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Self Psychology

The Self and Its Vicissitudes Within a Relational Matrix

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A well-documented shift from a one-person to a two-person psychology (Rickman, 1957; Balint, 1968; Greenberg and Mitchell, 1983; Modell, 1984; Mitchell, 1988; Ghent, 1989) cuts across a number of psychoanalytic theoretical developments, including the British school of object relations, self psychology, interpersonal psychoanalysis, and currents within Freudian ego psychology. Because of its pervasiveness, it has led to the use of the term "relational perspectives" (Greenberg and Mitchell, 1983; Mitchell, 1988), the subject matter of this book. This shift from an intrapsychic to a field perspective can be likened to the Copernican revolution, in that the individual, like planet earth, does not exist alone but can be understood only in relation to the "gravitational forces" of the universe at large.

SHIFT IN OBSERVATIONAL STANCES

Fundamental shifts in theoretical perspectives within the domain of science often entail basic changes in both observational and conceptual stances. The shift from an intrapsychic to a field model within psychoanalysis is in part based on the on-going, far-reaching change from the positivistic science of the 19th century, wherein so-called "facts" were "objectively" observed, to the relativistic science of the 20th century, marked by Heisenberg's Uncertainty

Principle, wherein the "observed" is recognized as always shaped by the observer.¹

The shift from positivistic to relativistic (or perspectivist) science is apparent in the psychoanalytic observational stances of the "objective" observer versus the subsequent formulation of the "empathic mode of observation." A breakthrough in Freud's work was his investigation of the patient's intrapsychic world, implicitly using the yet unformulated empathic mode of observation. The positivistic science of the day, however, significantly influenced the investigation of the patient's inner life. The analyst's observations and interpretations tended to be, and often still are (particularly in clinical discussions), viewed as "objective."² Recognizing from a relativistic scientific position that the analyst always affects what is observed, Kohut (1959, 1982) clarified and proposed the *consistent* use of the empathic mode of observation namely, to attempt to understand from *within* the vantage point of the analysand. Placing the analysand's perspective and experience in the foreground *militates* against imposing the analyst's point of view onto the analysand. Although this listening stance is designed "to hear" as well as possible from within the vantage point of the analysand, this is clearly a relative matter, for what is heard is always *variably* shaped by the analyst.³ To refer to this

¹This shift to a relativistic science is both reflected and further developed in Piaget's theory of constructionism.

²We can surmise that Freud did not formulate the "empathic mode of observation" principally because of the positivistic science of the day. Although he seldom used the term empathy, Freud (1921) did address its fundamental importance in referring to it as "the mechanism by means of which we are enabled to take up any attitude at all towards another mental life" (p. 110). Empathy has generally referred to affective resonance with the other (see Greenson, 1960). As a data-gathering stance (Kohut, 1959), empathy enables us to feel into and to "vicariously introspect" about the other's subjective experience—a complex affective and cognitive process (see Lichtenberg, 1981).

³In his critical assessment of self psychology, Bromberg (1989) erroneously links the empathic mode of observation with "dedication to full empathic responsiveness" (p. 282). Kohut (1959, 1982) conceptualized the empathic mode of observation as a data-gathering stance, distinct from ensuing interventions. The confusion may partially emanate from Kohut's (1982) noting that this data-gathering activity of the analyst (which the patient experiences as a response from the analyst) in itself may be experienced by the patient as "empathic" and "therapeutic" and his use of the word "empathy" also to refer to a "powerful emotional bond between people." Referring to the *responses* of the analyst based on empathically-gathered data, Kohut (1977) also noted the need for an "average empathic responsiveness" (p. 253). Contrasting empathic responsiveness with the "neutrality" of the classical stance, Kohut used the term to address the requisite affective involvement of the analyst. What is meant by empathic responsiveness is a far too complex subject to approach here, but it is to be differentiated from the empathic mode of observation.

listening stance as a mode of "observation" reflects the ongoing shift from positivistic to relativistic science, for "observation" conveys a sense of an "outside" observer. A more relativistic description is to identify this mode as the empathic mode of *perception*, referring to the analyst's perceptual process (Lichtenberg, 1981, for example, uses this latter term). The analyst's perceptions, understandings, and explanations are subsequently offered to the analysand for his or her experiential assessment (Schwaber, 1984, has further delineated this stance).

