

THE PRIVATE SELF

&

RELATIONAL THEORY

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Our book asks the question: what is the relation between the inner world of private meaning and the outer world of interaction? This immensely broad topic suggests the need for concepts that would bridge the gap between individual and social psychology. Psychoanalysis is preeminently a psychology of the individual, yet our field of observation is intersubjective. Traditional psychoanalysis has been defined as a one-person psychology in that it refers intersubjective events occurring within the psychoanalytic dyad to the mind of one individual, the patient. However, within the past decade there has been a noticeable shift of emphasis toward a two-person psychology. We have collectively given greater weight to the developmental significance of actual parent-child experiences as well as to the intersubjective nature of transference. This point of view has long been implicit in object relations theory and more recently has become the explicit focus of psychoanalytic studies of the infant.

Somewhat more than forty years ago, the English psychoanalyst John Rickman (1957) suggested that research in psychology be divided in accordance with the number of persons involved; hence he proposed a one-body, two-body, three-body psychology, and so forth. For example, when we consider the influence of internalized objects, Rickman noted that we can speak of a three- or four-person psychology in a two-person situation.

A recent school of psychoanalytic thought, which identifies itself as a two-person psychology, has come to be known as relational theory. I shall use this term in its more general, generic sense as a theory that rests on the premise that psychoanalysis is fundamentally intersubjective. In its more restricted sense, relational theory has been identified by some as an alternative to Freudian psychoanalysis, which, in turn, has been inaccurately described as a “drive-structure” model. My own position is to oppose such dichotomies. Even as one who does not accept Freud’s instinct theory, I do not find it necessary to dichotomize relational theory and Freudian thought in this fashion; it does an injustice to the complexity and subtlety of Freud’s thinking. Furthermore, Freud himself did not contrast individual and social

psychologies. Freud (1921) explicitly stated in his monograph on group psychology that a psychology of the individual must perform be, at the same time, a social psychology. Traditional structural theory can be interpreted within a social context as a theory of internalized objects; the self contains many voices. Freud posited that what was internalized as psychic structure represented a *relationship* between persons. For example, in “An Outline of Psychoanalysis” (1940), Freud described the superego’s function in relation to the ego as carrying on the functions performed by people in the outside world. Freud did not further develop this line of thought; this was left to Fairbairn, who can be considered as the founder of contemporary relational theory.

Freud was as aware as we are today that the transference and countertransference are the primary sources of psychoanalytic observation. He knew that it was this unique source of observation that distinguished psychoanalysis from other psychologies. While fully aware of the intersubjective origin of the countertransference, Freud believed that to utilize the countertransference as a source of primary data would jeopardize psychoanalysis’ claim to be an “objective” science. We learn this from the Freud-Ferenczi correspondence (Brabant et al., 1993). As early as the years prior to World War I, both Freud and Ferenczi knew a great deal about countertransference, but Freud advised Ferenczi not to publish papers on this subject because it might give psychoanalysis a bad reputation. He was thinking of the fact that countertransference might involve some kind of occult transfer of thoughts from the patient to the analyst and vice versa, and to reveal this connection might imperil psychoanalysis’ claim to be a science. Some fifteen years earlier Freud revealed in a letter (August 7, 1901) to Fliess (Masson, 1985) that he was wounded by Fliess’s assertion that Freud was a “reader of thoughts [who] merely reads his own thoughts into other people.” Freud responded that if that were true it would render all his efforts valueless. So in that respect Freud was allergic to any public discussion of occult communication between analyst and analysand.

To some extent Freud was a positivist for whom a purely subjective, phenomenological account of self-experiences was unscientific. Freud avoided using the term *self*, he spoke of the “I,” which was rendered by Strachey into the abstract Latin term *ego*. The experiences of the self, both in isolation and in interaction with others, were referred to as a theory of psychic structures contained in a mental apparatus. But Freud did not go as far in this direction as his critics would maintain; we need to be reminded that the *I* is not equivalent to the *ego*. Further, the humanist in Freud prevented him from

succumbing completely to such abstractions. Freud alternated between an anthropomorphic account of psychic structures—as if the structures themselves were persons—and a very different account in which the formation of psychic structures is seen as an impersonal process based upon the transformation of instinctual energy. Freud (1923) described the ego and the superego as if they were people, a child and its parents. As with a child and its parent, the superego is at times punitive toward the ego while at other times it is loving and protective. Interactive events occurring between the child and its caretakers were conceived as internalized events, so that the system of internalized objects could serve as representations or markers of those events. So in this sense Freud did not overlook the significance of the social environment, but rather he transposed interactional experiences into the language of an individual psyche.

