# The Bull Fight A Psychiatric Encounter — Bernard Levinson

#### Summary

The bull fight is compared to the psychotherapeutic process. Each act of the bull fight is compared to each act in the process of therapy. Finally the death of the bull is seen as the removal of the illness. The central elements that make all therapy possible are discussed.

I often relive my first experience of a bull fight. I remember my apprehension. My Ango-saxon soul crying out. All my fears and doubts. What am I doing watching the senseless slaughter of an animal? Is there not enough cruelty in the world, that I must impose on myself an afternoon devoted solely to pain and death? I remember looking about me in the arena at Palma de Mallorca. There must have been five thousand people. Perhaps a third of them were tourists. The bull fight season starts in Spain at Easter and continues until November. Arenas all over Spain would be full - season after season. Year after year. I remember thinking it had to be more than just the killing of an animal. There had to be more. The Spaniards were watching something that I had neither the eyes nor heart to see. I wanted to understand that. If it existed, I wanted to capture some of this timeless mystery.

I already knew some of the facts. Much of my information was trivia. I knew that the word toreador was not used in Spain. It's a frenchification of the word torero. It's a word used only in opera, or to belittle a bull fighter by suggesting he is French . . .

Bull fighters are all called toreros. The matador is the central figure. He will hire a team of toreros to work

for him. There will be a picador, usually on horseback who at the matador's careful instruction will challenge the bull's courage with a pike. It is nothing for a bull to lift and throw both horse and rider. There is a high morbidity rate for both the picador and his horse. The banderilleros are the toreros who will place the brightly colour dowels in pairs in the withers of the bull. The prongs of their sharp harpoon point catch under the skin, keeping them in place high on the very top of the hump, close together. Like the picador, the banderillero takes all instruction from the matador.

Before the fight, lots are drawn for each of the six bulls. The bull that the matador draws now belongs to him. He orchestrates this encounter with great care, using his team as wisely as he can. The entire scenario has three acts. In the first act, the picadors work for the matador. In the second act, the banderilleros have their spectacular moment. The last act belongs to the matador alone. From the moment the matador takes the sword and a small cape, the muleta, he has fifteen minutes to resolve this encounter. If he fails, the bull is immediately led out by a group of trained steers and he is left alone to face the contempt of the crowd.

I also knew some facts about the bulls. They are called toro in Spain. The ideal toro, to provide a sufficiently dangerous enemy for the torero so that the corrida will retain its emotion, should be at least four and a half years old in order to be mature, and weigh approximately 340 kilos without head and hoofs. I had heard that when he came for you, the ground shook beneath your feet . . .

I also knew at that moment, waiting for the corrida to start in the bull ring of Palma de Mallorca, the toro was waiting, restless and angry, in semi-darkness.

With this basic information I waited, unsure what I would in fact see. What I didn't expect was a totally mystical experience. I could not imagine that the central core of all psychiatric therapy was about to be revealed to me.

It was late afternoon. The sun had struggled with heavy clouds all day. As each matador paraded with their own toreros, the sun appeared, spilling half of the arena into sharp shadow. The sand was burnt gold.

I had a seat near the red painted wooden barrier. It was at head level with the parading men. The matador was slightly built. His face sculptured sharp and hard. There was something about his eyes that caught my attention. He was not looking at us. His eyes were not 'turned-out' and searching. They were veiled and dark. He had already started the magic dream sequence in which only he and the toro would exist.

At the sound of a bugle, a gate swung open and the bull emerged. He was a large animal. Dark and heavy. He trotted quickly into the centre of the ring, arrogant and aggressive. Searching for someone to punish for his frustrating wait.

In the sudden silence, I could hear his urgent hot breathing. The sound of his impatient hoofs on the sand.

I think of my patients who walk into my rooms for the very first time.

Paul aged 18 was brought by his parents.

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"I don't have a problem. I think my parents have a problem . . ."

This comment after a long silence. He remained passive and unresponsive. I tried many ways of drawing him into a dialogue. His disdain for me and the entire setting was powerful and crippling.