When the analyst's observations and interpretations are no longer viewed as "objective" facts but as "subjective" organizations, the analytic field shifts immeasurably as the analyst is "dethroned" from the position of the "objective" observer and becomes a coparticipant in perceiving and constructing the analytic process. The perceptual-affective-cognitive organizing principles or schemas of the analyst variably shape the analyst's experience and reading of the analysand's experience, just as the analysand's schemas variably shape his or her experience of the analyst. This fundamental shift from positivistic to relativistic science and paradigmatic change in observational stances underscores that the *analytic arena* involves an interaction between two persons (and their respective subjectivities) and, therein, is a relational or intersubjective field.⁴

ONE-PERSON AND TWO-PERSON PSYCHOLOGIES: A NEW SYNTHESIS

In understanding a person (personality theory), a one-person psychology model emphasizes biologically determined developmental unfolding and conflictual experience and views psychopathology as primarily intrapsychically generated. A two-person psychology model emphasizes development and conflict emergent within a relational field and views psychopathology primarily as emergent

⁴The terms relational (Greenberg and Mitchell, 1983) and intersubjective (Atwood and Stolorow, 1984) are used here interchangeably. The term relational directly refers to (internal and external) relationships and is easily recognizable and also broadly applicable outside the analytic context; the term intersubjective, in emphasizing the interaction of two subjective worlds (to be distinguished from Stern's (1985) use of the term intersubjective, which refers to a distinctive form of relatedness), includes more easily, when applied to the analytic arena, the full range of self experience in which the relational dimension shifts between foreground and background. Both terms refer to a field model in which the individual is viewed as developing and living within a relational matrix.

within and generated by the relational field. Because these theories of development and pathogenesis reflect an intrapsychic and relational emphasis respectively, a one-person psychology model *applied* to the analytic arena tends to support the classical view of transference as a displacement and projection onto the blank screen of the analyst wherein the contribution of the analyst is considered minimal, that is, transference as distortion (for a review, see Fosshage, 1990a). Interpretation and insight, and not the relational experience, tend to be viewed as the central agents of therapeutic action. Correspondingly, a two-person psychology model supports the view that both patient and analyst variably contribute to the transference (for a review, see Fosshage, 1990a). Conceptualizing the analytic scene as a two-person psychology opens the door to including, if not emphasizing, the new relational experience, in addition to interpretation and insight, as important agents in therapeutic action.

As Modell (1984) and Mitchell (1988) point out, considerable overlap exists between these two theoretical perspectives. The one-person perspective is not "naively solipsistic" and the two-person perspective is not "naively environmental" (Mitchell, 1988, p. 4). Environmental influences are included within a one-person perspective, but the *action* in development, pathogenesis, transference, and therapy tends to be intrapsychic. Conversely, biological determinants are included within a two-person perspective (for example, primary motivations in all psychoanalytic theories are biologically anchored or prewired), but the *action* in development, pathogenesis, transference and therapy tends to be relational. All theories have elements of both, although most theories emphasize, as evidenced in interpretive constructions, one side or the other. Moreover, the elements in the various monadic and dyadic models significantly vary in *content*. For example, all theories of primary motivation assume that motivation is inherent to the organism, but differ as to what the specific motivational strivings are.