This tradition has continued into our own time and is reflected in Hartmann's (1950) introduction of the concept of the self and object representations, which was further expanded through the work of Jacobson (1964) and Kernberg (1976). Elsewhere (Modell, 1984, 1993) I have been critical of the terms *self-representations* and *object-representations*, as they suggest an atomistic entity. Whatever these terms signify, they refer to memorialized structures without apparent links to experiences in real time.

Fairbairn (1952) greatly enlarged Freud's anthropomorphic interactional description of the ego, or more properly speaking, the self. Traumatic experiences that have occurred between the self and the caretakers become transposed into internalized object relations within the self. Fairbairn proposed that a traumatic relationship with a parent resulted in the internalization within the self of both actors, the victim and the perpetrator. If the affective experiences of both the victim and the perpetrator are internalized within the self, a relative coherence of the self cannot be maintained. Fairbairn postulated that an initially cohesive self is then split into dissociative aspects such as a central ego or self, which may or may not have conscious awareness of other aspects of the self. These split-off other aspects of the self were characterized by Fairbairn as an exciting object, a rejecting object, and a persecutory object, and so forth. In contrast to Freud, Fairbairn described the splitting of the self as a consequence of traumatic relationships. Sutherland (1989), in his biography of Fairbairn, makes the justifiable claim that Fairbairn's theory represented a Copernican revolution within psychoanalysis in that his theory of personality, unlike Freud's, was founded upon social experiences and not on the vicissitudes of individual instinctual development.

In this regard it is interesting to note that a similar criticism of Freud was made as early as 1927 by the Russian philosopher Bakhtin (1984), who noted that in a psychoanalytic session the patient's words are determined not only by the motivations of the individual but more by the interaction that comes into being in the micro-society formed by the analyst and the patient. I shall shortly return to Bakhtin's contributions to this issue.

Fairbairn's theory is essentially a theory of memorialized social relationships. Affects and speech are the missing links that would enable his theory to be applied to social interactions in real time. Fairbairn did not pay particular attention to the function of affects. In this regard Kernberg (1976) made an important contribution to the theory of internalized object relations, namely, that affects are the organizers of internalized objects. Affects are memorialized as categories of experience that form a link between past and present. In *Other Times, Other Realities* (Modell, 1990) and *The Private Self* (Modell, 1993), I have re-emphasized the importance of Freud's idea of *nachträglichkeit*, the re-contextualization of memory, suggesting that in the transference specific memories of affective experiences are recategorized.

In *The Private Self* I develop the thesis that the self is fundamentally paradoxical, which leads to certain conceptual dilemmas. Philosophers have long recognized the epistemological quandary of objectifying the subjective experience of self. Freud may have recognized this when he alternated between anthropomorphic and scientific accounts of the ego. Apart from this epistemological paradox, the self is contradictorily both private and social. The self obtains its sense of coherence and continuity from within, yet at the same time it is dependent upon the appraisal of others who can either support or disrupt the self's continuity. The private self supports a relative self-sufficiency, whereas from another perspective the self is not at all autonomous and is vulnerable in its dependence upon others for a sense of coherence and continuity.

The coherence and continuity of our private self is generated from within, and we guard against anything that intrudes upon this process. In contrast, as has been emphasized by self-psychology, we also seek coherence through social affirmation. As infants we acquire human traits through the influence of others. This coherence, finding a completeness of the self in the other, is analogous, in adulthood, to the poet's use of a muse or one's use of what Kohut referred to as a mature self-object. But it should be noted

again that the other who contributes to the cohesion of the self can also contribute to its disruption. The self is a homeostatic selective system aimed at maintaining its own continuity and coherence. Yet the self is at the same time an intersubjective system. As Hegel first observed, our consciousness of self is dependent upon the consciousness of the other. If we grant that the self is paradoxically both autonomous and dependent, individual and social psychology cannot be dichotomized. This paradox of the simultaneity of autonomous self-regulation and dependent intersubjectivity can be illustrated in certain well-known aspects of the transference.

