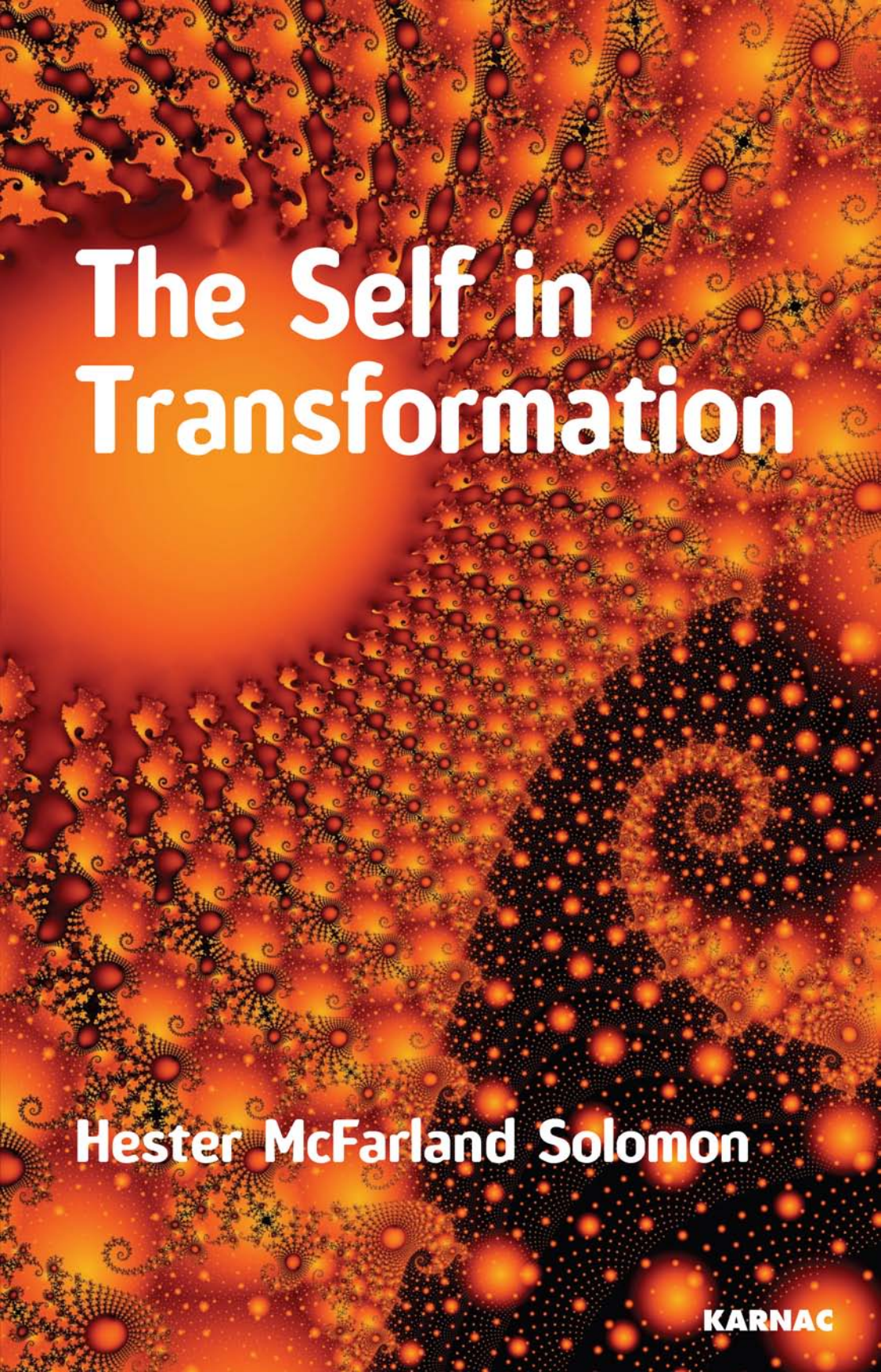




The Self in Transformation

Hester McFarland Solomon

KARNAC

THE SELF IN
TRANSFORMATION

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in loving memory of Jonathan Solomon

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In completing, reviewing and revising the texts of these chapters, I was struck by the persistent memory of a poem by the 19th century French romantic/symbolist poet, Charles Baudelaire, from his collection, *Les Fleurs du Mal*. The poem is *Correspondances*, written in 1857.

Correspondances

La nature est un temple où de vivants
piliers
Laissent parfois sortir de confuses
paroles;
L'homme y passent à travers un forêt
de symbols
Qui l'observent avec des regards
familiers.

Comme de longues échos qui de loin
se confondent
Dans une ténébreuse et profonde
unité,
Vaste comme la nuit et comme la
clarté
Les parfums, les couleurs et les sons
se répondent.

Il est des parfums frais comme des
chairs d'enfants,
Doux comme les hautbois, verts
comme des prairies,
- Et d'autres, riches, corrompus, et
triomphants,

Ayant l'expansion des choses
infinies,
Comme l'ambre, le musc, le benjoin,
et l'encense
Qui chantent les transports de l'esprit
et des sens.

Nature is a temple whose living
pillars
Emit from time to time obscure
messages;
We proceed through a forest of
symbols
Which watch us with knowing
looks.

Like sustained, far away echoes
mingling
In a deep and shadowy unity,
As vast as night time and daylight,
Scents, colours, and sounds all
resonate.

There are scents as fresh as infants'
flesh,
Silky as oboes, green as meadows,
- And others, rich, decayed, and
exultant,

Having the expansiveness of infinity,
Like amber, musk, benjoin and
incense,
Which celebrate the transports of
spirit and senses.

Trans. H. M. Solomon

ACKNOWLEDGEMENTS

This book of collected papers – older, more recent, and one (the last extended essay) not hitherto published – is made possible by my membership of a community of analysts, psychoanalysts, and psychoanalytic psychotherapists, patients, supervisees, and colleagues, who have, in various ways and through long and intensive personal commitment, contributed to the ongoing, emergent process of depth psychology's unfolding enquiry, begun by Freud and Jung, the first great pioneers of depth psychology in the modern era. It is this community, not always in harmonious concert but certainly always dedicated to the same task – that of immersion in, exploration of, and reflection on the nature of the human psyche – that has made this book of essays possible. The pleasure, stimulation and rewards on many levels of being part of the extended analytic community are immeasurable.

For their help in bringing together these papers I would like to thank Carol Quarini for setting them out in a format ready for publication, and Susan Steeds who has been a constant helper from the start of this enterprise many years ago. My warm thanks also go to Oliver Rathbone and Christelle Yeyet-Jacquot at Karnac Books for their vision and assistance.

Finally, my thanks go to my son, Gabriel, for his support, and to his family, Milène, Moselle, and Jonathan, for the joy that they bring to my life.

Hester McFarland Solomon
London, May 2007

ABOUT THE AUTHOR

HESTER MCFARLAND SOLOMON is a training analyst and supervisor for the Jungian Analytic Section of the British Association of Psychotherapists. She has been Chair of the BAP's Council, its Jungian Analytic Training Committee, and its Ethics Committee, and is a Fellow of the Association. She has published widely and has co-edited three books: *Jungian Thought in the Modern World*, *Contemporary Jungian Clinical Practice*, and most recently *The Ethical Attitude in Analytic Practice*. She is currently President Elect of the International Association for Analytical Psychology.

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Chapter 6: The not-so-silent couple in the individual was originally published in *Journal of Analytical Psychology*, 1997, 42: 383–402.

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Freud and Jung: an incomplete encounter?, 2003, 48: 553–569

The not-so-silent couple in the individual, 1997, 42: 383–402

Archetypal psychology and objects relations theory: history and communalities, 1991, 36: 306

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Cambridge University Press

The developmental school. In: P. Young-Eisendrath and T. Dawson eds. *The Cambridge Companion to Jung*. Cambridge University Press, p.119.

Free Association Books

Recent developments in the neurosciences. In. E. Christopher and H. M. Soloman eds. *Jungian thought in the modern world*. London: Free Association Books

Routledge

Permission to reprint the figure in paragraph 422 of Jung's *Collected Works* published by Routledge and Kegan Paul in 1954.

Inner City Books

Permission to reprint a figure from 'The analytic encounter' by Mario Jacoby published by Inner City Books in 1984

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FOREWORD

Hester Solomon has a feeling for ideas—a reliable feeling, which is why her essays are so orienting. They represent her reasoned appraisal of what’s most worth thinking about in the field of therapeutic analytical thought—starting, of course, with the analytical psychology of C. G. Jung, still too often regarded as a marginal ancestor of mainstream depth psychotherapy. Generations of students of psychoanalysis, in particular, have tended to see Jung’s as, at best, an inspirational approach, heralding what Philip Rieff called the “triumph of the therapeutic uses of faith after Freud”, uses which, even if not exactly ludicrous—because, after a fashion, they can be effective—are nevertheless intellectually bankrupt and the bane of a genuine psychoanalysis. Solomon became a Jungian analyst in a generation that could see farther than that myopic view of Jung’s achievement, and it is understandable that she wouldn’t want to practise analytical psychology without actually having taken aboard what Jung intended. What is more original is her empathy for other thinking that casts a light on his intention. Solomon is constantly making forays into other fields to gain perspectives on Jung’s seminal ideas, and one feels that, in the process, she has tumbled onto all the really interesting ideas of our time. She is convincing, moreover, in pointing out that these intellectual developments, most of which have come into their own only since Jung’s death, have turned out to provide the validating context his thought lacked in his lifetime. His was a much less comprehending time for the kind of psychological science he was trying to build; he would have been gratified to have a mid-size volume like this to mirror his achievement.

Not that Jung would have failed to experience the challenge to some of his own assumptions. After her introductory chapter, Solomon opens her book by revealing the link of Jung to Hegel, one that Jung denied. It took perseverance for her to “out” Jung’s debt to Hegel, and her doing so opens the door to admit a broader range of philosophic influences than the intellectual ancestors Jung preferred to identify in the line that runs from Leibniz to Kant to Schopenhauer to Nietzsche. She ends with an essay that shows the astonishing relevance of present-day developments in scientific philosophy—chaos theory, complexity theory, and the theory of emergence—to ideas in Jung which lie on (and also tell the truth about) “the edge of chaos”: the archetype, synchronicity, the nature of the psychoid, and the transcendent function. Taken as bookends, these chapters suggest the range of formulations on the contemporary border of clinical theory that Solomon has managed to tuck between the covers of this well-integrated collection of papers. It is like a little private library, a bedside shelf of ideas of importance to anyone who would like to follow her in locating analytical psychology within contemporary currents of thought and so use our time as a witness to Jung.

I am particularly grateful for the section on “Ethics in the Psyche: Ethics in the Consulting Room”, in which Solomon makes the case for the “ethical attitude”, a concept she has introduced. She makes it clear that such an attitude is a developmental achievement, no less than the “depressive position” and the “Oedipal stage”. She understands how critical it is for any psychotherapy that tends to regard what emerges out of the unconscious as what is up for transformation to be alert to the status of the ethical attitude in the patient, because the patient cannot develop past a certain point unless the maturing self attaches value to the treatment of others. And she sees the implication for anyone who seeks to proffer effective analytical psychotherapy, which is that the practitioner must be prepared to continually practise the ethical attitude in dealing with patients, and thus has to be open to recurrent “supervision” long after passing successfully through a particular period of training to qualify as a psychotherapist or analyst.