Although Freud (1896) in his seduction theory began with a two-person emphasis, his theory evolved primarily into an intrapsychic model. The reemergence of a field perspective in psychoanalysis, the Hegelian "antithesis," has prepared the way, initially, for the use of complementary models (Modell, 1984) and, now, for a possible new synthesis through the integration of the one-person and two-person perspectives (Modell, 1984; Chent, 1989).⁵ As Chent (1989)

⁵Similarly, the developmental arrest (self) theory was initially juxtaposed with the conflict/defense model (Kohut, 1971) as a complementary model in the 1970s and early 80s (see Stolorow and Lachmann, 1980). As the theory evolved a new synthesis

points out, one emergent synthesis, guided by the overlapping work of Winnicott, Guntrip, and Kohut, involves the concept of the self "as the center of activity of the psyche," within a relational field.⁶

With the central focus on the development, consolidation, and maintenance of the self, self psychology is viewed by some advocates (for example, Goldberg, 1986, and Wolf, 1988) and critics (for example, Bromberg, 1989, and, as relating to transference, Hoffman, 1983, and Mitchell, 1988, 1990) as fundamentally a one-person psychology. This assessment, I believe, is based principally on Kohut's initial separation of the narcissistic and object relational lines of development, a separation that he never fully resolved, and on his early notion of merger between self and object when the object serves archaic selfobject functions. To separate conceptually two lines of development implies erroneously that self-development does not occur within a relational field, a theoretical contradiction (to be developed) in the light of the emphasis on the self-selfobject matrix. This separation also erroneously implies that the state of the self does not affect one's object relations and that one's object relations, in turn, do not affect the sense of self. Although Kohut legitimized self-concerns by focusing on the development of the self (in contrast to classical theory wherein the developmental pathway is from infantile narcissism to object relatedness), initially he inadvertently repeated the error in classical theory of dichotomizing self and object relational concerns. Although Kohut (1984) never fully extricated himself from this dichotomization, his description of "self-selfobject relationships" became more relational in that it typically involved two separate persons (see pp. 49-52). Subsequently, other authors (for example, Modell, 1984; Stolorow, Brandchaft, and Atwood, 1987; Bacal, 1990; Bacal and Newman, 1990; Fosshage, 1990c) have more forcefully set forth that the self-selfobject matrix is a relational matrix; they, therefore, consider self psychology, in part, to be fundamentally a two-person field model.

My thesis is that the evolving theory of self psychology, a direction Kohut (1984) provided especially in his last book, newly synthesizes monadic and dyadic features and that a new synthesis is required to

emerged in an overarching self psychological theory in which conflict was readily included through a redefinition of the primary ingredients of conflict. A primary model of conflict, in Stolorow's (1985) words, is that "conflict states often arise when central strivings and affective qualities of the person are believed to be inimical to the maintenance of an important selfobject bond" (p. 200). (This model corresponds with Winnicott's, 1960, notion of the formation of "a false self on a compliant basis.")

⁶The concept of self as a guiding center was also central for Jung (1953), but without a corresponding emphasis on the relational field.

provide a comprehensive understanding of an individual and the analytic process. My purpose here is to illustrate this emergent synthesis by examining some of the one-person and two-person features of self psychology in the conceptualizations of psychological development, pathogenesis, transference, and therapeutic action. Self-psychological psychoanalysis, like all psychoanalytic orientations, continues to be an evolving theory and includes a wide range of theoretical and clinical variations and differences. The ensuing discussion, of course, emphasizes my perspective.

PSYCHOLOGICAL DEVELOPMENT

All developmental models posit that human beings are prewired to follow general developmental patterns. The specificity, content, and emphasis of these patterns differ considerably. *How and the degree to which development requires a relational field and the degree to which the relational field shapes the person point up the one-person and two-person distinction.*

Kohut (1984) placed at the center of psychological development the self as striving "to realize" "its intrinsic program of action" within a self-selfobject matrix. Kohut's "nuclear self" refers, in part, to an innate or prewired general developmental program (Goldberg, 1986) involving mirroring, idealizing, and twinship selfobject needs that provides an overall direction to the development of the self.⁷ In addition, the nuclear self includes the unique talents through which the emergent ambitions and ideals are expressed. Although Kohut described various experientially accessible features of the self as "vigor," "vitality," "harmoniousness," and an "independent center of initiative," he avoided defining the concept of the self precisely, because of concern that it was premature to reach closure on so new a concept. The "intrinsic program of action" refers to an inbuilt overall developmental "program" or "guiding" principle unique to each person. This notion of a unique guiding center of the person varies in emphasis but has been recognized and described by several psychoanalytic authors. For example, Loewald (1960) writes:

If the analyst keeps his central focus on this emerging core, he avoids moulding the patient in the analyst's own image or imposing on the

⁷These selfobject needs exist throughout one's life (Kohut, 1977) and are not viewed as only infantile needs. While developmental lines are delineated for each selfobject realm, the full range of selfobject experience is always potentially accessible and shaped by immediate needs, stresses, and psychic structure.

patient his own concept of what the patient should become. It requires an objectivity and neutrality the essence of which is love and respect for the individual and for individual development [p. 229].

The conceptualization of an inner "core" emerges in Winnicott's (1960) idea of a "true self" as distinct from a "false self," in Guntrip's (1971) concept of self, and in Jung's (1953) overarching concept of self wherein the self is viewed as a "guiding" center (Whitmont, 1987).⁸

Evidence of an unique inner "core" for each individual and inherent developmental strivings continues to accrue. The concept of self-righting (Tolpin, 1986; Lichtenberg, 1989) has recently been appropriated from the embryologist Waddington (1947), who proposed a genetically programmed self-organizing and self-righting tendency inherent in all organisms. Lichtenberg (1989) posits "an inherent tendency to rebound from a deficit with a developmental advance when a positive change in an inhibiting external condition occurs" (p. 328). Tolpin (1986) observes that the frustrated baby spontaneously revives and insists on getting the "mother to act right!" (p. 121). A deprivation of REM leads to a self-righting or "rebound effect" (see Fiss, 1986, for a review).⁹ Self-state dreams (Kohut, 1977) are seen as attempts to restore a failing sense of self. And on the basis of clinical evidence, REM and dream content research, I (Fosshage, 1983, 1987) have postulated that, pertaining to psychological organization, dreaming men- tation fundamentally serves developmental, maintenance, and restorative (or self-righting) functions.¹⁰ Regarding the many constitutional givens, Thomas and Chess (1977) have provided us with a powerful research demonstration of basic temperamental differences existent at

⁸Comparing interpersonal psychoanalysis and self psychology, Bromberg (1989) suggests that crucial to analysis is our "need to find out who the patient is rather than believing you know in advance what he needs" (p. 283); he ascribes the latter stance to self psychology. Bromberg's analysis may partially rest on Kohut's posited nuclear self, which is unique for each individual, but, it is to be hoped, no analyst, self psychologists included, believes that he or she "know[s] in advance what a patient needs." Bromberg states, and I concur, that we need to discover "who the patient is." Interestingly, his formulation, "who the patient is," implies a "core" self. This "core" self emerges within a relational matrix and within the analytic relationship. Actual theoretical differences probably lie between the degree of emphasis on an intrinsic "nuclear" (Kohut) or "true" (Winnicott) self and the degree to which the self is shaped by the relational matrix.

⁹At the microbiological level, the self-righting tendency is reflected in the discoveries of DNA's complex genetic instructions for damage repairation.

¹⁰My positing that dreaming, just as waking mentation, can further developmental processes somewhat overlaps with Jung's concept of the compensatory function of dreams. For Jung, when "ego consciousness" deviates from the self, a predominantly unconscious developmentally guiding center of personality, the dream attempts to compensate or self-right the person.

birth and continuous throughout life. And based on infant research, Stern (1985) presents an array of hard-wired givens in the developmental unfolding and structuring of a sense of self within an "interpersonal" field. Stern's description of "a continuous unfolding of an intrinsically determined social nature" (p. 234) makes relationships a built-in feature of the self.