Howard aged 23 called for help. He sat before me wringing his hands, eyes downcast. His childhood had left him impotent in a terrifyingly hostile world. The challenge was to give him the courage to talk, to search, to stand up and risk himself.

Martha aged 36 burst into my room demanding help. All the doctors she had seen, had been incompetent fools. She had no faith in pills. Less faith in men. She was angry and arrogant . . . To work with her, I would have to control this anger. I would have to sharpen her need to meet me, open and honest.

In the first act the matador takes a history. His eyes never leave the toro. The president who presides over the corrida will signal with a handkerchief the end of each act. He can lengthen it or shorten the time as he pleases. If the matador is skilled he may shorten the time available to study the toro. One of the toreros encounters the bull with a large cape, and runs trailing the cape in the sand. Which horn does he use? Which eye? Does he charge in a straight line? Does he brake suddenly with his hind legs? Is he reluctant to encounter the torero? How much encouragement does he need to play his role to the full? Has the matador recognised the 'querentia'? The safeplace chosen by the bull. It may be a damp patch. It could be with his back

safely against the wooden barrier. He will leave this space to encounter the torero. He will always return to that safe-place.

If the matador does not learn all there is to know about this bull, the animal will destroy him. In the last act they will engage totally. To ensure that this is possible, and that the engagement will be emotional and meaningful, the toro must be prepared. If he is weakened or heavily punished, the final act is meaningless. There is no rapport. No vital electric link between the man and this death. If the toro is too strong, the last act may end in the death of the matador. There is a graph that grows in the matador's heart. In one arm of the graph, the learning capacity of the toro. Crossing it is the line showing the weakening of the animal. The point of crossing must be carefully controlled. There could be a meaningful encounter that has a logical resolution or a useless comictragedy of a weary bleeding animal dead on its feet, or a matador crucified on the horns of the toro.

This first act of history taking ends with the picador on horseback holding the bull at bay with a spiked staff. The bull's courage is tested. His response like everything else is carefully watched.

Joan age 32 sits before me. She is telling me her story. She has crossed her legs and placed her handbag in her lap. She folds her arms and leans forward onto her bag. Her shoulders are hunched. I have placed my chair in front of her, and a little to the side. I adopt her posture. I 'echo' her body, both to experience her mood and to 'lock in' to her words. I am aware of her use of words. Where we start in her story, where she is

taking me. I notice how she changes the pitch of her voice. At different moments she hunches deeper into herself. She is sealed off completely. I gently relax my own body, inviting her to follow. I gently increase the silence between us, watching, always watching, holding the air between us, looking for signs that will allow me into her painful world.

The second act is signalled. The matador sends his banderillero into the ring instructing him how many barbs he wants and where he wants them placed. On occasion an extremely skilled matador will place the banderilla himself. He stands alone in the ring. He no longer has a cape to distract the toro. He offers himself. He holds the sharp sticks high above his head. The bull comes, head low, horns at chest height. The banderillero rushes forward. They meet each other at full force. The poised banderillas are plunged vertically in the exact centimetre of space where the matador wants them. The banderillero swings out away from the horns using the shafts of the banderilla as a pivot. This enrages the bull. The urgency of the moment is marked with pain.

Edgar age 28 unable to establish relationships. He is unable to risk himself at any level. From the most trivial daily pursuit to the most complex activity. He is afraid to commit himself. His life is a shambles of procrastination. He is repeating this self-defeating drama with me. He sits smiling at me safe in his non-touch, non-involved, ivory-tower 'querentia'. He will talk about the political climate, the problems people generally experience in his field, about life. He cannot, will not, turn inwards. Feelings are commitments.

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I talk about his father. The many jobs his father had. The many moves they made. I talk about all the schools – of always being a new boy. He is silent. There are tears trailing down his cheeks. I continue probing. I place the banderilla firmly in place. In pain, he begins to explore his past. I judge it as carefully as I can. Too much pain and he will close off – afraid.