This example, from a section in which Solomon’s ability to engender a practical transformation in the way we analysts look at what we do every day is on full display, illustrates what she brings

throughout this volume to every aspect of her chosen field, in which she has excelled as therapist, analyst, supervisor, and now mentor. To read her from cover to cover is to learn how the contemporary practice of analytical psychology might be held by all “compassionate analysts of the human psyche”. Implied, as one reads, is an entire history of a field, which ever since the fateful engagement of Freud and Jung, revisited here with wise perspective, has found itself asked to look beyond the transference of internal object relations in depth to find the real face of the other. That neither Freud nor Jung could do this with or for each other when they still had the luxury of eye contact has been a wound that our field might not have healed but for the generation of analysts to which Solomon belongs, and in which she herself has emerged as a leader. As part of her generation, I feel I can say that it has been our particular task to discover that ethical attention to the other is as important as the understanding of self within any analytical psychotherapy, if sound development towards genuine transformation is to occur in treatment. I believe that only a member of our generation could make the personal statement that Hester Solomon offers from the standpoint of her own identity as a practitioner: “I cannot be fully a ‘Jungian analyst’ without having an intimate knowledge of and without pursuing in depth my study of the foundations and theoretical developments of ‘Freudian psychoanalysis’.” This statement is modest, because it leaves out how much else she has realized she has to take aboard to be “fully a ‘Jungian analyst’”.

Also left unmentioned, though it seems obvious on every page of this book, is the labour involved in meeting such a standard. As Solomon goes on to imply, this work, though arduous, has in another sense not been hard to undertake, because she has been led by her desire, the not-so-easily admitted motivation of just about anyone who engages in the analytical enterprise, to gain a wider perspective. What has motivated Solomon to learn so much about both “Freudian” and “Jungian” analysis and about all the other systems of ideas that are so elegantly covered in this volume is what she calls “a genuine desire, the desire to know the other”, which for her is seamlessly linked “to a desire to know and understand myself better”. The integrity with which she has embraced her desire to know the nature of our field (the very ground of which is the unknown) may be the secret of the lucidity of her prose when she engages with the

thought of others. Unlike many analysts with as much feeling as Solomon, her heart stays clear when she contemplates ideas because she knows what she is looking for in them and what she is willing to make the effort to find.

John Beebe

PART I

INTRODUCTION

The self in transformation: the analyst in transformation

This current volume of papers written and collected during the course of some twenty years of clinical and professional activity represents a work in progress of a Jungian analyst, trained in London, deeply identified with a Jungian approach to the psyche and its ongoing development, who at the same time is open and responsive to influences of other contemporary Jungian and psychoanalytic thinking and development. In fact, what strikes me as I reflect with hindsight on the process of gathering these papers into a format which will, I hope, convey structure as well as a view of the development of a clinical and theoretical reflection, is that it follows a path of connected points of reflection that was not envisaged as I alighted at each stage on a topic that gripped me at the time. Looking back, however, it is possible to perceive that this series of clinical and theoretical reflections represents an ongoing enquiry into the nature of psychological change, growth, and development, which is at the heart of the clinical work of depth psychologists.

The concept of transformation—meaning the transformation of self and self states—is pivotal in Jung's thinking and itself evokes a number of related concepts that are at the core of his orientation to the psyche. These include individuation, the transcendent function, synchronicity, and the teleological basis of psychic change. Underlying these core concepts is Jung's theory of psychic energy, otherwise called libidinal energy, which differed radically from Freud's theory. For Freud, libido was primarily sexual energy whose manifestations in non-sexual forms were substitutes, or sublimations,

of their original sexual nature. Jung, on the other hand, conceived of libido as generalized psychic energy, with its source in the unconscious from the very beginnings of life, appearing in consciousness as symbols, which find a multitude of transformations throughout the life cycle, as it has throughout humankind's history, in any human endeavour, from mythology, religion, art, and the great scientific discoveries, as well as in relationships, including sexual relationships, and the relationship in the consulting room, as evinced in his understanding of the transference and countertransference relationship. Even though Jung uses the term "countertransference" rarely—he was in fact writing about these matters well before psychoanalysis took up the topic and developed it clinically.

Jung's use of the word "transformation"—the bringing across of a form, a shape, a representation, or an image from one mode, or figure or state to another—remained at the foundation of his approach to the psyche since the publication of his early masterpiece, *Symbols of Transformation* (*Wandlungen und Symbole der Libido*, 1916). It was this publication that marked his differentiation from the theoretical orientation of Freud. This classic work addresses the major questions at the basis of all depth psychological theories—how does psychic change occur and what are the factors that facilitate or impede it? At the time of their passionate collaboration and eventual bitter disaffection, both Jung and Freud shared two major focal points of attention, which gripped them in their psychological research and theory building: the first concerned the nature and function of libido; the second concerned the origin and nature of spiritual and religious experience. Whereas for Freud the concept of libido was inseparable from its sole attribution, the idea that all libidinal energy was essentially sexual in essence, for Jung libidinal energy certainly partook in sexuality but was much greater than that. If Freud thought that the various manifestations of human creativity were ultimately reducible to sexual libido via sublimation, for Jung libido encompassed but reached far beyond it. Jung conceived of libido as generalized psychic energy that can be expressed in many forms—sexually, relationally, socially, creatively, and spiritually. Psychic energy can be transformed and is expressed through symbols and archetypal images that shape and propel individuals and groups.

Similarly, as I discuss in greater detail in Chapter 9 ("Did Freud and Jung have a "clinical" encounter?"), in the time prior to and

during their eventual resentful disaffection, each was seeking independently to find and conceive of the sources of the ubiquitous religious and spiritual expressions of humankind. Freud would eventually consider the religious impulse to reside in the Oedipal complex (*Totem and Taboo*, 1913). For Jung, this shared human instinct could not be reduced back to a developmental, psychosexual phase in the history of the individual or group. Rather, his distinctive contribution to the understanding of depth psychology in general, and to the ubiquitous and universal nature of spiritual phenomena in particular, rested on a teleological view of the psyche. In this view, all living beings strive towards the goal of self-realization, which includes the successive transformations of the God image (Chapter 14 discusses this more fully).

The contents of the chapters in this book span my longstanding interests in the humanities and the sciences as ways of approaching and finding correlatives to the various aspects of the long-term, intensive, and interrelational work in the analytic consulting room. They are not arranged in chronological order, but have been organized according to several categories—theoretical, clinical, ethical, and the correspondences with cutting-edge scientific and cultural enquiry. They show that, over a span of time, my interests have both circumambulated, and been focused on, a number of fields of enquiry that relate to the overall breadth and depth of Jung's opus. Thus, they have followed him in spirit. My orientation as a writer on Jungian topics resonates deeply with, sometimes preceding and sometimes being influenced by, the breadth and depth of a number of other Jungian clinicians and theoreticians in the spirit of his initial endeavours who will be encountered during the course of these chapters. To them I owe much.

My thinking as a Jungian practitioner has therefore embraced multiple influences. In relation to these influences I have brought my own correspondences—my background studies in the humanities and social sciences, my personal analysis and supervisions, my training, my life experiences, and that unique treasury, the long-term intensive encounters I have been privileged to have with patients and supervisees in my consulting room. In each case, the chapters represent my focus at the time on topics that I found stimulating and which posed important questions that I wished to address in order

better to understand their import for my work and my understanding of the general field of depth analytic enquiry.

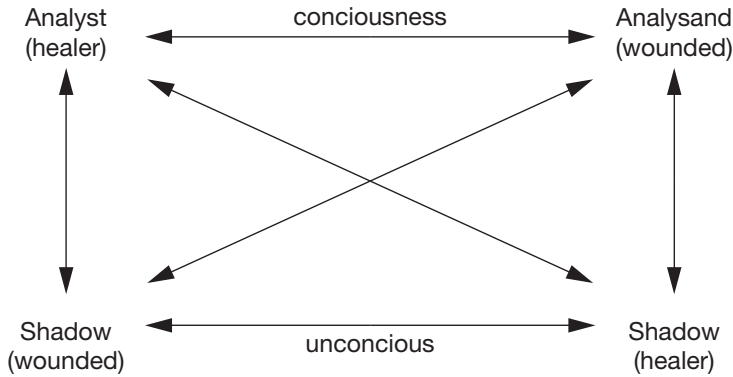
Jung insisted on the essential reciprocity of the genuine analytic encounter:

For two personalities to meet is like mixing two chemical substances; if there is any combination at all both are transformed. In any effective treatment the doctor is bound to influence the patient; but this influence can only take place if the patient has a reciprocal influence on the doctor. You can exert no influence if you are not susceptible to influence.

(Jung, 1916, para. 163)

The recognition of this reciprocity is itself based on an awareness of a fundamental psychoneurological reality, now fully established as a scientific fact, but only interpolated from experience and earlier scientific research, to which Jung himself contributed, notably through his development of the Word Association Test. This recognition is that the human brain is in essence plastic and relational, in particular the prefrontal cortex which governs the higher cognitive and socioaffective functions. It is, therefore, dependent on and liable to be influenced structurally and functionally by, the type and quality of the interaction with significant others, from the beginning of life onwards, starting with the primordial mother–infant pair, and spanning important relationships across the whole of life. This of course includes the significant interactions of the analyst–patient dyad. If there is an emphasis in analytic and therapeutic work on the transformation that may occur in the mental functioning and subsequent behaviour of the patient, the model of reciprocity (in Schore’s developmental terms, the “system of reciprocal mutual influences”, 1999) implies that the analyst be as “reciprocally influenced” as the patient, albeit in different ways, given the differences in age, training, and analytical experience and differential psychological developments.

At the core of this mutual reciprocal influencing is the accessing of unconscious contents and dynamics in both partners of the analytic pair, and the interactive processes of these with the conscious mind. Jung famously offered a schematic model of the possible pathways of interaction between the two in *The Psychology of the Transference* (1916, para. 422):



Jung's schematic model

Through the processes of transference and countertransference over the course of a full-enough analytic encounter that allows for sufficient time and space for adequate processing to occur, inevitable transformations in both neural pathways and resultant mental content permits growth and change of the self, leading to greater capacity for symbolization and a decrease in mental, and often physical, toxicity. Thus, affect and cognition are brought into better functional relationship, leaving space for self transformation.

Central to Jung's researches was the phenomenology of the self, which he studied through close scholarship of many specialized areas of enquiry, the most important of which is, perhaps, the symbolism of alchemy. In *The Psychology of the Transference*, Jung used a series of alchemical images, known as the *Rosarium Philosophorum*, to illustrate the pathways of projections and connections that occur in the analytic relationship. Jung was interested in alchemy because, as Henderson and Sherwood aptly put it, "from a psychological point of view, alchemy is concerned with the mysterious human capacity for renewal and change and the symbols that our psyches use to communicate to us about that experience" (Henderson & Sherwood, 2003, p. 22). Alchemists believed that through their involvement in the work and process of change, they, too, were changed. The act of observing and participating in the alchemical transformations led to the alchemist's self-reflection and psychological transformations. Jung understood that their insights were based on projective

processes in relation to the experiments they were performing in the *vas*, but for him, these insights were realities that contain truth: "One can be perfectly scientific about mythology, for it is just as good a natural product as plants, animals or chemical elements" (1945, para. 195).

