: Yes, I mean lesson auditions. I don't know how they choose, but you know, people who know the flute have a quota, and there are quotas for those who don't. She took private lessons for two months, and since she knows that I don't know anything, **she wants to choose a person she doesn't know as a sacrifice and enter the audition with her..**

(20) T3: You don't know according to what they chose, but what you are saying despite that is, I guess you are bringing something from the front that you will not be elected so that she will be elected.

A: **yes yes I think that's what she was thinking** because none of us know how we were chosen

(27) C: **she searched someone who not know, that is, she chatted with people there and searched someone who not know I could not believe it.**

T3: so you've been chosen as a victim

A: **she tried** to do but I didn't become a victim, it's such an ugly thing The thing is so ugly that you want to go to an audition with a person who doesn't know to be elected, **it's very wild, this school is really wild** so it's easy for a class called easy I don't think there are people like that, she doesn't know anything, she just has the flute, but she acts like she never took lessons like that, but she wants to audition with you because **she wants to crush you because she wants to be selected, how wild are they?**

(38) T3: **she saw you as pure idiot**

A: **yes, I guess I was an idiot** again I saw myself that way or I don't know

T3: you say you saw yourself

A: **she wanted to go with me because she saw me that way.**

T3: It's from you, we don't know anything about seeing something like that, pure idiot.

A: **I think I am seen as a pure idiot, yes, or what do I know, I wonder if everyone is a sheep-like person or am I a sheep?**

### Original

(15) C: **belli ki onun flüt geçmişi var ki hiç kimse evine giderken ay dur bi tane flüt alıyım demiyo hani tabak beğenip alırsınız ama flüde bi milyar verip almazsınız çok saçma olur yani bu kızın flüt geçmişi var ve içeri seçmelere benimle girmek istedi**

T3: neden olabilir ne düşündünüz

C: **bence kendisi seçilmek için istedi bunu çünkü herkes ikişer kişiler haline giriyö ben hiçbi şey bilmiyorum benimle içeri girerse kesinlikle seçilceğini düşündü bence çünkü neden benimle içeri girmek istesin ki hiç tanımadığı bi insanım flüdümün olmadığını flütle ilgili hiçbi fikrimin olmadığını söylüyorum ve diyo ki a diyo biz seninle birlikte içeri girelim mi diyo bana**

T3: yani siz seçilmiceksiniz

C: evet yani ders seçmeler yani neye göre seçtiklerini bilmiyorum ama hani flüt bilenlerin de kontenjanı var bilmeyenlerin de kontenjanı var iki ay boyunca özel ders almış benim hiçbi şey bilmediğimi bildiği için **hiç tanımadığı bi insanı yanına kurban seçip onunla birlikte seçmeye girmek istiyö**

(20) T3: neye göre seçtiklerini bilmiyorsunuz ama ona rağmen söylediğiniz şey şu herhalde kendisi seçilsin diye sizle yani siz seçilmiceğinize dair bi şey önden getirmiş oluyosunuz

C: **evet evet onun düşündüğü bence buydu hani çünkü hiçbirimiz neye göre seçildiğimizi bilmiyoruz**

(27) C: **bilmeyen birini aradı yani orda insanlarla sohbet ederek kendisine bilmeyen birini aradı ve inanmadım**

T3: kurban seçildiniz yani

C: seçmeye çalıştı ama kurban olmadım o kadar çirkin bi şey ki u şey çok çirkin hani kendin seçilmek için hiç bilmeyen bi insanla bi seçmeye girmek istiyosun **bu çok vahşice bi şey bu okul gerçekten çok vahşi** o yüzden yani kolay denen bir dersin kolay olduğunu düşünmüyorum işte böyle insanlar hani hiçbi şey bilmiyomuş sadece flüdü varmış u ama hiç böyle ders almamış falan gibi davranıyo ama sizinle birlikte seçmeye girmek istiyö çünkü **sizi ezmek istiyö çünkü kendisi seçilmek istiyö ne kadar vahşiler**

(38) T3: **saf salak gördü sizi**

C: **evet yani salak olmuş oldum herhalde yine kendimi öyle gördüm ya da bilmiyorum**

T3: siz kendimi gördüm diyosunuz

C: **o öyle gördüğü için benimle girmek istedi seçmeye**

T3: sizden çıkıyo öyle bi şey saf salak gördüğüyle ilgili bi şey bilmiyoruz o nasıl gördü ama sizde böyle bi şey var saf salak görüldüğünüz

C: **ben saf salak görüldüğümü düşünüyorum** evet ya da ne biliyim acaba herkes ben koyun gibi bi insan mıyım koyun muyum acaba ben

**D14**

(142) D: **I'm sure that type of person does not follow any rules in his life, you know.**

**Original**

(142) D: **o tipin mesela hayatında hiçbir kurala uymadığına eminim böyle hani**

**E7**

(26) E: **The man thought like this, So he brings me to him with the excuse that he will take you to this marketing event, he thinks like he will ask for what you want, he will try to disturb you or something like that.**

T5: Huh huh

E: he didn't even come to me not just talking business

T5: what would happen if it came

E: **I had not thought of such an idea, but**

T5: you didn't think

E: **I guess he thought of it**

(164) E: **My father wanted this lineage to dry up and it is a very interesting thing, for example, my grandfather's grave is in izmir, 535 kilometers in izmir, my uncle's grave is in istanbul, I don't know in which cemetery, he is there, so my grandfather went to izmir, died there, they buried him right there. They went and died there, they buried them right there, they didn't even bring the bodies to Ankara to the cemetery I mean, I thought it was a planned thing, I thought it was planned by my family.**

T5: how could it be planned

E: **Then I thought about how it could have been planned so did they bring a man and get this woman pregnant nothing like that will happen, what will happen but I thought that you can understand it would not happen to me, let's not put it further, I didn't tell my daughter or my mother about it. What I'm saying is that my daughter knows, so I feel, she does things from time to time like this, oh god she does, I don't know if she's hiding it from me or if she really knows or doesn't know**

**Original**

(26) E: **Adam şöyle düşündü yani bu pazarlamaya seni alacağım bahanesiyle beni yanına getiriyor u işte alacağını isteyecek rahatsız etmeye çalışacak falan gibi düşündü**

T5: Hı hu

E: yanına bile gelmedi yani bırakın iş konuşmayı

T5: gelseydi ne olacaktı

E: **Benim aklıma böyle bir fikir gelmemiştii ama**

T5: Hu gelmemiştii

E: **onun aklına geldi herhalde**

(164) E: **Babam bu soyun kurumasını istiyordu ve u çok ilginç bir şeydir mesela benim dedemin mezarı seferihisar savacıktadır izmir de 535 kilometre bir amcamın mezarı istanbulda hangi mezarlıkta onu da bilmiyorum ordadır yani dedem izmire**

gitmiş orda ölmüş hemen oraya gömmüşler amcam istanbula gitmiş orada ölmüş hemen oraya gömmüşler cenazeleri ankaraya mezarlığa bile getirmemişler u yani **bunun hani planlı bir şey olduğunu düşündüm ben ailem tarafından planlanmış olduğunu düşündüm**

T5: nasıl planlanmış olabilir

E: **Sonradan düşündüm nasıl planlanmış olabilir** yani bir adam mı getirdiler de bu kadını hamile bıraktılar böyle bir şey olmaz u ne ne olur vesselam senin anlayacağın u onunda olmayacağını düşündüm uzatmayalım ben bu konuyu ne kızıma söylediiim ne anama söylediiim **kızım biliyo yani hissediyorum** ben o ara sıra şey yapıyo böyle ya allah allah yapıyo da u o benden mi saklıyor yoksa gerçekten biliyor mu bilmiyor mu bilmiyorum

### **Because of Other**

In this section, quotations in which people try to explain the reasons for not resolving the situations that make them victims or complain about through an Other that transcends both themselves and others are included.

### **Shame**

#### **A59**

(65) T1: **Do you have an argument when you say no?**

A: yes, we would **definitely** xxx ((his friend)) privately but when I think of a person other than xxx, I think **it will be a problem again** yes ... well, because there is a situation like this, I can't fire the haza in a very nice way, I will say a sentence that will cause him not to come, after all, there is a subject that I am uncomfortable with, but when I say this, firstly, there is Zehra in the environment and I represent a person. I definitely prefer to be alone in the environment, so the presence of a third person is a much more disturbing situation. I think the situation is the same for the other party, and by saying this, I will be firing her as a result. This is actually **a huge shame.**

T1: you say firing, you say shame

A: But how can another person give it a different meaning that there is something that can be defined other than dismissal and shame, but I don't think about it?

#### **Original**

(65) T1: **hayır diyince tartışma mı yaşıyorsunuz**

A: evet xxx ((arkadaşı)) özelinde **kesinlikle yaşardık** ama xxx dışındaki bi insanı düşündüğümde de **yine bi sıkıntı olucanı** düşünüyorum evet ... ya bide çünkü şöyle bi durum var ben orda çok güzel bi biçimde Pelinii kovamam yani onu onun gelmemesine neden olucak bi cümle söylicem sonuçta orda çünkü ortada benim rahatsız olduğum bi konu var ama u bunu söylediğimde birincisi ortamda Zehra da var ve ben bi insanı temsil ederken ortamda mutlaka yalnız olmayı tercih ediyorum yani üçüncü bi insanın varlığı çok daha rahatsız edici bi durum karşı taraf açısından da öyle diye düşünüyorum ve orda yani söylerken bunu onu yani sonuç olarak **kovmuş olucam yani bu aslında çok büyük bişi ayıp**

T1: kovmayı siz diyosunuz ayıbı siz diyosunuz

A: ama başka bi insan buna nasıl bi başka anlam yükleyebilir ki kovmak ve ayıp dışında tanımlanabilecek bişey var da ben mi onu düşünmüyorum

## Validity

### C37

(52) C: I always talk about these **I always want to be right about something**

T3: in something

A: no matter what, if what I'm doing is right, **I expect everyone to accept what I've done, I want to dye my hair pink I want the front of my hair to be pink I want everyone to confirm this, but what does it matter**

### Original

(52) C: sürekli bunlardan bahsediyorum **sürekli bi şeyde haklı olmak istiyorum**

T3: bi şeyde

C: ne olursa olsun yani yaptığım şeyin doğruysa herkes yani **yaptığım şeyin herkes tarafından kabul görmesini** bekliyorum saçımı pembeye boyatmak istiyorum saçımın ön kısmı pembe olsun istiyorum **herkesin bunu onaylamasını** istiyorum oysaki bunun ne önemi var

## Honor

### E7

(66) E: I mean, there is a saying here and there they say **drowning in honor**, you know?

T5: What is dishonor used for?

E: What it is used for, drowning in honor is like this, in other words, you **glorify** the man in front of you so much that you **glorify** the man in such a way that he cannot say anything to you for a small account. He is a very high person, he cannot condescend to this small thing, **I guess we are drowning in honor**

### Original

(66) E: yani burda bizim orda bir deyim vardır **namusa boğulmak** derler bilir misiniz onu

T5: Namusa boğulmak ne için kullanılır

E: Ne için kullanılır namusa boğulmak şimdi **namusa boğulmak** şöyle bir şeydir yani adamı karşınızdaki adamı **öyle yüceltirsiniz ki öyle yüceltirsiniz ki** yani ufak bir hesap için size bir şey söyleyemeyecek hale gelir **namusa boğulur** u artık ufak bir şey için bir şey söyleyemez çünkü o çok yüce bir insandır bu ufak şeye tenezzül edemez biz de **namusa boğuluyoruz** herhalde

## Unwritten rules

### D14

(116) D: Then I was going to say, **everyone is already very obedient to the rules in our country, I was really going to say we are a great country**, but then I got a little nervous because I see a lot of violence in a type of work that I don't know, he also seemed like an unbalanced person, I didn't want to get into a lot of quarrels like that.

(271) T4: For some reason, the argument seems very strong to me. Yes, **there are many rules in daily life, but not everyone follows these rules..**

(277) D: For example, something happens that disturbs people, but what I do is **there is a rule, okay, I shouldn't cross that lane ((laughs)) but**



T4: huh

D: *There is no discomfort like this, there is no problem like this.*

**Original**

(116) D: *sonra şey diycektim herkes zaten çok uyuyo kurallara ülkemizde çok hani harika bi ülkeyiz gerçekten diycektim ama sonra birazcık tedirgin oldum çünkü tanımadığım bi tip işte bi sürü şiddet olayı görüyorum dengesiz birisine de benziyordu böyle çok laf dalaşına girmek istemedim*

(271) T4: *şey argümanı çok kuvvetli geliyor bana nedense gündelik hayatta evet birsürü kural vardır ama herkes bu kurallara riayet etmez hani*

(277) D: *o mesela rahatsızlık veren bir şey oluyor insanlara ama benim yaptığım şey bi kural var tamam o şeridi geçmemem gerekiyor ((gülüyor)) ama*

T4: huh

D: *böyle de rahatsızlığı da yok böyle bi sıkıntısı da yok*

**Pathology**

In Mr. Bulut's speech, the emphasis is primarily on the psychiatrist and their words, rather than the vague rules or laws that exist like in other patients. The focus is on the direct interaction with the psychiatrist and the significance of their statements.

**4.3. Relationship with the Therapist as Other**

Since the material examined was therapy sessions, the patient's relationship with the therapist as Other was traced in this section and, I have set 5 highlighted notions in this main focus

**4.3.1. Demand for knowledge**

In her relationship with the therapist, Ms. Aslı expresses a desire for the therapist to tell her something about herself.

**A59**

(33) A: *What other attitude could I take here that I would like to do?*

**Original**

(33) A: *ben burda başka nasıl bir tavır alabilirdim ki kendi isteğim doğrultusunda*

However, she also mentions that if she were to receive that information and apply it, she would find herself in a situation she would not like.

(40) T1: *So why can't you say that we are working, I think the subject we are working on is the same in another situation, for example, I get distracted.*

A: ***huh, this is something that can be said***

T1: *when you say it can be said*

A: ***So if I say this, my relationship with my colleague will immediately break down.***

(56) T1: *hm, are you compatible later?*

A: *ha yes, for example, I think this part is already problematic, if I am not going to complain about something, I will be compatible, but if I am already complaining about this situation within myself, it means that I am not an adaptable person.*

T1: *yeah*

A: ***but here i don't know how to fix it, what attitude to take.***

### **Original**

(40) T1: *yani peki siz niye biz çalışıyoruz u galiba çalıştığımız konu aynı başka bi durumda dikkatim dağılıyor diyemiyosunuz mesela*

A: ***haa bu söylenebilir bişey***

T1: ***söylenebilir derken***

A: ***yani işte bunu söylersem iş arkadaşımın aram direkt bozulur zaten normalde***

(56) T1: *hm siz peki uyumlu oluyo musunuz sonradan*

A: *ha evet mesela bu kısmı bence zaten sıkıntılı eğer bi şeyden şikayetlenmiyceksem tamam uyumlu oluyum ama zaten kendi içimde bu durumdan şikayet ediyosam ben uyum sağlayan bir insan değilim demek oluyor bu*

T1: *yaa*

A: ***ama işte bunu nasıl düzelticemi nasıl bir tavır almam gerektiğini bilmiyorum***

Also, she repeatedly speaks to her therapist, reiterating her request to obtain information and trying to rationalize it. She also expresses her need for this information. However, as she fails to receive information from her therapist, she blames not only others in her daily life but also the therapist for this situation.

### **A60**

(124) A: *Because, for example, when I say something , I know what I can find when we say let's stick the needle in ourselves a little bit, BUT I can't find it myself while I'm actually thinking about it.*

### **Original**

(124) A: *çünkü mesela bişey söylediğimde ne biliyim iğneyi biraz da kendimize batıralım dediğimizde bişey bulabiliyorum AMA ASLINDA kendim düşünürken kendim kendime onu bulamıyorum*

### **A61**

(96) A: *I know it won't be like KNIFE CUTS all of a sudden. After all, I've been going to a psychologist for three years.*

T1: *huh*

A: ***but I feel like we need to think together for a solution like this***

(106) A: ***I don't know after all, I can't ask you anything because I know, again, I can't get that answer as I want with what being a psychologist gives me anyway, there is no eye communication anymore, I guess therapies really push me harder.***

**Original**

(96) A: bunu birden bire böyle BIÇAK KESİĞİ gibi olmayı biliyorum sonuçta üç yıldır gidiyorum ben psikoloğa

T1: hıh

A: ama daha böyle **çözüm için birlikte düşünmemiz gerekiyormuş gibi hissediyorum**

(106) A: **bilmiyorum** işte sonuçta **size de bişey soramıyorum** çünkü biliyorum yine işte psikolog olmanın verdiği şeyle **o cevabı işte istediğim gibi alamıyorum zaten artık göz iletişimi de yok falan böyle artık iyce terapiler gerçekten beni daha çok zorluyo galiba**

After expressing her thoughts on something she thinks, Ms. Canan requests her therapist to share their thoughts about her. She expresses a certain uncertainty about how she will position herself after receiving the desired answer, attempting to arouse curiosity in the therapist and persisting in her insistence on the fulfillment of her request.

**C41**

(131) A: ...I can't teach myself about this, I know I can't control myself about it, I know I have to control it I wonder if it's lack of will, **what do you think?**

T3: you ask me

A: yes

T3: so what do you think?

A: Sounds like a lack of will to me

T3: Well, it seems that way to you, but then you are waiting for an answer from here, what is it?

A: Just in case you have an opinion, maybe you have a comment , **don't you?**

T3: if there is, what will happen?

A: You can tell me, **maybe an idea will form in my head.**

T3: after

A: **I say it's not lack of will**

T3: So there is something about your lack of willpower, then you will receive other information from me and you will be positioned according to the information from here.

A: **Maybe I will refuse** For example, you told me that you are enjoying it, I don't think it's pleasure.

T3: then you are talking about a positioning on rejection

A: **no let's try ((laughs))**

**Original**

(131) C: ...bunu bi türlü kendime öğretemiyorum hani kendimi bu konuda kontrol edemiyorum etmem gerektiğini biliyorum iradesizlik mi oluyo acaba bu **yani sizce ne bu**

T3: bana soruyosunuz

C: evet

T3: sizce ne peki

C: bana iradesizlikmiş gibi geliyo

T3: hı size öyle geliyomuş bi de sonra burdan cevap bekliyorsunuz o nasıl bi şey peki

C: sizin de bi yorumunuz vardır diye sizin de bi düşünceniz vardır belki diye **yok mu**

T3: varsa nolcak peki

C: bana söylersiniz benim de **kafamda bi fikir oluşur belki**

T3: sonra

C: **derim ki iradesizlik değilmiş**

T3: yani sizde iradesizlik olduğuna dair bi şey var sonra benden başka bi bilgi gelecek ve ona göre konumlanıyorsunuz burdan gelen bilgiye göre

C: **belki reddetcem** mesela siz bana şey dediniz zevk altyosunuz dediniz onun zevk almak olduğunu düşünmüyorum

T3: o zaman reddetmek üzerine bi konumlanmaktan bahsediyosunuz

C: **hayir deneyelim hadi ((gülüyor))**

Esat asks the therapist what they last talked about, and when the therapist responds, he says that he doesn't remember anything about that topic. Nevertheless, Esat continues to ask questions and tries to get answers during the therapy sessions.

### **E7**

(6) E: How, I couldn't understand

T5: So we can start

E: **Yes, where were we?**

T5: You were talking about a marketer.

E: Got it

T5: Yes

E: **No I can't think of anything right now**

T5: Huh, you had a meeting with the marketer.

E: **Hmm, I don't remember** a meeting with the marketer anyway, as a result, we still don't have a marketer.

### **Original**

(6) E: Nasıl anlamadım

T5: Başlayabiliriz yani

E: **Evet nerde kalmıştık**

T5: **İki bir pazarlamacıdan bahsediyordunuz**

E: Anladım

T5: Evet

E: **Yok aklıma bir şey gelmedi şu anda da**

T5: Hı hı pazarlamacıyla bir görüşmeniz vardı

E: **Hmm hatırlamıyorum** pazarlamacıyla bir görüşme neyse sonuç olarak pazarlamacımız hala yok

### **E9**

(142) E: Oh, by the way, we came here from demagogy, Can you tell me this? What did I do now? **Can you tell me this?** I want to learn about myself.

T5: Why

### **Original**

(142) E: Ha bu arada demagojiden geldik buraya biz ne oluyoruz bunu bana söyler misiniz ben şimdi ne ne yaptım ben **bunu anlatır misiniz bana** ben kendimi öğrenmek istiyorum

T5: Niye

### 4.3.2. Request for confirming victimhood

In the sessions, when the concept of victimhood is brought up, and patients receive a comment that questions their personal responsibilities—whether those they take or neglect, especially when it interrupts the consistency of their story—it is observed that they tend to guide the conversation in a direction that aims to persuade the therapist about the extent of their own victimhood. The following passages from the sessions serve as examples of this behavior.

#### C37

(30) C: *In terms of my position, I feel very unhappy and lonely because my lover is not with me. We have such a relationship and I don't know where the relationship is going, I don't know if I live in my life with longing Isn't it a pity? I feel sorry for myself.*

#### Original

(30) C: *yani konum olarak zaten sevgilim yanımda olmadığı için kendimi çok mutsuz ve yalnız hissediyorum böyle bi ilişki yaşıyoruz ve ilişki nereye gidiyo ben bilmiyorum sürekli özlem duyarak mı yaşcam hayatımda yazık değil mi bana yani kendime acıyorum*

#### C41

(34) T3: *why are you getting annoyed*

C: *Isn't his behavior a very ugly thing?*

T3: *You said I'm getting annoyed, it is different what he did*

#### Original

(34) T3: *nesine gıcık oluyosunuz*

C: *çok çirkin bi şey değil mi yaptığı davranış*

T3: *onun yaptığı başka gıcık oluyorum diye söylediniz*

#### D14

(246) D: *Isn't this a simple thing in everyday life?*

T4: *hmm is it?*

S: *((laughs)) I don't know so*

T4: *So you're not just talking about a simple strip over there right now.*

D: *something like that happened , so the dialogue I had with that person made me think that I was talking about something simple because*

#### Original

(246) D: *bu gündelik hayatta basit bişey değil midir hani*

T4: *hmm öyle mi*

D: *((gülüyor)) bilmiyorum yani*

T4: *yani sadece ordaki basit bi şeritten bahsetmiyorsunuz gibi şu an*

D: *öyle bişey oldu yani o kişiyle yaşadığım diyalog beni evet basit bişeyden bahsediyomuşumdan çıkarttı çünkü*

#### E7

(139) H: *Do you know how humiliating it is to put something like that?*

(187) T5: So you talk about your spouse like a commodity in the shop

E: **How do you want me to talk about a woman who cheated on me, gave birth to a child from someone else, and made me take care of this child for 15 years ((silence)) How can I talk about this? Look at this life.** Mm what are we doing now? We are 55 years old, we go to a psychiatrist, we take pills, we go to a psychologist. We do this, then we read books and try to improve ourselves, we need to do these when those problems arise.

### **Original**

(139) H: Böyle bir şey kondurulması u ne kadar aşağılayıcı biliyor musunuz

(187) T5: Yani eşiniz hakkında dükkandaki bir mal gibi konuşuyorsunuz

E: **Be beni beni aldatmış başkasından bir çocuk doğurmuş bu çocuğa da 15 sene bana baktırmış bir kadın hakkında nasıl konuşmamı istersiniz ((sessizlik)) nasıl konuşayım şu hayata bir bakın yaa yani ha şimdi biz ne yapıyoruz biz 55 yaşında işte psikiyatriye gidiyoruz hap alıyoruz psikoloğa gidiyoruz görüşme yapıyoruz ondan sonra u kitap okuyoruz kendimizi geliştirmeye çalışıyoruz bizim bunları o sıkıntılar ortaya çıktığında yapmamız lazım**

### **4.3.3. Formation of a victimizing therapist**

Ms. Aslı raises her concerns about the general framework and technique of the sessions, specifically expressing her dissatisfaction with the suggestion of the sessions being scheduled twice a week and the variable length sessions. Aslı expresses her frustration with this framework and associates it with a feeling of worthlessness. Additionally, she mentions that she believes her therapist gets angry with her because she keeps repeating the same things without showing any progress. This leads her to think the therapist doesn't want to continue therapy with her.

### **A60**

(58) A: If I went twice a week, I wouldn't be able to afford it, **of course, that was one of the factors, but** here's another thing I'm thinking about, even if I had to force myself and sacrifice xxx lira per month.

T1: huh

A: Well, half-hour and twenty-minute therapies will perhaps be reduced to fifteen minutes to ... minutes, anyway, there will be a break, thinking often that we are doing it twice a week.

T1: huh

A: And I... on the other hand, **I said no to twice a week** because I thought I could explain these things once a week in fifty minutes, but then this is it, we want to meet twice a week and we meet for twenty minutes, **this makes me angry.**

T1: hu

A: because I realized that I want **to be valued**

T1: hiiiiii

A: But I guess I'm naming this thing on the **worthlessness** I guess

T1: yes

A: *Because I think you **didn't want to do therapy** when we stopped therapy, or maybe **you got angry** because I kept saying the same things and didn't change my behavior.*

**Original**

(58) A: *haftada iki gidersem maddi olarak karşılayamayacaktım **aslında hani etkenlerden birisi tabi ki buydu ama işte** bi de şeyi düşünüyorum ben kendimi çok zorlayıp ayda xxx lirayı gözden çıkartıcak olsam bile*

T1: *hıhı*

A: *u zaten yarım saatlik yirmi dakikalık terapiler belki de ... dakikaya on beş dakikaya düşücek nasıl olsa haftada iki kere yapıyoruz diye sık sık düşünüp ara verme olayı olacak*

T1: *hu*

A: *ve ben hani ... tarafta elli dakikada haftada bir kereyle de bunları anlatabilirim düşündüğüm için de **haftada ikiye hayır demiştim** ama sonrasında da işte bu hem haftada iki kere görüşmek istiyoruz hem de yirmi dakika görüşüyoruz **bu beni sinirlendiriyö***

T1: *hı*

A: *çünkü uuu **değer görmek** istediğimi fark ettim*

T1: *huuuuu*

A: *ama sanırım bu şeyi uı **değersizlik** üstüne adlandırıyorum sanırım*

T1: *evet*

A: *çünkü terapiyi kestiğimizde **sizin terapi yapmak istemediğinizi** ya da **ben sürekli aynı şeyleri anlattığım için ve davranış şeklimi değiştirmedığım için belki de öfkelenmişinizi düşünüyorum***

Ms. Diren starts the session by expressing that she felt bad and depressed after the previous session.