The postulation of developmental strivings and of a "nuclear" core, however specified, provides the *motivation for* and the *overall direction* of an analysis. *A person who seeks analytic treatment hopes for the developmentally requisite experiences* (termed, within a self-psychological perspective, the selfobject dimension of the transference or analytic relationship; see Ornstein, 1974, on the search for the new beginning), *expects the old to reoccur and tends to organize and construct the analytic experience according to the well-established schemas (transference), and tends to connect in those characteristic ways established in past relationships.* These various processes are intricately interwoven and are the focus of the analysis. If developmental strivings are not postulated, the analysand tends to be viewed as exclusively invested in the "old," whether conceptualized as infantile fixations or repetitions relational configurations (the latter, for purposes of attachment, psychological organization, or both). Under these circumstances, the overall momentum for analytic change, rather than being buoyed by the analysand's developmental striving to change, can subtly shift to the analyst and potentiate the analysand's accommodation or aver-siveness to what then becomes the analyst's agenda for change.

To posit and include developmental strivings, in addition to problematic schemas (transference), profoundly affects the analyst's listening to and organization of clinical material. For example, in a recent case presentation (Fosshage, 1990b) the discussants and the analyst viewed the analysand's incessant demands to feel cared for and "careable" quite differently. Some viewed the analysand's "demandingness" as a remnant of infantile (narcissistic) omnipotence; others, as the repetition of "bad" object relational patterns. Those analysts (including the author) who posit developmental strivings viewed demandingness as partially an expression of both the patient's difficulty with maintaining (due to problematic schemas) and the patient's striving to consolidate a feeling of being cared for and "careable" (Kohut referred to the latter as the "leading edge" of the material [Miller, 1985]; and Guntrip, 1971, as the "cry" within the hysteric).¹¹

¹¹In my view the patient suffered both from a deficiency in a positive, cohesive self-structure (namely, an arrest in the development of sense of self as cared for and "careable" and of self-esteem regulatory capacities) and from pathological structures,

The emphasis on a prewired general developmental program of the self, primary in self psychology, is a one-person psychology feature. Infant and developmental research and clinical evidence, however, clearly indicate that self-development does not occur in a vacuum. Self-development not only includes relationships as central but *requires* a relational field. Kohut's most important clinical finding focused on the ways that patients make use of their analysts to develop, consolidate, and maintain a positive cohesive sense of self. He conceptualized this dimension of analytic experience as the selfobject transference and gradually etched out a developmental model based on the self-selfobject matrix.¹² Lichtenberg (1991) writes, "In agreement with much infant research, Kohut conceptualizes a constant interrelationship between *motive*, to achieve and restore self cohesion, and *environment*, the empathic responsiveness" (pp. 4-5). Kohut (1984) considered this self-selfobject matrix as a life-giving and -preserving relational matrix:

Self psychology holds that self-selfobject relationships form the essence of psychological life from birth to death, that a move from dependence (symbiosis) to independence (autonomy) in the psychological sphere is no more possible, let alone desirable, than a corresponding move from a life dependent on oxygen to a life independent of it in the biological spheres (p. 47).

The development of the self *within* a self-selfobject matrix is central to the developmental model and is an emergent theoretical synthesis of one- and two-person psychologies.

Are Self-Selfobject Relationships Relational?

Much confusion surrounds the question whether the self-selfobject matrix is a relational matrix. The confusion emanates, I believe, from namely, a negatively valenced self-schema in relation to problematic schemas of the other. At those times when "normal" development is arrested, resulting in *specific deficiencies* in self-structure, *specific problematic* (or pathological) *structures* are formed (for example, problematic schemas of self and other). Deficiencies and pathological structures are complexly interwoven, further negating the earlier theoretical and clinical dichotomization of developmental arrest and conflict/defense models. (Eagle, 1984, makes the same point, although he retains the notion of conflict as defined within the conflict/defense model.) Psychopathology always includes both arrests in development and conflict, the latter as *redefined* within self psychology (refer to footnote 5). Structural deficiencies and their corresponding developmental needs as well as pathological structures must be addressed analytically.

¹²The concept of the selfobject emphasizes development rather than repetition of the past and, therefore, in my judgment, does not fit properly under the concept of transference. This dimension is more accurately viewed as the selfobject dimension of the analytic relationship. (Bacal and Newman, 1990; Fosshage, 1990a).