The understanding of the nature of reciprocal transformations that interested Jung in his alchemical researches resonates with many cutting-edge scientific enquiries of our times, as discussed in Chapter 14. For Jung, this was a fundamental apperception of the superabundance of energy throughout Nature and the universe, and its possibilities for transformation, which formed the basis of his approach to reality as *unus mundus*, through which psyche and physis are co-terminous. Over and over, Jung stressed that he was an empiricist, and time and again in his writings, he warns against the kind of empiricism that, in seeking knowledge, would impose an operational definition on scientific enquiry that limits Nature to unequivocal answers which deny the participation of the observer and the sensory limitations of his mind. For example, in discussing the projective processes in the work of an important alchemist, Paracelsus, which he closely studied, Jung states:

Nature is certainly equivocal . . . What takes place between light and darkness, what unites the opposites, has a share in both sides and can be judged just as well from the left as from the right, without our becoming any the wiser: indeed, we can only open up the opposition again. Here, only the symbol helps, for, in accordance with its paradoxical nature, it represents the "tertium" that in logic does not exist, but which in reality is the living truth. . . . deeper insight into the problems of psychic development soon teaches us how much better it is to reserve judgment instead of prematurely announcing to all and sundry what's what. Of course we all have an understandable desire for crystal clarity, but we are apt to forget that in psychic matters we are dealing with processes of experience, that is, with transformations which should never be given hard and fast names if their living movement is not to petrify into something static. The protean mythologem and the shimmering symbol express the processes of the psyche far more trenchantly and, in the end, far more clearly than the clearest concept; for the symbol not only conveys

a visualization of the process but—and this is perhaps just as important—it also brings a re-experiencing of it, of that twilight which we can learn to understand only through inoffensive empathy, but which too much clarity only dispels.

(Jung, 1945, para. 199)

Jung's fortuitous phrase, "inoffensive empathy", could best describe the basic ethos of the approach adopted here as a *modus operandi* in the clinical setting, as well as the gathering of correspondences between pivotal themes in analytical psychology and in other areas of human enquiry, whether in the sciences or the humanities. It is a position hard won over many years of practice, and is not a constant but continually engaged with. It is a position that does not forswear encountering conflict, challenge, or the array of other negativities that are met in pursuing the analytic task. Rather, it harkens to an overarching position in relation to the encounter in the consulting room, and in the library of the analyst, where all manner of approaches and reactions may be entertained, studied, and responded to in good measure. Thereby may emerge the greatest possibilities for transformation.

The chapters of the current book are organized into five Parts. After this introductory chapter (Part I, Chapter 1, "The self in transformation: the analyst in transformation"), Part II is entitled "Theoretical underpinnings and explorations". In this Part, I have brought together four papers on core Jungian concepts and their relation to a number of psychoanalytic and other concepts. Theoretical reflection regarding clinical practice has been an ongoing interest in my work and has supported and amplified the core of my professional clinical activities.

Chapter 2, "The transcendent function and Hegel's dialectical vision", concerns Jung's notion of the transcendent function as an explanatory concept, which he likened to a mathematical formula. In this chapter Jung's tripartite schema of thesis–antithesis–synthesis, the transcendent function, which underlies the dynamic processes of psychological growth and change, is compared to the great nineteenth-century philosopher Hegel's dialectical vision, which Hegel expounded as a universal, deep structural model for all change. His was a vision of how history develops within a model of opposition, sublation, and synthesis, in order for development to occur.

Chapter 3, entitled “Analytical psychology and object relations theory”, explores the links between certain concepts of analytical psychology, in particular archetypal theory, and its relation to certain psychoanalytic concepts within object relations theory, through the mediation of the dialectical vision. The history of the development of Jung’s concept of the archetype is considered, and compared to certain concepts from object relations theory, such as unconscious phantasy, *coniunctio*, projective identification, and *participation mystique*.

Chapter 4, “The developmental school in analytical psychology”, offers an understanding of the situation of analytical psychology in England, which gave rise to the so-called “London Developmental School” under the leadership of Dr Michael Fordham, who, in the 1950s and 1960s, along with a cohort of Jungian analysts, became convinced of the necessity of integrating within a Jungian approach to the psyche a view of early infantile and childhood development. Drawing on his work as a child psychiatrist with a Jungian orientation, and supported by the findings from new methods in infant observation research, Fordham developed the concept of a primary self, or primary integrate, and the dynamic processes of deintegration and reintegration, in order to bring a depth understanding of early infantile development within the reaches of analytical psychology.

Chapter 5, “Recent developments in the neurosciences”, explores findings from the neurosciences that correlate to a number of Jungian analytic concepts, in particular ideas concerning the self and how it unfolds in an interrelational environment. It seeks to bring together aspects of archetypal theory, object relations theory, attachment theory, and Jungian developmental theory to show how their neurobiological substrate in the right brain to right brain “system of reciprocal mutual influences” first described by Allan Schore (1996) underpin developmental achievements in psychological functioning, self-identity and intersubjectivity, and how deficits in these may occur. This has direct implications for the treatment situation in the consulting room.

Part III is entitled “Clinical explorations: the self, its defences and transformations”. Here I have collected five clinical accounts of intensive analytical work with patients and the patients of supervisees over more than two decades of clinical work, including an exploration of the possible dynamics in the relationship between

Freud and Jung. Clinical work is pivotal to my commitment to and understanding of the Jungian approach to the unfolding of the psyche.

Chapter 6, "The not-so-silent couple in the individual", examines the nature of the self, with its foundation in the primary self, and the nature of internal objects, a concept that forms the basis of theories concerning part selves and sub-personalities. Clinical material shows how a series of linked but oppositional internal couples may be created which acts as a defence against annihilation anxieties that a young self is unable to process in the face of an inadequate nurturing couple in the form of the parental caregivers. It is suggested that for transformation of these defences to occur, it may be necessary that the analyst be internalized as a self object over a long process of treatment.

In Chapter 7, "The self in transformation: the passage from a two- to a three-dimensional internal world", I consider some of the steps necessary to transform a bleak experience of the void that may have been internalized when important caregivers are either abandoning or intrusive, creating a system of massive defence through preconscious achievement, that ensured psychic survival until the point that all internal resources had been exhausted. A dream series shows how this internal situation changed during the course of an intensive analysis through the activation of the transcendent function, allowing a transformation of the internal world into a three-dimensional space into which the analyst was eventually allowed entry.

Chapter 8 is entitled "Love: paradox of self and other", in which the many contexts of love and the principle that links them, that of self in relation to another, are considered. Twin studies *in utero* show that there is a primary capacity for relating and loving, as much as for aggression and competition. It is suggested that the quality of the relationship of the pregnant couple can influence which tendency may predominate. A clinical example in which the internalization of repeated failed attachments to absent objects which had led to threat of a barren and loveless life was overcome by the maintenance of a constant analytic presence and container that eventually allowed for the instinct of relatedness propelled the psyche to reach out from within the self to find an object of love.

Chapter 9, "Did Freud and Jung have a 'clinical' encounter?", considers the psychodynamics at play in the powerful relationship between Freud and Jung and the elements of their respective

personalities that made for an impassioned encounter and subsequently a tragic split, symbolized by Jung's revision of certain of Freud's core concepts, such as the nature of libido and the centrality of the Oedipus complex. The author attempts an evaluation of the pivotal role played by Sabina Spielrein, once Jung's patient and subsequent colleague, who became a psychoanalyst in Freud's Viennese circle before her tragic return to Rostov in Russia during the Nazi occupation.

Chapter 10, entitled "Self creation and the limitless void of dissociation: the 'as if' personality", considers the concept of the "as if" personality, used variously in psychoanalytic and psychotherapeutic literature, without having formed part of a clinically based theoretical development over time. The author considers a particular grouping of elements that form a defence of the self in certain sorts of individuals, many of whom show an exceptional capacity for creative engagement in the world, surpassing expectations given the deficits in their background. The "as if" personality is distinguished from Jung's concept of the persona and Winnicott's concept of the false self, demonstrated via a composite clinical profile drawn from the author's extended clinical encounters with a number of patients and supervised patients. The "as if" personality concerns the action of defensive dissociation deriving from very early experiences of internalizing the presence of psychologically absent or narcissistic, or violent and abusive, caregivers, which create a sense of an internal void at the core of the self. At the same time, the self is capable of acts of self creation through a succession of identifications and internalizations with other sources of environmental nourishment, which are constructed around the original sense of internal emptiness. At a certain point, these resources are depleted, leading to physical or psychological breakdown. The countertransference is shown to be the means of both useful but often perilously obtained clinical experience and information, supporting the work along the hazardous analytic journey.

Part IV, "Ethics in the psyche: ethics in the consulting room", contains three papers that evolved as a result of considerable, long-term reflection on the nature of personal and professional ethics. In the course of my professional development, alongside the essential foundation of my experiences as an analyst and supervisor of patients engaged in intensive and lengthy analyses, I have had the good

fortune to be involved with the work of a number of professional bodies, both in the United Kingdom and internationally, concerned with maintaining benchmark standards of training and governance within the analytic and psychotherapeutic profession overall. During the course of this professional involvement with a multiple focus, I was privileged to serve as the Chair of the Ethics Committee of the British Association of Psychotherapists, and as Chair for the Sub-Committee for Ethics Procedures of the International Association for Analytical Psychology. My involvement with these two bodies, each committed to the aim of maintaining and supporting the ethical conduct of the members of the analytic profession afforded me the opportunity to seek to understand for myself the underlying bases of ethical reflection and its relationship to professional ethical provision and conduct. As I began to take a close look at the position of ethical reflection within the history of analytic theory building, and the place of ethics within the analytic and psychotherapeutic training institutions, I was struck by the lack, with some notable exceptions, of theoretical and clinical writing specifically addressing the development of an ethical attitude, either at personal or professional levels. This was even more surprising since there is a universal and stated commitment across the analytic profession to uphold rigorous principles and standards of ethical conduct, supported by constitutional requirements in training institutes and registering bodies alike, to maintain Codes of Ethics and Good Practice, including procedures for addressing ethics complaints and appeals. The three papers that follow set out to address this hiatus, and seek to give a reasoned account of the necessity for ethical awareness within analytic training organizations and those bodies concerned with the governance of such bodies.

Chapter 11, "The ethical self", seeks to address the question of whether Jung's model regarding the structure and processes of the psyche can offer a specific and helpful approach to understanding the development of an ethical attitude personally, and the nature of the ethical attitude underpinning analytic practice. Jung's concept of the self has direct bearing on the essence of the ethical attitude as it evolves in the individuation process in a relational context. It considers how the self finds, defines, creates, and struggles with ethical value, personally and in the consulting room.

In Chapter 12, “The ethical attitude: a bridge between psychoanalysis and analytical psychology”, I discuss the common professional implications for the traditions of psychoanalysis and analytical psychology of the ethical attitude, which presupposes special responsibilities that determine the analytic attitude and define the analytic setting. Analyst and patient are not equal partners in the analytic relationship, but nevertheless are in a situation of mutuality, shared subjectivity, and reciprocal influence. This chapter argues that the analytic attitude is, in essence, an ethical attitude, and as such it can function as a bridging concept between psychoanalysis and analytical psychology. Furthermore, the ethical attitude is seen as a developmental achievement and is considered to reach beyond the depressive position.

Chapter 13 is entitled “The ethics of supervision: developmental and archetypal perspectives”. It considers the nature of supervision as an ethical provision at the heart of professional analytic training and practice post-qualification. It develops the idea of the “third space”, a concept found in psychoanalysis and analytical psychology alike, as the area where the ethical and analytic attitudes can be protected and developed.

Part V, “The human psyche in a changing world”, consists of an extended and newly written chapter for this book, Chapter 14, “The potential for transformation: synchronicity, emergence theory, and psychic change”. I have looked at analogies and correspondences between a number of Jung’s core concepts, such as the psychoid, synchronicity, transformation, the transcendent function, and the archetypes, and linked them to ideas emerging from the sciences, including the theory of emergent properties and the new physics, with a brief look at ideas from the human sciences, including neuropsychology, evolutionary anthropology, theology, and the arts. It is striking that there appear to be a number of recent developments in these varied areas of human enquiry that are analogous to and resonate with Jung’s theories of psychological emergence, or individuation, the central focus that lies at the heart of his great and sustained opus, his life’s work and passion.