**D14**

(6) D: *ok how are you*

T4: *thanks you*

D: *I'm fine too, thank you, this week was a busy week, **it was very busy after our meeting with you.***

T4: *huh*

D: ***for some reason when I left here I left feeling a little bad***

T4: *umm*

S: *and I thought a lot and was a little bit **depressed** ((laughs))*

**Original**

(6) D: *tamam nasılsınız*

T4: *teşekkürler siz*

D: *ben de iyiyim teşekkür ederim bu hafta yoğun bi haftaydı **baya yoğun geçti sizinle görüşmemizden sonra***

T4: *hı*

D: ***burdan ayrılırken niyeyse biraz kötü ayrıldım birazcık kötü hissederek ayrıldım***

T4: *hımm*

D: *ve çok fazla şey düşündüm bi birazcık şey olmuştum **depresif** ((gülüyor))*

In the later parts of the session, she uses similar expressions of while talking about the incident of going to the hairdresser and getting her hair cut. Afterwards, she shares her thoughts about the hairdresser as follows:

(26) H: I had a class on Wednesday I went to it then I wanted to cut my hair

T4: huh

H: I have been looking at hairstyles like this for a while because **I didn't want to decide on anything all at once**, because before, getting a haircut was a bit more complicated, but it was sudden and fast. This time, I did some preliminary research. I wonder which one I want, which model I want.

T4: Well, you evaluated it this time, so what do you want?

H: **Although the hairdresser was a bit strange there** but uh, I have never seen such an **unhappy** hairdresser.

T4: huh

H: I went happily like this - I went with such joy I'm telling but the hairdresser is a very sullen person

T4: huh

H: I don't like to talk like that, about people, but he got tired, bad people came, he bothered me, maybe he was tired, I understand the day, but

T4: huh

H: the hairdresser **reflected that thing to me** like that **never talked** about it while cutting my hair during the whole thing **with my instructions ((coughing))** I say this, **he doesn't add anything as hairdresser**, we expect a little more as a hairdresser, you know?

T4: huh

H: he said it's ok directy whatever I say

T4: huh

H: but he had a slightly annoying tone, **I was so uncomfortable or I left unhappy while leaving**

(84) D: I mean, if we had a good **dialogue**, we would probably find a middle way and do something with a medium shape, but **when that's the case at first, he didn't want to do what I wanted too much, then he did it** when I wanted to, you know, **when I said something, for example**, When I said something, for example, I cut this part a little more, he said something like, **"you wanted it that way, what am I doing, it's happening like this."**

### Original

(26) H: Çarşamba günüü dersim varduu ona girdimm sonra saçlarımı kestirmek istiyodum

T4: hu

H: bi süredir bakıyodum böyle saç modellerine çünkü **bir anda karar vermek istemiyodum artık bişeye** çünkü önceleri saç kestirmem birazcık daha şey oluyodu işte anı ve hızlı oluyodu bu sefer böyle bi ön araştırma yaptım acaba hangisini istiyorum hangi modeli istiyorum

T4: hu bu sefer değerlendirdiniz yani neyi istediğinizi

H: gerçi **orda da kuaför birazcık garipti** ama **ıh o kadar mutsuz bi kuaför görmemiştim hiç**

T4:huu

H: böyle ben mutlulukla git- yani böyle sevinçle gittim hani anlatıyorum ama çok suratsız bi insandı

T4: hu

H: böyle konuşmayı da sevmem insanlarla ilgili ama yorulmuştur kötü insanlar gelmiştir rahatsız etmiştir belki yorgun geçmiştir günü anlayışla karşılarım hani ama

T4:hu

H: böyle **bana da yansıtı o şeyi hiç konuşmadı şey boyunca** saçımı keserken **hep benim yönlendirmelerimle işte ((öksürüyor))** ben şunu söylüyorum **o hiçbi şey katmıyor** kuaför olarak birazcık daha şey bekleriz ya hani



T4: huu

H: o direk ne söylüyorsam tamam dedi

T4: huu

H: ama birazcık gıcık bi ses tonu vardı böyle bi **rahatsız oldum ya mutsuz ayıldım ordan çıkarken**

(84) D: yani eğer güzel bi **diyalog** kursaydık büyük ihtimal orta yolunu bulup orta şekilli bişey yapcaktık ama böyle olunca hani ilk başta benim istediklerimi çok fazla yapmak istemedi sonradan isteyince yaptı hani **ben bişey söyleyince de mesela şurayı birazcık daha kestirmiştin siz böyle istemişsiniz ben napıyım böyle oluyo gibisinden bişeyler söyledi**

At the beginning of the session, Mr. Esat expresses his dissatisfaction with the therapist not asking how he is doing, and he interprets this as a lack of value and importance given to him by the therapist. In the following passage, he questions the therapist if she gets bored with him, expressing his concerns about it.

**E9**

(60) M: I mean, look, for example, we experienced the same thing today you said come on, we can't log in and **you didn't ask how are you again**

T5: Huh huh

E: So this means **I think what I say doesn't matter to you.**

T5: It doesn't matter how, where did you get that from?

E: I mean, I don't know, **it means that it doesn't matter**, Hocam oh well, I'll come here, I'll talk here, and you will help me understand what I'm talking about with your questions.

T5: Huh huh

E: **This is all about it, so please don't get me wrong, for example, do you remember where we were last week, Hocam?**

T5: Why did you think of it last week?

E: It seemed to me as if we were in an important place and continued from there.

T5: Do you want to continue from last week?

E: Do you think we should?

T5: Huh..

E: **Last week or the week before, or the week before, or the week before that , do you think it's a session we left at a very important point?**

T5: What do you call an important point? How is it important? How important is it?

(163) E: You have the answer

((silence))

E: Do you get bored in my sessions, Hocam?

T5: You brought boring

E: Hocam

T5: Boring why did you bring boring

E: ((laughs)) I don't know, so now I'm wondering if Hocam thinks that even if the time is up, do you think that we should hang up this phone even if the time is up, that is, look at the bullshit, at least I can relax until next Sunday ((laughs))?

T5: Where did you get this from?

E: **I don't know, it sounded like that ((laughs) I mean, it sounds like you're saying something about you, your mother, and your thoughts. I mean, you're saying, "Oh my God, how many minutes are left?" ((laughs)).**

### **Original**

(60) E: yani bakın mesela bugün de aynı şeyi yaşadık buyrun dediniz bana yani giriş giriş yapamıyoruz ve **nasılsınız** diye **gene sormadınız**

T5: Hı hu

E: Yani bu şu anlama geliyor bence u benim söylediklerimin sizin **nezlinizde** u **herhangi bir önemi yok**

T5: Nasıl yani önemi yok bunu nerden çıkardınız

E: yani bilmiyorum öyle öyle çıkardım **demek ki bir önemi yok** yaa yani ben gelirim işte burda konuşurum u siz de sorularınızla benim konuştuğum şeyi idrak etmemi sağlarsınız

T5: Hı hu

E: Olay bundan ibaret yani **yanlış anlamayın lütfen** u mesela geçen hafta nerde **kalmıştık hatırlıyor musunuz Hocam**

T5: Niye aklınıza geçen hafta geldi

E: Sanki önemli bi yerde kalmıştık da ordan devam etçektik gibi geldi bana

T5: Hu geçen haftadan devam mı etmek istiyorsunuz

E: Sizce etmeli miyiz

T5: Hı..

E: Geçen hafta veya evvel hafta veya daha evvel ki hafta veya u ondan önceki hafta **sizce çok önemli bir noktada bıraktığımız bir seans olabilir mi**

T5: Önemli nokta dediğiniz nasıl oluyor hani neye göre önemli nasıl bir önem

(163) E: Cevap sizde

(sessizlik)

**E: Benim seanslarımda sıkılıyor musunuz Hocam**

T5: Sıkılma getirdiniz

E: Efendim

T5: Sıkılma neden sıkılma getirdiniz

E: ((gülüyor)) ne bileyim yani şimdi acaba diyorum benim hoca şöyle mi düşünüyor lan şu vakit dolsa da şu telefonu kapatsak yani saçmalığa bak lan haftaya pazara kadar en azından kafam 74ahat etse ((gülüyor)) diye mi düşünüyorsunuz acaba

T5: Bunu nerden çıkardınız

E: **Ne bileyim öyle geldi ((gülüyor)) yani senin de annenin de düşüncenin de diyosunuz gibi geldi yani bırak artık allahım kaç dakika kaldı acaba ((gülüyor)) diyosunuz Hocam**

### **4.3.4. I should / not**

Ms. Diren, by also mentioning the previous topics in therapy, emphasizes her position of defending or protecting herself while summarizing her recent experience to the therapist. She believes that considering their past talk is important in shaping her perspective and expressing her thoughts.

### **D14**

(293) D:... I've been talking to you about something for a while, you know, **being able to respond to something** is about **protecting myself**, that's an answer to that, actually, you know, **I could have not responded to that person, you're right, by enduring that bad treatment, I could have said even if what I did was wrong, I'm sorry. I could have said that I passed or something, but I didn't say that, maybe**

something happened, you know, **I reacted to something** so that it could gain a place for me, in order to protect myself, someone said something to me, **it wasn't something I was at fault for, it wasn't something I was guilty of**, and his style was very bad, so I felt like that. **I was able to defend myself somehow**

T4: hmm

D: I was able to protect

T4: hmhhh

### **Original**

(293) D: ...bi süredir şey hakkında konuşuyodum ya sizle hani **bi şeye cevap verebilmek işte bir kendi-mi koruyabilmek işte bu ona bi cevap oluyo aslında hani o kişiye cevap vermeyebilirdim hani haklısınız hani o kötü muameleye katlanarak hani yaptığım şey hatalı da olsa diyebilirdim ki kusura bakmayın hani geçtim falan da diyebilirdim ama onu demedim belki de şey oldu hani u benim için yer edinebilmesi bir şeye tepki vermiş oldum kendimi korumak adına birisi bana bir şey söyledi çok da hatalı olduğum suçlu olduğum bir şey değil** ve uslubu çok kötüydü ben de o şekil **bi şekilde kendimi hani savunabildim**

T4: hmm

D: koruyabildim

T4: hmhhh

However, as her narratives are examined from a different perspective during the session, she generates other things that she believes should be done or avoided. The therapy process seems to be a place where she tries to determine what she should and shouldn't do, searching for boundaries.

### **D14**

(340) D: so when I think about it, mmmm there, **I felt like I was defending myself** while talking to that person but now I feel a little worse, I wish I could say that his style is bad, maybe it would be something more warning for that person

T4: You said you thought I was defending, was there someone there to defend?

A: yes

T4: huh

D: I mean, **he said something to me in an aggressive way, the other person is the person in front of me.**

(197) D: maybe if you were there, if you were an officer there, maybe there was an attitude like you are not allowed to press here, you shouldn't do that.

T4: huh

D: you're right sorry I didn't think about that or

T4: huh

D: Maybe I could say that I didn't think it would cause such a problem, but

T4: where did you get me

D: I don't know, I just gave an example ((laughs)) that person appeared out of nowhere

### **Original**

(340) D: yani düşününce de mmmm orda yani **kendimi savunmuş gibi hissetmişim** o kişiyle konuşurken ama şu anda biraz daha kötü hissediyorum keşke üslubunun

*kötü olduğunu söyleyebilseymişim mesela o daha o kişi için daha uyarı bir şey olurdu belki*

*T4: savunduğumu düşünüyodum dediğiniz sizin yani savunulacak biri mi vardı orda*

*D: evet*

*T4: hu*

*D: yani orda saldırgan bi şekilde bana bişey söyledi karşıdaki kişi karşıdaki kişi*

*(197) D: belki orda atıyorum siz olsanız orda görevli olsanız hani ama buraya basmanız yasak böyle yapmamanız gerekiyor gibi bi tavır olsa belki*

*T4:hu*

*D: haklısınız kusura bakmayın bunu düşünemedim ya da*

*T4: hı*

*D: hani böyle bi sıkıntıya yol açmanı düşünmedim filan diyebilirdim belki ama*

*T4: beni nerden çıkardınız*

*D: bilmiyorum örnek verdim sadece ((gülüyor)) orda bi anda belirdi o kişi*

Mr. Esat shares a situation where he was about to decide regarding his job that could potentially result in him being victimized but later changed his mind. He expresses that the change in his decision was influenced by his daughter (she is also a psychologist) warning him about the potential consequences. He then mentions that the emphasis used by his therapist during their conversation also impacted his decision-making process.

#### **E7**

*(36) E: It didn't make sense because it's really unreasonable to hire someone who scammed me a year and a half ago.*

*T5: Huh, it was unreasonable, but you actually called that person.*

*E: Here is the handicap.*

*T5: Huh, **what happened, you gave up**, you called after that..*

*E: **My daughter said, "Dad, don't give him another chance" and your emphasis impressed me.***

*T5: Huh*

*E: Did you call the person who defrauded you to work, **you said**, did you call him to work The emphasis of **your emphasis in that sentence brought me to my senses**, I gave up hiring him, I would have met him with an excuse, so I would have sent him.*

*T5: Huh huh*

#### **Original**

*(36) E: Mantıklı değildi çünkü bir buçuk yıl önce beni dolandıran birini yanımda işe almak hakkaten mantıksız bi şey*

*T5: Hı hı mantıksızdı ama siz de aramışsınız aslında o kişiyi*

*E: İşte bakın yani handicap burda*

*T5: Hı hu peki **ne oldu da peki vazgeçtiniz hani aramışsınız sonra..***

*E: İşte **kızım demişti baba ona bir şans daha verme demişti bir de sizin vurgulamanız beni etkiledi***

*T5: Hu*

*E: Sizi dolandıran kişiyi işe mi çağırdınız **öyle bir cümle kurmuştunuz işe mi çağırdınız dediniz sizin vurgu u şeydeki o cümledeki vurgu u beni kendime getirdi***

*ben işe almaktan vazgeçtim onu ha gelseydi bir bahaneyle görüşecektim  
göndercektim yani  
T5: Hı hu*

#### **4.3.5. Speaking to convey**

Here, Mr. Bulut is seen to be in a relationship with the therapist in a different way than the others. Despite the therapist's suspicion of psychotic clinical structure, even minor word emphasis results in the patient repeating what he or she has said, saying yes, for example, I mean. No questioning, inquiry, or doubt arises. It is as if Mr. Bulut is speaking only to an agent to whom he will entrust his speech with his thoughts. He has no need to confirm or persuade, he just seems to speak as he is.

#### **4.4. Conflict Points**

##### **4.4.1. Coexistence of contradictions**

Under this highlighted notion, when the traces of victimization are traced, the points where the patients talk about both themselves and the negative, even if there is no contradiction, are determined as the area of contradictions. Examples are given below with three subheadings.

#### ***Personal – Professional***

##### ***A61***

*(132) A: Yes, for example, when I want to solve it during therapy I also feel like I will be blocked by you*

*T1: you have brought blocking*

*A: If I brought blocking and we're going to leave it here again then why am I talking about this?*

*T1: uh, think about it*

*A: ((sighs)) Can't you talk about therapy?*

*T1: huh, we thought we'd leave it here right now what are you asking*

*A: I mean your thoughts on my feelings and thoughts.*

*T1: huh*

*A: I know you won't bring **anything personal**, but can you bring something **professional**?*

*T1: So you said blocking , then I said let's stop here why are you asking this right now, you can think about it in parallel with blocking okay*

##### ***Original***

*(132) A: evet yani mesela bunu da terapi sırasında çözmek istediğimde de yine aynı şekilde sanki sizin tarafınızdan engellencekmişim gibi bi his oluyo*

T1: siz engellenmeyi getirmiş bulundunuz

A: engellenmeyi getirdiysem ve yine burda bırakırsak o zaman niye bunları konuşuyorum

T1: **huh düşünün bakalım**

A: (iç çekiyor) **terapi konusunda peki siz konuşamaz mısınız**

T1: **hi şu an burda bırakalım dedik siz ne soruyosunuz**

A: **işte benim duygu ve düşüncelerim hakkında sizin düşüncelerinizi**

T1: **hu**

A: biliyorum **kişisel bişey** getirmiceksiniz ama **profesyonel bişey getiremez** misiniz

T1: yani şu an engellemek dediniz sonra burda duralım dedim siz şu an bunu niye soruyosunuz bunu engellemeyle paralel olarak düşünebilirsiniz tamam

**A60**

131) T1: : This is what you are talking about, you are talking about being valued in terms of session times, this is what you are talking about the therapist getting bored, here you are talking about the value in return for the effort you put in, and you are talking about the passive position, and as a passive position, you are talking about not being able to direct the course of the therapy.

A: yes

T1: how come these are like this now

A: I mean it's like being passive actually- because for example if I take an **active** position, I just think of doing the same behavior in my daily life **and cutting off the relationship completely.**

T1: huh

A: Because I feel like **you're going to annoy me even more** after I say that.

T1: hmm being more annoyed with you so you think i'm annoyed with you

A: A little but of course because it's a professional thing and ummmm I've been going to a psychologist for years now and I went to a psychologist when I was little.... it's been my life anyway, but ummm, **I know you be- are professional – I know everyone every psychologist is thing at this issue I mean I don't know if I take it too personally when I say being annoyed**

T1: huh

A: But as I said, I didn't know how else to interpret the fact that I wanted to meet twice a week, but the duration of therapy, which normally reached fifty minutes, decreased to twenty minutes, because if we have to meet twice a week, I really need to resolve a lot of things in therapy, in these two weeks there were parts of my daily life that were **very difficult** in my relationships with other people..

T1: So you are saying that if it were fifty minutes, it would be right if it were two times a week, and you are talking about talking a lot and solving it that way.

A: yes

T1: so

A: thing

T1: **you are talking about controlling a course in therapy**

**Original**

(131) T1: bu dediğiniz işte seans süreleriyle ilgili olarak değer görmekten bahsettiniz işte bu terapistin sıkılmasından bahsettiniz işte sizin verdiğiniz emekle değer karşılığında bahsedip hani edilgen konumdan bahsettiniz u edilgen konum olarak da terapinin gidişatına yön verememekten bahsediyorsunuz

A: evet

T1: nasıl geliyo bunlar böyle şimdi

A: yani sanki edilgen olmak aslında- çünkü mesela **etken** bir konuma geçersen eğer yine günlük hayattaki davranış tarzımın aynısını yapıp **ilişkiyi tamamen kesmek** düşüncesi geliyo bana sadece

TI: hu

A: çünkü ben bunları söyledikten sonra **siz bana daha çok gıcık olursunuz** diye hissediyorum

TI: hmm size daha çok gıcık olmak yani size gıcık olduğumu düşünüyorsunuz

A: ya biraz ama tabii ki profesyonel şey olduğundan dolayı ve immmm artık psikoloğa yıllardır gidiyorum küçükken de gittim .... hayatım o olmuş oluyo zaten ama immmm ya **profesyonel ol- olduğunuzu biliyorum herkesin her psikoloğun bu konuda işte şey gıcık olmak derken çok kişisel olarak algılıyo muyum bilmiyorum**

TI: hı

A: ama dediğim gibi his olarak hem haftada iki kere görüşmek isteyip de hem de normalde hani elli dakikayı bulan terapi süresinin yirmi dakikaya düşmesini başka nasıl yorumluycamı bilemedim çünkü haftada iki kere görüşmemiz gerekiyorsa madem benim aslında gerçekten terapide bi sürü şeyi çözümlenmeye ihtiyacım var bu iki hafta içerside de günlük hayattaki diğer insanlarla olan ilişkimdede çok zorlandığım kısımlar oldu

TI: yani diyosunuz ki elli dakika olsa haftada iki olsa hakkı vericek olan bişey ve çok konuşmak ve o şekilde çözümlenmekten bahsediyosunuz

A: evet

TI: yani

A: şey

TI: **terapinin içindeki bi gidişatı kontrol etmekten bahsediyosunuz**

### **to Want – not to Want**

Ms. Aslı expresses the need to hear something from the therapist, from outside herself, but also states that she "actually doesn't want it."

#### **A61**

(38) A: I think I expect to hear something from the psychologist in general

TI: huh

A: I mean I don't know, then it's really about managing I guess I just want things to be more intense as you said Well, mm **I mean I really care about your thoughts** this actually a cause of my feeling a commitment to a psychologist I mean I feel like I need a psychologist **all the time I constantly need a thought from someone other than me to say something and push me to think, actually I don't want it**

#### **Original**

(38) A: genel olarak psikologdan bişey duymayı bekliyorum galiba diye düşünüyorum

TI: hu

A: yani bilmiyorum o zaman da işte gerçekten yönetmek olmuş oluyo gerçekten de dediğiniz gibi sadece şeyin daha çok yoğun olmasını istiyorum galiba işte işte u uuu yani **sonuçta sizin düşüncelerinize çok önem veriyorum** bu da aslında psikoloğa bağlılık hissediyo olmamın bi sebebi yani sürekli bi psikoloğa ihtiyacım olduğunu hissediyorum **sürekli bi düşüncenin benim dışındaki birisinin bişey söylemesine ve beni düşünmeye itmesine ihtiyaç duyuyorum** aslında bunu istemiyorum

Additionally, she expresses her struggle with the therapy process and her reluctance to continue, but she also doesn't want to make the decision to terminate the therapy process herself. She even thinks that she wants the therapist to decide instead of her.

## A61

(44) A: : For example, everything you said stays in my mind, like, let's put the needle in ourselves, let's put the screws on someone else, or where does **to direct** come from, where does **bonding** come from? When we examine these things, **what you said stays in my mind more but**

TI: huh

A: I think **I don't want to come to theraiies** because you haven't been doing this kind of thing much lately

TI: huh

a: **but I also don't want to quit therapy** when i'm thinking about quitting therapy **then really this is what diet this is what pickles**

TI: huh

A: I don't want it and I don't want it, I can't decide what I want

TI: huh

A: **I think maybe you should even decide on this issue then**

(68) A: Um, for example, here's what I say when we talk, for example, I think it's better for me when I think and analyze more during therapy, think more and keep in touch with the psychologist and progress the therapy, but in your style, it's more about explaining and explaining and cutting off at the most important point. I think it would be more beneficial for me to say this **because I want to change that style, but at the same time, I do not want to take an active role as much as directing it, but I also want to change it a little bit** because every time this happens, when there is a form of therapy that I think does not benefit me, this time therapies are a separate problem for me. It's becoming a thing and it's hard to say it. a separate problem for me and saying this is also you know difficult to say.

## Original

(44) A: mesela işte uı ya söylediğiniz her şey çünkü aklımda kalıyo işte uımm iğneyi kendimize işte çuvaldızı başkasına batıralım gibi ya da işte **yönetmek** nerden geliyo **bağlanmak** neren geliyor hani böyle bunları irdelediğimizde **sizin söylediğiniz daha çok aklımda kalıyo ama**

TI: hıh

A: son zamanlarda da bu tarz çok yapmadığınız için sanırım **terapilere gelmek istemediğimi** düşünüyorum işte

TI: hıh

A: ama aynı zamanda da terapiyi bırakmayı düşündüğümde de **terapiyi bırakmayı da istemiyorum** o zaman gerçekten **bu ne perhiz bu ne lahana turşusu** olmuş oluyo yani

TI: hu

A: hem onu istemiyorum hem bunu istemiyorum ne istediğime bi türlü karar veremiyorum

TI: hıhı

A: **belki bu konuda bile sizin karar vermeniz gerektiğini düşünüyorum** işte o zaman

(68) A: mm ya mesela işte şey konuştuğumuzda dediğim uı benim mesela terapi esnasında düşünüp de daha çok irdelediğim daha çok düşünüp böyle daha çok böyle psikologla iletişimde kalarak u terapiyi ilerlettiğimde daha iyi olduğunu düşünüyorum benim için ama sizin tarzınızda daha çok anlatıp anlatıp hani en önemli yerde kesmek yer alıyo **o tarzı değiştirmek istediğim için** bunu söylemenin benim için daha yararlı olacağını düşünüyorum **ama aynı zamanda da yönetmek kadar etkin bi rol almak istemiyorum ama azıcık da değiştirmek istiyorum** çünkü



bu olduğunda her seferinde bana yararı olmadığını düşündüğüm bir terapi şekli olduğunda bu sefer terapiler benim için ayrı bir dert haline geliyor ve bunu söylemek de işte zor söylemek

#### C44

C: suddenly xxx started teaching me. I didn't ask her to teach me ((laughs)). I didn't make such a request. Without asking me anything, he said, look, now, she put down the papers, she brought up the very beginning of the subject and started telling me, I had already studied there, so **I couldn't ask** her to teach me herself. I mean, she started to teach me lessons on her own, I think there is such a technique, people learn lessons by teaching lessons to other people, they say, "If you teach a lesson to someone else, you will learn the lesson better, she will reinforce it, etc. I think she wanted to reinforce it on me."

#### Original

C: birden xxx bana ders anlatmaya başladı ben ondan bana ders anlatmasını istemedim ((gülüyor)) böyle bi istekte bulunmadım bana hiçbi şey sormadan bak şimdi dedi kağıtları koydu taa konunun en başını açtı ve anlatmaya başladı bana ben zaten oraları çalıştım ben onun bana ders çalıştırmasını **isteyemedim ki** yani kendi kendine bana ders anlatmaya başladı sanırım böyle bi teknik var ya insanlar başka birilerine ders anlatarak dersi öğreniyo şey diyolar ya birine ders anlattırsan dersi daha iyi öğrenirsin hani pekiştirirsin falan sanırım benim üzerimde pekiştirme yapmak istedi

Ms. Canan mentions that she believes the school environment is very competitive and chaotic due to individuals who are driven by ambition to be selected for a particular class. While describing this example, she mentioned being targeted by these ambitious individuals. In the continuation of her conversation, she expresses her desire to have similar criteria and grade averages as these ambitious individuals.

#### C41

(30) T3: There are people who want to be selected at school

A: We need **to be selected** to take that course

T3: who else is in school like this

A: : I think all people are like this, I believe that there is **a very wild order**, you are trying to stay above the average, being average is not enough, you cannot survive, the average is not enough when you get a curve, you have to get something higher, higher, higher, **I hope this is the case for me this period**.

#### Original

(30) T3: seçilmek istenen birileri var okulda

C: o dersi almak için **seçilmemiz** gerekiyo

T3: başka kim var okulda böyle

C: bütün insanların böyle olduğunu düşünüyorum çok **vahşi bi düzeni** olduğuna inanıyorum bi ortalamanın üstünde kalmaya çalışıyorsunuz ortalama olmak yetmiyo hayatta kalamıyorsunuz ortalama körv aldığınız zaman yetmiyo hiçbi şekilde daha üstü daha üstü daha üstü bi şey almak gerekiyo **umarım benim de böyle olur bu dönemim**

### *to Direct – to be Directed*

Esat is attempting to guide the therapist in therapy, expressing a desire for the therapist to provide direction or guidance. Diren, on the other hand, brings a similar subject to therapy based on his experience with the hairdresser.