For example, we know that transference is both a repeatable occurrence and a unique happening. There is some justification for the view that the transference can be used as a nosological marker, as seen in the differentiation between transference in the so-called classical neurosis with its central oedipal configuration and transference in the narcissistic disorders. We also know that when a patient has had more than one analysis, some aspects of the transference are repeated regardless of the personality, theory, and technique employed by each analyst. Yet paradoxically the transference is also a uniquely new creation that reflects the patient's response to the personality and technique of the analyst. Transference from this perspective is not repeatable inasmuch as the analyst, by virtue of his or her theoretical beliefs, will interpret some aspects of the transference and minimize or ignore other aspects.

Recognizing that both the private and social selves operate simultaneously as separate organizing foci may help us to avoid the crude pendulum shifts that have characterized conventional wisdom concerning the transference. For example, when I was a psychoanalytic candidate it was an unquestioned assumption that the analyst's contribution to the transference in a well-conducted analysis was relatively minimal, and that technique was accordingly adjusted toward this end. The analyst was viewed as a neutral screen or mirror to receive the patient's transference projections. Today there are some analysts, influenced by relational theories, who claim that the content of the transference can largely be attributed to the analyst, thereby minimizing the projective aspects of the transference and, by implication, minimizing the autonomous aspects of the private self and the patient's psychic reality.

If one needs evidence for the existence of the private self, one has only to observe the defensive measures employed to preserve it. The need to preserve the coherence and continuity of the self from intrusive disruptions is evident in most psychoanalyses. These defensive measures can be placed under

the heading of the regulation of distance. As Balint (1950) noted, defenses not only are intrapsychic but also may occur between two minds. In disorders of the self, the so-called narcissistic disorders, the non-communication of affects is one method of regulating distance. The meaning to be discovered in our speech is signaled by a certain quanta of affect. We are all familiar with those patients who fill their hours with talk that communicates nothing, so that at times we feel that we are drowning in a sea of words without meaning. Prolonged states of nonrelated-ness induce a familiar countertransference response. I experience a sense of boredom and sleepy withdrawal, which has been described by others (Khan, 1986) as a state of “eerie mellow fatigue.”

Winnicott’s (1949) concept of the false self is another example of an interpersonal defense; a form of social compliance to prevent the private self from being known. Non-communication of affects is not the same as a false self in that it does not represent a social compliance, but it has the same aim—that of protecting the private self from intrusion. This type of defense may become habitual in childhood in those families in which the child experiences the caretakers as excessively intrusive. What is of particular interest is that this social defense is internalized as an intrapsychic defense. *The means employed to protect private space against intrusion by others is also re-created within the self.* As a consequence, the individual loses touch with the vital affective core of the self, and life loses its zest and meaning. Some individuals become estranged and decentered from their own private self and are as false and inauthentic within themselves as they are with others. In the struggle to preserve private space they therefore achieve a tragic pyrrhic victory. Ironically, the fight to protect the private self continues even after the individual has lost contact with it. It is as if a householder maintained a burglar alarm long after misplacing the jewels. *In closing oneself off from others, one inadvertently closes oneself off from oneself.*

Measures to preserve the private self may appear in the cognitive as well as the affective sphere. For example, some patients need to preserve the autonomy of their own thinking by not accepting the ideas of others. We are all familiar with cases in which the patient appears to accept what we say, only to learn later that this represents a false compliance and that nothing has gotten through. These patients live within a fortress that does not permit any ideas to enter that they have not already thought of themselves. This trait is particularly evident in cases where the parent’s construction of reality is unreliable, for example, if the parent is psychotic. In these cases psychic survival depends upon their inner construction of reality remaining unchallenged. I believe that these defenses against other minds

that we can observe in the so-called narcissistic cases are merely an exaggeration of a process that is present in all of us.

The major point that I am attempting to make is fairly simple: there are two organizing foci within the self—one is social, that is to say, intersubjective, and the other is private and autonomous. The private and social selves develop in tandem. We know that the development of the sense of self is linked to the acquisition of language. We also know that the acquisition of language in infancy is a social act, but this does not preclude the existence of privately generated meanings that exist alongside of and parallel with language acquisition.