Both personally and professionally over the course of many years, the resonances and correspondences that I feel with Jung’s work, and with the work of many other Jungians and psychoanalysts alike, have enlivened, invigorated, and nourished me. I hope that the chapters

of this book, which represent the record of a series of sustained reflections on various areas of the manifold analytic enquiry, will bear witness to the long march of an odyssey, as yet unfinished, but whose underlying theme is transformation, various aspects of which are continuously emerging in moments along the way, in the form of this series of chapters, but whose goal is never known.

PART II

THEORETICAL
UNDERPINNINGS
AND EXPLORATIONS

Theoretical underpinnings and explorations

This Part brings together four chapters on certain core Jungian concepts and their relation to some psychoanalytic and philosophical concepts and recent findings relating the dynamic processes evident in depth psychology and the neurosciences.

Chapter 2, “The transcendent function and Hegel’s dialectical vision”, shows that Jung’s concept of the transcendent function has an important structural parallel in the pivotal nineteenth-century philosophical idea of dialectical change expounded by Frederick Hegel. Hegel’s dialectical model concerns the development of self-consciousness as it unfolds in what he describes as the World Spirit (*Geist*). It can be likened to Jung’s theory of the self and how the transformation of the self occurs over time through the emergence of symbols which herald new patterns of order. Jung’s vision of a dynamic between related and relating opposite psychological functions, for example between conscious and unconscious, can be understood to be situated intrapsychically as well as between the self and its objects (for example between infant and mother or analysand and analyst). The tension created by these two opposing states can, under the right conditions, lead to a greater integration or synthesis, a new resolution the characteristics of which depend upon and sublate, but cannot be reduced to, the elements of the original opposition. This chapter also describes the theoretical developments that took Jung away from Freud’s view of the libido as purely psychosexual energy to an alternative, teleological

understanding of generalized libidinal energy as the source of all human activity, both creative and, in malign conditions, destructive. It includes a view about how instinctual energy can be transformed through the processes of symbol formation, thus enhancing breadth and depth of self experience, including the capacity for *coniunctio oppositorum*. The models of the development of the self proposed by Fordham (primary self) and Winnicott (primary instinct for relatedness), which appear to be contradictory, can then be seen as resulting in a dialectical synthesis: the self as a union of opposites. This chapter concludes that positing a primary self developing through the dynamic process of deintegration and reintegration, and the self's relational instincts towards its objects, can be usefully elaborated by the deep structural understanding provided by the dialectical model.

However, the dialectical model is only one of the theories concerning deep structure that can be used to understand the processes of change and development that are described equally in analytical psychology and object relations theory. Chapter 3, "Archetypal psychology and object relations theory", considers the links between the fundamental principles of analytical psychology, in particular Jungian developmental and archetypal theory, and its relation to psychoanalytic concepts elaborated in object relations theory. It is possible to think of the archetypes of the collective unconscious as psychological deep structures through which the infant's inner experience of their real parents builds up dialectically into a complexity of psychic structures and contents that include phantasy and reality experiences. Jung's archetypal model suggests that humankind shares in certain fundamental psychic structures through which the self mediates its inner experiences and its earliest relationships, interactions that build up over time to make up the person we are. The Kleinian notion of unconscious phantasies can be viewed as having similar characteristics and functions as the archetypes, as deep structural mental templates that mediate the experiences of the real baby and mother. The connection between the concept of the archetypes of the collective unconscious and concepts from object relations theory about unconscious phantasy and internalized objects are related through these common core principles.

Chapter 4, "The developmental school in analytical psychology", describes how the theoretical and clinical situation of analytical

psychology in England after World War II gave rise to the London Developmental School established by Dr Michael Fordham. At this time, Jung's contribution to the understanding of the functioning of the psyche based on a view of the dialectic of growth and transformation was in danger of becoming clinically limited because it did not have a thorough grounding in a developmental understanding of early mental activity. Fordham's researches as a child psychologist and analytical psychologist showed that Jung's work with the unconscious psyche could be linked to an understanding of how the infant's internal world developed through the experience and internalization of successive encounters with the external world through ongoing processes of what he called deintegration and reintegration. Fordham's model, which formed the basis of the London Developmental School, shows how through the dynamics of deintegrative and reintegrative processes the psyche accrues complexity, depth, and identity over time. It also shows how impediments to this process may occur and result in pathological or maladaptive states of mind. By drawing on certain psychoanalytic concepts from the Kleinian tradition, the London Developmental School ensured that Jungian analysis was established firmly within an understanding of early infantile development. Fordham's achievement is to have integrated Jung's concepts of the self and of the prospective nature and function of the psyche with a psychoanalytic view of the psyche-soma development of the infant and child. It is also able to show that this has a direct bearing on what happens in the consulting room between patient and analyst.

Recent developments in neurophysiology that correlate with several Jungian analytical concepts are described in Chapter 5. They emphasize the importance of the quality of the earliest interactions between self and others. These interactions trigger the biochemical and neurobiological processes that underly the maturation of the cortical and subcortical structures of the infant's brain that govern higher order socioaffective and cognitive capacities. The two main brain growth spurts that occur during the first two years of life depend on what Allan Schore has called the "system of reciprocal mutual influences" within the infant-mother dyad. This evidence of the mutuality of exchanges leading to the development of the infant's brain has direct relevance to the findings from analytical and developmental studies. It also reinforces the critical interactive role

of infant and mother or caregiver in ensuring a stable and secure foundation for the self to grow and develop. These results show how archetypal theory, attachment theory, psychoanalytic object relations theory, and the Jungian developmental theory may be linked through a scientific understanding of the neurobiological interconnectedness between the infant and its primary caregiver. In particular, studies of dissociative states demonstrate correlates between recent findings in neurophysiology and pathological states that enter the consulting room, with implications for treatment.

The transcendent function and Hegel's dialectical vision

In this chapter I will trace Jung's concept of the transcendent function back to its philosophical roots in the notion of dialectical change, first expounded by the German Romantic philosopher Frederick Hegel (1770–1831).

Hegel expounded his dialectical model at a particular time and place in European history, in Germany, at the time of the Romantic revolution and the Napoleonic Wars, a time of enormous social, political and economic change. It formed an essential core of important twentieth-century European philosophical traditions, such as phenomenology and its derivatives, as well as the version of psychoanalysis developed by Lacan and his followers in France.

Hegel's dialectical model is a schema for understanding how change happens throughout all living systems; essentially, it is about the development of self-consciousness as it unfolds both internally and in individuals, in what he calls the World Spirit (*Geist*). He finds a parallel in Jung's theory of how the individual develops a sense of identity or selfhood over time through the interplay between inner and outer, and between collective and personal psychological contents, both located at conscious and unconscious levels. Hegel expounded a philosophy that reflects a deep structural view of the world (Hegel, 1807a; 1812–1816; 1817; 1820). It has had a profound effect on the thinking of those schooled in European culture since the nineteenth century. Hegel's dialectical vision reflects an understanding of fundamental truths, including psychological truths, concerning reality, and how the self is brought into being and attains

its fullest actualization through the interaction between self-consciousness and consciousness of an other. Both Hegel and Jung expounded models that are concerned with those deeply embedded, inherited structures and dynamic processes that underlie the ways in which we perceive ourselves and our reality, and the ways in which we become the individuals we are. Both employ an archetypal model of the self expressed in terms of an image of wholeness, achieved through successive conflict-ridden steps towards individuation and integration.

Hegel's model is fundamentally about *Spirit* as the product of the dialectical interaction between subjective thought and the objective world, between *Logic* and *Nature*. "It begins with *Logic*, defined as 'the science of the Idea in itself,' which treats of the inner life of mind, of human thought. It is followed by the *Philosophy of Nature* 'the science of the Idea outside of itself, or for itself,' which deals with the physical world. The *Encyclopaedia* concludes with the *Philosophy of Mind*, 'the Idea in and for itself.' This is concerned with the origin, nature and purposes of human personality and social institutions. In this scheme, purely logical and natural beings are merely 'one-sided' or partial expressions of spirit. The only true and complete reality is spiritual, which is the dialectical result of the interaction of subjective thought and objective world." (Stepelevich, 1990, p. 19). As such, *Spirit* finds its fullest manifestation in human consciousness. For Hegel, the history of reality is equivalent to human history as it engages in the struggle to reconcile itself to itself. In so doing, it achieves a synthesis, arriving at successive and increasingly encompassing states of consciousness. *Phenomenology of the Mind*, Hegel's great work written in 1807, relates the story of this dynamic between conflict and integration, the goal of which is wholeness.

Although this chapter will concentrate mainly on the parallels between Jung's model of the transcendent function and Hegel's dialectical model, there is a deeper implication. An understanding of the dialectical model would contribute to a broader recognition of the philosophical bedrock that underpins the ways of thinking about human nature and development that we call analytical and psychoanalytic theory. It is able to contribute to an understanding of the differential roles of inner and outer influences in the development of personality. Thus it contributes conceptually to a central debate in depth psychology now: whether a primary self or a primary instinct for relatedness forms the basis of personality structure. It can

lead us to think about a possible resolution of the debate through a view of the self as the result of successive interactions between the contents of the inner world and those objects in the outer world with which it relates. It is a model of how the self combines and interacts with its objects from birth through to maturity: that is, in Jungian terms, how the primary self becomes the individuated self.

The Hegelian notion of dialectical change permeates the psychological theories of Freud and Jung and their followers, steeped as they all were in the German speaking culture of their times. Neither Jung nor Freud acknowledged a real debt to Hegel. In fact, the few references to Hegel in Jung's *Collected Works* are quite scathing. Indeed, we also know from those sparse references to Hegel in his writings that Jung was highly critical of Hegel's style in expressing his philosophical ideas:

A philosophy like Hegel's is a self-revelation of psychic background and, philosophically, a presumption. Psychologically, it amounts to an invasion by the unconscious. The peculiar high-flown language Hegel uses bears out this view: it is reminiscent of the megalomaniac language of schizophrenics, who use terrific spellbinding words to reduce the transcendent to subjective form, to give banalities the charm of novelty, or pass off common-places as searches wisdom. So bombastic a terminology is a symptom of weakness, ineptitude, and lack of substance. But that does not prevent the latest German philosopher from using the same crackpot power-words and pretending that it is not unintentional psychology.

(Jung, 1947, para. 360)

In another context, however, Jung called Hegel "that great psychologist in philosopher's garb" (Jung, 1935, para. 1734). But in *Memories, Dreams, Reflections* he wrote:

Of the nineteenth-century philosophers, Hegel put me off by his language, as arrogant as it was laborious; I regarded him with downright mistrust. He seemed to me like a man who was caged in the edifice of his own words and pompously gesticulating in his prison.

(Jung, 1963)

It is not my intention to concentrate on Freud's debt to Hegel here; that would be the basis for another study. It may suffice to mention Freud's tripartite model of the mind and the three levels of consciousness, each in dynamic relationship within and between the various structures, with ego synthesizing the opposing demands of id and superego. The argument of this chapter is that the dialectical vision is the essence of Jung's concept of the transcendent function.

The transcendent function

Jung considered the transcendent function to be a process central to the psyche. He thought of the conscious and unconscious as being in dynamic opposition to each other, resulting in an intense interaction, both conflictual but also full of potential for growth, and he thought of the transcendent function as the way through the conflict of these opposites. For Jung the transcendent function is "a natural process, a manifestation of the energy that springs from the tension of opposites" (Jung, 1917, para. 121). It forms the basis for:

... a process not of dissolution but of construction, in which thesis and antithesis both play their part. In this way it becomes a new content that governs the whole attitude, putting an end to the division and forcing the energy of the opposites into a common channel. The standstill is overcome and life can flow on with renewed power towards new goals.