#### **D14**

(68) D: *That person is doing it, and that person is **not giving me any good guidance while doing it. If we do it this way, it will happen like this. If we do it that way, it will happen like that.***

T4: *uh, he exactly did what you wanted.*

D: *Actually, it is not to do exactly what I want. ... For example, it's cut a little bit more here there are some problems with the bangs*

#### **Original**

(68) D: *o kiři yapıyo bunu o kiři de bunu yaparken hiç yani **güzel bi yönlendirme yapmiyo bana hani böyle yapsak böyle olur şöyle yapsak böyle olur***

T4: *hu yani tamamen sizin istediđinizi yapmış aslında*

D: *aslında tamamen istediđimi yapmak olmuyo mesela birazcık daha buraları fazla kesmiş işte kaakülde birazcık problemler var*

#### **E9**

(74) E: *What kind of importance is it, for example, you have caught a big mistake or you have seen a big problem, **do you think there is something that needs to be investigated or that I do not understand or that I need to understand? Wouldn't you like to ask a question** about the past or the past in these conversations? **Wouldn't you like to direct** my speech from the beginning of the session, Hocam?*

T5: *Hi, the to directing ((guidance)) came again*

E: *Oh no, we were caught very badly ((laughs)) Yes, I'm expecting this from my psychologist. I mean, I'm expecting this from my psychologist Hocam I think my expectation is justified. I mean, a sentence or two, **some guidance((direction))** on a subject, or **some knowledge, or correcting a misconception**, or something else. So I'm waiting for a conversation from my psychologist.*

#### **Original**

(74) E: *Nasıl bir önem yani u nasıl bir önem çok mesela büyük bir yanlış yakaladınız veya çok büyük bir sıkıntı gördünüz u yani **sizce eşelenmesi gereken** u veya **benim anlamadığım anlamam gereken** bir konu yok mudur bu konuşmalarda geçmişten ya da geçmişe ait **bir soru sormak istemez misiniz** ya da u benim konuşmamı u seansın başından **yönlendirmek istemez misiniz** Hocam*

T5: *Hu yönlendirme geldi yine*

E: *Eyvahh çok kötü yakalandık ((gülüyor)) evet ben bunu bekliyorum psikoloğumdan yaa yani ben bunu bekliyorum Hocam beklememin de haklı olduğunu düşünüyorum yani u yani bi iki cümle bi konu hakkında bi **yönlendirme** veya **bir bilgi birikimi** veya bir **yanılgı düzeltme** veya bi u başka bir şey yani bi bi konuşma bekliyorum psikoloğumdan*

While attempting to expand and make sense of the desire for guidance through a series of questions, Mr. Esat also phantasies the scenario where the therapist provides guidance and envisions his own reaction to it.

### **E9**

(108) E: *I know that people understand others to the extent of their own capacity, that is, a very stupid person perceives the other person as much as his own capacity, and even thinks that he is smarter than him. Therefore, a very intelligent person understands others as much as his own capacity. Even though his intelligence is not very high, he perceives the world in his own way, he perceives people in the same way, and he thinks he is very intelligent in his own way. Now, here is the question: **When you give a direction, do I take it, interpret it in my own way, multiply and divide it and say no, or do I interpret it in the same way and say yes? I already know that you will not give direction, so this is not your thing. **Let's assume you did it, or am I going to ask someone for this guidance, or do I have such a search, since you won't do it?*****

T5: *Hmm, will you ask someone else if I don't?*

E: *Well, that may be the case, you probably want some guidance from someone else.*

T5: *what kind of guidance ((direction))*

E: *I don't know, Hocam, **it is very difficult to direct me I mean.***

T5: *it is very difficult to direct you.*

### **Original**

(108) E: *Şunu biliyorum u insanlar u başkalarını kendi kapasiteleri kadar anlıyolar yani çok aptal bir insan karşıdakini u kendi kapasitesi kadar algılıyor ve u hatta ve hatta ondan daha zeki olduğunu bile düşünebiliyor çok zeki bir insanın karşısındaki u dolayısıyla da adam ya insan ne kadar aptal olsa da ya da zekası çok üstün olmasa da kendi kafasınca dünyayı algılıyor insanları da öyle algılıyor ve u kendisini de çok zeki sanıyor kendi çapında şimdi burda şu söz konusu oluyor yani **u siz bir yönlendirme yaptığınız zaman ben u kendi çapımda bunu alıp yorumlayıp ondan sonra çarpıp bölüp u hayır mı derim yoksa gene aynı şekilde yorumlayıp evet mi derim yoksa zaten siz yönlendirme yapmayacaksınız bunu biliyorum yani bu sizin şeyiniz değil u **ama varsayalım ki yaptınız ya da ben bu yönlendirmeyi birinden mi isteyeceğim yani ya da böyle bir arayışım mı var siz yapmayacağınıza göre böyle bir yönlendirme*****

T5: *Hmm ben yapmayınca başka birinden mi isteyeceksiniz*

E: *yani u öyle olur heralde başka birinden istersiniz bi yönlendirme*

T5: *nasıl bir yönlendirme*

E: *Bilmiyorum ki Hocam **beni yönlendirmek de çok zordur** yani*

T5: *Hu sizi yönlendirmek çok zordur*

## **4.4.2. Subject – Object positions**

In this topic, passages have been identified that highlight the confusion regarding whether patients are the subject or object in their speech and who takes the subject position in therapy.

### **E7**

(88) E: *You say we came, we came to the delete sound ((lapsus, bell sound)) of the clarion((zurna))*

T5: ***Why** did you say that?*

E: *I couldn't say the zurt sound of clarion, that's why I said it's the delete sound of the clarion, Hocam.*

T5: **Well, why couldn'tt you say that?**

E: **Hocam, do you know that you are smiling today, you smiled a couple of times because I can see clearly today, I am really happy now, Hocam, unfortunately, I could not be brother of my brothers and sisters**

### **Original**

(88) E: Geldik diyosunn geldik geldik u zurnanın sil ((zil yerine sürçme)) sesine

T5: Niye öyle dediniz

E: Zurnanın zırt dediği yer diyemedim de onun için zurnanın sil sesi dedim Hocam

T5: **Ha niye** öyle diyemediniz peki

E: **Hocam bugün yüzünüz gülüyor biliyor musunuz** bugün u ben mi net gördüğüm için böyle bir iki defa gülümsediniz gerçekten mutlu oldum şimdi Hocam u maalesef ben kardeşlerimi abilik yapamadım

When a topic concerning himself is addressed in therapy, and he makes an inference or revelation about it, Mr. Esat immediately changes the subject and redirects it toward the therapist, posing a different question.

### **E7**

(94) E: Nice what is the connection I'm trying to establish a connection Hocam

T5: hı hı

E: **Someone is waiting for direction thinking oh I don't want to think. I want someone to direct me. Do I want that? I want it to be like a state of narcosis. I don't think. I don't get tired. Did someone direct me do I want it like this? or you hmm I was stuck on something too, Hocam.**

T5: HI HI

E: You said that I will tell you and you will object. **what would I object?**

T5: Well, after you brought an objection

E: Do you remember?

T5: Oh, well, you brought direction, then you brought an objection, now wait for the direction.. now you brought an objection.

E: What would I object after the direction?

T5: And now you brought up the objection after the direction issue..

E: No, you said that, but I remember that, I have said that.

### **Original**

(94) E: Güzel u nasıl bir bağlantısı olabilir u kurmaya çalışıyorum Hocam

T5: hı hı

E: **yönlendirme bekleyen birisi düşünmek iste ooo düşünmek istemiyorum beni biri yönlendirsin öyle mi istiyorum yani narkoz hali gibi olsun ben düşünmeyim yorulmayım birisi beni mi yönlendi böyle mi istiyorum veya siz ha ben de şeye takılmıştım hocam**

T5: HI hı

E: Ben söyleyeceğim siz itiraz edeceksiniz demiştiniz **ben niye itiraz edeceğim**

T5: Hu itiraz etme getirdiniz sonrasında

E: Hatırladınız mı

T5: Ha şimdi şey hani yönlendirme getirdiniz sonra hani itiraz getirdiniz şimdi yönlendirme bek.. şimdi itiraz getirdiniz

E: Yönlendirmeden sonra ben niye itiraz edeceğim

T5: Ve şu an da itiraz getirdiniz yönlendirme konusundan sonra

E: Hayır siz bunu söylemişsiniz de ben onu hatırlıyorum onu söylemiştim

Also, Mr. Esat redirects the conversation back to the therapist when unconscious material arises as a slip and it is emphasized in the session. Similarly, Ms. Canan asks the therapist "In your opinion" instead of continuing to talk after making inferences about something.

#### **C44**

(99) C: *if I had never talked about this, for example, if I had not said that I went swimming to lose weight, **if I had not said**, for example, that I ate a salad, I am trying to be healthy today, **if I had not said** that I cannot fit into my trousers, **these people would not have said anything to me**, they would not have told me **never eat squid? What do you think?***

T3: *why are you saying these?*

#### **Original**

(99) C: *ben bunun hakkında hiç konuşmasaydım mesela mesela yüzmeye gittiğimin zayıflamak için olduğunu söylemesem mesela salata yedim bugün sağlıklı olmaya çalışıyorum **demesem** pantolonumun içine giremiyorum **demesem bu insanlar bana şey demicekleri sakın kalamar yeme demicekleri** diye düşünüyorum sizce*

T3: *siz niye söylüyorsunuz peki bunları*

#### **C41**

(131) A: *I can't teach myself about this I know I can't control myself about it I know I have to control it is it just lack of will, **what do you think?***

T3: *you ask me*

A: *yes*

T3: *what do you think?*

A: ***Sounds like a lack of will to me***

T3: *Well, it seems that way to you, but then you are waiting for an answer from here, what is it?*

A: *Just because you have an opinion, maybe you have an opinion don't you?*

T3: *if there is, what will happen?*

A: *You can tell me, maybe an idea will form in my head.*

T3: *after*

A: ***I say it's not lack of will***

#### **Original**

(131) C: *bunu bi türlü kendime öğretemiyorum hani kendimi bu konuda kontrol edemiyorum etmem gerektiğini biliyorum iradesizlik mi oluyo acaba bu yani **sizce ne bu***

T3: *bana soruyosunuz*

C: *evet*

T3: *sizce ne peki*

C: ***bana iradesizlikmiş gibi geliyo***

T3: *hi size öyle geliyomuş bi de sonra burdan cevap bekliyorsunuz o nasıl bi şey peki*

C: *sizin de bi yorumunuz vardır diye sizin de bi düşünceniz vardır belki diye yok mu*

T3: *varsa nolcak peki*

C: *bana söylersiniz benim de kafamda bi fikir oluşur belki*

T3: *sonra*

C: ***derim ki iradesizlik değilmiş***

What is striking in the speech of Ms. Diren is that activity and passivity are quite intertwined and this directly manifests itself in the structure of the language. We can say that a passive language structure is dominantly active.

### **DI**

(26) D: **no consent was received from me** somehow the process went there

(48) D: **those people did not give me a space something like that**, when I could go around them and say 'my boyfriend' or 'we are lovers'

T4: hmm how so

S: it was like that for two people we didn't tell people around us that we were in a relationship or that we were together

### **Original**

(26) D: **herhangi bi rızam alınmadı** bi şekilde süreç oraya gitti

(48) D: o insanların da bana böyle bişeyi hani etraflarına çıkıp **sevgilim ya da biz sevgiliyiz diyebileceğim bi alanı tanımamış olmaları**

T4: hmm nasıl yani

D: iki kişi için bu böyleydi etrafımızdaki insanlara bir ilişki içinde olduğumuzu ya da birlikte olduğumuzu söylemiyoduk

Although this passive language structure is seen in different examples, certain distortions and slips occur in this structure time to time.

### **DI**

(10) D: **The constant repetition** of the events I experienced, that is, when I look at it now, **constantly repeating the things** I experienced and making the same mistakes - or **encountering the same type of people**, constantly somehow and **remaining passive** against this, that is, **not being able to continue this**, created a kind of insecurity within myself, broke my perception of myself as a personality, that is, personality. My perception is, when I think about it, sometimes I can't believe how I could get into those situations.

### **Original**

(10) D: yaşadığım olayların **sürekli tekrar etmesi** yani şu anda bakınca yaşadığım şeylere **sürekli tekrar etmesi ve aynı hataları-** ya da **aynı tip insanların karşıma çıkması sürekli bi şekilde** ve buna **karşı edilgen** kalmam yani **bunu sürdüremiyor olmam** kendi içimde bi çeşit güvensizlik yarattı kendimi olan kişilik algımı kırdı yani kişilik algım hıh düşününce bazen hani onları nasıl o hallere girebildiğime inanamıyorum

### **D14**

(118) I said I didn't do anything, I didn't cause any harm here, I said I was already aware of it, I was walking like this, he was saying something more behind me, but now I walked, so I left, but **I disturb- I was disturbed** very much.

T4: You got angry when you said why you don't follow the rules

(222) D: **the start of his anger - I was the target of his angry** but it was a lot of people with me

T4: huh

D: uncomfortable, I means I was uncomfortable, then I thought, I'm glad I answered, then I wondered what would happen if I said something, if I hadn't reacted at all, of course, if I said you're right, for example, I would feel worse, I thought so later

T4: what would happen then

D: I thought **I would being satisfied -have satisfied** someone's ego, so I'm glad I didn't.

### **Original**

(118) D: ben bişey yapmadım dedim bi zarar vermedim buraya dedim zaten farkındayım dedim bu şekilde yürüyordum işte arkamdan bişeyler daha söylüyodu ama artık yürüdüm yani ordan gittim ama çok **rahatsız et- oldum**

T4: kurallara niye uymuyosunuz deyince sinirlendiniz siz

(222) D: onun **öfkesinin başlangici- ha öfkesinin hedefi** bendim ama benimle birlikte bi sürü kişiydi

T4: hu

D: rahatsız yani rahatsız oldum sonra şeyde iyi ki de cevap verdim diye düşündüm sonra acaba hani şey deseydim ne olurdu diye düşündüm hiç tepki vermeseydim tabi haklısınız deseydim mesela daha kötü hissederdim kendimi sonra öyle düşündüm sonra

T4: öyle olunca ne olcaktı

D: öyle birisinin egosunu **tatmin ol- etmiş olcaktım** o yüzden iyi ki yapmadım diye düşündüm

In this context, there are sample passages from sessions that demonstrate the simultaneous use of demonstratives, which grammatically indicate distinctions, and interrelational dynamics, reflecting both active and passive stances. Several examples involve quotes in which individuals mentally position themselves in a completely passive role while expressing their thoughts.

While Ms. Aslı is talking about being active-passive, she is actually speaking from a position that she allows the situation that she complained about at the beginning of the session. Talking about his relationships with the therapist in the continuation of the session, Ms. Aslı brings up similar examples from his life and states that he takes a position that allows the other person to be active.

### **A59**

(60) T1: So in the end, what you do is complain, you neither conform nor say no.

A: I am complaining if there is a problem, but I am still in the mode of getting what the other party wants.

T1: u why are you in that mode

A: **I think I will be more accepted when this is the case** at least from the outside I mean inside I'm having problems inside, okay, but **i am on a more accepted side** from the outside, for example, **I am accepted because I al-lowed** xxx to come to the meeting room, although i did not want it yesterday.

(88) A: *I was thinking a lot too, for example, **but I guess it's because I'm so used to the other party's constant directing the relationship....***

TI: *umm*

A: *Although I think I am clear, I actually feel **PASSIVE** here too.*

TI: *umm*

A: *... **for example, I am the one who tells everything, of course i am the most effective part here but also because i could not choose endpoint issues or when i want to tell something else.***

TI: *huh*

A: *Since I can't bring this to therapy in any way, I think **I'm putting myself in a passive position here again and I allow the opponent management and this actually drives me crazy.***

TI: *hmmm*

### **Original**

(60) TI: *yani neticede yaptığınız şey şikayetlenmek oluyo ne uyum gösteriyosunuz ne hayır diyosunuz*

A: *ben ortada bi sıkıntı olsun da şikayetleniyim ama yine karşı tarafın istediği olsun modundayım*

TI: *au niye o moddasınız*

A: ***sanırım böyle olunca daha çok kabul görücem düşünüyorum** en azından dışardan yani içimden tamam **kendi içimde sıkıntılar yaşıyorum** ama dışardan daha **kabul gören** bi tarafta olmuş oluyorum mesela dün xxx'i **istemediğim halde** onun toplantı odasına gelmesine **izin ve-rdiğim için kabul görmüş** oluyorum*

(88) A: *ben de çok düşünüyodum mesela ama sanırım yine de **karşı tarafın sürekli ilişkiye yön vermesine çok alıştığım için ....***

TI: *hum*

a: *her ne kadar ben net olduğumu zannetsem de aslında ben burda da kendimi **edilgen** hissediyorum*

TI: *humm*

A: *... **mesela her şeyi anlatan benim aslında tabi ki burda en etken kısım benim ama bitirme konusunu bi türlü ben seçemediğim için ya da başka biy anlatmak istediğimde de***

TI: *huuum*

A: *hiçbi şekilde terapiye bunu getiremediğim için yine burda da kendimi **edilgen** konuma sokuyorum bence ve karşı tarafın yönlendirmesine **izin veriyorum ve bu da beni aslında dellendiriyo***

TI: *huumm*

### **4.4.3. End point of the session**

Ms. Aslı explains that when she thinks on her own outside of therapy, she finds it challenging to determine what actions to take and how to approach them.

Moreover, towards the conclusion of the session, she persists in speaking in a way that sustains the session, even though the therapist had indicated that the session had reached its end. The following passages are examples from the endings of three consecutive sessions.



**A59**

(103) T1: *Why are you blaming for not being able to say no, but when you say that, you talk about why they are idiots without seeing your own role, why can't I say no to this stupidity, you don't talk about your own role, let's stop here today*

A: ***my role is here - okay let's stop my role here is thing isn't it***

T1: *You don't talk about your point of view, you say you couldn't say no from his point of view, you say I don't know, but he is an idiot, he is a retard, where do you stand, how are they always being stupid, they are always being retarded.*

A: ***but, how could I have done it in another way, I can't find it anyway I think I don't understand right now because I'm saying it's stupid, I'm saying she's cheeky.***

T1: *huh*

A: *In my own role, I also say that I am aware that there is trouble because I cannot take a determined stance on this, do I not turn the angle on myself anyway?*

T1: *Well, the other side is bad, you say like you are right but you cannot defend your right.*

A: *yes*

T1: *You don't screw yourself up so okay let's stop today*

A: ***I thought about this already for a week now it's the same thing again i don't understand***

T1: *ok*

A: *ok let's stop*

T1: *ok*

(120) A: ***... I blame you for finishing early but maybe I'll prick myself with this needle that should have been anyway, I can't find the place right there.***

T1: *um*

A: *It's like that in daily life too*

T1: *huh*

A: ***Because, for example, when I say something , I can find something when we say let's stick the needle a little bit into ourselves, but actually I cannot find it myself while I'm thinking about it.***

(160) A: *I see it as more analysis in more time because in 20 minutes you just give me the needle to yourself*

T1: *huh*

A: ***When we say let's screw the bag with someone else and finish the therapy with a bang, then I asking the technique too - even if I do not question the technique yes I do not have much faith left yes, I guess I guess I did not question the content either.***

T1: *hmmm*

A: *I didn't think of it that way I thought of it that way right now*

T1: *hmmm okay let's leave it here today*

A: ***So are we going to leave it here today or do we always end it because the relationship is getting worse?***

T1: *uh, think about it, we'll deal with them next week*

A: *ok*

T1: *ok good week to you*

A: ***But Ms. T1, for example, we have finished here, if we talk about it next week, I will say the same thing next week, I thought about it for two weeks, now how can I say something without questioning the technique?***

**Original**

(103) T1: *siz neden hayır diyemediniz diye suçluyosunuz da onu söylerken kendi rolünüzü görmeden onlar neden salak ben niye bu salaklığa hayır diyemiyorum diye bahsediyosunuz kendi rolünüzden bahsetmiyosunuz burda duralım bugün*

A: rolüm burda benim - **tamam duralım da** rolüm burda benim şey değil mi  
T1: siz kendi açınızdan bahsetmiyorsunuz onun açısından hayır diyemedim diyosunuz bilmemne diyosunuz da o salak oluyo gerizekalı oluyo siz kendiniz nerde duruyosunuz onlar nasıl hep salak oluyo noluyo onlar hep gerizekalı oluyo

A: **ya ama nasıl bunu başka şekilde şeyapabilirdim onu zaten bi türlü bulamıyorum** bence yani anlamadım şu an çünkü orda tamam karşı tarafa salak diyorum arsız diyorum

T1: huu

A: kendi rolümde de diyorum ki ben de zaten buna kararlı bi duruş sergileyemediğim için sıkıntı çıktığının farkındayım burda zaten kendime döndürmüyor muyum açığı

T1: ee ama karşı taraf kötü siz haklı olduğunuz ama hakkınızı savunamadığınız için gibi diyosunuz ya

A: evet

T1: kendinize çuvaldızı batırmıyorsunuz yani **tamam bugün duralım**

A: **bi hafta boyunca zaten bunu düşündüm şu an yine aynı şey oldu anlamadım**

T1: tamam

A: tamam duralım

T1: tamam

(120) A: ... **erken bitirdiğiniz için sizi suçluyorum** ama belki de zaten olması gereken bu **iğneyi kendime batırıcam yeri tam bulamıyorum orda**

T1: hım

A: günlük hayatta da böyle

T1: hu

A: çünkü mesela bişey söylediğimde ne biliyim iğneyi biraz da kendimize batıralım dediğimizde bişey bulabiliyorum ama aslında kendim düşünürken kendim kendime onu bulamıyorum

(160) A: uu daha fazla sürede daha fazla çözümlenmek olarak görüyorum çünkü 20 dakika içerisinde bana sadece iğneyi kendinize

T1: huuu

A: çuvaldızı başkasına batıralım diyip de terapiyi pat diye bitirdiğimizde o zaman tekniği de **sor- tekniği sorgulamasam bile evet çok inancım kalmamış oluyo** evet aynen sanırım **ben içeriği de galiba sorgulamamışım meğer**

T1: huuuuu

A: bunu böyle düşünmemiştim bunu şuanda öyle düşündüm

T1: hmmm yaa peki **bugün burda bırakalım**

A: **işte şimdi bugün burda bırakcaz mi yoksa ilişki kötüye gittiği için hep mi bitiricez**

T1: **hıhı düşünün bakalım haftaya ele alırsanız bunları**

A: peki

T1: tamam iyi haftalar size

A: **ama T1 hanım mesela şimdi burda da bitirdik ya haftaya da bunu konuşursak e ben haftaya da aynı şeyleri söylüycem iki hafta düşündüm işte şimdi ben tekniği sorgulamadan nasıl şeyapacam ki**

**A61**

(90) A: but I feel like I'm **being blocked**

T1: huh, who is blocking you?

A: am I blocking myself

T1: **This is what you said, I shouldn't answer, then you will stop, I will pretend to think, but I will not think much, what are you saying?**

A: That's just how I think, this is the part I want to change, that's exactly how I think during therapy and

T1: huh

A: I know it won't be like a knife cut all of a sudden, after all, I've been going to a psychologist for three years.

T1: huh

A: **But I feel like we need to think together for a solution like this.**

T1: huh

A: In the part of being together, **my addiction to you** and my trust in your work, that interest and support that I want to receive from you.

T1: huh

A: all of this actually makes me feel bad

T1: huh

A: Because I can't be an individual and this time I want to feel more commitment to you, just like in the xxx ((previous therapist)), but maybe it's good that this is not the case, but I don't know.

T1: huh

A: **I don't know**, after all, **I can't ask you anything** because I know, again, I can't get that answer as I want with what being a psychologist gives me anyway, there is no eye communication anymore, I guess, **therapies really push me more.**

### **Original**

(90) A: ama sanki **engelleniyormuşum** gibi hissediyorum

T1: haa kim engelliyo acaba

A: ben mi kendimi engelliyorum

T1: **bu dediğiniz şey cevap vermiyim sonra durduracaksınız ben düşünür gibi yapcam ama çok da düşünmüycem bu dedikleriniz neler**

A: işte benim daha böyle sanırım değiştirmek istediğim kısım bu aynen ben terapi esnasında düşünüyüm ve

T1: huh

A: bunu birden bire böyle bıçak kesiği gibi olmayı biliyorum sonuçta üç yıldır gidiyorum ben psikoloğa

T1: huh

A: ama daha böyle **çözüm için birlikte düşünmemiz gerekiyormuş gibi hissediyorum**

T1: hu

A: birlikte olma kısmında da **size karşı olan bağımlılığım** ve size karşı olan işte u güvenim sizden almak istediğim o ilgi destek

T1: hı

A: bunların hepsi de bana kendimi aslında kötü hissettiriyo

T1: hı

A: çünkü birey olamayıp bu sefer de aynı xxx (önceki terapisti) olduğu gibi size karşı daha fazla bağımlılık hissetmek istiyorum halbuki bunun olmaması belki de iyi bişey ama bilmiyorum işte

T1: hı

A: **bilmiyorum** işte sonuçta **size de bişey soramıyorum** çünkü biliyorum yine işte psikolog olmanın verdiği şeyle o cevabı işte istediğim gibi alamıyorum zaten artık göz iletişimi de yok falan böyle artık iyce **terapiler gerçekten beni daha ço zorluyo galiba**

The following quote is from the end of Mr. Esat's session.

### **E7**

(202) T5: You say that you are evaluating it, but you also connected it to the cheater issue, I think something like this happened in this marriage, think about it, let's stop here this week.

E: Have we come to the end of time?

T5: Huh huh

E: ... **let's think about it, but this this I really can't solve this issue myself, please look that it is the same thing when buying goods.**

T5: As I said, as I said, let's make an appointment next week

E: Let's create, Hocam

#### **Original**

(202) T5: Değerlendirdiğinizi söylüyorsunuz ama hani şeye de bağladınız o dolandırıcı mevzusuna bu evlilikte de böyle bir şey olmuş bence siz bunu bir düşünün bu haftalık burada duralım

E: Geldik mi vaktin sonuna

T5: Hı hı

E: ... **bunu bir düşünelim bunun ama bu bu konuyu lütfen gerçekten ben çözemiyorum kendim bakın mal alırken de aynı**

T5: Dediğim gibi dediğim gibi haftaya randevu oluşturalım u

E: Oluşturalım Hocam

#### **4.4.4. W(h)o(man)**

Finally, there are statements about being a woman or a man in the speech of two patients whose biological sex is male. Both Mr. Bulut and Mr. Esat explained that the people around them had certain expressions about themselves, such as like a girl or like a woman, which means also a wife in Turkish. When the following excerpts are examined, the ways in which they bring this subject to the session and talk about it are quite different from each other. While Mr. Bulut transfers it to the therapist just like he is a messenger of only existing information, Mr. Esat repeats an important conflict he had on this subject. Below are passages.

#### **B10**

(121) B: **I'm a wimp, that's what they always call me, you're a wimp. Bulut is a wimp, he's timid. Bulut is touchy, and I show touchiness too.**

T2: who says

B: Oh, I can also be **touchy, shy, wimp, they always call me a wimp**, I mean they call me a **girl**, they even say **you're like a girl, you're not like a boy, you're like a girl.**

T2: Can you think of an example, who would call them?

B: my surroundings, my aunts, my mother, my sister xxx my wife all say so

T2: your aunt your sister your mother your wife

B: Yes, there are expressions like **onion man**, I mean whatever **onion man** means, **a man will be** what you call, he will be sociable, when he hits his fist on the table, he will do something like that, they don't see me like that, I am not that type of person, I am not someone who is quick to respond to something that gets into trouble, so I guess that's why.