This view is consistent with the observations of infant and baby researchers, who have, within the past few decades, collected a vast body of empirical data about mother-child interactions. The work of Trevarthen (1989) and others has demonstrated that intersubjectivity exists at birth. Both infant and mother are able to track each other's affective responses and react to each other's affective states. The perceptual source for the infant is the mother's tone of voice and gaze—the eyes are truly the window to the soul. This interaction can be described as conversational in that there is a sense of combining the interests of two persons in an exchange of signs. But the infant is not simply a passive partner in this interaction, for, even shortly after birth, he or she is capable of self-activation and self-regulation. The mother responds to the infant's initiative in equal measure as the infant responds to the mother.

Not only does the infant seek to engage the mother, but he or she also initiates periods of disengagement. Even in infancy there is a suggestion of the infant's need for relative autonomy in that the infant, in a sense, is able to regulate his or her distance from the mother. This is done by means of an aversion of gaze, so that periods of relatedness are interspersed with periods of non-relatedness. Lou Sander (1983) observed that by the third week of life the mother responds to the infant's needs by providing periods of relative disengagement. Intuitive mothers will provide their infants with "open space," which Sander sees as the infant's opportunity to exercise an "individually idiosyncratic and selective volitional initiative." The infant is free to follow his or her own *interests*, which may involve self-exploration or responses to low-level stimuli. Disengagement has a place of equal importance with engagement. One can infer from this the existence of an agency within the infant that is separate from the mother. Winnicott stressed the importance of the infant's first creative act, which he called the

spontaneous gesture. The spontaneous gesture requires the mother's presence, but it exists independently of the mother. While language acquisition is undeniably social, I would suggest that the infant's spontaneous gesture represents an area of private meaning. This selectivity of the spontaneous gesture suggests to me the beginnings of a private self whose autonomy must be preserved.

The paradox of the autonomy of the private self and the dependency of the social self gives rise to a multiplicity of clinical dilemmas of which we are all aware. A central quandary is: How can I remain the same in the midst of the other person? How can I maintain my own voice and not be swallowed up by the other? Here we also encounter the fact that empathy is a mixed blessing. The wish to be known and understood is counterbalanced by a fear of being found and controlled. An empathic response may reinforce a fragile sense of self, or it may lead to sense of merging fusion which threatens the continuity of the self.

To maintain one's own voice in the midst of the other person means that one is free to have one's own thoughts and can select whether or not one chooses to be influenced by the other's construction of reality. The question of whose reality it is, is especially evident in cases of physical and sexual abuse of the child, where the voice of an adult may insist that nothing of significance had occurred. Ferenczi (1933) observed this problem in his famous paper "Confusion of Tongues Between Adults and the Child." The confusion of tongues refers to the child who is sexually seduced by the adult and is confused by the contradiction between his or her own language of tenderness and the adult's language of lust and hypocrisy. Ferenczi goes on to describe traumatized children's helpless anxiety, which compels them to subordinate themselves like automata to the will of the adult—to divine each of his desires and to gratify these oblivious of themselves. He makes the further telling observation that the guilt of the adult may be absorbed by the child.

We still do not really understand the process of suggestion, but it does involve a submission to the voice of the other. In the altered state of consciousness of hypnosis, the subject's powers of discrimination and judgment are suspended and replaced by the hypnotist's command. However, the concept of suggestion becomes more complicated when applied to states where the subject is fully conscious, as in psychoanalysis or psychotherapy. Freud (1920) noted that the patient's acceptance of an interpretation always depends upon some measure of suggestion. But was Freud thinking of the paradigm of the

hypnotist to whom the patient passively submits? Alternatively, we can imagine that the analyst's suggestion will animate the patient and act as a fertilizing influence, enabling the patient to generate new meanings. In such cases, an initial passivity' is followed by the patient's active generativity.

When new meanings are generated in an analysis, does the analyst simply facilitate the emergence of a selective process from within the patient? Alternatively, are new meanings borrowed from the analyst, bypassing the agency of the patient's self, or are new meanings arrived at conjointly? In other words, does the patient's acceptance of an interpretation represent an act of compliance or a generative process? Correspondingly, is the analyst's action one of discovery or one of invention?