(Jung, 1921, para. 827)

The image that results from this process (Figure 2.1) contains the possibility of a creative synthesis and a way out of what had appeared to be a locked state of polar opposition. This achievement, in turn, creates a position against which further elements will stand in opposition, leading to new conflictual polarities, which will also require further integration, mediation, and synthesis. So the process continues, inexorably and relentlessly, each time reaching a higher level of synthesis.

Far from claiming it a philosophical idea, Jung compared the transcendent function to a mathematical function:

There is nothing mysterious or metaphysical about the term "transcendent function," it means a psychological function

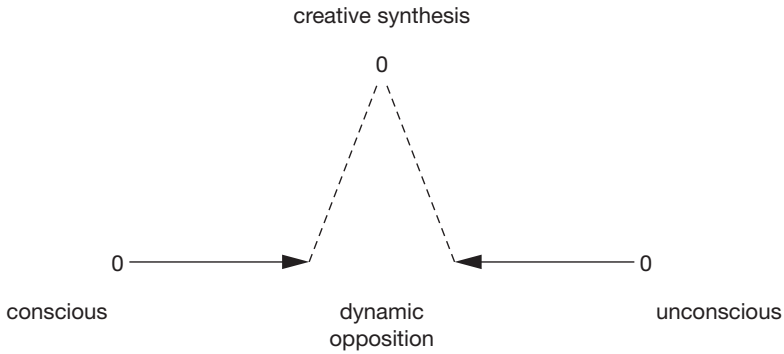


Figure 2.1: The Transcendent Function

comparable in its way to a mathematical function of the same name, which is a function of real and imaginary numbers. The psychological “transcendent function” arises from the union of conscious and unconscious contents.

(Jung, 1957, para. 131)

The years 1912–1916 were pivotal in Jung’s psychic development, a time of great crisis. It was during this time that he wrote both the *Seven Sermons to the Dead* and *The Transcendent Function* (although the latter would not be published until 1957, the former was published in a private edition in 1925). Jung had broken with Freud in 1912, and this highly disturbing severing of what had been a cherished relationship was followed by Jung’s surrender to a descent into the depths of his own unconscious. There followed a profound self-exploration with dramatic consequences. It was at this time that he began his studies of the writings of the Gnostics, later using images he found therein as metaphors for the dialectic within and between internal and external relationships, including the transference/countertransference relationship. Judith Hubback, in her review of the *Seven Sermons to the Dead*, speculated that the abstract thinking formulated in the *Transcendent Function* was based on the personal experiences expressed in the *Seven Sermons*, and that Jung hesitated to publish it for that reason. As she points out, Jung was looking for “a pattern of order and interpretation in face of the confused and frightening contents of the unconscious” (Hubback, 1966, p. 107).

Going on from Judith Hubback's understanding, I would suggest that Jung may have found containment for the highly personal and disruptive experiences found in the *Seven Sermons to the Dead* through exercising the philosophical and intellectual rigour expressed in the *Transcendent Function*, a kind of "progress report" (Shamdasani, private communication, 2005). I think that the schema of psychological functioning that Jung developed in the *Transcendent Function* has a parallel in the philosophical vision of Hegel's dialectic. In the immediacy of the disintegrating psychological experiences that he went through in the years around 1916, Jung swung from one pole of experience to the other, from the chaos and destabilization of unconscious irruptions witnessed in the *Seven Sermons to the Dead*, to the structuring and orderliness of thinking as expressed in the *Transcendent Function*. Through this dynamic interplay, he was able to achieve a personal synthesis, a position of relative integration between the conscious and unconscious attitudes. So Jung himself was living the dialectic.

The transcendent function, like the dialectical process, is about achieving greater and greater differentiations:

The confrontation of the two positions generates a tension charged with energy and creates a living, third thing . . . a living birth that leads to a new level of being, a new situation.

(Jung, 1957, para. 189)

Jung called the synthesis of what is oppositional at a particular moment in the unconscious and in the conscious "transcendent" because, as he says, "it makes the transition from one attitude to another organically possible . . . the constructive or synthetic method of treatment presupposes insights which are at least potentially present in the patient . . ." (Jung, 1957, para. 145). It is especially through the transference and the catalytic contribution of the analyst that ". . . the suitably trained analyst mediates the transcendent function for the patient, i.e., helps him to bring conscious and unconscious together and so arrive at a new attitude." (Jung, 1957, para. 146)

Jung's vision of a bound-together dynamic between related and relating opposite functions which lead to change, forms the basis of my comparison of the transcendent function and the dialectical

vision. Jung presents us with a vision of opposites that are in dynamic relation to each other. These may be situated intrapsychically, or between the self and an other (for example, between infant and mother or analysand and analyst). Through the tension and conflict created by the dynamic relationship, a creative, forward-moving resolution, a synthesis is achieved. Death or stagnation resides in holding these factors separate and apart.

The shuttling to and fro of arguments and affects represents the transcendent function of opposites. The confrontation of the two positions generates a tension charged with energy and creates a living, third thing—not a logical stillbirth . . . but a movement out of the suspension between opposites, a living birth that leads to a new level of being, a new situation. The transcendent function manifests itself as a quality of conjoined opposites. So long as these are kept apart—naturally for the purpose of avoiding conflict—they do not function and remain inert.

(Jung, 1957, para. 189)

The dialectical vision

Hegel's grand design is an attempt to understand reality as constructed historically in pairs of opposites that are not dichotomous but are rather in intimate, dynamic, albeit oppositional relation to one another. The dialectical model allows for a two-fold view of reality, on the one hand in terms of bipolar opposites in dynamic relation to each other, and on the other hand a unity of opposites towards which each strives.

When any thought, notion, or understanding becomes fixed or defined, the mind's tendency to achieve a more comprehensive view is momentarily stunted. A potentially creative conflict may then occur that enables the rigidly held position to be mediated, superseded or overcome (*aufgehoben*). The task of dialectical philosophy is to strive for greater and greater comprehension until a kind of totality of understanding is achieved. This is what Hegel called "absolute reason". This involves the work of negation (*Aufhebung*). I will discuss later how this relates to Jung's archetypal notion of the Self as an image of wholeness.

The dialectical process begins with a “thesis”—any definable reality that is considered as an unconditioned beginning, a starting point from which future developments proceed. In the course of time, the thesis is seen to entail an opposite—“antithesis”—or “the other”. This opposite is understood in relation to the thesis, such that the thesis is seen to require the presence of the antithesis all along. A third stage is achieved, called the “synthesis”, which is the result of the dynamic, conflictual, and reciprocal relationship between thesis and antithesis (Figure 2.2). This resolution has the capacity to hold the two apparent opposites together.

Hegel begins his enquiry by an illustration of dialectical thinking: he posits “pure being” as the fundamental starting point of philosophical enquiry. The very next step, following the act of positing the idea of “pure being”, is immediately, almost simultaneously, to require its opposite—“nothingness”. (This equally could be “self” and “not self”.) “Being” as thesis implies “nothingness” as antithesis. As long as these two fundamental opposites remain in stagnant and mutually annihilating conflict without authentic interaction, no resolution, no creative change is possible. Hegel demonstrates that the only possible dynamic and creative outcome between these opposite positions is “becoming”. “Dialectic is the process of thought that leads the mind from one idea into its complementary opposite, and reveals the unexpected conclusion that their fundamental truth is found only in their unity. Dialectical philosophy proceeds from

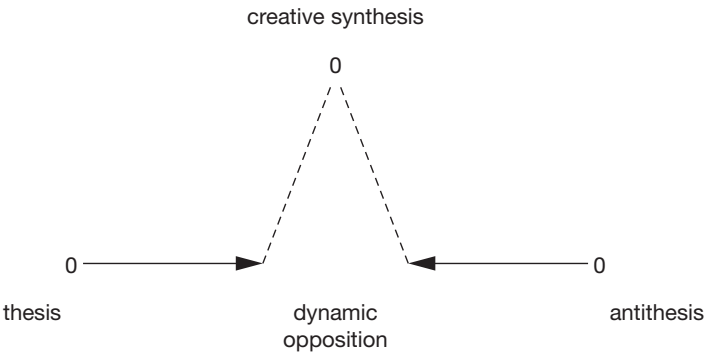


Figure 2.2: The Dialectical Model

the premise that true reality is a 'unity of opposites'." (Stepelevich, 1990, p. 16). This brilliant and immediately accessible understanding of the fundamentals of existence is matched by a similar understanding of the fundamentals of the human psyche and its relationship to others.

Hegel's major illustration of the dialectic between the self and others occurs in his analysis of "Lordship and Bondage", found in *Phenomenology of Spirit*. It is supremely psychological, in that it is concerned with how the individual develops self-consciousness. The process begins at the moment when one person first becomes aware of another as being like him, but also different, an *other*. "Self-consciousness exists in and for itself when, and by the fact that, it so exists for another; that is, it exists only in being acknowledged" (Hegel, 1807b, para. 178). Each is filled by the desire for recognition by the other.

A living relationship is thus established between them, based on an encounter so authentic that the basic core identities of each are touched, threatened with takeover by the other, and then, in some way, reconciled.

Self-consciousness is faced by another self-consciousness; it has come *out of itself*. This has a twofold significance: first, it has lost itself, for it finds itself as an *other* being; secondly, in doing so it has superseded the other, for it does not see the other as an essential being, but in the other sees its own self.

(Hegel, 1807b, para. 179)

The tripartite structure of the dialectical model reflects an archetypal pattern that we meet in the world and in the human mind as it mirrors the structures of the world. The Christian idea of the threefold nature of God as Father, Son, and Holy Spirit; Spinoza and Descartes' threefold vision of reality as consisting of three different kinds of substance (thought, nature, and God); the Socratic dialectic whereby rigid positions are confronted and thereby changed by adroit questioning leading to deeper understanding—all attest to the ubiquitous, deep structural nature of the tripartite dialectical vision. As an explanation of how change occurs psychologically, the dialectical model also gives us a way of thinking about another deep human structure: how a *two*-person becomes a *three-or-more*-person

psychology. The primary mother-infant dyad, if maintained for too long, becomes a stultifying, anti-life set-up, which does not allow for change, as does not the oppositional black-white set-up of the paranoid-schizoid position. The presence of the father, or the mediatory inner element, acts as a catalyst for forward movement where growth and change may be possible. The central psychoanalytic concept of the Oedipus complex is exactly about this, whether it be thought of at the classical psychosexual phase, creating emotional space for the individuation process to occur, or whether it be at the level of very early unconscious phantasy, creating mental space in which thoughts may occur.

Hegel's *Phenomenology of Spirit* concerns the steps by which the World Spirit (*Geist*) achieves wholeness. Each moment in the dialectical process corresponds to a centre or point of consciousness and, as Hegel says, "they stimulate each other into activity . . . [so that] each has its 'other' within it and they are only one unity". (Hegel, 1807b, para. 161).

Hegel's choice of language in the enquiry concerning the dialectical processes of Spirit (*Geist*) begins as if it were a statement concerning the primary self:

the simple essence of life, the soul of the world, the universal blood . . . [that] pulsates within itself but does not move, inwardly vibrates, yet is at rest.

(Hegel, 1807b, para. 162)

This primary state of undifferentiated unity, this "restless infinity" (Hegel, 1807b, para. 169) holds the potential for all the differences to come. It is from out of "this self-identical essence" that an "I" and an "other" appear. For this to happen, consciousness must become self-consciousness, and this in turn can only occur when the self is conscious of itself in relation to another. To describe this achievement, Hegel uses the violent image of self-sundering:

These *sundered moments* are thus *in and for themselves* each an opposite—*of an other*; thus in each moment the "other" is at the same time expressed . . . and so each is therefore in its own self the opposite of itself.