#### **Original**

(121) B: **ben pısrık ya bana hep öyle derler pısrıksın Bulut pısrıktır çekingendir Bulut alıngandır alınganlık da gösteririm**

T2: kimler der

B: aa ya **alnganlık** da gösteririm **çekingen pısırk hep pısırk derler** yani bana **kız** derler hatta **kız kız gibisin yani erkek gibi değİlsin kız gibisin** derler

T2: aklınıza bir örnek geliyor mu kimler derlerdi bunları

B: çevrem teyzemler annem ablam xxx eşim hepsi de öyle söyler yani

T2: teyzeniz ablanız anneniz eşiniz

B: evet **soğan erkeğı** falan gibi tabirler var yani **soğan erkeğı** ne demekse **yani erkek dediğın** şey olacak ki girişken olacak masanın üstüne yumruğunu vurunca hani şey yapıcak beni öyle görmüyolar yani öyle bi tip değilim iş koparan bişeyin üzerine giden çok hazır cevap falan birisi değilim yani o yüzden heralde

E7

(106) E: Of course, it was my puberty, 18 and 20 years old, a fast period, ii, women, girls, drinks, etc., ii, my father became a member of parliament at that time, **and after that, let's not go further**, I realized that I don't have any siblings, they don't call me, they don't count me, they don't love me, they don't take into consideration, they exclude me, they don't want me.

T5: Why did it happen?

E: I don't know if I told you, the elder one ((his sister)) one day, 15 years ago, the elder one said something to me. After that, we never talked to them again. We did talk, but there was never a real conversation. **She said to my mother, "look at him look at him"** she said **"All his movements are like a woman."** she said exactly this sentence. I was shocked, I couldn't say anything, I looked and couldn't react, **I've been taking revenge on her on various occasions for about 15 years.**

**Original**

(106) E: benim buluğ çağımdı tabi u 18 20 kusür yaşlar hızlı bir dönem u kadınlar kızlar içkiler falan filan u babam o ara milletvekili oldu ondan sonra ve u derken **uzatmayalım** bir baktım ki benim kardeşlerim yok beni u aramazlar saymazlar sevmesler dikkate almazlar dışlarlar istemezler

T5: Niye öyle oldu peki

E: Bilmiyorum büyük olan size söylemiş miydim büyük olan ((kız kardeşi)) u bundan 15 sene önce bir gün bi laf etti ondan sonra bir daha onla u konuşmadık konuştuk da yani hani gerçek bir konuşma asla olmadı u **şuna bak şuna dedi anneme bütün hareketleri karı gibi dedi** aynen bu cümleyi söyledi ben şok oldum bir şey diyemedim baktım tepki gösteremedim yaklaşık 15 senedir çeşitli vesilelerle intikam alıyorum ondan

(138) E: Do you know how humiliating it is to put such a thing?

T5: What does it mean, it is for you to put something like this

E: I don't know now, for example, my father has nothing to do with this, **but what my father did is my father cut off my contact with people from his own circle, relatives, all of whom we could meet with, and he excluded me and humiliated me.**

T5: How do you know that?

E: sorry what,

T5: Ha, how do you know this? You said, "I lost my contact with the people around me because of my father."

A: Yes

(138) E: Böyle bir şey kondurulması u ne kadar aşağılayıcı biliyor musunuz yani

T5: ya ne anlama geliyor yani bu böyle bir şey kondurulması sizin için

E: Bilmiyorum şimdi u mesela babamın bu bu konuda bir iması yoktur ama **babamın da yaptığı şey babam kendi çevresinden akrabalarından u bütün u ortak olabilecek görüştüğümüz görüşebileceğimiz kişilerle benim irtibatımı kesti kendisi de beni dışladı aşağıladı**

T5: Bunu nerden biliyorsunuz peki

E: Efendim,

T5: ha bunu nerden biliyorsunuz hani dediniz ya çev şey çevremdeki insanlarla irtibatımı kesti babanız için

E: Evet

(120) E: So this is something insulting, something humiliating, this is something that is not acceptable, how can you accept that and your sister is saying that?

T5: So why did you think it was so humiliating?

E: It's so humiliating why shouldn't I think about it?

T5: But why humiliating?

E:... ((inaudible))

T5: sorry I couldn't hear

E: **Where are you trying to get to?**

T5: Why did you wonder?

E: **So, was that the place you wanted to reach or Was your behavior like that or not?**

T5: Why did you think that?

E: Questions questions took a turn, as far as I understand, I thought of something like this

T5: Your reaction to me has changed now when I ask this.

E: Is it?

T5: Huh huh

E: No, I'm not reacting to you, we need to talk about it

T5: Huh huh

E: I talked about this issue with Hocam ((previous therapist)) before you, and it stayed like that, I said, **I said Hocam, I mean with this sitting, this speech, this behavior, my attitude, I do not believe that I am speaking like a woman, I cannot see, I said such a thing, if I saw it, I would say, okay, I am like this, but, I can't see it myself. not only my sister but also a few other people made such allusions to me in those years.**

T5: Well, you think you're not like that, but why do you get so angry when something like that happens?

**Original**

(120) E: Yani bu küçültücü bir şey aşağılayıcı bir şey bu yani bu kabul edilmeyecek bir şey nasıl kabul edersiniz bunu yani ve bunu kardeşiniz söylüyor

T5: yani niye bu kadar aşağılayıcı olduğunu düşündünüz

E: Çok aşağılayıcı niye düşünmeyeyim ki

T5: Ama niye aşağılayıcı

E:... ((duyulmuyor))

T5: Efendim

E: **nereye varmak istiyorsunuz**

T5: Niye merak ettiniz

E: **Yani şu varmak istediğiniz yer şu mu öyle miydi hareketleriniz değil miydi mi buna mı varmak istiyorsunuz**

T5: Niye böyle düşündünüz

E: Sorular sorular viraj yaptı anladığım kadarıyla böyle bir şey düşündüm

T5: Bana olan tepkinizde değişti şu an ben bunu sorunca

E: Öyle mi

T5: Hı hu

E: Yoo size tepki vermiyorum bunu konuşmamız lazım

T5: Hı hu

*E: Ben bu konuyu u sizden önceki Hocamla konuştum öylece kaldı **ben dedim ki Hocam dedim yani şu oturuşumla şu konuşmamla şu hareketimle şu tavrımla yani ben karı gibi konuştuğuma inanmıyorum göremiyorum** böyle bir şey dedim görsem diyeceğim ki tamam ya ben böyleyim yani ama bu **kendimde bunu göremiyorum** yalnız bu konuda yalnız kız kardeşim değil bana birkaç kişi daha o senelerde u böyle bu tarz imalarda bulundu*

*T5: Hu peki hani siz öyle olmadığınızı düşünüyorsunuz ama öyle bir şey gelince niye bu kadar sinirleniyorsunuz*

## CHAPTER 5

### DISCUSSION

In this chapter, the results of the study will be discussed and evaluated. The research, which was carried out with the aim of *examining constructed victimhood in the speech of patients during the psychotherapy process and examining the functions of this and its impact on the psychotherapy process* through Lacanian Discourse Analysis, psychotherapy sessions were analyzed using four main focuses. These main focuses were: 1. Key signifiers on victimhood, 2. Persistently known, 3. Relationship with the therapist as Other, and 4. Conflict points.

In the first focus, *not being able to say no, (cannot) be like others, to (be) upset, “somehow...”, falling for the trap: “tezgah”, in/justice and anger* were noted as key signifiers of victimhood. The second focus included two subtopics: *about me* and *about O/others*. In the third focus, *demand for knowledge, request for confirming victimhood, formation of a victimizing therapist, “I should /not”, and speaking to convey* were determined as highlighted notions. At last, the *coexistence of contradictions, subject–object positions, the endpoint of the session, and w(h)o(man)* were noted as the points of conflict. First, I will discuss the results generated by analyzing each focus point. Afterward, I will proceed to discuss the overall findings.

#### 5.1. Discussion on the Four Main Focus

##### 5.1.1. Key signifiers of victimhood

In this main focus, I identified the main signifiers of the parts where the patients predominantly constructed victimhood in speech in the session. The signifiers that each patient builds around the victimhood during the session are different from each



other. Ms. Aslı expresses *not being able to say no* is a problem for her. Mr. Bulut gives many examples of *cannot being like others*. Ms. Canan, in her speech, in which she continues around being upset, uses a transitional expression between *being upset* and *upsetting others* or *being happy that others are upset*. Ms. Diren expresses that she often encounters situations that she does not want to be in, and she describes how these repetitions happen with the expression “*somehow...*”. As a last, Mr. Esat provides his therapist with examples of instances where he *falls for traps* set by others. He metaphorically illustrates falling into traps using the Turkish word *Tezgah* which is also connected to his job.

Each patient has a unique situation in which they experience discomfort, complaints, and suffering, and they tell this situation to the therapist with their subjective perspectives and words while they take the position of victim. However, although these signifiers are constantly revolving around, they are not things that are fully grasped or fully expressed, and they place themselves at the center of speech repeatedly.

Understanding subjectivity in Lacanian philosophy depends on a specific interaction between signifiers and the structure of the subject. While a signifier represents another signifier from the chain for the subject, the subject is an outcome of the chain of signifiers, and subjectivity exists within the space between different signifiers (Lacan, 1957–1958/ 2017). Vanheule (2017) states that the subject utilizes signifiers, yet speech gives rise to the subject rather than simply emerging from the speech (p. 91-92). Therefore, self-reflection through speech doesn't guarantee self-awareness and a clear understanding of oneself. In fact, according to the Lacanian perspective, an inherent impossibility characterizes self-reflection, and it is this very impossibility that constitutes the unconscious mind. Because the ego and subject are two different things, and the subject is divided into two between the consciousness and unconscious. Lacan explains this division by  $\$$  (barred “S”), the symbol he uses to denote the subject. Besides, individuals are empowered by speech and language to name and articulate their lived experiences through speech acts, allowing them to symbolize themselves as subjects (Vanheule, 2017, p.101). Although there is an effort to represent suffering in language, this effort fundamentally falls short due to

the Real, which cannot be pinpointed and endured as symptoms (p.102). The human utilization of language bears a gap, encompassing irrationality and perplexity that hinder our capacity to grasp the significance of our experiences (p. 102). Therefore, the therapist should not only pay attention to the meanings present in speech about sufferings and complaints but also consistently listen to them within the context of the individual's life history, relationships, existential questions, and the social and cultural circumstances in which they live (Vanheule, 2017, p. 104)

Furthermore, the other two highlighted notions, *in/justice* and *anger*, emerge as prevalent motifs within the patients' speech during sessions where victimhood holds significant sway in discourse. The initial notion is expressed in language by the duality of "being right" versus "being wrong" and "having the right" versus "not having the right". For instance, Ms. Aslı mentions having the right with the signifiers of completeness and everything: “*tamamen şey de değilim ... her şeye trip atıyo her şeye trip atma hakkı varmış gibi düşünüyö [I'm not totally anything about it ... she trips about everything she thinks she has the right to trip about everything]*”. In the speech of Ms. Canan, there are expressions of deserving what happens to them “*başlarına gelmeyi hak ettiler ... kötü şeyler yaparsanız başınıza öyle şeylerin gelmesi doğaldır*” [*they have deserved what happened to them ... if you do bad things it's natural that bad things happen to you*], and then these thoughts are spoken in relation to religion “*buna çok inanıyorum dinde böyle bi şey var*” *es, I really believe in this. there's such a thing in religion.*] in the session. Mr. Esat structures his speech around *honor, dignity, morality, greatness, and smallness* while addressing justice. Moreover, as Ms. Diren discusses rights, signifiers related to rules emerge in her language “*onun kural olduğunu biliyorum onun haksız bişey olduğunu biliyorum aslında ama bunun herhangi bişeye zarar vermediğinin farkındayım bunu bilerek yapıyorum zaten [I know it's a rule, I know it's unfair, but it doesn't cause anything. I'm aware that it doesn't cause any harm, I'm doing this on purpose]*”. Mr. Bulut, however, emphasizes that while *others managed to assert their rights* and take a stance, he found himself unable to adopt the same position.

In sessions, these justice-related words appear when expressing to the therapist the disagreements in their relations with others, the irregularities in daily lives, and the

rules they have or think they should be. It is remarkable that the word "Hak", which is homonymous with justice in Turkish, can also be used synonymously with the concept of God in Turkish culture. Related words are included in the speech, intertwined with religious, legal, or moral considerations regarding the social sphere. Therefore, it can be said that it is an area where the existence of the "Other", which governs and shapes one's interactions with others who share similarities, becomes prominently evident within language boundaries. In addition, it is possible to catch traces of people's association with the Other here. In general, the expression of injustice is evident in all the patients who complain about it. Thus, this finds its place in the speech as the most prominent signifier of victimhood.

*Anger*, another highlighted notion also emerges as a signifier when individuals narrate their victimhood to the therapist, essentially revisiting their experiences. While it often appears as an emotional expression, at times it surfaces in relation to other signifiers, such as the other party's anger towards them “*sizin terapi yapmak istemediğinizi ... belki de öfkelendiğinizizi [I think you didn't want to do therapy when we stopped therapy, or maybe you got angry ... maybe you got angry]*”, “*karşı tarafın bana iyice sinir olacağını ve ilişkinin tamamen bozulacağını düşündüğüm için because I think that the other party will be very angry with me and the relationship will completely break down,*”], their other feelings “*niye ben sevgilimi göremiyorum sinirlendim moralim bozuldu*” [*why I can't see my lover I got angry and was demoralized*], their relation to the rules “*kurallara niye uymuyosunuz dedi ... ben çok sinir oldum ... herkes zaten çok uyuyo kurallara [he said why don't you follow the rules ... I'm very angry ... everyone is already very obedient to the rules]*”.

Although nothing is directly experienced by the patient in the session about anger, anger still finds its place circulated in the speech. That is, anger as a signifier is a signifier that spreads between self and O/thers in patients' speech. In addition, where they express anger, there is something else in them: *laughter*. This is a notable aspect is that there is often a bodily reaction as a laughter that accompanies the attempt to articulate the anger, which doesn't quite align with the ongoing narrative “*dünyanın en kötü şeyini yapmışım gibi azarlıyo yani bi sinir oldum ((gülüyor)) [he scolds me like I did the worst thing in the world, so I got angry ((laughs))]*”, “*Siz zaten*

*sorulara cevap vermezsiniz Hocam ((gülüyor)) ... ben bunalırım burda siz gene bir şey demezsiniz ...çıldırıyorum Hocam sinirleniyorum geriliyorum. [You don't answer questions anyway, Hocam ((laughs)) ... get overwhelmed here and you still don't say anything. ... I'm going crazy, Hocam, I'm getting angry, I am getting nervous.]”*

This reaction seems to disrupt the continuity of the speech and is not compatible with anger as an emotion. In other words, there is something here that the patients are experiencing that cannot be articulated at that very moment. According to Saint-Jewin (2018) laughter serves as a defense against the exposure of the inherent absurdity or lack of coherent meaning within the core concept of meaning itself, as well as the flexibility of that meaning. This laughter acts as a shield against a specific type of anxiety triggered by the ability of absurdity to shift into meaning and vice versa (Freud, 1905, as cited in Saint-Jewin). This pertains to the unconscious aspect of an individual, the “being of the I outside discourse” that makes a subject that is “not I” (Lacan, 1967, as cited in Saint-Jewin 2018). Although Lacan asserts only the anxiety as an affect does not deceive, he suggests that when we have constructed a very nice symbolic framework, where everything is going well, with order, law, and goodwill in place, the moment the real comes into play, anger emerges (Lacan, 1959, as cited in Vanheule, 2017). He describes this as the realization that nothing fits together, and this is the situation where anger arises. According to Vanheule (2017), the real component of a complaint is conveyed, for example, in the “*stupefaction and anger*” that an individual may feel while thinking about or discussing personal concerns. He names it as a shocking effect of a symptom. This effect is defined by the destabilization of a person's ideas and feelings on self and the world, adding an element of unpredictability and unfamiliarity into the heart of self-experience (Vanheule, 2017, p. 102-103). The inclusion of anger as a signifier in speech when patients talk about their victimhood and the accompanying bodily reaction can be thought of as related to this shocking effect.

To conclude, in this section, the signifiers that emerge as individuals describe what they suffer from personally have been examined. To hear these signifiers and attribute meaning to them at the outset would be to stifle the process. Conversations aimed at diagnosis or approaches focused on eliminating symptoms generally work

this way: Meaning must be attributed so that it can be framed, controlled, and managed. However, Lacan's analytical approach points to another direction; within the individual's speech, within the chain of signifiers, these signifiers indeed carry meaning, but the purpose is not to reveal this meaning because it shifts. He contends that the connection between signifier and signified is “inconsistent, fluid and ever-changing” (Bilik et al, 2021) and considering that a signifier rigidly refers to an unchanging signified is a misconception (Lacan, 2006). To make hearable subjectivity established in the gaps between signifiers and the desire of the subject, the patient is encouraged to speak by generating new signifiers.

### 5.1.2. Persistently known

*The positive fruit of the revelation of ignorance is nonknowledge, which is not a negation of knowledge but rather its most elaborate form*

Lacan, Ecricts, p. 297

Considering the points underlined in this focus point, it can be said that the imaginary knowledge of people about themselves, others, and their positioning with social reality is reflected in their language quite clearly during the sessions. It is also useful to underline that these are the expressions they use while justifying their victimhood.

What they expressed about themselves was noted as three themes under the topic of “About me”. When the speech of Ms. Canan “*taleplerimi söylemeyen bi insanım, kendimi nasıl ifade ediceğimi bilemedim [I am a person who does not say my demands, I did not know how to express myself]*”, Ms. Diren “*herhangi bi ilişki kurmuyoduk bunu ben de ona açık bi şekilde konuşamıyodum niye o şekilde olmadığına [somehow I couldn't speak clearly about why it wasn't that way]*”, and Mr. Esat “*diyemiyorum yüzümü pekiştirip söyleyemiyorum ... ben sana bu fiyata iş diktiremem kusura bakma diyemiyorum [I can't say I can't sharpen my face and say it ... I can't get you to get a job done at this price, I'm sorry I can't say]*” were examined, *inability* is the first and common highlighted notion. Similarly, while the main situation that Ms. Aslı complains about is *not being able to say no* and she often expresses this in her speech, Mr. Bulut constructs his speech centered on the

motif of *not being like others*. Therefore, the most striking issue is that they include something in their speech by emphasizing that *some “thing” is not in them*. While "the thing" varies for each individual and in every speech, the constant thread is the emphasis on its *absence*, essentially manifesting a mode of existence through language and discourse.

The second one, *reference to personality*, includes many definitions of their identities and personalities that people express while describing their victimhood. Ms. Asli and Canan both assert possessing a *compatible personality*. However, Ms. Asli also mentions a desire for *dominance* to prevent her victimhood, whereas Ms. Canan occasionally questions if she exhibits a more unrestrained nature. Diren describes herself as an *introvert* in her first meeting with the therapist. Mr. Bulut, on the other hand, expresses many thoughts about his personality with numerous adjectives such as “*sensitive, wimp, shy, touchy*”, and tries to reinforce them with the words of his relatives and psychiatrist. Unlike the others, Mr. Esat, on the other hand, often either brings up the thoughts of others or asks the therapist to make this definition or naming instead of talking directly about who he is and what kind of person he is “*Esat hasta falan gibi bir şey psikolojik bir sorunu var diye bir şey kondurdular ... damgayı yedim ... Deli ... Deli Esat ... bunun adı ne Hocam yani ne diyorsunuz siz dilinizde tıp dilinde [They put something like Esat sick or something like he has a psychological problem ... I was stigmatized ... Crazy ... Crazy Esat ... what is the name of it, Hocam, so what do you say in your language in the language of medicine]*”. As the last highlighted notion here, the use of medical term is seriously evident in Bulut's speech such as “*pathological, psychosomatic, stuttering, brain dysfunction, social phobia*”.

When the passages are examined, the knowledge about the self, from the first to the last, seems to have a function that ossifies the passivity. Being unable to do something and lacking in a way, being in features that do not allow to change this inability as personality patterns, or already being like this due to pathology. Within the context of psychoanalysis, Lacan makes fundamental contributions to the conceptualization of knowledge and the concept of not wanting to know. Lacan speaks of two kinds of knowledge. While one of them is *savoir*, which is the

knowledge of the unconscious/subject, the other is imaginary knowledge about the self: *connaissance*. Evans (2006) summarizes these two types of knowledge in his dictionary of Lacanian terms. *Savoir* is a kind of knowledge that is targeted by psychoanalysis and includes the subject's tie to the symbolic order through the manifestation of signifiers.

The unconscious is a type of symbolic knowledge that the subject is in ignorance of. Through techniques such as free association, analytic praxis seeks to communicate this knowledge to the individual. The technique, however, does not aim at "absolute knowledge" but rather recognizes a fundamental gap between the subject and knowledge.

On the other hand, while *connaissance* is another type of knowledge, related term *méconnaissance*" means misrecognition belonging to the realm of self-knowledge within the imaginary. It comes from the fact that the ego is formed through misunderstanding and misrecognition. Imaginary knowledge, additionally referred to as "paranoiac knowledge" by Lacan, has a similar structure to paranoia and is characterized by delusions based on whole knowledge and control. Imaginary knowledge obstructs access to symbolic information, and psychoanalytic treatment serves to call the subject's *meconnaissance* into question in order to allow for *savoir* that it obstructs. The objective is to address and gradually traverse the fantasies (imaginary) that impede the subject's ability to effectively face the existential difficulties (Ruti, 2008; Özbek Şimşek et al, 2019). When these passages from the patients' speech were examined, the construction of the victimhood in speech was in a reciprocal relationship with what the patient knows and expresses about his/her self.

Whereas the preceding heading encompassed associations that individuals perceiving victimization deemed relevant to themselves, the current section delves into their perceptions of others. If we look at the passages from the sessions, while Ms. Aslı says "*çünkü biliyorum ki kız alınacak ... tam bir arsız [because I know that a girl is a very touchy type to take a girl... a total cheeky]*", Mr. Bulut states "*yani aklımdan o geçiyö işte bu da acemi falan ... acemi olduğumu biliyo [I mean, that's what I'm*

*thinking, this is a novice or something.... he knows I'm a novice]*” and Ms. Canan insists “*bence kendisi seçilmek için istedi ... hiç tanımadığı bi insanı yanına kurban seçip onunla birlikte seçmeye girmek istiyoy ... sizi ezmek istiyoy çünkü kendisi seçilmek istiyoy ne kadar vahşiler [I think she wanted this to get elected ... she wants to choose a person she doesn't know as a sacrifice and enter the audition with her.. ... she wants to crush you because she wants to be selected, how wild are they]*”. Mrs. Diren and Mr. Esat both include certainty more in their sentences. Ms. Diren states that “*o tipin mesela hayatında hiçbir kurala uymadığına eminim [I'm sure that type doesn't follow any rules in his life, for example]*” and Mr. Esat says that “*Adam şöyle düşündü ... Benim aklıma böyle bir fikir gelmemişti ama onun geldi herhalde [The man thought like this ... I had not thought of such an idea, but I guess he thought of it]*”.

What comes to the fore at this point is that they include statements about what the other thinks, feels or plans in their social relationships and comments on others in their discourse. These statements are noted under the "knowing the unknown (O/other)" theme. O/other, a word denoting what is already different, not self. I chose this title for the highlighted notion because our understanding of others is something we cannot possess but can imagine. Regardless of whether what we imagine is true or related to reality, this constitutes knowledge we generate imaginarily. This finds its place in the imaginary axis between the ego and the other in the L-schema which is mentioned in the Chapter II. While psychoanalytic treatment does exert a strong influence on the ego, its focus is *primarily on the subject* rather than solely on the ego (Evans, 2006, p. 205). Thus, an analyst/therapist should insist on listening to signifiers posing on symbolic axis rather than having a belief on imaginary.

Lastly, the statements under the "Because of Other” category encapsulate the rationales which patients attribute to the victimhood they talk about. These can serve as instances of relations with The Other as an order, social law, and culture. Ms. Asli expressed that behaving differently from how she was in the situation she complained about would be “*shameful*”. Ms. Canan mentioned her desire for “*acceptance by others*”. Ms. Diren stated that “*nobody adheres to the rules anyway*”. Mr. Bulut attributed his suffering to the experienced *pathologies*. Finally, Mr. Esat



affirmed that he conducts himself with *honor and dignity*. Examining the passages, there's an element that initiates a speech directly concerning the concept of the Other. And here, there is such a way of relating to the Other that this form must necessarily come with being a victim, and it's not possible otherwise.

### **5.1.3. Relationship with the therapist as Other**

In this topic, which focuses on how the victimhood in speech works in the relationship with the therapist as an Other and five prominent themes, as *demand for knowledge, request for confirming victimhood, formation of a victimizing therapist, I should /not,* and *speaking to convey* were determined.

To begin with, in the initial part of the session, Ms. Aslı conveys to her therapist her uncertainty and lack of knowledge about how she should behave differently when facing the situation in which she is complaining. The therapist provides a scenario as a potential way to handle the situation, and when inquiring why she might not have taken that approach, the patient perceives it as a direct recommendation. In response, she rejects the suggestion by returning it to the therapist, implying that if she were to say something like that, her relationship with her colleague would immediately sour, stating, " *yani işte bunu söylersem iş arkadaşımın aramı direkt bozulur zaten normalde [So if I say this, my relationship with my colleague will immediately break down]*". In the later part of the session, Ms. Aslı expresses, " *ama işte bunu nasıl düzelticemi nasıl bir tavır almam gerektiğini bilmiyorum [but here i don't know how to fix it, what attitude to take]*", once again conveying to the therapist her lack of knowledge. This can also be seen as trying to trigger a process of knowledge generation by the therapist. In her other sessions as well, Ms. Aslı expresses that she doesn't find answers when thinking on her own, and she believes that the therapist needs to be involved in the process of generating solutions. She also mentions that she refrains from asking questions because she knows she won't receive answers from the therapist anymore. Thus, she continues to insist on the therapist taking an active role in generating information. Similarly, Ms. Canan like Ms. Aslı, also poses a question to the therapist, asking " *sizce [what do you think?]*" and persists in her insistence when she does not receive a response. She adds that " *belki reddetcem*

*[maybe I will refuse]*". In a similar manner, Mr. Esat initially directs questions to the therapist and then neutralizes the responses once obtained. However, he does not give up on his insistence that the therapist give and produce information about him.

When we look at the highlighted notion of request for confirming victimhood, examples were Ms. Canan "*yazık değil mi bana; çok çirkin bi şey değil mi yaptığı davranış [Isn't it a pity?; Isn't his behavior a very ugly thing?]*", Ms. Diren "*bu gündelik hayatta basit bişey değil midir hani [Isn't this a simple thing in everyday life?]*", and Mr. Esat "*nasıl konuşayım şu hayata bir bakın yaa [How can I talk about this? Look at this life.]*". Each present their statements in a manner that seeks the therapist's support regarding the incident they tell the therapist and confirmation of their victimhood.