The urgency for therapy is marked with pain. The therapist can only work with pain. In cool analytic therapy there is pain in the silences, in the sharp interpretations cutting to the core of one's need and one's fear. In hot touch therapy in all its shades, pain cannot be escaped. The patient is sucked into touch and into memory.

The president signals for the final act. The ring suddenly clears. The matador takes the small muleta and a sword. He draws the toro to him, slowly winds him around his body. The toro and the matador have entered a trance. They are linked to each other. He encourages the bull to be brave. They flow together.

On the 20th November 1567, Pope Pius the Fifth issued a Papal edict excommunicating all Christian princes who should permit bull fights in their countries and denying Christian burial to any person killed in the bull ring. The church only agreed to tolerate bull fighting, which continued steadily in Spain in spite of the edict, when it was agreed that the bulls should only appear once in the ring.

Prior to this law, if the bull survived the final fifteen minutes, it reappeared the following week in another corrida. Of course the mortality amongst matadors was terrifyingly high. The toro had learnt. It was now impossible to control.

We are not as wise in psychiatry.

Ilana age 26. Described a three month period in Tara Hospital. She named all the therapists she had seen. The psychiatrists and psychologists named, were a fair cross section of therapists available over the past ten years. She had never been drawn into the final act. There had never been a resolution of her problem. I listen carefully. I recognise a phrase. Words of colleagues. For the most part, a blur of crude semi-psychiatric insights. No real pain. She watches me closely. Her querentia is now a minefield of psychological jargon. It's impossible to entice her out. She is formidable.

The matador is working 'Arrimar al Toro'. He is offering himself. He allows the toro's horns, which are razor sharp, to take the braid off his chest. He floats the muleta like a butterfly in slow motion over the toro's head and across his back. He turns the toro majestically, slowly around him. The bull's blood stains the matador's abdomen.

Jane age 30. Admitted to Tara Hospital. She is allocated a registrar for therapy. I have been a registrar for six months. I have learnt only a few suertes – clumsy psychiatric passes that are part of the technique of the psychiatric encounter. I'm not sure what she is saying to me. I don't understand what's wrong with her. I make what I imagine to be an elegant pass with my new multicoloured psychiatric cape. She remains in her safeplace. We are both bewildered.

We are visited by Prof P from Holland. There is a case presentation. I present Jane. The small room is crowded with therapists. They sit and stand in a tight circle. The Prof, Jane and I are in the centre. I present my patient. I hear my own voice. It is clear that I am presenting nothing. I have never met Jane. I mumble a few more words and leave the corrida. Prof P pulls his chair close to Jane. The room is so still, the scraping of his chair is loud and harsh. He takes the arms of her chair in each hand, effectively blocking us out. He talks softly. Gently. He holds her with his eyes. My encounter with her has done nothing to help him, or her, for that matter. He starts from the beginning. Slowly he draws her out - giving her confidence protecting her - easing her into her childhood. She begins to cry. He takes her hand. I am thunderstruck by the things she is saying in this crowded impersonal room. The things that she could not reach in the warm intimacy of my consulting room. The Prof keeps offering himself - his warmth - his concern - his love. She comes out of her 'querentia' and encounters him. She is in pain. His gentleness gives her the courage to go on . . .

The matador and the toro are locked in a dark intimate dance. We are approaching the 'moment of truth'. For me, the moment of truth is not the death of the toro.

I have used the toro as the symbol for the illness. In this analogy I am not concerned about the person behind the illness. The toro is the illness. The disease process itself. When the matador faces the toro in the final moments – it is the most powerful

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negative force that threatens him. In the consulting room we are faced with the same powerful destructive elements.

Abel aged 40 was deeply depressed and suicidal. In the time allotted to me, we did not engage. He remained in his querentia – his belief that he had failed and that he had become a burden to his family. In another corrida, defeating another matador, he committed suicide. I was not gored as a torero might be. I was nevertheless physically destroyed.