(Hegel, 1807b, para. 162)

Hegel now carries the argument further. For the “I” to differentiate itself from the “first distinct moment”, something other than purely passive self-contemplation must occur. This other thing is, according to Hegel, the “second distinct moment”, a moment of antithesis, which Hegel calls “desire” (Hegel, 1807b, para. 167). The living, immediate quality achieved at this level of philosophical analysis, the introduction of psychological states of desire as the catalytic factor in the dialectic of the self, is remarkable. Hegel, “that great psychologist in philosopher’s garb”, as Jung called him in an ironic remark (Jung, 1935, para. 1734), relates inner states of desire to the foundation of the self in its relation to others—I know myself through my desire in relation to an other. The language he uses is full of immediacy and life—“restless infinity” (para. 169), “Life as a *living thing*” (para. 171), “life points to something other than itself” (para. 172), “self-consciousness as Desire” (para. 174), “Desire destroying its object in order for the self to incorporate it” (para. 175).

Jungian analyst and writer of philosophical texts on aspects of archetypal psychology, Wolfgang Giegerich, commenting on a previous version of this paper, attributed a “peace negotiation fantasy” to my exploration of the parallels between Hegel’s dialectical vision and Jung’s concept of the transcendent function (Giegerich, 2005, p. 4). Although he concurs that I depart from the “peace negotiation” model by speaking of a “*creative synthesis*” [his italics] (*ibid.*, p. 5), thus establishing “a fundamentally new level” (*ibid.*), Giegerich misreads me when he purports that I suggest that the dialectical process begins with Two, and not with One, with a *Position*. I very clearly state that the first position, the thesis, is the first moment, which immediately gives rise to the second moment, the antithesis, the start of the dialectical *process*. It is the dialectical process through which an eventual synthesis of the oppositional state may occur, overcoming/sublating the initial negation as the fundamental attribute of that state by preserving what is negated and transforming it into a new position.

The differences between us may well lie in Giegerich’s view concerning psychology, life, and the soul. He states:

Psychology is not about life and life phenomena, not about people and their development or behavior, but it is about “the soul,” the “logical life,” the dialectics operative *within* such life

phenomena, *within* people's behavior. With the notion of "conflicts" we are already in the outside world, in the social and empirical arena of thing-like entities and events: of human beings and their behavior, their interaction and relationships (so-called object relations), their interests, their desire and fears, and thereby we have already closed behind us the door to the sphere of "the soul" and its concerns, the door to the sphere of psychology.

(Giegerich, 2005, p. 2)

When Giegerich states that "with the notion of 'conflicts' we are already in the outside world", as if this were not possible within an Hegelian dialectical position, while still retaining a reflection that sublates and transforms these conflictual positions, then he leaves out practically all of Hegel's analysis of the history of the living world, including the history of humankind. I agree that Hegel's dialectical thinking proceeds from the standpoint of interiority (*ibid.*, p. 8); as, of course, does the analytic attitude. But to promote a dualism of psyche and matter is not, I think, in Hegel's philosophical disposition, nor is it in Jung's, as recent advances in the neurosciences and theories in physics, including emergence theory, also suggest. I have developed this argument in Chapter 13. As I understand it, dialectical thinking mirrors dialectical processes in the living world, both drawing on deep structural realities that provide "common ground."

The self: a bridging concept between the transcendent function and the dialectic

The archetype of the Self can be usefully thought of as the analytical equivalent of Hegel's dialectical model of Spirit. Both involve a vision that includes opposites, the conflict between them, and the resolution of the conflict through synthesis. In discussing this progression, I will consider three moments or steps in Jung's theoretical development and how these relate to the dialectic. This will take us along a path that includes the movement from libido to symbol, from symbol to Self, and from Self to *coniunctio*.

Much has been written by Jung and after Jung about the self in its various forms and functions. In recent years we have only to study

the work of Michael Fordham (1985a; 1985b), Kenneth Lambert (1981), Joseph Redfearn (1985), and Rosemary Gordon (1985), to embark on an impressive list of commentators and theoreticians on this most difficult of concepts.

In this chapter I would like to add to the discussion, specifically by relating Fordham's notion of a primary self with its integrates and deintegrates (1974; 1979) to Jung's original idea of the Self in relation to the transcendent function, and to explore how these may be expressions in psychological language that have their correlates in dialectical philosophy.

To set the scene, let us introduce the *I* and the *Other*, or in Hegel's language, the *Subject* and *Object*. In the view being elaborated here, neither the *I* and the *Other*, nor the *Subject* and the *Object*, are thought of independently of each other. Rather, they are considered as opposites that are in dynamic relation to each other—they interact, they conflict, and, through the process of relating, over time and under the right (i.e. facilitating) conditions, each makes its own internal synthesis of the experience.

Jung's theory of libido was derived from a different model of the psyche from that of Freud's original drive model of libido which he conceived of as a release of instinctual energy according to erotogenic zones. Jung's own view of libido was consistent with an overall teleological position, in that instinctual energy was available to be transformed at the psychological level, especially via the production of psychic representations and symbols. He developed this view, in counter-distinction to Freud's theory, in his 1912 work, *Wandlungen und Symbole der Libido*, later to be published as *Symbols of Transformation* (Volume 5 in the *Collected Works*). The publication of this work marked, for all intents and purposes, the end of the professional and personal collaboration that the two had enjoyed up until then. I would like to consider those theoretical steps that took Jung from the concept of libido to that of symbol and then to Self. A final point is reached when Self and *coniunctio* are bridged.

In *Symbols of Transformation*, Jung altered radically the concept of the symbol from that used by Freud. Instead of the, then prevalent, psychoanalytic view of the function of symbol formation as a sublimation and therefore prevention of the primary incest tendency, Jung's view of the symbol was that it designated:

... phenomena requiring a teleological explanation ... [rather than] simple causalities ... [with] the purpose of canalizing the libido into new forms ...

(Jung, 1912, para. 332)

It is not possible to overestimate the importance of this radical (we might call it dialectical) shift in the concept of libido. Through this new definition, Jung offered an alternative view of the purely psycho-sexual nature of libido, for he goes on to claim that, under the right (i.e. facilitating) conditions, the effect of the canalization of libido is to:

... stimulate the creative imagination which gradually opens up possible avenues for the self-realisation of libido. In this way the libido becomes imperceptibly spiritualized.

(Jung, 1912, para. 332)

In this passage Jung has, in a dialectical manner, created an alternative meaning of libido to that designated by Freud. By juxtaposing the instinctual and the spiritual, while at the same time uniting them through the concept of symbol, Jung offers a demonstration of both the form and the content of the dialectical process in its immediacy. It was to be only a few years later that he would publish *The Transcendent Function* (Jung, 1916), where the dialectical view of psychological change is expounded, and a few years after that *Psychological Types* (Jung, 1921), in which he defines symbol in relation to the transcendent function. In *Psychological Types*, Jung describes the symbol as "a living thing ... the expression of a thing not to be characterised in any other or better way ... pregnant in meaning" (Jung, 1921, para. 816). He then gives a description of the symbol in dialectical terms:

But precisely because the new symbol is born out of man's highest spiritual aspirations and must at the same time spring from the deepest roots of his being, it cannot be a one-sided product of the most highly differentiated mental functions but must derive equally from the lowest and most primitive levels of the psyche. For this collaboration of opposing states to be possible at all, they must first face one another in the fullest conscious opposition.

This necessarily entails a violent disunion with oneself, to the point where thesis and antithesis negate one another, while the ego is forced to acknowledge its absolute participation in both.
(Jung, 1921, para. 824)

Having posited thesis and antithesis, he goes on to state:

Since life cannot tolerate a standstill, a damming up of vital energy results, and this would lead to an insupportable condition did not the tension of the opposites produce a new, uniting function that transcends them.
(Jung, 1921, para. 824)

This achievement culminates in what Jung calls “a middle ground” where:

. . . the energy created by the tension of opposites therefore flows into the mediatory product and protects it from the conflict . . . for both the opposites are striving to get the new product on their side.
(Jung, 1921, para. 825)

Despite the highly abstract nature of Jung’s concept, his language is dramatic, energetic, and alive with immediacy. The words he uses include: living, pregnant, anticipatory, dead, flows, highest, deepest, violent disunion, damming up, conflict, striving, and energy. The dramatic and immediate quality of the language no doubt attests to the drama of Jung’s personal experience as the contents of his unconscious burst upon his consciousness. It is interesting to reflect at this point that the language of Hegel’s *Phenomenology of Spirit* is also replete with the living and violent nature of the dialectical engagement, the life and death struggle when opposites meet, clash, and war, risk dissolution and disintegration. An encounter of these titanic proportions constitutes the only authentic prelude to the possibility for the dynamic of the transcendent function to be released, creating an opportunity for a new position in the psyche. If Jung conceived his notions of libido, symbol, and transcendent function in a state of extreme crisis, in a psychological life-and-death struggle of his own, when he submitted to the immediacy of the

experience of the contents of his unconscious as they pushed themselves forward, so (although we do not know his mental state at the time) Hegel conceived in similar language his dialectical model, writing the *Phenomenology of Spirit* as he sat at a table by his window, hearing the sounds of Napoleon's cannons during the Battle of Jena in 1806.

Dialectical processes within the Self

As we know, the symbol of the Self was for Jung the central unifying symbol that signified the containment of opposites within a unified whole. Much of Jung's writing is devoted to the discovery and elaboration of symbols and representations of the Self. Just as Hegel's *Phenomenology of Spirit* expressed and, at the same time, by virtue of being written, contributed to the dialectical process that spanned original unity, to differentiation, and finally to integration, leading ultimately to an ordered sense of wholeness, so, too, Jung's notion of the Self and its symbols not only expresses potential integration or order, but also contributes to it.

We think of the archetype of the Self as spanning an early primitive state or core identity through to an individuated state of wholeness via the combination and differentiation of opposites. When the Self is expressed through the symbol of the Divine Child, we might understand that we are dealing with a state of the primary, undifferentiated core identity of the Self—a primary self. The archetype of the "child" "paves the way for future change of personality. In the individuation process, it anticipates the figure that comes from the synthesis of conscious and unconscious elements . . ." (Jung, 1940, para. 278). Jung goes on to state that "this it cannot do without detaching itself from its origins . . . the conflict is not to be overcome by the conscious mind remaining caught between the opposites, and for this reason it needs a symbol . . ." (Jung, 1940, para. 287). The creation of symbols is the way to overcome "an original psychological state of non-recognition, i.e. of darkness or twilight, of non-differentiation between subject and object . . ." (Jung, 1940, para. 290).

When, however, the Self is expressed through the symbol of the mandala, we might understand that we are dealing, albeit as an abstraction, with the end product of the process in which all the differentiations have occurred, all the steps towards individuation have taken place, where an integrating, unified wholeness is achieved

(Jung's "conglomerate soul", 1950, para. 634). Hegel's idea of the Perfect Man (i.e. man fully individuated and conscious of himself) is similar to Jung's idea of the wholeness of the Self:

Psychologically the self is a union of conscious (masculine) and unconscious (feminine). It stands for the psychic totality. So formulated, it is a psychological concept. Empirically, however, the self appears spontaneously in the shape of specific symbols, and its totality is discernible above all in the mandala and its countless variants.

(Jung, 1951, para. 426)

We can conclude that at both poles of the Self archetype, Jung expresses the dynamics of change in dialectical terms that resonate with Hegel's language concerning the dynamics of the Spirit. Later theoreticians, including Fordham, Winnicott, and Racker, take Hegel's dialectical model, adapting it for an age more centred on the notion of the reality of the psyche.