Moreover, under the topic of formation of victimizing therapist, Ms. Aslı discusses the therapeutic technique with her therapist, including two sessions a week and variable length sessions. She also mentions that she perceives a connection between this approach and the therapist's feelings for her, and that she thinks the therapist is acting this way because the therapist does not value and states that "*çünkü terapiyi kestiğimizde sizin terapi yapmak istemediğinizi ya da ben sürekli aynı şeyleri anlattığım için ve davranış şeklimi değiştirmedim için belki de öfkelenmişsiniz diye düşünüyorum [Because I think you didn't want to do therapy when we stopped therapy, or maybe you got angry because I kept saying the same things and didn't change my behavior.]*". Mr. Esat complains that his therapist does not ask him how he is and associates this with the fact that his speech is not important to the therapist. Furthermore, after the therapist mentions that the answer lies within the patient himself in response to a question he raised during the session, instead of generating a response to the question, the patient asks the therapist, "*Benim seanslarımda sıkılıyor musunuz Hocam?*" [*Are you getting bored during my sessions Hocam?*]. Additionally, Ms. Diren, somewhat distinct from the others, begins the session by expressing her dissatisfaction with the previous session and then proceeds to complain about being unhappy with a hairdresser who always followed her instructions and didn't add anything to the process, using the same words to describe her unhappiness with the hairdresser. With these expressions, she is implicitly expressing that she sees the therapist in a position that makes her unhappy.

If we look at the other highlighted notion “I should/ not”, Ms. Diren illustrates a situation during the session where she conveys an impression of how she should behave based on her deductions from previous therapy sessions and appropriately acts in accordance with it. With this behavior being questioned in the session, Ms. Diren states that she feels worse. She then introduces a hypothetical example involving the therapist in a position that forbids her. Hence, Ms. Diren positions the therapist in a way that restricts her based on the truth she attributes to the therapist. Mr. Esat, while explaining to the therapist that he has implemented a decision he made, mentions that in previous sessions, the therapist's emphasis led him to take this decision. Both believe there is a truth within the therapist and engage with it in their own unique ways.

As a last, when we look at the relationship that Mr. Bulut has with the therapist through the discourse of the victim, it draws attention that, unlike the others, he is only in a position to express something to the therapist, just speak to convey. When the therapist underlines certain parts of Mr. Bulut speech, he often responds by beginning his next sentence with "yani" (which means "in other words") or "yes" and proceeds to provide more details while continuing his train of thought based on what he has previously shared. He does not generate questions, entertain doubts, or engage in any form of inquiry. The sessions sometimes resemble more of a monologue rather than a dialogue. Additionally, when Mr. Bulut brings up others' thoughts as examples during the sessions, it doesn't seem like those thoughts are separate from his own. Instead, they appear to be intricately intertwined with his own ideas, almost as if he perceives them as originating from within himself.

According to Georgaca and Gordo-López (1995), the Other serves as a means of verifying the subject's discourse and securing the subject's own subjective position (as cited in Parker, 2005). The patient maintains her own fantasy through the therapist by attributing a position that “supposed to know”. This position not only creates an effect that enables the patient to continue speaking but also opens the space for her to establish a relationship with the therapist as guided by her phantasm through transference. In addition, the patient assumes that the therapist desires something. This something is not the desire in the therapist, and as long as it remains

unknown to the patient, the patient transfers something of himself/herself there, and in this way the patient's fundamental fantasy becomes audible. Instead of this obscurity, we see that if information about what the therapist wants and what s/he wants for the patient enters the session, the patient enters into a conflicting relationship with it. For instance, looking at the parts where knowledge is requested from the therapist, the moments when the therapist provides this information result in a rejection. Additionally, in the passages in the I should/not section, there are examples where patients are also seeking information on what the therapist might or should not want them to do. Here, who wants and desires what gets mixed up. The patient may nevertheless seek this information, but the therapist must leave this space blank so that the patients' desire can be centered and workable.

#### **5.1.4. Conflict points**

In this main focus point where the conflicts that emerged in language during the sessions were present, and four highlighted notions related to victimhood in discourse were noted *as coexistence of contradictions (personal – professional, to want – not to want, to direct – to be directed), subject–object positions, end point of the session, and w(h)o(man).*

When we look at the first contradiction, Ms. Aslı wants to receive insights from her therapist regarding her own role within their therapeutic relationship. The conflict between the personal and professional dimensions becomes evident in the language employed in this context as “*biliyorum kişisel bişey getirmiceksiniz ama profesyonel bişey getiremez misiniz [I know you won't bring anything personal, but can you bring something professional?]*” Furthermore, Aslı expresses her perception that the therapist might be harboring annoyance towards her. This perception once again highlights the ongoing internal struggle Ms. Aslı experiences, stemming from the complex interaction between her personal feelings and the professional boundaries inherent to their therapeutic relationship: “*profesyonel ol- olduğunuzu biliyorum herkesin her psikoloğun bu konuda işte şey gıcık olmak derken çok kişisel olarak algılıyo muyum bilmiyorum I know you be- are professional – I know everyone every psychologist is thing at this issue I mean I don't know if I take it too personally when*

*I say being annoyed]”*. Similarly, in the second contradiction, while talking about the course of therapy in her relationship with her therapist, Ms. Aslı reflects this time a conflict between wanting and not wanting as *“yönetmek kadar etkin bi rol almak istemiyorum ama azıcık da değiştirmek istiyorum [do not want to take an active role as much as directing it, but I also want to change it a little bit]”*, *“terapilere gelmek istemediğimi düşünüyorum ... terapiyi bırakmayı da istemiyorum [I think I don't want to come to the therapies ... but I also don't want to quit therapy]”*, *“sürekli bi düşüncenin benim dışındaki birisinin bişey söylemesine ve beni düşünmeye itmesine ihtiyaç duyuyorum aslında bunu istemiyorum [all the time I constantly need a thought from someone other than me to say something and push me to think, actually I don't want it t]”*.

While Canan talks to her therapist about a friend's approach to her with the aim of using her, and when she criticizes the "wild order" at school, the conflict of reluctance is reflected in her language as *“bana ders çalıştırmasını isteyemedim ki ... sanırım benim üzerimde pekiştirme yapmak istedi [I couldn't ask her to teach me... I think she wanted to reinforce it on me]”*, *“çok vahşi bi düzeni olduğuna inanıyorum bi ortalamanın üstünde kalmaya çalışıyorsunuz ... umarım benim de böyle olur bu dönemim [I believe that there is a very wild order, you are trying to stay above the average ... I hope this is the case for me this period..]”*.

As a third contradiction, Ms. Diren and Mr. Esat speak on to direct – to be directed. While Ms. Diren complains that the hairdresser she goes to does not guide her while s/he cuts her hair, Mr. Esat, ironically, criticizes the therapist for not directing him effectively and then comments, *“beni yönlendirmek de çok zordur. [it is also very difficult to direct me ]”*.

Apart from Mr. Bulut, the combination of contrasts frequently appears in the sessions of other patients. These contradictions are most related to their position in the relationship with the therapist and in relation to others.

In the second point of conflict, there are examples where subject-object positions are mixed. Mr. Esat changes the topic at the point where he is encouraged to continue

talking about it by bringing it to a place related to the therapist. For example, at one point he slips his tongue, and when this is pointed out, he starts talking about the therapist's smile that day or revisits a previous comment by the therapist as a switch to a different topic. Ms. Canan, on the other hand, asks the therapist's opinion after making a conclusion about herself during the session, instead of continuing her conversation there, saying "Sizce [in your opinion?]". After this "in your opinion" question, she states that she will negate her own inference through what the therapist says "*bana iradesizlikmiş gibi geliyor... derim ki iradesizlik değilmiş [it looks to me like a lack of will... I say it's not a lack of will]*", or "*belki reddetcem [maybe I will refuse]*" or she falsifies her earlier conclusion by saying that everyone does what she does. In fact, as the person who comes to the session and speaks, they have a tendency to shift the subject of the session from themselves to the therapist. Also, as a second confusion, the subject of the therapist is made the object of the session. Considering the examples of Mr. Esat and Ms. Canan, it can be said that while the things they talk about are in the foreground, they suddenly interrupt it and point to a place where the therapist will speak, and they will be positioned accordingly. In addition, it is striking that this positioning is an objection or an opposite position.

If we look at the quotes from Ms. Diren, it is striking that first of all, the use of a passive language structure that can indicate the object position is dominant: "*herhangi bi rızam alınmadı [no consent was received from me]*", "*bi alanı tanımamış olmaları [They have not provided me a space]*". However, there are moments when precisely this passive position is overturned by a slip or by transitions between active-passive language structures: "*onun öfkesinin başlangıcı- ha öfkesinin hedefi bendim [the start of his anger - I was the target of his angry]*", "*tatmin ol- etmiş olcaktım [I would being satisfied -have satisfied him]*", "*sürekli tekrar etmesi ve aynı hataları- ya da aynı tip insanların karşıma çıkması sürekli bi şekilde ve buna karşı edilgen kalmam yani bunu sürdüremiyor olmam [constantly repeating the things I experienced and making the same mistakes - or encountering the same type of people, constantly somehow and remaining passive against this, that is, not being able to continue this]*".

On the other hand, in the language of Ms. Asli, this object appears in relation to the confusion of subject positions, her saying that she gives permission to the situations

she complains about / is victimized by. In other words, she states that the way for the other party to be more active is through herself. She adds that this giving permission makes her accepted by others or something that makes her angry:” *izin ve-rdiğim için kabul görmüş oluyorum [I am accepted because I al-lowed]*”, “*karşı tarafın yönlendirmesine izin veriyorum ve bu da beni aslında dellendiriyo [I allow the opponent management and this actually drives me crazy.]*”.

The third point of conflict is related to *the moment of ending the session*. Ms. Aslı is in conflict with her therapist regarding the ending points of the sessions, and she actively opposes the ending points and criticizes the therapist and therapy techniques. At the end of the sessions, Ms. Aslı tries to continue her speech, sometimes she expresses that she cannot solve it alone and wants the therapist to say more. Similarly, when his therapist finished the session by saying “*bence siz bunu bir düşünün bu haftalık burada duralım*” [*think about it, let's stop here this week.*], Mr. Esat replies with “*bunu bir düşünelim*” [*let's think about this (together)*] and then continues his speech even though the session is over and underlines that he could not solve this problem on his own.

In the last highlighted notion w(h)oman, passages are from the sections in which the two biologically male patients Mr. Esat and Mr. Bulut bring to the session the information that they are described as woman/girl by the people around them. While Mr. Esat is enraged by this statement about himself and is still dealing with and interacting with rejection, Mr. Bulut displays an attitude that can be considered close to neutral and even to some extent accepting.

### **5.1.5. Sexuation and Clinical Structure**

The clinical structures of the patients are detailed in Table I within the methodology section. In brief, information regarding hysterical neurosis was provided for Ms. Aslı, Ms. Canan, and Mr. Esat, while perversion was identified to Ms. Diren, and psychosis was identified for Mr. Bulut, as reported by their therapists. Considering the sessions in which the victimhood in speech is dominant were studied within the scope of this thesis, the clinical structures of the patients reveal a picture consistent with the information received from the therapists when the relationship of each with

the Other and the lack is considered. In addition, the clinical structures that therapists think about patients can have a determining effect on their techniques and the relationship in therapy. Since the scope of this study is not to directly comment on clinical structures, I will briefly touch on what has been analyzed on the basis of existing data. In this context, considering the general relationship that Ms. Aslı, Ms. Canan, and Mr. Esat are established with the therapist and the social law, it is noteworthy that they talk about an Other who deprives and lacks something and that they are in an accusatory attitude based on this Other and others. In addition, the statements of all three, they wish to hear the what the Other wants from them but then that will be reversed in the discourse and it will not be satisfied. With this aspect, it can be said for all three of the clinical structuring of hysterical neurosis.

On the other hand, Ms. Diren's relationship with Other that stands out, unlike the others, is reflected in her language: her breaking the rule even though she knows it. Here, denial, which is the basic defense mechanism of the clinical structure of perversion, seems to be in action. In addition, considering Ms. Diren's sentences with not being directed by someone in the way of establishing a relationship, it is remarkable that she complains about not confronting an element with which she can fight and that when she hears a demand or rule, she establishes her relationship with warning and prohibition in the language. that is, the absence of an explicit redirect bothers her, while the presence of a redirect or directive also bothers her.

Mr. Bulut, on the other hand, comes to his therapist, talks and leaves. Rather than producing a question or questioning, or a general suspicion about himself or his relationships, a situation that reinforces them by telling them over and over is at the forefront. The therapist's thinking about the psychotic clinical structuring of Mr. Bulut seems to be effective in establishing this type of relationship in therapy which far from triggering questioning and desorganize the imaginary knowledge.

Mr. Esat uses masculine male signifiers while talking to the therapist, on the one hand, and on the other hand, he circulates around the questions of whether I am a woman or a man, on the subject of his anger at his sister's calling him as "woman". This seems compatible with the hysterical structure. Pommier (2014) asserts that the



characteristic of masculine hysteria is the rejection of one's own feminine side. On the other hand, Mr. Bulut seems to be only expressing this conflict without taking any position of participating or standing against it. This seems to indicate that something about sexualization is not on the agenda for Mr. Bulut. This is data compatible with his clinical structure.

Methods used in psychoanalysis to treat neurosis have potential risks when applied to psychosis, according to Gürsel and Gençöz (2019). For example, analysis on a couch or scansion is not recommended while working with a psychotic patient, and detecting a psychosis in therapeutic practice is critical. It is seen that the therapist considers Mr. Bulut's clinical structure might be psychotic and does not use the techniques used by other therapists in the sessions. Because in the psychotic structure, the real, imaginary and symbolic rings are not connected with each other as in other clinical structures and the structure that seems to be together is ready to fall apart at any moment (Fink, 2007, p. 262). When working with a psychotic individual, the analyst's goal is to help them manage their strong emotional experiences without causing injury and to prevent the unexpected loss of *stable meanings* because psychotics, unlike neurotics, do not operate inside the typical framework of meaning. As a result, the analyst must use unique techniques to define limits and meanings. (Fink, 2007, p. 271). Nomine (2005) states that in situations of psychosis, the primary goal frequently entails linking the three aspects where challenges in building a cohesive bond develop. Furthermore, there is a need to assist in reestablishing a connection if the initial link breaks down, especially in cases of triggered adult psychoses (Nomine, 2005, p. 98).

### ***Conclusion on the Discussion of Main Focuses***

The results with the analysis of the notes for each focus point, the construction of each person's speech of victimhood around subjective signifiers, the existence of constructed victimhood in speech in different clinical structures, the reinforcing effect of imaginary knowledge of self and others, positioning for recognition and repetition of victimhood in the relationship with the therapist/Other, active passivity, absence of taking responsibility of unconscious and resistance where subjective

responsibility is pointed out were interpreted as the main components of the victimhood that emerged in the patient's speech during the sessions.

## **5.2. Discussion on Victimhood in Psychotherapy/ Psychoanalysis**

### **5.2.1. Victimhood in Discourse, Discourse of the Hysteric, Hysterization**

#### ***Victimhood in Speech as a Resistance***

The construction of victimhood in speech is considered a situation that can be encountered in the therapy process with clinical structure. When the results are reviewed, examples are available for clinical structures of neurosis, perversion, and psychosis. While the relational strategies employed by each individual in constructing victimhood may differ, a brief analysis of the results of the recent study reveals several patterns. The neurotic individual tends to heavily utilize strategies from the hysterical discourse. In the case of perversion, strategies related to rules and laws become more prominent in speech. On the other hand, the psychotic individual, appears to draw an imaginary support point for themselves by adopting the victim position and this mechanism seems similar to paranoia.

The notion called *active passivity* evolved, in which people took a passive position while actively seeking validation of their victimhood. This was accompanied by a reluctance to explore the unconscious components and avoidance of responsibility for the unconscious. Engaging in a psychoanalytic process requires one to move away from the victimhood in their speech and become aware of subjective responsibilities. The operation of the process depends on the fact that people move away from perceiving themselves as victims and also from attaching their lives primarily to external causes or blaming others. Evans (2006) claims that Lacan distinguishes between "behavior," which is shared by all animals, and "acts," which are symbolic and unique to humans. Acts are defined as ethical notions by their capacity for accountability. However, because of the interaction of conscious and unconscious intents, psychoanalytic responsibility differs from legal liability. When an unintentional behavior is examined, it may reveal an unconscious desire. Unlike

legal norms, psychoanalysis requires subjects to accept ethical responsibility for the unconscious, recognizing underlying agendas inside seemingly unintentional (Evans, 2006). Individuals develop narratives to justify their acts for defensive reasons and these narratives are fundamentally selective, attempting to disguise the illogical features, emotions of powerlessness, and disharmony that underpin our true relationship with the environment (Vanheule, 2017, p. 68). The ego, specifically, as a self-reflective creature, takes on the duty of masking these basic features. Therefore, *victimhood in speech is interpreted as a resistance for a psychoanalytic process* when the results of this thesis study are evaluated. In a qualitative study conducted by Bıçakçı (2019) on the topic of resistance in psychotherapy, the victim position of the patient, which is considered together with the discourse of worthlessness, is evaluated as resistance and attention is drawn to the potential gain that the subject may derive from victimization.

Furthermore, while neurotic patients maintain this active passivity by establishing victimhood in their discourse, they insist on blaming others, complaining, and being demanding during the therapy session. In this context, it seems to be quite similar to the hysterical discourse that Lacan mentioned. Ünal (2017) argues that which discourse the patient is in can affect the quality of the therapy relationship and addresses the patient's constant complaints, frequent asking questions, the therapist's effort to provide information about the problems, and questions in response to this request of the patient within the scope of a case study in which she examined hysterical discourse. In this case study, in which a therapy process that did not start with a psychoanalytic orientation was later evaluated with a Lacanian psychoanalytic perspective, the author explained that the therapist never thought that the patient was satisfied with what the therapist did or said during the process, and therefore, felt inadequate and frustrated by the presence of hysterical discourse (Ünal, 2017). Therefore, the construction and continuation of the victimhood in the discourse of a neurotic is in harmony with the strategies in the hysterical discourse which can exist independently of the clinical structure. The patient might frequently have demands during the session. The evaluation of these demands within the context of discourse, structure, and transference relationship is necessary because regardless of their intention, any response given by the therapist to a demand has a transformative

effect, turning transference into suggestion (Lacan, 2005, p. 205). This can be interpreted in relation to the investment of hysterical discourse in the creation of a master. Verhaeghe (1996) explains that this connection might be comprehended structurally through Lacan's discourse theory, in which the Master's discourse and the hysterical discourse are shown to be in perfect coherence.

On the other hand, in order for the psychoanalytic process to work, the patient must be hysterized (Verhaeghe, 2008, p.60; Yoğan, 2020). There are points to be considered in order to both hysterize the patient and establish an analytical relationship with the demands that appear in that position. Burgoyne (2018) states that the ego is not an ally of the analyst in striving to gain access to the Real. The therapist's ego, as much as, and sometimes more than, the patient's ego, contributes to restricting paths to the Real and creating resistance (Burgoyne, 2018, p. 8). Evran (2017) declares that the subject as a consequence of feminine and masculine dialectic might only come across the ambiguous desire of the Other just in the position of the hysteric or in a hystericized situation and this is a requirement for operating through the unconscious in psychoanalytic praxis.

### **5.2.2. Definitive and Diagnostic Problems on Victimhood**

The literature is based on trauma-induced victimization and deals with the psychology of victims. In other words, the definition of victim is based on the definition of law and criminology rather than the definition of a field working on the human psyche. According to Vanheule (2017), the dominant discourse of psychiatry and diagnostic approach shares a similar defensive function of ego which selectively produces narratives and “*obfuscates the nonsensical elements, powerlessness, and discord that lie at the basis of our actual experience of the world*” (p. 68). Also, the neurogenetic explanations for diagnosis advanced by Kraepelin's followers increase trust in psychiatry's power, but they also masquerade the distinct and fundamental components that play a central role in arriving at diagnostic decisions. As indicated in the study of Baltacı (2019), this approach is "juridical-normative" and based on a power-based relationship. If we think in focus of the concept of victimization, from a juridical point of view, there is a victim and a person who caused the victimization: a

perpetrator, or an external event or situation that causes victimization. The law is there to compensate for the unbalanced power relationship between the two and is the means of overcoming this disproportion in the social order. In this context and from the definition, when victimization and victim are directly included in the field of psychotherapy, the psychotherapist is also located in a place where these power relations take place. This is a position that writes the power to cure in its own field. Thus, the therapist takes part in the therapy process as a new master in the treatment of the victim. There is an opinion that the treatments that the therapist should apply can be better determined with better diagnoses and placed on a scientific basis, but Verhaeghe (1996) argues that this is just an illusion (p.60). Taking this discussion further, he mentions that at certain moments in the therapy process, people might demand the establishment of this master discourse with words such as "you must tell me why I am suffering" in order to get away for a moment from the displeasure of self-division, and that the emergence of a diagnosis in response to this will be synonymous with "band-aid therapy", and defends that the failure of such a treatment will not change (p. 62). According to Soysal (2011) in today's society, where master discourse is increasingly common, and individuals tend to position themselves as knowledgeable conveyors of truths for others, questions often come with implied answers, limiting exploration. She critiques the diagnostic criteria in psychiatry due to ignoring subjective aspects. Anyone who believes they can and must hold this unattainable master position indefinitely will be led astray at some point in time (Verhaeghe, 1996, p.68).

According to Lacan, everyone experiences the trauma of fundamental loss and faces the impossibility of regaining what has been lost (Gessert, 2014). But rather than victimization, it is actually the only possible way of humanization and subjectivity, it is the nature of being human. When examining the dreams, fantasies, and jokes of any individual, we encounter not an idealized human but rather the inherent division of subjectivity (Vanheule, 2017, p. 138). Therefore, listening in psychotherapy is not possible with the rejection of this nature, but only possible with its subjectivation.

### **5.2.3. Discourse of the Analysis as a Key**

Hence, all of these aspects highlight an ethical dilemma. This ethics is what shapes the foundation of the clinical technique in Lacan's view. Consequently, he suggests

adopting an analytical discourse rather than assuming the role of a master as a key for this dilemma.

Deliberate non-understanding calls the clinician to the possibility of the unexpected. The core idea is that those who do not yet comprehend pay more attention to what the other person says, and therefore notice the new better. This demonstrates an ethic of respect for the other's otherness (Vanheule, 2017, p. 184). In addition, “good” that a therapist in analytical praxis has to deal specifically with is to listen well and think about what the patient says and this involves paying attention to the patient's suffering or distress without assuming what sense of distress indicates or assessing whether behaviors are appropriate or not (Vanheule, 2017, p. 135). More specifically, it should be centered around the subject's own words regarding his/her clinical structure (Homer, 2016) while relinquishing the position of knowing and enabling patients to seek out what is driving their symptoms for themselves (Salecl, 2020) rather than trying to understand and give meaning them as a therapist or master of psychopathology. This is related to the fact that ignorance, which Lacan mentions as one of the three passions, works on the analytic training, that is, repressions of things that the analyst does not want to know in himself, and can operate this as another kind of ignorance by leaving the position of having knowledge in the session (Lacan, 2006, p. 297).

### **5.3. Strengths and Limitations of the Current Study and Thoughts on Further Studies**

First of all, data was comprised mostly of the sessions of neurotic patients. The fact that the discourse of the victim is often seen in a hysterical structure, in general, may have led to the collection of data in this direction. This can be considered as a strength to study the see and show the subjective differences between people sharing similar clinical structures. However, it is also a limitation that this dominance leaves other clinical structures a bit secondarily represented in the analysis. Also, sessions conducted within the framework of the psychoanalytic approach were used as data. This could provide a good observation and evaluation area for therapists who are particularly interested in this field or who are developing themselves in this field.

Furthermore, the study was based on a critical approach to the dominant discourse in clinical psychology. With a critical view, it was powered by the language-based method, and the qualitative research methodology and Lacanian-based evaluation of the concept of victimhood that is widely discussed in mainstream psychology was presented to the literature.

Finally, the sessions were included in the analysis according to the criterion of the dominance of the victim discourse, so it was an analysis that was established in the discourse at that specific time rather than a procedural one. From this point of view, research on the reflection/impact of the differences in the techniques of therapists on victimhood in patients' talks to the next processes could be studied on a similar methodological basis. Furthermore, the construction of victimhood in talk within the framework of an existing "evil from the outside" narrative suggests the operation of mechanisms similar to paranoia. From this perspective, the assessment of victimhood in the context of paranoid psychosis could be a subject for future studies. In addition, nowadays, we see that an increasing number of psychopathological diagnoses are becoming more and more common in everyday life. Because a way of what people desire is blocked from the beginning, it takes place in life as a question that is answered without being asked. Studying the way people relate to this discourse in relation to the new psychic economies suggested by Charles Melman may also be useful for current studies.

#### **5.4. Conclusion**

To conclude, in the dominant discourse in psychology, victimhood emerges as a consequence of the trauma-pathology relationship. However, from a psychoanalytic perspective, trauma is an ontological starting point unique to humanity, and victimhood holds distinct functions in various clinical structures depending on how it is constructed in language. In fact, it could be argued that the way victimhood is addressed within the dominant discourse and the activation of compensatory mechanisms might have an influential role in paving the way for the even more frequent utilization of this. Exploring these functions and to study on them is only possible when it is evaluated on a subjective basis. When the results obtained from

the analysis of the data are evaluated, it can be said that within the context of a psychotherapy process, the construction of victimhood in the patient's speech emerges as resistance in neurotic and perverse structures, whereas for the psychotic structure, it could be found as an imaginary support that might prevent the dissolution of the structure. Therefore, the existence of victimhood in language, much like any other symptom, suffering or complaint, will shape the course of psychoanalytic practice, primarily after a structural differentiation is made, or rather, depending on the possibility of a psychotic structure. For the neurotic structure, it can be stated that moving beyond the victim discourse and assuming subjective responsibility might initiate an analytical process. In the case of the perverse structure, an analytic inquiry is likely to commence after the interruption of the paradoxical relationship with rules and laws established through the victim position. In other words, while the victim discourse should be considered as an issue of desire for the neurotic and the perverse structures, it could be perceived in relation to demand in the context of the psychotic structure, apart from desire.

Additionally, the conjunction of the victim discourse, especially with the hysterical discourse in neurotics, should be considered, and the distinction between this and the individual's becoming hysterical should be well anticipated. This is because hysterization, especially when considering the obsessive structure where demand is already challenging to articulate, becomes one of the significant steps for the progression of the analytic process to take place. At this juncture, what is done through hysterization and how the relationship is established become fundamentally determinants of the direction the process will take. Hysterization pertains to the emergence of a demand, whereas what is done with this demand is related to the therapist's positioning and the discourse they engage in. The master's discourse, blocking and pseudo-satisfying the demand, which often results in an unsatisfactory response, can push the individual further away from their desire. Through the analytical discourse, however, the fundamental relationship the person has with their desire is set in motion, the basic fantasy is explored, and the possibility of giving birth to a new relationship is worked on by traversing the fantasy, which is a form of the relationship established with desire. Once again, we return to the most fundamental point: this is only possible through the subjectivization of this position,



framing another kind of relationship within the context of being an analyst, sacrificing the pleasure of being in the position of the one who knows, i.e., through castration. Therefore, there is no analyst who has not undergone castration in the relationship they establish with their truth within the analytic discourse. The path to attaining this is primarily by relinquishing the pursuit of becoming a master and instead following the desire by letting go of the goal of reaching an ideal.