In the corrida the death of the bull ends the encounter. In therapy the death of the toro is the moment when the illness is conquered. Only in Hollywood is the therapeutic moment sudden and dramatic. In real life, this is the vital 'end game' in therapy. The disease is controlled, it wanes, the patient is more courageous. The destructive force is finally overcome. The toro is killed. The encounter has been successful. The negative overwhelming force might be the patient's suicide wish, to the voices that tear down his familiar world and plunge the patient into

fear, the delusions that destroy all trust, or the life-style that drives one deeper into loneliness. The death of this force frees the patient for ever.

There is another moment in the corrida that is the moment of truth for me.

The matador remains still, unafraid. He watches the toro come towards him. He is calm, motionless. He moves the cape or muleta slowly, suavely, prolonging the moment of the pass and the danger. He is weaving a magic spell over the toro.

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They are one single moving form. He stops the bull abruptly – holding him frozen with his muleta held low in his left hand. Then he slowly turns his back on the bull. He stands there for what seems an age – elegant and unafraid of this death. He is doing this for every person watching the corrida. He is doing it for me – that I too am without fear, and like him, I have a moment of contempt for death . . . He has cast a spell over the entire corrida.

Dr C has arrived in the ward at a most crucial moment. A patient has become extremely aggressive. He is psychotic. He has a shovel in his hand. He swings it wildly around his head. He has cleared a space for himself of fellow patients and staff. We all hang back afraid. He roars at us. Dr C walks in. She is unafraid of the madness. She walks slowly towards him. She talks to him softly, firmly.

"Come Henry. You are very upset. Give me the shovel. I want you to tell me what happened to you . . ."

For one moment he looks at her. Searching her voice, her eyes, feeling her total calm. She takes the shovel from him and she leads him to the consulting room.

Our patients watch us closely. They note the finest nuance in our response to their story. Our honest fearlessness and disdain for the destructive storms that lash at them, gives them the courage to go on. This is the moment of truth for the patient.

You understand what is happening to me – and you are not afraid . . .'

For the corrida to be complete a number of elements must be present. This follows in every detail the psychiatric encounter.

The toro that bursts out of the darkness into the tragic arena of the corrida will face men for the very first time in his four and half years of life. Only once before as a yearling will he be challenged. If he responds, he is set aside for eventual corrida. In every way this will be a new encounter for him.

The matador has a great responsibility to enact this drama fully, honestly and with a great deal of skill. There must be a good resolution.

The toro will immediately find his safe-place. This is not unlike the querentia of our patients. Their delusions or perhaps their homes or beds. The matador has to beguile the toro to leave his querentia. If driven by the rapid passage of time - the matador in desperation enters the toro's safe-place - he may be destroyed. It is dangerous to enter the patient's safe-place unless you are extremely skilled and confident. The only way to draw the toro out of the querentia is to offer yourself. The matador who is afraid and plays the bull at arms length fails to engage. There is no rapport. They do not coalesce into one feeling movement. This is the moment the crowds throw their cushions into the ring. They are instantly aware that it has failed. This is the central core of all therapy. I have known therapists who hold themselves aloof. They create a 'clinical' atmosphere. A need to be 'scientific'. Patients are aware of this. If we fail to offer ourselves, therapy fails.

There will be pain and bloodshed. I have never known a therapeutic encounter without this.

In Palma de Mallorca, in that first encounter, the last act was a deeply emotional experience. I can see it now, as though it was taking place at this very moment.

The matador stands facing the bull. The red heart-shaped muleta in his left hand, the sword outstretched in his right hand. He invites the toro to come to him. He offers his chest, his abdomen, his groin, his thigh. He is open and vulnerable. A great dream calm has filled the matador. This calm sweeps the entire arena into a breath-holding silence. The bull charges. The matador lowers the toro's head with a gentle dropping of the muleta. As the sword enters between the cervical vertebrae, the toro's horn brushes the matador's tunic. They face each other. The toro does not know he has died. At that moment the sun found a heavy cloud and covered its face.