Fordham's dialectical model of self development

Michael Fordham's work offers us a further dialectical view of the processes in the development of the self. In postulating two forms of the self, the whole self and part selves, he has developed the idea of two kinds of self functioning—integration and deintegration (Fordham, 1976). His view of this process is dialectical:

a symbolic expression can never represent the whole self because in order to form, the self has to divide up to produce two part-systems, the one that creates the imagery (this is rather loosely called the unconscious) and another (the ego) that records and interacts with it . . . it is the images referring to the self . . . that become numinous . . . when . . . they come close to representing the whole self.

(Fordham, 1979, p. 23)

His dynamic twofold model of deintegration and reintegration (Figure 2.3) provides a view of the primal self in relation to its experiences, whether they be internal or external to the self.

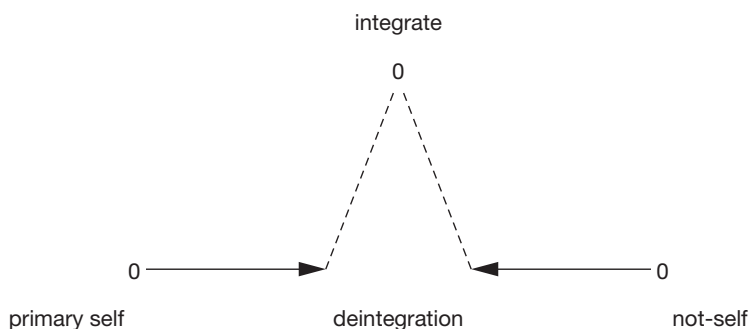


Figure 2.3: Fordham's Self Process

It is a vision of dynamic and synthesizing relating, like that ascribed to the dialectical vision, and offered by Fordham in the image drawn from Freud of the amoeba with pseudopodia that extend from the central area in order to incorporate elements from the outside world. In so doing, both the self and the deintegrate undergo a change—a synthesis—within the central area.

Just as deintegration is the action of the (primary) self as it relates to its objects (Urban, 1991), so the dialectical process is the action of being-in-the-world. Both describe the dynamic of change, and both use a twofold model of, in psychological terms, "I" and "not-I", the interaction between which produces a new element, which is reincorporated into and transforms each element in the process.

Applied to the evolution of the personality, the dialectical model can be used to explain how a series of incremental steps take place as a result of the collision of, and play between, opposite experiences (good/bad, separate/merged, through a practically infinite list of polarities), and how they might gradually achieve an internal synthesis. Each element defines and is defined by its opposite in the dialectical pair. Implicit but central to this view is a teleological vision of how living organisms develop and grow by subsuming (negating) and preserving each previous stage in the process of achieving the next stage. (Hegel's famous example is how the acorn becomes the oak tree.) Implied in the model is an explanation of how a failure to develop might occur, when breakdown or a rigid defensiveness would arise through a conflict of opposites with too great pressure

on the system and with no means of synthesis. In the process of the development of the neonote, we might call the starting point of the dialectic, the first moment, the thesis, the “primary self”, and the second moment, the antithesis, is the caregiver, not self. Thus, thesis and antithesis are seen to require the presence of each other all along. So we might say that the primary self is ready to interact with the caregiver, and the capacity to become itself—individuation—requires the capacity to find and relate to the other—in Hegel’s terms, its desire is the desire for another (i.e. the mother). In Winnicott’s imagery, the baby invents the breast and the breast arrives (if it is a good-enough breast) at that particular moment when the hallucinatory desire has occurred (Winnicott, 1952, p. 99).

The *coniunctio* as a creative image of the dialectical self

For Jungians, images of the *coniunctio* are symbols of central psychological importance, denoting the union or marriage of opposites in an intercourse that would have, as its fruition, the birth of a new element. Jung considered that many primal phantasies of adult patients did not arise from real childhood experiences of the primal scene, as traditionally understood by psychoanalytic theory, but were better conceived of as projected into what are experienced as memories from childhood. The sources of these projected “memories” are the bipolar archetypal images of the collective unconscious, images of, for example, the anima and animus in *coniunctio*.

In analytical psychology, the central archetypal image of the primal scene is envisaged as the coupling of the King and Queen in all its vicissitudes (as Jung demonstrated in his well-known study of the *Rosarium*, 1929). Jung used alchemy as a vehicle through which to explore those elements in the psyche that could be observed in the special analytic *coniunctio* contained within the transference/countertransference. In fact, the alchemical metaphor centred around the *coniunctio* image—a meeting within the *vas hermeticum* of the base or primitive psychic elements and those processes they undergo in a series of transformations from base (instinctual) to precious (psychological) substances. We could see the alchemical vessel as the analytic or therapeutic setting, and the elements to be transformed as aspects of the conscious and the unconscious of both the patient and the analyst. In alchemy, the elements to be combined are

conceived of as opposites, the combination leading the alchemist to the production of something in the third space, *tertium quid non datur*, or the interactive field. The new condition was unnatural, in the sense of not being found naturally (*contra naturam*, as Jung says). The alchemical metaphor is rich in its potential for viewing the processes that occur within any relationship, including those within the transference/countertransference relationship, because it is concerned (in a similar way to the dialectical model) with how individuals influence each other, impact upon each other, and how their experiences are internalized and synthesized by each other: what we call the various modes of projection, introjection, identification, and projective identification.

The interrelations between therapist and patient, the openness of both to changes in each other, are clearly valued by Jung. It is through the changing, ongoing analytical relationship that the vicissitudes of the treatment take place, and that progress and process within the transference and countertransference can happen. Indeed the concepts of complementary, concordant, and syntonic countertransference (Racker, 1968; Lambert, 1981) can be understood in dialectical terms as forms of mutual relatedness, contained by the analytic set-up, which allow for subtle communication through projective identification. An "approximate union or identity between the various parts (experiences, impulses, defences), of the subject and the object" is achieved (Racker, 1968, p. 136). Perhaps instead of Racker's idea of a straightforward exchange producing unity or identity, we can envisage an emergent property of the analytic relationship of a complicated mix of shared projected and introjected elements, as discussed more fully in Chapter 13. For the stuff of the projected or introjected material must find a mental space and place in the recipient's psyche, and then it goes on acting in there. Hegel's words are eloquent:

[Self-consciousness] must supersede this otherness of itself. This is the supersession of the first ambiguity, and is therefore itself a second ambiguity. First, it must proceed to supersede the *other* independent being in order thereby to become certain of *itself* as the essential being; secondly, in so doing it proceeds to supersede its *own* self, for this other is itself.

(Hegel, 1807b, para. 180)

The dialectical understanding of transference and countertransference

Racker referred to the subjective experience of the transference as “determined by the infantile situations and archaic objects of the patient” (Racker, 1968, p. 152), the understanding of which the analyst can approximate only through his capacity to allow the analysand enough access to his own unconscious—what Racker calls “an intensified vibration” of his own infantile situations and archaic objects. This is similar to Fordham’s view of the importance of the analyst’s ability to tolerate their own deintegrative processes and states in the presence and service of their patients (Fordham, 1957). The understanding achieved by this subjective experience is then translated into an interpretation, which becomes part of the shared history-making between patient and analyst. It may then be re-experienced at the conscious or unconscious levels at the time of each subsequent interpretation. The quality of the resonating constitutes an important therapeutic factor in the subjective experience of the analysis.

The interrelations between analyst and patient, the openness of both to changes in each other, are clearly valued by Jung, and he referred to the centrality of the relationship between analyst and analysand in dialectical terms:

In actual practice, therefore, the suitably trained analyst mediates the transcendent function for the patient, i.e., helps him to bring conscious and unconscious together and so arrive at a new attitude. The patient clings by means of the transference to the person who seems to promise him a renewal of attitude; through it he seeks this change, which is vital to him, even though he may not be conscious of doing so. For the patient, therefore, the analyst has the character of an indispensable figure absolutely necessary for life.

(Jung, 1957, para. 146)

Because each personality is equally involved in the process, change occurs for both:

For two personalities [doctor and patient] to meet is like mixing two different chemical substances: if there is any combination at

all, both are transformed. In any effective psychological treatment the doctor is bound to influence the patient; but this influence can only take place if the patient has a reciprocal influence on the doctor. You can exert no influence if you are not susceptible to influence.

(Jung, 1929, para. 163)

In the transference, the analysand may project an internal object into the analyst, and, in consequence, in the countertransference the analyst may feel himself to be identified with this object. The analyst's own subjective experience of the projected object will depend on the quality of the projection as well as the quality of his inner world. How conscious understanding of this subtle and complex process builds up over time forms the context of the analysis. Hegel's formulation of the dialectical interaction between two people as the "ambiguous supersession of [their] ambiguous otherness" is another rendering of the archetypal image of the *coniunctio*.

This ambiguous supersession of its ambiguous otherness is equally an ambiguous return *into itself*. For first, through the supersession, it receives back its own self, because, by superseding *its* otherness, it again becomes equal to itself; but secondly, the other self-consciousness equally gives it back again to itself, for it saw itself in the other, but supersedes this being of itself in the other and thus lets the other again go free.

(Hegel, 1807b, para. 181)

Two dominant images linked to the analytic *coniunctio*, and studied extensively by Jung in alchemical texts, are the hermaphrodite, a combined male-female image, unconscious and lacking differentiation, and the androgyne, the integration of male and female aspects in conscious balance. They are seen, in clinical material, in terms of the wish to merge, at the undifferentiated hermaphroditic end of the spectrum. The more differentiated androgyne imagery can point to vicissitudes and variations in the *coniunctio*. It is possible to think of the development from less to more differentiated imagery as being achieved in part through processes facilitating the formation of what has been called the subtle body. An unconscious couple is created and interact together in the consulting room, by virtue of the

consistent containment of the therapeutic setting and through the subtle communications that can occur within the interplay of projective identifications, or, in Jung's terms, through *participation mystique*.

Projective identification can initiate the process of gaining access to, and transforming, interactive fields of linking or relating. These fields are imaged, for example, by the couples in the *Rosarium*. The alchemical process is devoted to overcoming the dangers of fusion states, of the tendency to concretise processes in the third area into something belonging to the ego.

(Schwartz-Salant, 1988, p. 44)

The collisions that occur between the unconscious analytic couple and the conscious analytic couple are often called enactments; those inevitable errors in the analytic work that can lead to creative change.

Marital or long-term partnership is a further example, wherein a relationship is built up over time and across major life occurrences. It is imaged in the *coniunctio*, in the androgyne, and in the idea of the combined parents, and it is mirrored in the analytic relationship. *Hierosgamos*, the image of the *coniunctio* of the sacred marriage, is visioned, in alchemical terms, as the meeting of opposite elements, male and female, which unite to produce a third substance. In the actual marriage, it may be an actual child. At the symbolic level, the partners will engage in exchanges that may lead to internal transformations within each that could not have occurred without the other.

We are now coming full circle, and return to the image of the mother and infant who form a nurturing couple. By their very coming together, they create a third element, which we could identify as aspects of the shared subtle body, that contain each, negate each as separate entities, but which by so doing reach towards their further mutual and individual differentiations and development as re-internalized by each.

Conclusion

This chapter has sought to demonstrate that Jung's idea of the transcendent function has a deep resonance with Hegel's seminal

philosophical enquiry. Despite Jung's rejection of Hegel as too identified with his own unrecognized psychology, Jung's early notion of the transcendent function and his later understanding of analysis and the path of individuation as a dialectical process, the aim of which was the synthesis of the personality through the transformation of opposites, has a parallel in Hegel's dialectical vision. Understood psychologically, the dialectical process as imaged archetypally in the child—producing images of *coniunctio*—has proved fertile in understanding the dynamics of the self and its development as lived out in the analytic transference and counter-transference. In chapter 13 I discuss the contemporary Jungian analyst, François Martin-Vallas' relevant view of the transferential chimera, where 'the transference and counter-transference unite to provide one of the containers for the transference . . . a genuine cross-projective container in which the process can unfold' (Martin-Vallas, 2007, in press).