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## APPENDICES

### A. INFORMED CONSENT FORM

 <p>ODTÜ Psikoloji Bölümü AYNA Klinik Psikoloji Destek Ünitesi</p>			
<p><b>AYNA Klinik Psikoloji Destek Ünitesi</b></p>			
<p><b>Bilgi Paylaşımı Mutabakat Formu</b></p>			
<p>AYNA Klinik Psikoloji Destek Ünitesi'nde yapılan görüşmelerde elde edilen bilgiler ünite içinde ve dışında eğitim amacıyla gizlilik ilkesi koşullarına uyarak kullanılabilir. Lütfen aşağıdaki eğitim amaçlı bilgi kullanabilme koşullarını okuyunuz ve bu koşulları onaylıyorsanız, isim ve tarih belirterek formu imzalayınız.</p>			
<p><b>Ünite-içi bilgi kullanımı:</b> AYNA Klinik Psikoloji Destek Ünitesi'nde yapılan görüşmelerde elde edilen bilgiler ünite personeli tarafından ünite-içi eğitim faaliyetlerinde (örn; vaka toplantılarında) kullanılabilir.</p>			
<p><b>Ünite-dışı bilgi kullanımı:</b> AYNA Klinik Psikoloji Destek Ünitesi'nde yapılan görüşmelerde elde edilen bilgiler Ünite öğretim üyeleri tarafından ünite-dışı eğitim faaliyetlerinde (örn; derslerde ve/veya bilimsel yayınlarda) bilgi kaynağı (isim, adres, kurum) gizli kalmak kaydıyla kullanılabilir.</p>			
<p><b>Yukarıdaki koşulları okudum ve onaylıyorum.</b></p>			
<table><tr><td>Tarih</td><td>İsim</td><td>İmza</td></tr></table>	Tarih	İsim	İmza
Tarih	İsim	İmza	

## B. APPROVAL OF THE HUMAN SUBJECTS ETHICS COMMITTEE

UYGULAMALI ETİK ARAŞTIRMA MERKEZİ  
APPLIED ETHICS RESEARCH CENTER



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27 Ekim 2020

Konu: Değerlendirme Sonucu

Gönderen: ODTÜ İnsan Araştırmaları Etik Kurulu (İAEK)

İlgi: İnsan Araştırmaları Etik Kurulu Başvurusu

Sayın Prof.Dr. Faruk GENÇÖZ

Danışmanlığını yaptığınız **Aylin ÖZKAN**'ın "*Victimization Discourse in Psychotherapy Sessions: A Qualitative Examination Through Lacanian Discourse Analysis Perspective (Psikoterapi Seanslarında Mağduriyet Söylemi: Lacanyen Söylem Analizi Aracılığında Nitel Bir İnceleme)*" başlıklı araştırması İnsan Araştırmaları Etik Kurulu tarafından uygun görülmüş ve 279-ODTU-2020 protokol numarası ile onaylanmıştır.

Saygılarımızla bilgilerinize sunarız.

Prof.Dr. Mine MISIRLISOY  
İAEK Başkanı

## C. CURRICULUM VITAE

### *Personal Information*

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AYLİN ÖZKAN

### *Education*

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**Middle East Technical University (METU), Ankara, Turkey**

October 2023

**Doctor of Philosophy (Ph.D). in Clinical Psychology, Graduate School of Social Sciences**

**Middle East Technical University (METU), Ankara, Turkey**

June 2016

**Bachelor of Science in Psychology, Faculty of Arts and Sciences**

High Honours Degree

### *Work Experience*

---

***Freud Lacan Psychoanalysis Association, Ankara, Turkey***

Supervisory Board Member, March, 2021-present

***AYNA Clinical Psychology Peer-Reviewed Journal (AYNA Klinik Psikoloji Dergisi)***

Editorial Board Member, February, 2021- March, 2021

Journal Reviewer, December, 2019-present

***Freud Lacan Psychoanalysis Association, Ankara, Turkey***

Psychoanalyst, 2020- present

***Zonguldak Bülent Ecevit University, Psychology Department***

Research Assistant, October, 2017-August, 2022



### *Educational Field Practice*

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#### *Psychotherapist*

2016-2019

Ayna Clinical Psychology Unit, METU, Ankara

#### *Supervisor*

2019-2023

Ayna Clinical Psychology Unit, METU, Ankara

#### *Intern Psychologist*

2015, Summer

Atatürk Training and Research Hospital, Ankara

### *Teaching Experience*

---

**Introduction to Psychology I & II**, 2018-2022, Teaching Assistant & Lecturer

**Carrier Planning (in Psychology)**, 2020-2022, Teaching Assistant & Lecturer

**Final Project II**, Assist. Prof. Elçin Gündoğdu Aktürk (2022, Spring), Teaching Assistant

### *Publications*

---

**Özkan, A.** ve Baltacı, S. (2020). Freud ve Lacan'ın psikanalitik kuramlarında yastan ayrılan melankolik özne. *Psikoloji Çalışmaları - Studies in Psychology*, 40(2): 317–333.

<https://doi.org/10.26650/SP2019-0056>

**Özkan, A.** (2020). Lacanyen yaklaşımda yeni ruhsal yapılanmalar ve vaka tartışması. *AYNA Klinik Psikoloji Dergisi*, 7 (3). <https://doi.org/10.31682/ayna.683214>

Gagua, N., **Özkan, A.**, Aydoğ, S. ve Gençöz, F. (2019). Türkiye'de psikoterapistlerin yaklaşımlarının belirlenmesi: Lacan'ın söylemleri çerçevesinde değerlendirme. In T. Gençöz, (Ed.), *Lacanyen Psikanaliz*. 1. Baskı. Ankara: Türkiye Klinikleri

## *Presentations*

---

Bilik, M. Z. & **Özkan, A.** (2023, April). Psikoz ve Schreber Olgusu. *Psikanalize Giriş Seminerleri 2023* (Zoom).

Erten, İ. & **Özkan, A.** (2022, Noverber). Günlük Yaşamın Psikopatolojisi. *Psikanalize Giriş Seminerleri 2022-2023*, Freud - Lacan Psikanaliz Derneği, (Zoom).

Özkul, K. & **Özkan, A.** (2022, January). Yeni Ruhsal Yapılanmalar. *Psikanalize Giriş Seminerleri 2021-2022*, Freud - Lacan Psikanaliz Derneği, (Zoom).

**Özkan, A.** (2021, December). Psikanalitik Dinleme. *Klinik Psikoloji ve Danışmanlık*. Zonguldak, Turkey.

Can, D. & **Özkan, A.** (2021, April). Psikanalitik Eylem ve Etik. *Psikanalize Giriş Seminerleri 2020-2021*, Freud - Lacan Psikanaliz Derneği, (Zoom).

**Özkan, A.** & Bulut, B. P.. (2020, September). Psikoz ve Schreber Olgusu. *Psikanalize Giriş Seminerleri 2020 Bahar*, Freud - Lacan Psikanaliz Derneği, (Zoom).

**Özkan, A.** & Bulut, B. P.. (2020, March). Psikoz ve Schreber Olgusu. *Psikanalize Giriş Seminerleri 2020 Bahar*, Freud - Lacan Psikanaliz Derneği, (Zoom).

**Özkan, A.** & Gürsel, M. D. (2019, October). Yeni Ruhsal Yapılanmalar. *Psikanalize Giriş Seminerleri 2019 Güz*, Freud - Lacan Psikanaliz Derneği, Ankara, Turkey.

**Özkan, A.**, Özkul, G., Saklı, Y. & Uçar, S. (2019, July). Psikanalizde Bilinçdışı. *23. Ulusal Psikoloji Öğrencileri Kongresi (UPOK 23)*, METU, Ankara, Turkey.

**Özkan, A.** & Gençöz, F. (2019, March). *Çalınmış Mektup (Purloined Letter)*. *Psikanalize Giriş Seminerleri 2019 Bahar*, Freud - Lacan Psikanaliz Derneği, Ankara, Turkey.

**Languages:** Turkish (Native), English (Advanced), French (Beginner)

## D. TÜRKÇE ÖZET / TURKISH SUMMARY

### BÖLÜM 1

#### 1.1. Genel Bakış ve Araştırma Zemini

Bu tez, psikoterapi seanslarında hastaların konuşmalarında inşa olan mağdurluğun nitel olarak incelenmesi üzerine kurulmuştur. Sosyal inşacı ve söylemsel bakış açılarına dayanan bu araştırmada, konuşmada mağdurluğun inşası ve bu inşanın fonksiyonu ve seanslara etkisi analiz edilmiş, sonuçlar Psikanalitik klinik çerçevesinde değerlendirilmiştir.

Birinci bölüm, mevcut literatürün mağdurluk/mağduriyet üzerine incelenmesini, güncel araştırmanın gerekçesini ve araştırma amaçlarını içeren genel bir giriş sunmaktadır. İkinci bölüm, Freud ve Lacan'ın perspektiflerinden Psikanalitik teorik zemini içermektedir. Üçüncü bölüm, araştırmanın metodolojik zeminini ve kullanılan yöntemi açıklamaktadır. Dördüncü bölüm analiz edilen sonuçları ve beşinci bölüm sonuçlar üzerine tartışma ve değerlendirmeyi içermektedir.

#### 1.1.1. Mağdur, Mağduriyet, Mağdurluk

Kökenini Latince'deki *victima* kavramından alan *victim*, Türkçe'de mağdur kelimesine denk düşer. *Mağdur*, etimolojik olarak incelendiğinde “zulüm, haksızlık, zorbalık” anlamlarını içeren Arapça *gdr* kökenli bir sözcük olan *gadr*'a dayanmaktadır (Nişanyan Sözlük, t.y.; EtimolojiTürkçe, t.y.). *Mağdur* kelimesinin yerine kullanılabilen *kurban* ise, dini çağrışımlar barındırmakla beraber kefarete için feda edilen masum varlık anlamına gelmektedir (Baş-Bayraktaroğlu, 2020). *Mağdur etme (victimize)*, birine ırk, cinsiyet, inanç vb. özellikleri nedeniyle kasıtlı olarak haksız şekilde davranmak anlamına gelirken *mağduriyet (victimization)* bu süreci/eylemi

ifade eder ve *mağdurluk (victimhood)* ise kişinin mağdur olma durumunu anlatır (Cambridge Sözlük, t.y.).

Özetle, mağduriyet/mağdurluk, *haksızlık, masumiyet, fedakarlık, çaresizlik ve pasiflik* çağrışımlarına sahiptir. *Konuşmada mağdurluğun inşasının* çalışıldığı güncel araştırmada, bahsi geçen çağrışımların izi sürülmüş ve deneyimlenen durumun gerçekliğinden ziyade hastaların konuşmalarında inşa olan konuma odaklanıldığından *mağduriyet* yerine *mağdurluk* teriminin kullanılması tercih edilmiştir.

### 1.1.2. Genel Literatür

Mağduriyeti daha iyi anlamak, nedenlerini araştırmak, etkilerini incelemek ve mağdurların deneyimlerini ayrıntılı olarak ele almak amacıyla çeşitli akademik disiplinlerce çalışmalar yapılmaktadır. Hukuki açıdan, bir suçun varlığı ve etkileri düşünüldüğünde, gerçek ve kurgu olan arasında ayırım yapılması büyük önem taşır (Peace vd., 2012) ve fail ile mağdurun belirlenmesi de kritiktir. Dolayısıyla, gerçeklikte karşılığı olan durumlar/olaylar üzerine çalışmalar yapılır ve mağdurlara adalet, koruma ve çözüm sağlama amaçları mevcuttur. Tüm bunlara ek olarak, toplumsal sorunlar üzerine çalışan araştırmacılar mağduriyeti; ayrımcılık, ırkçılık, cinsiyet eşitsizliği ve toplumsal adalet ve benzeri konular temelinde ele alarak eşitsizliğin anlaşılması, adaletin geliştirilmesi ve toplumsal değişim hareketlerinin başlatılması gibi noktalarında yardımcı olabilmektedir.

Ayrıca, mağduriyetin söylemsel olarak incelendiği ve farklı bakış açılarıyla değerlendirildiği, mağdurların deneyimlerini ve/veya anlatımlarının incelendiği, mağduriyetin toplumsal söylemdeki inşasına ve konumuna odaklanan, toplumun mağduriyeti nasıl tanımladığını, şekillendirdiğini ve algıladığını tartışan çalışmalar da yapılmaktadır (bkz. Yılmaz, 2017; Yıldız & Verkuyten, 2011). Mağdur/mağduriyet/mağdurluğa ilişkin yasal, politik söylemlerin veya sosyal medya söylemlerinin, bu söylemlerde mağdur olarak tanımlanan bireyler üzerindeki etkisini anlamayı hedefleyen çalışmalar da mevcuttur (Leisenring, 2006; Persson, 2014). Bu çalışmaların sonuçları bireyin anlatısının ve deneyiminin çalışıldığı alanlarda,

mağduriyet üzerine yasal, politik söylemlerin ve medya söylemlerinin her zaman mağdurların kendi bireysel deneyimleri ve anlatılarına denk düşmeyebileceği, mağdurların bu söylemler ve kendi deneyimleri arasındaki uyumsuzluklardan kaynaklı karmaşa yaşayabilecekleri ihtimalinin değerlendirilmesinin önemli olduğu şeklinde yorumlanabilir.

### **1.1.3. Psikoloji Literatüründe Mağduriyet/Mağdurluk**

Psikoloji literatüründe, mağduriyetin/mağdurluğun psikolojik ve sosyal yönlerine odaklanılmakta, mağduriyetin mağdurların psikolojilerine etkileri, mağdurların yardım arama davranışları, tekrarlayan mağduriyet, sosyal destek kaynakları gibi konular üzerine çalışılmakta, mağduriyete sebep olan farklı olaylara (örn. cinsel istismar, terör saldırıları, akran zorbalığı, sanal zorbalık, yakın partner şiddeti) yoğunlaşmaktadır. Bu kapsamda, Psikoloji alanında mağduriyetin, genel olarak suçlular ile mağdurlar arasındaki hukuki ayrımın yapılabildiği, çoğunlukla gerçek yaşantılara dayanan durumlarda incelendiği dikkat çekmektedir. Klinik Psikoloji alanında ise, mağduriyetin travma ekseninde ele alındığı, mağduriyet hakkında literatürün ve baskın söylemin bu ekseninde şekillendiği gözlemlenmektedir. Travma, Mental Bozuklukların Tanısal ve İstatiksel El Kitabı (DSM)'de Travma Sonrası Stres Bozukluğu (TSSB) tanısı ile yer almakta ve ilgili literatürde TSSB-mağduriyet ilişkisine odaklanan çok sayıda çalışma bulunmaktadır. Dolayısıyla, TSSB'yi merkeze alarak gerçekleştirilen DSM odaklı araştırmaların yoğunluğu üzerine, literatürün pozitivist epistemoloji ve realist ontolojiye dayanan Kraepelin'in Tanılama Modeli çerçevesinde şekillendiği söylenebilir (Baltacı, 2019). Öte yandan, sosyal inşacı bir bakışla rölativist bir ontolojiye dayanan, konuşmadaki mağduriyete/mağdurluğa odaklanan nitel araştırmalar da mevcut olmakla beraber bu tip çalışmalar sayıca oldukça azdır.

## **1.2. Çalışmanın Rasyoneli, Amacı ve Sorular**

Özetle, Psikoloji literatürü mağduriyet/mağdurluk konusunda çok sayıda çalışma barındırmakla beraber özellikle klinik psikoloji alanında bu tür çalışmalar gerçeklikte yaşanan olay ile sınırlanmış görünmektedir. Buna ek olarak, mağduriyet/mağdurluk,

travma ve psikopatoloji iliřkisi çerçevesinde çalışılmaktadır. Psikoterapi içinde hastaların konuşmalarındaki mağduriyet/mağdurluk ise yeterince çalışılmamış bir konu olarak varlığını sürdürmektedir. Bu konunun, klinik psikoloji literatüründe dilbilimsel odaklı nitel araştırma yöntemleri kullanılarak kapsamlı bir şekilde incelenmeye ihtiyacı dolayısı ile güncel araştırma planlanmıştır. Çalışmanın amacı, gerçek bir mağdurluğun varlığına/yokluğuna bakılmaksızın hastaların psikoterapi seansları sırasında konuşmalarında inşa olan mağdurluğu incelemek ve bunun psikoterapi sürecine etkilerini arařtırmaktır.

Sorular:

- Hastalar psikoterapi seansları sırasında mağdurluğu konuşmalarında nasıl inşa eder?
- Konuşmada inşa olan mağdurluk psikoterapi sürecinde ne üretir?

## BÖLÜM 2

### TEORİK ZEMİN

#### 2.1. Freud: Travmadan Düşleme

Freud, fizyoloji alanındaki eğitiminin ardından Breuer ve Charcot ile yollarının kesişmesiyle döneminde fazlaca görülen histeri ve histeri vakalarında o dönem sıklıkla kullanılmakta olan tedavi yöntemi hipnozla ilgilenmeye başlar (Quinodoz, 2015). O dönem, nöropatolojik olarak ele alınan, birçok somatik semptom, fonksiyon kayıpları, dönüştürülmüş semptomlarla tanınan ve tanımlanan histeri vakalarına uygulanan hipnoz ve katarsis yöntemi, daha sonraları Freud'un farklı bir yaklaşım ve tedavi metodu geliştirme girişimleri doğrultusunda Psikanalitik yaklaşımı sistematik olarak geliştirmesine temel oluşturmuştur (Rudinesco, 2016).

Freud, başlangıçta histeriyi bastırılmış travmatik deneyimlerle ilişkilendirmiştir. Breuer ile beraber kaleme aldıkları *Histeri Üzerine Çalışmalar (1895/2001)*'da histerik semptomların *unutulmuş travmatik deneyimlerden* kaynaklandığını savunmuştur. Freud, bahsi geçen travmanın örneğin bir istismar deneyiminin gerçek olduğunu düşünmekteydi (Melman, 2022) fakat daha sonra, histeri vakaları ile klinik çalışmaları devam ettikçe bu bastırılmış travmatik deneyimin ancak onu hatırlatacak başka bir unsurla sonradan tetiklendiğinde travmatik bir etkiye sebep olarak semptom ürettiğini gözlemlemiştir ve bunu *ertelenmiş eylem* (deferred action/ Nachträglichkeit) olarak nitelendirerek gündemine almıştır (Haute & Geykens, 2012)

Ardından devam eden çalışmalarıyla Freud, düşlemlerin önemine dair bir noktayı kavrayışıyla ilk etapta ortaya attığı baştan çıkarma teorisini (seduction theory) gözden geçirmiştir. Devamında ise histerik bir semptomun gelişiminde travmatik bir deneyimin her zaman zorunlu olmadığını, gerçek anılardan ziyade düşlemlerin

(fantasy) de bu tür semptomların ortaya çıkmasında etkili olabileceğini belirtmiştir. Moncayo (2021)'ya göre Freud, düşlemlerin ruhsal işleyişte ve nevrotik semptomların gelişiminde çok büyük bir öneme sahip olduğunu düşünmektedir. Bu yön değiştirme, Freud'un en nihayetinde kendi baştan çıkarma teorisini terk ettiğini açıkça Fliess'e yazdığı 21 Eylül 1897 tarihli mektubunda açıkça ifade etmiştir (Freud, 1887-1904/1985). Bu değişim nihayetinde düşlemlere de gerçeklikte deneyimlenen herhangi bir durum olarak yaklaşılabilmesi, semptom üretimi açısından özellikle başlangıçta *düşlem ve gerçeklik arasında bir ayrımın gözetilmesinin* gerekli olmadığı (Quinodoz, 2005) düşüncesiyle sonuçlanmıştır. Freud'un düşünme yaptığı vurguyu okurken gerçeklikte yaşananın önemsiz olduğunu söylemediğine; psikolojik alanda etkin olan dış faktörlerin yanı sıra içsel mekanizmaların da önemine vurgu yaptığına, nevrozların oluşumunda düşlemin de deneyimlerle denk derecede önemli bir rol oynadığını vurguladığına dikkat etmek önemlidir. Bu çerçevede, Freud'un bakış açısının, dış dünyadan gelen travmatik olayları doğrudan psikopatolojiyle ilişkilendiren bakış açısına eleştirel bir konumda olduğu açıktır. Bu örnekten yola çıkarak Psikanalitik yaklaşımın insanın ruhsal mekanizmasına ilişkin baskın söylemdekinden farklı bir anlayışa sahip olduğu sonucuna varılabilir.

## **2.2. Lacan: Freud'a Dönüş**

Jacques Lacan, Freud'un teorilerini kendine has bir biçimde bu teorileri yeniden okuyarak yorumlamıştır. Samuel (1993) Lacan'ın psikanalizin evrimini üç ayrı bölüm halinde gördüğünü söylemektedir: ilki "Freud'un psikanalizi ilk keşfi", ikincisi "Ego Psikolojisi tarafından Freud'un düşüncelerinin bastırılması" ve sonuncusu Lacan'ın "Freud'a yeniden dönüşü". Vanheule (2017) Lacan'ın bakış açısının, Ego Psikolojisi perspektifinden ve Nesne İlişkileri teorisinden Freud'un çalışmalarını yorumlama biçimleriyle ve yapısal modeli topografik model yerine tercih etmeleri dolayısıyla farklılaştığını söylemektedir. Lacan Psikanalitik perspektife dilbilimsel kavramları (Homer, 2016) ve topolojiyi dahil etmiş, ayrıca Freud'un çalışmalarının halihazırda dilbilimi vurguladığını çünkü zaten bu teorilerin temellendiği yer olan kliniğinin analizanların serbest çağrışımına, diğer bir ifadeyle divandaki konuşmalarına ve sözel ifadelerine dayandığını savunmuştur (Vanheule, 2017). Raggland ve Milovanovic (2004) Lacan'ın topoloji kullanımının, insanın



zihinsel yaşamındaki (görünüşte çelişkili) paradoksların işleyişini anlatmak için oldukça kullanışlı olduğunu ve bu sayede Lacan'ın, karmaşık ve doğrusal olmayan insan özneliliğinin karakterini gösterebildiğini düşünmektedir.

### 2.2.1. Düşlemeden Gerçeğe

Lacan, Freud'un düşleme ilişkin düşüncelerine önem vermekle beraber imgesel yönünü merkeze alan Freud sonrası psikanalistleri eleştirmektedir. Bu eleştirinin mantığını anlamak, Lacan'ın *Borromean Düğümü* ile anlattığı üç düzene yakından bakmakla mümkündür: *İmgesel, Simgesel ve Gerçek*. Lacan özne yapılanmasını topolojik olarak, hiçbir iki halkanın doğrudan birbirine bağlanmadığı; üçüncü bir halkanın iki halkayı bir arada tuttuğu, halkalardan herhangi birinin kesilmesi ile diğer ikisinin de çözümlenerek birbirinden ayrılacağı Borromean Düğümü ile göstermektedir ve halkalar İmgesel, Gerçek ve Simgesel'in gösterimidir (Lacan, 1972-1973/1999).

İmgesel, “*imgeler, hayal gücü, aldatma ve yanılsama*” dünyasının hakim olduğu bir alandır (Knockaert vd., 2004). Kişinin aynada gördüğü ve kendi olarak tanıdığı yansımayla özdeşleşmesiyle gerçekleşen egonun kurulumu (Evans, 2006), imgesel düzenin temel taşıdır ve Lacan (1949/2005) bunu Ayna Evresi olarak adlandırdığı bir süreçle açıklar. Bebek, aynadan yansıyan imaj aracılığıyla bütünleşmiş varlık deneyimi yaşar, bir tamamlanma ve zevk hissi yaşar. Bu bebeğin, yeterli motor yetenekleri henüz gelişmemişken nihayet bedenine hakim olduğu yanılsamasını içinde barındırır ve dolayısıyla imajın benlikle iç içe geçmesi, yabancılaştırıcı bir özdeşleşme ile gerçekleşmektedir. Dolayısıyla ego bir yanlış tanıma yoluyla, parçalanma ve yabancılaşmayı kabul etmeyi reddederek işleyişini sürdürür. Lacan, Ego Psikolojisinin egoyu, bilinçdışı süreçlerin üzerinde önceliklendirme ve özneye eşitleme istekliliğini eleştirerek (Homer, 2016) egodan farklı bir öznenin varlığından, bilinçdışı öznenin söz eder (Schneiderman, 1980).

Simgesel, dil alanıdır; gösteren ise dilin simgesel boyutudur (Knockaert vd., 2004). Annesinden farklı ve ayrı olduğunun farkına varması sayesinde, bebek daha sonra amansız bir bütünlük arayışıyla motive olur ancak belirli bir noktada bu arayış uğruna kaçınılmaz olarak dili kullanması gerekir (Lacan, 1953/2006). Bu arayış

bebeği nihayetinde ses çıkarmaya, bağırma, dış dünyaya ağlamaya zorlar. Bu çığlığın yönlendirildiği ve ulaştığı yerde, başka bir insan, yani yetişkin, bebeğin ağlamasını dil aracılığıyla yorumlayarak bebeği bir dilin öznesi olarak belirler, toplumsal bağın içinde konumlanmasının yolunu açar. Böylelikle beslenme gibi temel ihtiyaçlar dilin sınırlarıyla retrospektif olarak belirlenmektedir. Bu sebeple Lacan, bilinçdışını Başka'nın söylemi olarak tanımlarken dili de Başka olarak tanımlamıştır (Homer, 2016; Dor, 1998; Lacan, 1961-1962/2010). Özetle Simgesel; çocuğun hayal dünyasını dil yoluyla yapılandırır, algısını ve çevresindeki dünyaya dair anlayışını şekillendirir, imgesel üzerinde kurucu bir güce sahiptir. Ayna Evresi aracılığıyla beden ve dil arasında bölünmüş öznenin (\$) temelleri atılır (Verhaeghe, 2008); Özne, hem imgesel hem de simgesel öğeler aracılığıyla bilinçdışının öznesi olarak ortaya çıkar.

Fink (1996) yabancılaşmayı, ayrışmanın takip ettiğini söyler. Annenin arzusunun\* göstereni olan Baba-nın-Adı'nın devreye girmesiyle ilerleyen ayrışma süreci bebeğin kendi yokluğunu annenin/ilk Başka'nın eksigi ile aynı hizaya getirme girişimini bozar, bebekle anne arasında bir boşluk yaratır ve bebeğin kendi öznelliğini kurmasına olanak tanır. Bebek, simgeselin yardımıyla Baba-nın-Adı'nın temsil ettiği, toplumun yasa ve normlarını da içselleştirir. Dolayısıyla bebek simgesel düzen vasıtasıyla kendi konumu ve öznelliğini inşa edebilir. Bu süreç bebeğin gelişimi ve arzu kuruluşunu açısından oldukça önemlidir (Fink, 1996).