Bakhtin (quoted by Wertsch, 1991) in his analysis of utterances, distinguishes speech interactions that inter-animate both participants, which he characterizes as multi-voiced, in contrast to other interactions that are authoritative and univocal. As in the paradigm of hypnotic suggestion, the crucial question is whether the content of what is communicated is received passively or actively altered by the perceiver. An authoritative communication would be analogous to the transmission of a telegraph message that the receiver decodes unchanged. Authoritative discourses are fixed in their meaning, demanding a submission or allegiance. Authoritative communications are not transformed, only transmitted; new meanings are not created—they are simply passively received. Bakhtin also uses the term *ventriloquation* to refer to instances in which the speaker uses someone else's voice without investing the words with his own intention and accent. That is to say, the agency of the self is temporarily suspended. Bakhtin was referring to ordinary speech, but therapists recognize an analogous process when someone is under the sway of an unconscious identification and recreates the thoughts of the other.

A more complicated example can be seen in the phenomenon known as projective identification. I mention this term with some hesitancy as it has become bowdlerized and does not have any agreed upon definition. I would suggest that what characterizes a projective identification is an involuntary communication of affects with a specific memorial context, usually related to a chronically traumatic childhood parental interaction. The affective communication in a projective identification is involuntary as far as the patient is concerned, in that it is unconscious. For example, a patient was, as a child, subjected to unpredictable and unprovoked attacks by her father, who suffered from a wartime post-

traumatic stress disorder. During an hour in which she was markedly withdrawn and depressed, she complained that I was not helping her because I was not making useful comments and interpretations. I, in turn, was feeling frustrated because I felt that in her withdrawn, mostly silent, unengaged state it was not possible to say anything meaningful. In response to her complaint, I did say that she wished me to produce something “out of the blue.” I do not know why I chose that particular expression but, much to my surprise, it evoked an intense rage reaction. My experience was one of being attacked for making an innocent remark; her attack on me also felt “out of the blue.” It was in fact that phrase that triggered the patient’s outburst, evoking the memory’ of her father’s attacks, which came out of the blue. The patient’s affective state of the blameless victim was telegraphically communicated to me and I directly experienced it. But I also became angry’ in response to her attack so that the patient’s experience was that I was attacking her. This was not simply a reversal of roles—we were both attacker and attacked. As Fairbairn (1952) predicted, developmental trauma results in dissociated splits within the self. In this instance the patient’s attack upon me was dissociated; when we attempted to later analyze this interaction, the patient did not even recall that she was angry.

Projective identification does involve the kind of thought transfer that was of interest to Freud and Ferenczi. It is a very curious fact that what was the patient’s private experience temporarily became my experience. I believe that this kind of involuntary transfer of traumatic affective memories is not limited to the process of projective identification, for the memories of trauma that parents have experienced are often unconsciously communicated to their children.

Helene Deutsch (1926) observed that aspects of the analyst’s unconscious experience during an analytic hour may be traced to the analysand’s occult communications. She called this process a “complementary” attitude, in contrast to empathy, which is explicit and conscious. Her observations were expanded by Racker (1968) in his contribution to the concept of projective identification. He explained Deutsch’s complementary attitude as the analyst’s unconscious identification with the patient’s internal object. I believe that this view has been amply confirmed by clinical observation.

From Bakhtin’s perspective, projective identification can be classified as an authoritative communication in that initially it is telegraphic and univocal. However, we know that there are two common outcomes of projective identifications. If a projective identification remains univocal, it can lead

to a stalemating of the therapeutic process. If projective identification results in the generation of new meaning, however, it may become a decisive turning point in a psychoanalysis or psychotherapy.

It is the analyst's capacity to make use of projective identifications that determines this outcome. I have suggested in *Other Times, Other Realities* that the creation of new meaning in the therapeutic process implies a capacity to shift from one level of reality to the other. There are multiple levels of reality at play within the analytic process: ordinary life; reality that is separated off from ordinary life by the therapeutic frame; and the misidentification of the analyst, that is to say, the transference.

In partial answer to the question "How do we remain the same in the midst of the other?" I suggest that it is this capacity to experience life simultaneously at many levels of reality. This implies an acceptance of the paradox of the coexistence of merging and separateness, which may be another way of defining mental health. The acceptance of multiple levels of consciousness within the self enables us to transform a univocal communication into a dialogue. This is necessary for adaptation, for in our contemporary world human life is irreducibly multi-leveled. We are both paradoxically merged with the other and separate from the other. This represents an intrinsic dialectic, which I believe should also be reflected in our theories that conceptualize the relation between private meanings and our interaction with others.

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