Gerçek ise simgeselin, dil yoluyla kavramsallaştırmanın ve ifade etmenin ötesinde ve imkânsızlıkla karakterize olmuştur (Lacan, 1974-1975, Knockaert vd., 2004). Gerçek, materyal bir şey/nesne veya gerçekliğin kendisi değildir, simgeselin sınırları içinde bilinemez olandır. Dolayısıyla Gerçek, Simgesel ve İmgeselden ayrı üç düzenden biridir. Söylemin hemen dışında olmaktan ziyade “içsel olarak dışlanmıştır”, konuşmayı şekillendirir ve yönlendirir (Greenshield, 2017).

### **2.2.2. Lacanyen Yaklaşımda Travma**

Raggländ (1995) “*Dilin, varlığın ve bedenin kalbinde elle tutulur bir boşluk yattığını*”, travmatik unsurun yapının kendisine içkin kurucu bir boşluk olduğunu

belirtir. Yapıdaki *bütün halinde bir olmanın* eksikliği ve boşluk (trou) nedeniyle özne, İmgesel, Simgesel ve Gerçeğin kaçınılmaz kurucu çelişkileriyle bir travma mekânına düşmek zorundadır. Travma insanlığın organik bir travmasıdır, insan varlığının derinlerine kök salmış, insan olmanın temel ve doğal bir yönüdür. Lacan 21. seminerinde bu yapılanma boşluğuna ve bunun travmayla olan ilişkisine bir kelime oyunuyla değinir: troumatizm (Lacan,1973-1974). Homer (2016) travmanın, bireyin anlayamadığı ve üstesinden gelemediği uyarılarla yüzleşmesi sonucu beliren psikolojik rahatsızlıklarla ilgili olduğunu ileri sürmektedir. Travma, acıyı ve ıstırabı dile dökememe ya da simgesel olarak tam özümseyememeye ilişkindir (Homer, 2016).

Özetle Lacanyen bakışa göre travma, günlük gerçeklikten ayrı olan Gerçek ile ilişkilidir ve insan varoluşundaki temel boşluktan, öznenin yapısındaki eksiklikten kaynaklanan insanın içsel bir yönü olarak görülür. Bu nedenle, travma sadece dışsal olaylardan kaynaklanmaz, aynı zamanda öznenin bu olaylara verdiği tepkiyle yakından ilişkilidir ve bu olayları tam olarak ifade edememe veya sembolik düzene entegre edememe doğal yetisizliğinden kaynaklanır. Psikanalizde amaç ise Gerçeğin her yönünü kapsamlı bir şekilde simgeselleştirmek değil, potansiyel olarak travmatik parçalara odaklanmaktır (Homer, 2016). Psikanalistin müdahalesi, analizanın travmatik olanla ilişkili göstereni konuşmasına yardımcı olabilir, bunun diyalektizasyonunun yolunu açar ve onu söylem içinde harekete geçirir (Fink, 1996).

### **2.2.3. Lacanyen Perspektiften Tanısal Yaklaşımın Eleştirileri**

DSM-IV ve DSM-IV-R’te travma ve travma ile ilişkili bozuklukların tanımında daha fazla ayrıntı sağlanmasına odaklanılmış (Çolak vd., 2010); DSM-V’te ise TSSB'nin kapsamı ve tanımında önemli bir genişleme yapılarak “Travma ve Stres Kaynaklı Bozukluklar” isimli yeni bir kategori oluşturulmuştur (Amerikan Psikiyatri Birliği, 2013). Bistoen vd. (2014) bu tanısal tanımın çeşitli ancak sınırlı sayıda travmatik olayla bağlantılı spesifik bir klinik sendromla ilişkili varsayıldığını savunur. DSM stres etkenleri için özel gereklilikler belirleyerek bir olayın “travmatik” olarak sınıflandırılmasını belirlemek için kısıtlayıcı bir yaklaşım benimsemektedir. Halbuki kritik nokta, orijinal olayın gerçek doğası değil, deneyimin bireyin ruhunu nasıl

etkilediğidir. Ampirik çalışmalar da travmanın bireyin tepkisiyle bağlantılı olduğu iddiasını destekleyen sonuçlar sunmaktadır (Bistoën vd., 2014).

Moncayo (2008), her TSSB vakasının bir travma geçmişine dayandığını ancak her travmatik deneyimin otomatik olarak TSSB ile sonuçlanmadığını savunur. TSSB'nin gelişimi, travmanın kendisiyle bilinçdışı düşlemler ve gelişimin belirli aşamaları arasındaki etkileşimi gerektirir (Moncayo, 2008).

Wright (2020), travma teriminin 20. yüzyılın ortalarından bu yana ciddi bir ilgi topladığını ve bu ilginin "Travma Çalışmaları" olarak bilinen disiplinin ortaya çıkışına etkisi olduğunu, terimin doğasındaki belirsizliğe rağmen, travma söyleminin etkili bir şekilde yayıldığını, daha büyük neoliberal gündemlerle uyumlu belirli değerlerin ve uygulamaların harekete geçmesini tetiklediğini vurgular. Aynı zamanda, travma teriminin, tazminat arama kültürü içinde mağduriyet ve mağdur hakları fikriyle ilişkilendirilerek sonunda insan haklarının jeopolitik alanına karıştığını savunur. Ayrıca, TSSB tanısı bağlamında tek taraflı bir neden-sonuç kavramsallaştırmasının, Freud'un psikanaliz teorisini geliştirmeden önceki daha sonra terk ettiği erken dönem teorisiyle benzer olduğunu ve bunun erken dönem Freud'un eksik ve yanıltıcı bir okumasının sonucu olduğunu düşünmektedir. Bu perspektiften bakıldığında Wright, TSSB'ye yönelik müdahalelerin acıyı bir dereceye kadar hafifletebileceğini ancak tartışmasız şekilde kişileri az ya da çok pasif kurban durumuna düşürdüğünü, Lacanyen bakış açısının bu durumdan farklılaşan bir klinik pratiğe olanak sağladığını öne sürmektedir.

#### **2.2.4. Düşlemi Kat Etme ve Psikanalitik Klinik**

Lacanyen teori Gerçek ile gerçeklik arasında bir ayırmadan söz eder. Travmayla ilişkilendirilen Gerçek, varlığın bilinemeyen ama mevcut yönünü temsil eder. Lacan, 1967'de "*Düşlem, her birimiz için gerçekliğe açılan pencерemizi oluşturur*" ifadesini kullanır (akt. Fink, 2007). Düşlem, kastrasyonun derin travmatik etkisiyle bağlantılı temel eksikliği öznenin gizleyerek, *orijinal travmaya bir çözüm işlevi* görür (Knockaert vd., 2004). Aynı zamanda, toplumsal gerçekliği inşa ederek özneyi dil ve kültürle kaynaştırma işlevi görür (Homer, 2016).

Her klinik yapı, Başka'daki eksikliği kapatmak için bir düşünme senaryosu kullanır. Grigg (1989), nevroz ve psikoz vakalarında hoşnutsuzluğun yerine öznenin isteklerine daha uygun ve daha kabul edilebilir bir gerçeklik koyma eğilimi olmasına rağmen, patolojik olmayan bir öznenin de içsel ve dışsal eksiklikleri örten düşlemleri olduğundan söz eder. Düşlem, arzu ile Gerçek ilişkisinde aracılık rolünü üstlenir, böylece arzuyu yapılandırma ve organize etme süreçlerini üstlenir ve öznenin arzularını Başka ile ilişkilendirmesi açısından önem taşımaktadır (Sharp & Turner, 2020).

Lacan daha sonraki yazılarında arzuyu ve hazzı sürdürmek için uzlaşmacı bir oluşum olarak hizmet eden temel bir düşünmenin varlığından söz eder (Sharpe & Turner, 2020). Dil temelli toplumsallığa girmenin ve Simgesel içindeki cinsiyetlenmiş kimlikleri benimsemenin zorlukları nedeniyle bireylerin temel düşlemleri yapısal benzerlikler taşımaktadır. Oedipus kompleksinin çözümü sırasında bireyler, ensest yasağını simgeleyen Baba-nın-Adı ile özdeşleşmeye teşvik edilir. Bunun öncesinde çocuğun dileği fallus ya da annenin doyum nesnesi olma etrafında dönmekteyken nihayetinde bu Odipal öncesi özlemden vazgeçilmesi gerekir.

Lacanyen bakış, kastrasyonu doğrudan penisle ilişkili olarak değil, salt hazzın ötesine geçen ve acı ile hazzı bir arada ima eden Simgesel bir keyif kaybı ya da yokluğu olarak görür. Eksikliğin farkına varılması, bireyin kültür ve ortak anlam alanına girmesi açısından çok önemlidir. Bireyin temel düşünmesi, simgesel kastrasyon olarak adlandırılan bu travmatik kayıp veya eksiklikle uzlaşmada önemli bir rol oynar (Sharpe & Turner, 2020). Düşlem burada Gerçeğin günlük yaşama müdahalesine bir savunma göreviyle gerçeklik içinde destekleyici bir unsur olarak vardır (Homer, 2016).

Psikanalizde, temel düşünme üzerinde çalışılır ve bu düşünme psikanaliz aracılığıyla yeniden şekillendirilir. Bu süreç, temel düşünmenin ortadan kaldırılmasını değil daha tolere edilebilir, değiştirilmiş bir versiyonun ortaya çıkarılmasını kapsar. Psikanalitik süreç, analizanın düşünmesini yeniden yapılandırmayı, onu kat etmeyi içerir (Fink, 2007).

Lacan ayrıca, psikanalitik kliniğin iki kişilik bir çalışma olduğu yönündeki standart görüşü eleştirir (Lacan, 1953/2006). Lacan'ın buradaki iki kişilik çalışmadan

kastettiđi, Psikanalitik iliřkinin İmgelese sıkıřıp kalmasıdır. Ego ile bařka arasındaki imgesel iliřki ile özne ile Bařka arasındaki simgesel iliřki arasında bir ayırım vardır. Bu iki kiřilik alıřma, insan dođasını ve Psikanalitik srecin iřleyiřini dođrusal olarak ele alan bir bakıř aısıyla uyumlu grnr; fakat benlik/ego ile özne aynı Őey deđildir.

## **2.5. Mađdurluđun Konuřmada İnařası**

Birinci blmde mađduriyetin tanımı, mađduriyet kelimesinin olası ađrıřımları, hangi alanlarda ve nasıl bilimsel incelemeye tabi tutulduđu hususlarına yer verilmiřtir. Ana akım psikoloji literatr incelendiđinde travma mađduriyete/mađdurluđa ve acı ekmeye neden olan bir durum olarak deđerlendirilmektedir. Lacanyen bakıř aısına gre ise travma varoluřsal bir unsurdur. Özne, dřlem aracılıđıyla dnyayla birok Őekilde iliřki kurabilir ve bu ařamada pek ok acı, bu acıların deđiřik birok nedeni olabilir. Terapi srecinde hastaların konuřmalarında inřa olan mađdurluk gz nne alındıđında, yařanan herhangi bir acı, var olan bir Őikayet sebebiyle terapi srecine bařlayan kiřinin konuřması mercek altına alınmaktadır. Lacanyen Psikanalitik yaklařımda mađduriyet/mađdurluk kavramı teoride aıka yer almamaktadır. Dolayısıyla bu tez kapsamında incelenenin, *kiřinin bařka ve Bařka ile mađdurluk zerinden kurduđu iliřki* olarak anlařılması gerekmektedir. Ayrıca gncel arařtırmada izi srlen noktalar, mađduriyet kavramının etimolojik ađrıřımlarından gelmektedir: *haksızlık, masumiyet, fedakarlık, aresizlik ve pasiflik*.

## BÖLÜM 3

### METODOLOJİ

#### 3.1. Nitel Metodolojinin Benimsenmesi

Bu tezde, psikoterapi seansları sırasında hastaların konuşmalarında ortaya çıkan mağdurluğu incelemek amaçlanmış, dolayısıyla bireylerin öznel deneyimlerine ve dillerine odaklanılmıştır. Araştırma, nitel metodolojiye, rölativist ve sosyal inşacı bir bakış açısına dayanmaktadır. Scotland'ın (2012) belirttiği gibi dünyada nesnel tek bir gerçeklik yoktur, bireyler kendi gerçekliklerini dil aracılığıyla inşa ederler ve bunlara erişmenin çeşitli yolları vardır. Rölativist bakış açısı çerçevesinde gerçeklik, sosyal etkileşimler ve dil aracılığıyla sürekli olarak inşa edilmekte ve şekillendirilmektedir.

#### 3.1.1. Söylemsel Metodoloji

Söylemsel metodoloji, dilin kurucu işlevini vurgulamaktadır (Georgaca ve Avdi, 2012) ve dil bir araştırma nesnesi olarak ele alınır Parker'a (2005) doğal olarak meydana gelen konuşmaların veya görüşmelerin analizinin söylem analizi yoluyla yapılabileceğini söyler. Dolayısıyla, daha önce gerçekleşmiş olan psikoterapi seanslarının veri olarak kullanılmasına da uygun bir metodolojidir.

#### *Lacanyen Söylem Analizi*

Parker (2005) bir söylem analizi yöntemi olarak *Lacanyen Söylem Analizi*'ni (LSA) önermektedir. LSA, Lacanyen teoriye dayanır ve Lacan, 'analizanın' bir analistle karşılaşmasındaki konuşmasıyla ilgilenir (Parker, 2005). LSA dilin yapısal özelliklerine odaklanır, kritik dayanak noktalarını belirler ve dil, bilinçdışı ve öznellik arasındaki ilişkiyi araştırır (Baltacı, 2022a). Özetle LSA, Standart yorumlama yaklaşımlarını sorgular ve söylem içindeki bilginin yeni bir

boyutunu ortaya çıkarmaya çalışır. LSA'da yedi temel teorik öge bulunmaktadır. Bunlar “Metnin Biçimsel Özellikleri, Temsilin Sabitlemesi, Faillik ve Belirlenim, Bilginin Rolü, Dildeki Konumlar, Bakış Açısının Açmazları ve Metinsel Malzemenin Yorumlanması”dır (Parker, 2005; Baltacı, 2019; Baltacı,2022a; Baltacı, 2022b). Aşağıda bu yedi ögeye dair Parker'ın 2005'teki ve Baltacı'nın 2019'daki metninden yararlanılarak oluşturulan kısa açıklamalar yer almaktadır:

**Metnin Biçimsel Özellikleri:** Gösterenlerin düzenlenişine odaklanarak "mutlak fark"ı aramak

**Temsilin Sabitlemesi:** Bastırma, metaforların ortaya çıkışı, kapitone noktaları

**Faillik ve Belirlenim:** Boşlukların ve eksikliklerin analizi

**Bilginin Rolü:** Konuşma sırasında bilginin farz edildiği yerlerin analizi

**Dildeki Konumlar:** Konuşma esnasında mesajın ters olarak geri dönüşünün analizi

**Bakış Açısının Açmazları:** Çatışma noktalarının, çıkmazların, cinsiyetlenmeye dayalı farkların analizi

**Metinsel Malzemenin Yorumlanması:** Yorumlamaktan ziyade metni bir analist gibi ele almak, metni bozmak ve düzensizleştirmek

## 3.2. Yöntem

### 3.2.1. Örneklem ve Veri Toplama

ODTÜ İnsan Araştırmaları Etik Kurulu'ndan (protokol no: 279-ODTU-2020) ve Ayna Klinik Psikoloji Destek Ünitesi'nden gerekli izinler alındıktan sonra Ayna Klinik Psikoloji Ünitesi'ndeki psikoterapistlerden araştırmanın psikoterapi seanslarında hastaların konuşmalarındaki mağdurluğu incelemeyi amaçladığı bilgisi verilerek ve hastanın konuşmasında mağdurluğun baskın olduğunu düşündükleri seansları iletebilecekleri belirtilerek gönüllülüğe dayalı biçimde tümü Psikanalitik yönelimle gerçekleştirilmiş seanslar toplanmıştır. Altı terapist tarafından iletilen altı ayrı hastayla yapılmış toplam on sekiz seans toplanmıştır. Terapistlerden seansların ses kayıtlarının yanı sıra hastaların genel demografik bilgileri, psikoterapiye ilk başvuru nedenleri ve her hastanın klinik yapısına ilişkin gözlemlerine dair bilgiler de alınmıştır.



### 3.2.2. Prosedür

Psikoterapistlerden seansların ses kayıtları toplanmış, isimler kod ad olarak değiştirilmiş, ardından tüm kayıtlar araştırma metodolojisinin niteliğine uygun olarak yazıya dökülmüştür. Transkripsiyon aşaması sonrasında baskın mağdurluk çağrışımlarının bulunduğu 11 oturum seçilmiş, sonrasında LSA prensiplerine dayanarak belirlenmiş yöntemle analiz edilmiştir. Veri analizinde, mağdurluk çağrışımlarının incelenmesinin dayandığı, LSA'ya uygun dört ana odak belirlenmiştir: Mağdurluğun ana gösterenleri, ısrarla bilinen, Başka olarak terapist ile ilişki ve çatışma noktaları.

*Mağdurluğun ana gösterenleri:* Hastanın terapistle şikayet ettiği alanlar, bunların metinde nasıl var olduğu ve neyi gösterdiği hususları incelenerek işaretlenmiştir. Bu işaretlemeler üzerinden mağdurluğa dair gösterenlerin terapistle konuşurken hastaların konuşmalarında nasıl kendini gösterdiğine dair bir analiz yapılmıştır.

**İsrarla bilinen:** Hastaların kendileri ve başkaları hakkında sahip oldukları bilgilerin izinin sürülmesi üzerinde durulmuştur. Burada, açıkça ve/ya tekrarlanarak belirtilen bilgilerin yanı sıra eksik olana dair izler sürülmüştür.

**Başka olarak terapistle ilişki:** Mağdurluk kapsamında hastaların bilgiyi atfettikleri konuyla, yani Başka olarak terapistle nasıl bir ilişki kurduğu incelenmiştir.

**Çatışma noktaları:** Seanslar sırasında dilde ortaya çıkan çatışmaların izi sürülmüştür.

Ayrıca transkripsiyon, okuma ve dinleme sürecinde doğrudan dilde olmayan bazı noktaları açıklamak için notlar (gülme, ağlama, iç çekme vb.) alınarak (( )) içinde alıntılara dahil edilmiştir.

### 3.3. Refleksivite ve Güvenirlik

Morrow'a (2005) göre bir çalışmanın güvenirliliği öznellik, refleksivite, verilerin yeterliliği ve yorum gibi faktörlere bağlıdır. Ayrıca Gearing (2004) araştırmacının öznel deneyimlerinin ve dünyaya ilişkin anlayışının şüphesiz tüm araştırma sürecini etkilediğini belirtmektedir. Nitel araştırmalarda araştırmacı, araştırma sürecinin her aşamasında önemli bir rol oynadığını kabul eder (Finlay, 2002). Dolayısıyla

araştırmanın güvenilirliđi açısından arařtırmacı, arařtırma üzerindeki bu etkinin farkındadır ve bunu refleksivite yoluyla düzenler. Bu bağlamda, konuyu seçim aşamasından yazım süreci dahil olmak üzere notlar alınmış ve gerektiğinde bir akran ekibi ile konuşulmuş, ve refleksif bir yazı oluřturma yoluna başvurulmuřtur.

## BÖLÜM 4

### ANALİZ

Ana Odaklar	Vurgulanan alanlar
1. Mağdurluğun ana gösterenleri	1.1. Hayır diyememe (Aslı) 1.2. Başkaları gibi ol(ama)ma (Bulut) 1.3. Üz(ül)me (Canan) 1.4. “Bir şekilde...” (Diren) 1.5. Tezgaha gelmek (Esat) 1.6. Hak/sızlık 1.7. Sınır
2. Israrla bilinen	2.1. “Ben” hakkında <ul style="list-style-type: none"><li>○ Yapamama/olamama</li><li>○ Kişilik özelliklerine referans</li><li>○ Tıbbi terimler</li></ul> 2.2. Başka/lar hakkında <ul style="list-style-type: none"><li>○ Bilinmeyi/başkayı bilme</li><li>○ Başka’dan dolayı<ul style="list-style-type: none"><li>● Utanç</li><li>● Kabul edilme</li><li>● Namus</li><li>● Yazılı olmayan kurallar</li><li>● Patoloji</li></ul></li></ul>
3. Başka olarak terapist ile ilişki	3.1. Bilgi talebi 3.2. Mağdurluğun kabulünü isteme 3.3. Mağdur eden terapist inşa etme 3.4. “Yapmalıyım/yapmamalıyım” 3.5. Konuşmak için konuşmak
4. Çatışma Noktaları	4.1. Çelişkilerin bir aradalığı <ul style="list-style-type: none"><li>○ Kişisel-profesyonel</li><li>○ İsteme-istememe</li><li>○ Yönetmek-yönlendirilmek</li></ul> 4.2. Özne-nesne pozisyonları 4.3. Seansın bitiş noktası 4.4. Kadınlık - Erkeklik - Kimlik

## BÖLÜM 5

### TARTIŞMA

#### 5.1. Dört Ana Odak Üzerinde Tartışma

##### *Mağdurluğun Ana Gösterenleri*

Beş hasta için vurgulanan nosyon olarak beliren beş ayrı nosyon bulunmaktadır. Her hastanın seans sırasında mağdurluk etrafında kurduğu gösterenler birbirinden farklı ve tekrarlı biçimde konuşmanın merkezine yerleşik durumdadır. Lacanyen teoride bir gösteren, özne için gösterenler zincirinden başka bir göstereni temsil ederken, özne, gösterenler zincirinin bir sonucudur ve öznellik farklı gösterenler arasındaki boşluktur (Lacan, 1957–1958/2017). Özne gösterenlerden yararlanır; konuşma özneyi doğurur (Vanheule, 2017). Konuşma aracılığıyla kendini aktarma, öz farkındalığı garantilemez. Dolayısıyla terapist, yalnızca acı ve şikayetlerle ilgili konuşmalarda mevcut olan anlamlara dikkat etmekle kalmamalı, aynı zamanda bunları bireyin yaşam öyküsü, ilişkileri, varoluşsal soruları ve içinde yaşadığı sosyal ve kültürel koşullar bağlamında sürekli olarak dinlemelidir (Vanheule, 2017).

Ayrıca, vurgulanan diğer iki kavram olan hak/sızlık ve sınır, mağdurluğun konuşmada baskın olduğu seanslarda hastaların dilinde yaygın biçimde belirlemektedir. Örneğin Aslı, hakkı olmak gösterenini tamlık ve her şey ile birlikte dile getirirken, Canan hak etmek üzerine kurduğu cümlelerini sonrasında dinle ilişkilendiriyor. Esat hak/sızlık gösterenini, şeref, namus, ahlak, büyüklük ve küçüklük gösterenleri ile bir arada tutarken Diren'in konuşmasında bu gösterene kurallara ilişkin gösterenler eşlik ediyor. Bulut'ta ise bu, başkalarının yapabildiği kendinin yapamadığı bir şey olarak haklarını savunmak şeklinde beliriyor. Burada, konuşmalarda toplumsal alana ilişkin dini, hukuki veya ahlaki konularla iç içe geçmiş gösterenlerin varlığı ile uyumlu olarak Türkçe'de Hak kelimesinin Allah/Tanrı ile eş anlama sahip olarak da

kullanılabilmesi dikkat çekicidir. Dolayısıyla buradaki alıntıların, benzerlikleri paylaşan başkalarıyla etkileşimi yöneten ve şekillendiren Başka'nın varlığının dil sınırları içerisinde belirginleştiği bir alan olduğu söylenebilir. Yalnızca Bulut örneğinde, bu diğerlerinde olduğu kadar belirgin olarak okunamaz. Öne çıkan diğer bir gösteren olarak *sinir*, çoğu zaman bir duygunun ifadesi olarak karşımıza çıksa da, bazen karşı tarafın kendisine olan siniri şeklinde, bazen de diğer duygularla karışarak konuşmada yer almakta. Seans sırasında doğrudan sinir hali belirgin biçimde davranışsal olarak yaşanmasa da konuşmada dolaşım halinde. Yani bir gösteren olarak sinir, hastaların konuşmasında benlik ile başkaları/Başka arasında yer değiştiren bir gösterendir. Ayrıca bu gösterenin bir başka eşlikçisi ise *gülme*dir. Bu dikkat çekici bir nokta çünkü, siniri dile getirme girişimine eşlik eden gülme gibi bedensel bir tepki konuşmanın genel akışını bozan ve konuşulanla doğrudan uyumlu olmayan biçimde var oluyor. Lacan (1967)'a göre gülme, anlamın esnekliğinin yanı sıra, temel anlam kavramının kendisinde var olan absürtlüğün veya tutarlı bir anlam eksikliğinin açığa çıkmasına karşı bir savunma görevi görür ve bireyin bilinçdışı yönüne ilişkindir (Lacan, 1967, aktaran Saint-Jewin 2018).

Sonuç olarak, bu bölümde incelenen mağdurluğun ana gösterenlerine baştan anlam yüklemek, Psikanalitik süreci tıkayan bir şey olacaktır. Teşhisi amaçlayan veya semptomları ortadan kaldırmaya odaklanan yaklaşımlar genellikle çerçeveselendirerek kontrol edilebilirliği ve yönetilebilirliği artırmaya odaklandığından anlam vermek bu çerçeveselendirmeyi kolaylaştırıcı bir unsur olarak düşünülebilir. Ancak Lacan'ın yaklaşımı başka bir yönü işaret etmektedir; konuşmada, gösterenler zincirinde bu gösterenler aslında anlam taşırlar ancak amaç bu anlamı ortaya çıkarmak değildir çünkü sürekli yer değiştirmektedir. Gösteren ile gösterilen, yani sözcüğün kendisi ve anlamı arasındaki bağlantı "*tutarsız, akışkan ve sürekli değişen*" bir ilişkidir (Bilik vd., 2021) ve bir gösterenin katı bir şekilde değişmeyen bir gösterilene gönderme yaptığını düşünmek yanılgıdır (Lacan, 2006). Dolayısıyla, gösterenlerle öznenin arzusu arasındaki boşluklarda özneye dair olanın duyulabilir hale gelebilmesi için hasta daima yeni gösterenler üretmek konuşmaya teşvik edilir.

### ***Israrla Bilinen***

Bu bölümde, hastaların seans esnasında mağdurluğu konuşurken kendilerine ve başkalarına dair sahip oldukları imgesel bilgi ve sosyal gerçeklikle kurdukları

ilişkilerinin dillerine yansması incelenmiştir. İlk vurgulanan nosyona bakacak olursak, Canan ve Diren kendileri hakkında konuşurken sıklıkla bir *yapamama/olamama* vurgusu içindedir ve Aslı Hanım'ın *hayır diyememe* ve Bulut Bey'in *başkaları gibi ol(ama)ma* olarak konuşmalarına yansıyanlarla birlikte değerlendirilebilir. Buradaki vurucu nokta, konuşmalarını *onlarda olmayan şey* etrafında şekillendirmeleridir. Bu *şey*, her biri için ve her konuşmada farklılaşmakla beraber, *yokluğa dair* vurgu bir var olma biçimi halinde dilde belirmektedir. İkinci nosyon olan *kişilik özelliklerine referans* kimliğe ve karakter özelliklerine dair birçok tanımlamayı içermektedir. Aslı da Canan da *uyumlu* bir insan olduklarını söylerken, Diren *içe kapanık* biri olduğunu dile getirmekte, Bulut ise yakınlarının ve psikiyatristinin kendisine dair söylediği birçok sıfatı (örn. *ince, hassas, pısrık, çekingen*) kendini tanımlarken kullanmaktadır. Esat ise kişiliğine dair kendisi bir söz söylemekten ziyade başkalarının kendisi hakkında düşüncelerini aktarmakta ya da terapistinden bir tanım/isimlendirme talebinde bulunmaktadır. Son olarak, Bulut'un kendine dair *patolojik, psikosomatik, kekeme, beyin işlevini bozan şey, sosyal fobi* gibi ifadeleri sıklıkla kullanımı, üçüncü vurgulanan nosyon olan *tıbbi terimler* bölümünde değerlendirilmiştir.

Lacan'ın bahsettiği iki tür bilgiden biri benliğe dair olan imgesel bilgi iken diğeri bilinçdışının/öznenin bilgisidir (savoir). Psikanalizin odağındaki, imgesel olandan ziyade öznenin bilgisidir, bilinçdışı olan, kişinin bildiğini bilmediği bir tür simgesel bilgidir ve Psikanaliz serbest çağrışım gibi teknikler aracılığıyla bu bilginin dilde dolaşıma girmesiyle duyulur hale gelmesinde aracı olur (Evans, 2006) ancak "mutlak bilgiyi" hedeflemez, özne ile bilgi arasındaki temel bir boşluğun varlığını kabul eder. İmgesel bilgi ise egonun yanlış tanıma yoluyla kurulumundan kökenini almaktadır. İmgesel bilgi, simgesel olana erişimi engelleyen bir işlev sürdürürken Psikanaliz, öznenin imgesel olanı sorgulamaya açmasının bir alanıdır. Amaç, öznenin varoluşsal zorluklarla etkili bir şekilde yüzleşmesini engelleyen düşlemleri ele almak ve yavaş yavaş onları kat etmektir (Ruti, 2008; Özbek Şimşek vd., 2019). Buradaki alıntılar incelendiğinde hastaların benliklerine dair bildiklerinin, mağdurluğun gösterenlerinden olan pasifliği kemikleştiren bir işleve sahip olduğu görülmektedir: bir şeyi yapamamak, bir şeyin yokluğunu zımbalamak, kişilik özelliklerinin bunun değişmesine izin vermeyeceği bir denklem kurmak ya da patoloji nedeniyle zaten böyle olmak ve başka türlüünün olabilirliğini dışarda bırakmak.

*Başka/lar hakkında bilgi* başlığında bir araya gelen alıntılar incelendiğinde, hastaların mağdurluğu konuşurken sosyal ilişkilerinde diğerinin ne düşündüğüne, hissettiğine veya planladığına dair ifadeler ve başkaları hakkında yorumlara da yer verdiği görülmektedir. Bu ifadeler *bilinmeyeni/başka'yı bilmek* olarak not edilmiştir. Başka, zaten *farklı olanı* ifade eden bir kelime ve başkalarını anlamak, bilmek sahip olunamayacak fakat hayal edilebilecek bir yerdedir ve doğru veya gerçeklikle bağdaşır olup olmadığına bakılmaksızın imgesel bilgiye ilişkindir. Psikanalitik bir süreç, ego üzerinde güçlü bir etkiye sahip olmakla beraber odak öznededir (Evans, 2006, s. 205), bu odakta kalmak bir analist/terapistin imgesel bilginin kıskacında takılıp kalmadan başka türlü bir dinlemeyi sürdürmesiyle mümkündür.

Son olarak, mağdurluğa atfedilen gerekçelere dair alıntılar, *Başka'dan dolayı* başlığı altında *utanç (Aslı), kabul edilme (Canan), namus (Esat), yazılı olmayan kurallar (Diren) ve patoloji (Bulut)* olarak not edildi. Alıntılar incelendiğinde, hastaların kendilerinden öte olan, kendilerini aşan bir yere referansla konuştukları, o yer ile ilişki kurma biçimlerine dair örneklerin varlığı görülüyor. Bu yer ve kurulan ilişkinin biçimi de, hali hazırda mağdurluğu kuran şey olmakla beraber başka türlü bir seçenek yokmuşçasına bir ifadeyi içinde barındırmaktadır.

### ***Başka Olarak Terapistle İlişki***

Terapistle bir Başka atfı ile kurulan ilişkinin incelendiği bu ana odakta vurgulanan nosyonlar *bilgi talebi, mağdurluğun kabulünü isteme, mağdur eden terapist inşa etme, yapmalıyım/yapmamalıyım ve konuşmak için konuşmak* olarak belirlenmiştir. Aslı, Canan ve Esat'ın terapistten kendilerinde eksik olduklarını düşündükleri bilgiyi talep etme, mağdurluklarının terapist tarafından kabul edilmesini isteme ya da terapisti de kendilerini mağdur eden biri olarak konumlandırma gibi noktalarda terapistleriyle benzer ilişkiler kurduğu gözlenmekle beraber, Diren'in daha önceki seansları referans alarak terapistin kendisinin yapması ya da yapmaması gereken şeylere dair istekleri olduğunu düşünerek hareket etmeye meyilli olduğu, Bulut'un ise diğerlerinden farklı bir şekilde yalnızca konuşmak için konuşmakta olduğu, terapistin vurgularının ya da altını çizdiği kısımların ardından soru üretmek ya da sorgulamak yerine kendi söylediklerini daha da pekiştirerek anlamaya devam ettiği ya da benzer örnekler getirdiği görülmüştür.

Georgaca ve Gordo-López (1995)'e göre Başka, öznenin söylemini doğrulamanın ve öznenin kendi konumunu güvence altına almanın bir aracı olarak hizmet eder (aktaran Parker, 2005). Hasta, terapistte *bildiği varsayılan* (Başka) bir konum atfederek kendi düşlemini sürdürür. Bu pozisyon hastanın konuşmaya devam etmesini sağlayan bir etki yarattığı gibi, aktarım yoluyla düşleminin rehberliğinde terapistle ilişki kurmasına da alan açar. Ayrıca hasta, terapistin bir şeyler arzuladığını varsayar. Bu bir şeyler, terapistteki arzunun yöneldiği şey değildir ve hasta tarafından bilinmediği sürece hasta kendisinden bir şeyler oraya aktarır ve bu sayede hastanın temel düşlemi duyulur hale gelebilir. Bu belirsizlik yerine terapistin hasta için ne istediği bilgisi seansa sızarsa hastanın bununla çelişkili bir ilişkiye girdiğini görüyoruz. Örneğin terapistten bilgi istenen kısımlara bakacak olursak, terapist bu bilgiyi sağlaması hastanın reddetmesiyle sonuçlanıyor. Ayrıca yapmalıyım/yapmamalıyım bölümündeki pasajlarda hastaların terapistin kendilerinden ne yapmalarını isteyebileceği veya yapmaması gerekenler konusunda da bilgi aradığı örnekler bulunmaktadır. Burası kim istiyor, ne arzuluyor sorularının ve cevaplardaki karmaşaları içinde barındırır. Hasta bu bilgiyi arayabilir, ancak terapist bu alanı boş bırakmalıdır ki hastanın arzusu merkeze alınabilsin, kim arzuluyor sorusunun cevabına terapistte dair olan karışmasın ve çalışılan hastanın kendisi olsun..

### ***Çatışma Noktaları***

Çatışma noktalarından ilki olan *çelişkilerin bir aradalığı* nosyonu, hastaların seansta dillerinde olan, genelde terapistle ve seansla ilişkilerine dair çelişkileri içermektedir. Hastaların *kişisel-profesyonel, isteme-istememe, yönetme-yönlendirilme* arasında çatışmalar yaşadığı görülmektedir. Ayrıca, *nesne-özne pozisyonlarının* konuşmalarda sıklıkla karışması söz konusu iken, bir diğer çatışma noktası da *seansın bitiş noktası* ile ilişkili olarak gündeme gelmektedir. Son olarak, kadınlık-erkeklik çatışma noktası vurgulanmıştır. Biyolojik olarak erkek iki hasta olan Esat ve Bulut, çevrelerindeki insanlar tarafından kadın/kız olarak tanımlandıkları bilgisini seansa getiriyor ve Esat kendisiyle ilgili bu söylenenlere öfkelenip hâlâ terapistle konuşarak bir şekilde reddetmeye çabalarken Bulut daha tarafsızlığa yakın, hatta bir ölçüde kabullenici sayılabilecek bir tavır sergiliyor.



## ***Cinsiyetlenme ve Klinik Yapı***

Daha önce terapistlerden alınan bilgilerde hasların klinik yapıları Aslı, Canan ve Esat için histerik nevroz, Diren için perversiyon ve Bulut için psikoz olarak belirtilmiştir. Mağdurluğun konuşmada baskın olduğu seanslarda kişilerin Başka ve eksik ile kurdukları ilişki değerlendirildiğinde, alınan bilgilerle aynı sonuçlara ulaşılmıştır fakat terapistlerin hastalar için düşündükleri klinik yapının terapi sürecini, kullandıkları teknikleri ve ilişkiyi etkileme olasılığı da bu sonuçları değerlendirirken akılda tutulmalıdır. Bu çalışmanın temel amaçları arasında klinik yapıya dair değerlendirme yapmak bulunmasa da var olan analiz sonuçları düşünüldüğünde, Aslı, Canan ve Esat'ın terapist, sosyal yasa ve başkaları ile kurdukları ilişkide suçlayıcı bir tavırda olduğu görülmektedir. Aynı zamanda, üçünde de Başka'nın ondan ne istediğine dair bir şeyleri duyma isteği olmasına rağmen bu istek duyulduğu an tersine çevrilmekte ve karşılanmamışlığı ile orada bırakılmaktadır. Öte yandan Diren'in Başka ile ilişkisi düşünüldüğünde, konuşmasında belirgin olarak kuralı bilmesine rağmen ihlal etmesi ve ayrıca yönlendirilmediği durumlara dair şikayeti yer almaktadır. Kuralı bilip bilmezden gelmek bir inkar olarak düşünülebileceği gibi yönlendirildiği ya da kuralın hatırlatıldığı durumlara rağmen bir kural getirilmesi ve yönlendirilme talebi mücadele edecek bir yer inşa etmekle ilişkili okunabilir. Tüm bunlardan farklı olarak, Bulut'un ilişkilene biçimi ilişki kurmama üzerine gibi görünmektedir: terapistte geliyor, konuşuyor ve gidiyor. Terapistte konuşmaya ve terapistin az da olsa vurgularına rağmen bir soru, sorgulama ya da herhangi bir şüphe konuşmalarında yer almıyor, var olan sorularının genel olarak cevabı, başkalarının yaptığı her ne ise onu yapamıyor olmak gibi görünüyor. Özetle analiz sonuçlarına göre, *her hastanın mağdurluğu konuşmada inşa edişinin özne gösterenler etrafında şekillendiği, bu insanın farklı klinik yapılarda farklı biçimlerde görülebildiği, benliğe ve başkalarına dair imgesel bilginin konuşmadaki mağdurluğu pekiştirici etkiye sahip olabildiği, terapistle mağdurluğun tanınması ya da tekrarlanabilmesi üzerinden ilişki kurulduğu gözlemlenmiştir. Ayrıca aktif pasiflik, bilinçdışının sorumluluğunu üstlenmenin bulunmayışı ve özne sorumluluklar işaret edildiğinde direnç gösterme hastanın seanslar sırasındaki konuşmasında ortaya çıkan mağdurluğun temel bileşenleri olarak yorumlanmıştır.*

## 5.2. Psikanaliz/Psikoterapide Mağdurluk Üzerine Tartışma

### 5.2.1. Söylemdeki Mağdurluk, Histerik Söylem, Histerizasyon

#### *Bir Direnç Olarak Konuşmada İnşa Olan Mağduriyet*

Konuşmada inşa olan mağdurlukla seanslarda farklı klinik yapılarla çalışırken karşılaşılabilmesi mümkündür. Sonuçlar gözden geçirildiğinde, nevroz, perversiyon ve psikoz için örnekler mevcuttur. Nevrotikler histerik söylem stratejilerini yoğun bir şekilde kullanmaktayken, pervert yapıda kural ve yasalara ilişkin stratejiler konuşmada daha belirgindir. Öte yandan, mağdurluğun konuşmada inşası psikotik için mağdur pozisyonunun adaptasyonu ile dağılmayı engelleyici olabilecek imgesel bir destek noktası işlevinde görünmektedir.

Aktif pasiflik nosyonuna bakıldığında, hastaların mağdurluklarını aktif bir şekilde geçerli kılmaya çalıştıkları göze çarpmaktadır. Buna bilinçdışı materyali çalışılmaya gönülsüzlük ve sorumluluğundan kaçınma eşlik etmektedir. Psikanalitik bir sürecin içinde olmak dilde mağdurluktan uzaklaşmayı ve öznel sorumluluğu almayı gerektir ve sürecin işleyişi, kişilerin kendilerini mağdur olarak algılamaktan, hayatlarında olan biteni öncelikle dış etkenlere bağlamaktan ya da başkalarını suçlamaktan uzaklaşmalarına bağlıdır. Eylem, hesap verilebilirlik kapasitesi barındırdığından etik bir nosyondur. Ancak bilinçli ve bilinçdışı niyetlerin etkileşimi nedeniyle Psikanalitik açıdan sorumluluk, yasal sorumluluktan farklıdır. Kasıtsız yapılan bir eylem bilinçdışı bir arzuya ilişkin olabilir. Yasal normlardan farklı olarak psikanaliz, kişilerin bilinçdışına ilişkin etik sorumluluğu kabul etmelerini, görünüşte kasıtsız görünen bilinçdışındaki materyalin farkına varmalarını gerektirir (Evans, 2006).

Kişiler, savunma amaçlarıyla kendi eylemlerini haklı çıkarmak için anlatılar geliştirirler ve bu anlatılar, çevreyle ilişkimizin altında yatan mantıksız özellikleri, çaresizlik duygularını ve uyumsuzluğu gizlemeye çalışan temel bir seçicilik taşıır (Vanheule, 2017) ve ego, bu temel özellikleri örtme görevini üstlenir. Bu nedenle, bu tez çalışmasının sonuçları değerlendirildiğinde, konuşmada inşa olan mağdurluk *Psikanalitik bir sürece direnç* olarak yorumlanmıştır. Bıçakcı'nın (2019)

psikoterapide direnç üzerine çalışmasında da, hastanın mağdur pozisyonu direnç olarak değerlendirilmiş ve öznenin mağduriyetten elde edebileceği potansiyel kazanca dikkat çekilmiştir. Güncel çalışmada, nevrotikler bu aktif pasifliği, konuşmalarında mağdurluğu kurarak sürdürürler, terapi oturumları sırasında başkalarını suçlama, şikayet etme ve talepkar olma konusunda ısrar etmektedirler. Bu bağlamda, Lacan'ın bahsettiği (yapıdan bağımsız bir biçimde) histerik söylemle oldukça benzerdir (örnek vaka çalışması için bkz. Ünal, 2017). Dolayısıyla, hasta seanslarda sık sık taleplerde bulunabilir. Terapistin bir talebe verdiği herhangi bir yanıtın, *aktarımı öneriye dönüştüren* bir etkisi olduğundan bu taleplerin söylem, yapı ve aktarım ilişkisi bağlamında değerlendirilerek çalışılması gereklidir (Lacan, 2005). Bu talebin yanıtlanması, histeriğin didişebileceği ve düşlemini sürdürebileceği bir efendi yaratma girişiminin başarıyla sonuçlanması olarak da yorumlanabilir.

Öte yandan, Psikanalitik sürecin işleyişi hastanın histerikleşmesine bağlıdır (Verhaeghe, 2008; Yoğan, 2020). Histerikleşen hasta ve buna eşlik edebilecek taleplerin varlığında psikanalitik bir ilişki kurabilmek için dikkate alınması gereken noktalar vardır. Burgoyne (2018), egonun burada analistin müttefiki olmadığını belirtir. Terapistin egosu, hastanın egosu kadar, hatta bazen daha fazla, direncin ortaya çıkışında etkili olabilmektedir (Burgoyne, 2018).

### ***Tanısal ve Tanımsal Problemler***

Literatür, travma kaynaklı mağduriyete dayanmaktadır ve mağdur psikolojisiyle ilgilenmektedir. Gerçeklikte yaşanan mağduriyetler merkeze alındığından, mağdurun tanımı da mağduriyetin tanımını ve sınırlarını belirleyen hukuk ve kriminolojinin tanımına dayanmaktadır. Öte yanda, insan ruhsallığının ve toplumsal ilişkilerin karmaşık yapısı dolayısıyla, mağdur psikolojisi ve söylemi, yalnızca gerçeklikte karşılığı olan bir mağduriyet sonucu ortaya çıkmamaktadır. Buna rağmen, Psikoloji literatürünün tanısal olanı önceliklendiren Psikiyatri literatürünün etkisindeki olduğu gözlemlenmektedir. Vanheule (2017)'e göre, psikiyatrinin baskın söylemi ve tanısal yaklaşımı, egonun seçici olarak savunma üreten işlevine benzer bir işleve sahiptir ve konuya yaklaşım biçimleri buradan şekillenmektedir. Ayrıca, Kraepelin'in takipçileri tarafından öne sürülen açıklamalar, psikiyatrinin gücüne duyulan güveni artırırken aynı zamanda tanısal kararların alınmasında merkezi bir rol oynayan farklı

ve temel bileşenleri de gizlemektedir. Baltacı (2019)'nın çalışmasında belirtildiği gibi, bu yaklaşım "hukuki-normatif" bir yaklaşımdır ve güç temelli bir ilişkiye dayanmaktadır. Mağduriyet, hukuki bir bakış açısından değerlendirildiğinde bir mağdur ve bir fail vardır. Hukuk, bu iki taraf arasındaki dengesiz güç ilişkisini telafi etmek ve toplumsal düzen içinde bu dengesizliği aşmanın aracıdır. Bu bakıştan alınan tanım, psikoloji ve psikoterapi alanına dahil edildiğinde, psikoterapist de bu güç ilişkilerinin içinde konumlanır. Bu, iyileştirmenin gücünü kendi alanına yazan bir konumdur; terapist, mağdurun tedavisinde yeni bir efendi olarak terapi sürecinde var olma eğilimindedir.

Bunlara ek olarak, terapistin uygulaması gereken tedavilerin daha iyi teşhislerle daha doğru belirlenebileceği ve bilimsel bir temele yerleştirilebileceği yönünde yaygın bir görüş vardır, ancak Verhaeghe (1996) bunun sadece bir illüzyon olduğunu savunur. Bu tartışmayı ileri taşıyarak, terapi sürecinin belirli anlarında insanların "*neden acı çektiğimi bana söyle*" gibi taleplerle Efendi Söyleminin kurulmasını isteyebileceğini ve buna yanıt olarak teşhisin ortaya çıkmasının "yara bandı tedavisi" ile benzer bir işlevde olacağını ve böyle bir tedavinin nihai başarısızlığının değişmeyeceğini savunur. Soysal (2011)'a göre günümüz toplumunda, Efendi Söylemi giderek yaygınlaşmakta ve bireyler kendilerini, başkaları için bilgi taşıyıcıları olarak konumlandırma eğiliminde olduğundan, sorular sıklıkla gizli cevaplarla birlikte gelir ve esas keşfi sınırlar. Ayrıca, Psikiyatri alanındaki teşhis kriterlerini de öznel yönleri göz ardı ettiği için eleştirir. Her insan, bir biçimiyle temel kaybının travmasını deneyimler ve onu geri kazanmanın imkansızlığıyla karşı karşıyadır. Ancak, bu mağduriyet değil, aslında insanlığın ve öznenin varlığın tek mümkün yoludur, insan olmanın doğasını tasvir eder. Herhangi bir bireyin rüyalarını, düşlemlerini veya şakasını incelediğimizde, ulaştığımız, idealize edilmiş bir insandan ziyade öznenin bölünmüşlüğüdür (Vanheule, 2017). Sonuç olarak,, psikoterapide dinleme, bu insana içkin doğanın reddiyle değil, ancak bunun öznelleştirilmesi (bkz. Subjectivization) yoluyla mümkündür.

### ***Bir Yol Olarak Analistin Söylemi***

Psikoterapi ve ne yolla yapıldığı/yapılacağı ele alındığında sözü edilen şey, *Etiktir*. Lacan'ın felsefesinde etik, klinik tekniğinin temelindedir ve etik ikilemlerden

uzakta olabilmenin yolu olarak Efendi Söylemi yerine Analistin Söylemini öne sürer. Analistin pozisyonunu temel biçimi ile anlatan *kasti olarak anlamama*, terapisti beklenmeyen olasılığına davet eder, hali hazırda söylenin ötesini de dinleyebilmeyi mümkün kılar; çünkü anlam kişinin kendisinden gelen bir şeydir fakat dinlenen başka'sıdır. Kasti olarak anlamama, diğer bir ifadeyle *anlamadan dinlemede* temelde yatan düşünce, henüz tam olarak anlamayanların diğer kişinin ne söylediğine daha fazla dikkat ettiği ve bu nedenle yeni ya da farklı olanı daha rahat duyacağıdır. İşte bu *başka olanın başkılığına saygı*, etiğin göstergesidir (Vanheule, 2017). Psikanalitik klinikte bir terapistin ilgileneceği tek "iyi" şey, hastanın ne dediğinin, acısının veya sıkıntısının ne anlama geldiğini varsaymadan, davranışlarının uygunluğunu değerlendirmeden *iyi* dinlemektir (Vanheule, 2017).

### 5.3. Genel Değerlendirme ve Gelecek Çalışma Önerileri

Psikolojideki baskın söylemde mağduriyet, travma-patoloji ilişkisinin bir ürünü olarak ele alınsa da Lacanyen Psikanalitik felsefede travma, insanlığa özgü ontolojik bir başlangıç noktasıdır ve dilde nasıl inşa edildiğine bağlı olarak çeşitli klinik yapılarda farklı işlevlere sahiptir. Verilerin analizinden elde edilen sonuçlar değerlendirildiğinde, Psikanalitik bir süreç kapsamında, konuşmada inşa olan mağdurluk nevrotik ve pervert yapılar söz konusu bir direnç; psikotik yapı için ise, yapının çözülmesini önleyebilecek imgesel bir destek olabileceği yönünde değerlendirildi. Bu nedenle, mağdurluğun da tıpkı diğer semptomlar, acılar veya şikayetler gibi, dilde nasıl var olduğu, Psikanalitik uygulamanın seyrini şekillendirecektir. Nevrotik yapı için konuşmadaki mağdurluğun ötesine geçmek ve öznel sorumluluğu üstlenmek; Pervert yapı içinse, mağdur pozisyonu aracılığında kurallar ve yasa ile kurulan paradoksal ilişkinin kesilmesi, bir analitik sürecin kapısından içeri adım atmak olarak değerlendirilebilir. Başka bir deyişle, konuşmada inşa olan mağdurluk, nevrotik ve pervert yapılar için bir arzu sorunu olarak kabul edilebilecekken psikotik yapı söz konusu olduğunda talep kapsamında değerlendirilebilir. Ayrıca, nevrotik yapının konuşmasındaki mağdurluk ile analitik sürecin motor güçlerinden olan histerikleşmenin kesişim noktalarına dikkat edilmesi de önemlidir. Histerikleşme ile ne yapıldığı ve nasıl ilişki kurulduğu, sürecin ne yöne gideceğinin temel belirleyicisidir. Özellikle talebin zaten dile dökülüşünde zorluk

yaşayan obsesif nevrozda histerikleşme, analitik sürecin başlaması adına önemli olmakla beraber histerikleşme ve oradaki taleple ne yapıldığı ise, terapistin pozisyonu ve söylemine bağlıdır. Efendi Söylemi talep boyutunda çalışmada sıkışıp kalma riskini taşıırken Analist Söylemi arzunun yolunu açabilir.

Güncel çalışmada, veriler çoğunlukla nevroz klinik yapısına sahip kişilerle gerçekleştirilmiş seanslardan oluşmakta. Genel olarak mağdurluk söylemine histerik nevrozda sıklıkla rastlanabilir olması, bir kısıtlılık olarak verilerin bu yönde birikmesine yol açmış olabilir. Her ne kadar bu birikme benzer klinik yapıları paylaşanlar arasındaki öznel farkları ortaya koyabilmeyi sağlasa da, diğer klinik yapıların analizlerde daha az temsil edilmesi sınırlılığını da beraberinde getirmiştir. Bunun yanında, Psikanalitik yaklaşım çerçevesinde yürütülen seansların veri olarak kullanılması özellikle bu alana ilgi duyan veya kendilerini bu alanda geliştirmek isteyen terapistler için iyi bir klinik gözlem ve değerlendirme sunmaktadır. Ayrıca, bu çalışma, literatürdeki hakim klinik psikoloji söylemini eleştirel bir yaklaşıma dayanarak ilgili literatürün alışılmıştan farklı ve eleştirel gözle okumasını sunması açısından değerlidir.

Bu çalışmada seansları mağdur söyleminin seanstaki baskınlığı kriterine göre analize dahil edildi ve yalnızca dahil edilen seanslardaki mağdurluğun izlerinin sürüldüğü anlar değerlendirildi. Bu noktada, terapistlerin tekniklerindeki farkların hastaların konuşmalarındaki mağdurluğu üzerindeki etkilerini araştırmak, bu çalışmada odağa alınmadı ve gelecek çalışmalar için öneri olarak sunulmaktadır. Ek olarak, konuşmada inşa olan mağdurluk, "dışarıdan gelen kötülük" anlatısı odağında okunduğunda, paranoya ile benzer bir mekanizmanın işlediği gözlemlenmekte, bu benzer mekanizma ve yapıyla işleyişteki farklar gelecek çalışmalarda ele alınabilecek konular arasında yer alabilir. Ayrıca, günümüzde, psikopatolojik teşhislerin giderek yaygınlaştığını görmekteyiz ve günümüz insanının teşhislerle ilişkilene biçimlerinin onları hızlıca sahiplenme yönünde olduğu dikkat çekici. İleriki çalışmalarda, günden günde sayıca ve görünürlük açısından hızla artmakta olan ruhsal patolojilerin sahiplenilmesi de konuşmadaki mağdurluktaki işleyiş mekanizmaları bağlamında ele alınabilir.

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