In the work of analytic reconstruction, a history of the internal image building is recreated—a real process of *self*-consciousness. No matter how we seek to answer the question of what comes first—the primal self or the interrelatedness that creates the self—in the end, our theories rest on speculations and inferences drawn from infant research, infant observation, and our day-to-day clinical work, and in the stages of our own dialectical, transformational development—our own individuation. In turn, these speculations must rest both on our best attempts to observe and understand, as well as our more or less conscious philosophical dispositions. All this points to fundamental concerns about epistemology in analytic theory building—how do we know what we know and what is it exactly that we *do* know?

Overall, we could view the basic differences between the philosophical stances taken by Freud and Jung as characterized by the reductionist method of Freud (the *archaeology* of mind) and the synthetic method of Jung (the *teleology* of mind). Seen together, they constitute a complementary system of opposites that form a whole—a dialectical system in itself.

It is possible that the dialectical model can help us to understand why these two lines of analytical enquiry, the archaeology and the teleology of mind, lead to potential conflict. It is also possible to use the dialectical model to understand how they are complementary. If

we strive towards a mediation of the two positions, which does not deny differences but rather seeks to understand them as existing within a larger whole, then we would be adding to the work that brings forward the general development and evolution of our theoretical understanding and clinical work.

Throughout our lives there is a constant dialectical process that enables our essential self and our personal, special inner and outer capacities for *coniunctio* to elaborate and grow. If we allow that there is both a primal self and an innate predisposition for interrelating, then we are in a position to understand that the development of the personality is due to both and necessitates both. The transcendent function of Jung and the dialectical model of Hegel both seek to address similar understandings of psychic reality and as such demonstrate a remarkable similarity of structure.

I would like to thank Sonu Shamdasani for his helpful comments on this chapter.

Analytical psychology and object relations theory

Considering the history and the possible communalities between the theory of archetypal psychology and object relations theory requires us to consider two basic philosophical dispositions that have permeated Western culture since the nineteenth century, and thus inevitably our own thinking as analytical psychologists. These are Hegel's dialectical vision concerning the processes of change, and the notion of deep structures, particularly psychological deep structures.

Each concept has made an important addition to the philosophical bedrock that underpins the ways of thinking about human nature and development that we call analytical and psychoanalytic theory. They are especially useful when we come to think about the differential roles of inner and outer influences in the development of personality, their combination, interaction, and relative importance, as primary to the structure and contents of the personality from birth through to maturity.

The first, Hegel's dialectical vision, grew up in Europe, especially in Germany, at the time of the Romantic revolution, as discussed in chapter 2. It translated into the realm of social, political, and economic change by Marx and his followers. I consider that the Hegelian notion of dialectics and dialectical change permeates the theories of Freud and Jung and their followers, steeped as they all were in the German-speaking culture of their times.

The dialectical vision offers a view of the world and of reality as organized according to basic positions that are in dynamic relation

to each other. Two opposing structures or states (thesis and antithesis) at once define each other by negating each other, and, if the conditions are facilitating enough, move towards an integration (synthesis), achieving at least part of a solution or resolution to the conflict. That solution itself becomes inevitably a further new thesis with its concomitant antithesis, leading to another synthesis, and so on. The dialectical vision understands dynamic oppositions are potentially fruitful collisions that may lead to greater self actualizations through the processes of change leading to synthesis. The process of history is seen as a dialectical forward movement, in which mankind progresses through the clashes of contradictory systems. It is a teleological vision which looks to the futurity of things.

Hegel argued that the same dialectical logic could be applied to any system, thus by inference including psychological and interpersonal systems (Hegel, 1807). The dialectical vision permeates Freud's conflictual hypothesis of the mind in, for example, the notion of the tripartite id-ego-superego structure; it is also there in Jung's notion of the opposing poles of the archetype, of the compensatory function of dreams, of synthesis and the *tertium quid non datur*, and in his idea of the transcendent function. The quintessential example is the dynamic relationship between consciousness and the unconscious, as they pass through the various stages of personal, starting with infantile, development. The most relevant example is of the build up of a sense of "I-ness" over time. This happens as a result of a dynamic process in which the subject experiences himself or herself in relation to a "not-I" figure, perhaps experienced or perceived initially as a part object. "I-ness" and otherness create one another, preserve one another, and transform one another. As psychoanalyst Thomas Ogden has stated in his dialectical view of object relations, "The mother creates the infant and the infant creates the mother" (Ogden, 1986, p. 209). The two develop a relationship over time in which the internalized parts of the one embed themselves within the personality of the other.

The second important concept, that of psychological deep structures, has a long philosophical history from Plato to Kant to the modern day. The concept has recently been explored further by the philosopher and psycholinguist Noam Chomsky in the last three decades in America (Chomsky, 1968, p. 3). Chomsky demonstrated the universality of underlying deep structures in languages, the

inheritance of which is innate rather than learned. These deep structures are subsequently converted into surface structures by applying a set of transformational rules that are acquired. In this way the various different languages have developed.

It is possible to think of the archetypes of the collective unconscious as psychological deep structures against which the infant's experience of his real parents builds up dialectically, over time, into an amalgam of phantasy and reality experiences. This amalgam is constantly under review, both consciously and unconsciously. The Kleinian notion of unconscious phantasies can be viewed in a similar way as the archetypes, as deep structural categories that mediate the experiences of the real baby and his mother.

Support for this view comes from philosophical and psychological sources, including clinical evidence. Also, ethologists, such as Tinbergen and Lorenz, posit theories concerning innate structures that exist prior to learned behaviour. These can be observed when a member of a species, in the presence of a stimulus (an "innate releasing mechanism"), is observed to perform stereotypical and ritualized behaviours. Courting behaviours in certain animals, including human beings, are a typical example. As are the stimulus and response behaviours between the nursing mother-baby couple, which ensure that a nurturing good-enough mother is available to look after the needs of her dependent baby.

The connection between the concept of the archetypes of the collective unconscious and concepts from object relations theory about unconscious phantasy and internalized objects can be understood to be related through the common core principles outlined above. Clinically and introspectively, these are conceived thus: that in all of us there are certain fundamental psychic structures through which the primal self mediates its inner experiences and its earliest relationships, and that the interactions between the primal self and inner and outer experiences with their multitudinous imageries build up over time to make up the person who we are: a kind of inner and outer family. Through a dialectical statement of this kind, we can avoid apparently contradictory theoretical statements where the acceptance of one would seem to preclude the other. For example, Fordham's notion of a primal self and Winnicott's notion that there is no such thing as a baby, but rather a nursing couple, can be synthesized by applying the dialectical model. The dialectical model

would provide that the child build up experiences of himself and his others that can be plotted on a spectrum of greater or lesser amounts of phantasy and of reality, of internality and externality. This is also true for the mother, albeit at a level appropriate to her adult status.

The concept of the archetype

In the history of the development of the concept of the archetype resides much of the history of the vicissitudes that have occurred between psychoanalysis and analytical psychology.

We know that, in the early years of the century, Freud and Jung enjoyed a close theoretical and personal collaboration. Freud considered the young Swiss psychiatrist, Jung, to be the likely heir to the leadership of the psychoanalytic movement, and much of Jung's early scientific and theoretical explorations fitted Freud's psychological notions. This was so particularly in Jung's experimental work on the complex, which was to become the foundation for the later theory of the imago and, after, of the archetype.

As a young psychiatrist working at the Burghölzli Psychiatric Hospital, Jung developed the Word Association Test (WAT) (Jung, 1903). This experimental tool established psychoanalysis as a verifiable science, thus giving it scientific legitimacy according to what would later be thought of as Popper's criteria (Popper, 1959). (Popper expounded his ideas later. Namely, that a science is legitimized when it is built up of a series of propositions rendered into operational definitions that are experimentally falsifiable. The requirement was to demonstrate statistically the probability that the data supporting the scientific proposition could not have happened by chance. Given the scientific status of the WAT, it is an irony that the validity of psychoanalysis as a science has been criticized precisely in terms of Popper's criteria concerning the lack of falsifiability of its propositions.)

The Word Association Test was a tool for measuring variations in certain autonomic responses and response times given by subjects to a list of carefully selected stimulus words. Anxiety-provoking areas of concern to the individual could be demonstrated by grouping variations in response times with the associations to thematically related stimulus words. These showed the individual's

complexes, or the “feeling-toned” complexes, as Jung called them, insofar as the differences in the variables as measured pointed to different unconscious emotional states evoked by the stimulus words. The key complexes, as demonstrated by different groupings, gave a profile of that individual’s problems. Experimentally and conceptually, the results were very impressive, and were hailed as the first scientific verification of the existence and effects of the unconscious and of the theory of repression in the aetiology of the neuroses. Indeed, the WAT was one of the first elegant psychological experiments, and became a classic in scientific history as a paradigm for investigating qualitative subjective states through the quantification of data. It was a major contribution to experimental psychology.

The WAT was Jung’s great gift to Freud, and certainly his main contribution to the early psychoanalytic movement because it provided experimental evidence for the existence in the psyche of the mechanisms of repression and the place in the mind where repressed contents go (i.e. into the unconscious). It established psychoanalysis as a science, and Freud was most eager to legitimize it in this way.

Establishing the experimental basis of psychoanalysis was also the foundation of Jung’s major contribution to what would become analytical psychology. The notion of the complex, discovered through the method of ordering reactions around a thematic group, would lead Jung to the notion of the imago, a series of thematically organized symbolizations, and would finally become the basis of his notion of the archetypes, the template through which human experience is channelled. Herein lies the deep structural link between the two movements, psychoanalysis and analytical psychology.

At this point, I would like to introduce a patient, whom I will call Sally, whose material will illustrate many of the points of this chapter. Sally begins by giving us an ordinary clinical example of the complexes discovered through association. She arrived for her session in a very agitated state. As she walked around the corner near my consulting room, she came across two policemen walking side by side towards her. She immediately felt extremely panicky, imagined she was going to be stopped and “examined” (her words) by them, and wondered how she would manage the 50 yards to my door.

If we were to use Sally as a subject for the WAT, we would no doubt find significantly different autonomic responses and variations

in response times to the stimulus word “policeman” than to other, more neutral, words. We might also expect similar responses to words like “father” or “men”. With her exaggerated reaction to the policemen, we would expect to uncover in analysis that she had a father complex with highly persecuting characteristics. In fact, through analytic work, we were able to see that her inner father archetype was very strict and critical, and that her experience of her real father did very little to alleviate the persecuting archetype. The panic she felt 50 yards from my consulting room echoed similar terrifying childhood states in which the source of protection was denied by a threatening force.

After the incident with the policemen, she embarked on a long and painful process, which took almost a year, in which she revealed what had been a preconscious, but became in the analysis an increasingly conscious, belief that she had been abused as a child of six years by her father, during a time when her mother had been hospitalized. Not only had her mother not been there to offer protection, she presumably had no idea that her child was in danger, just as, so Sally perceived, I did not as I waited for her to arrive for her session. I did not offer “protection”, nor did I know she was “in danger”.

Returning to the historical survey, up to this point, Freud took Jung’s WAT experiments as validation of his theory of repression into the unconscious through the defence mechanisms. However, around 1912, the relations between Freud and Jung broke down. The overt reason for the break was Jung’s publication of *Symbols of Transformation* (Jung, 1912a). Jung used the idea of “symbol” in a specific way, as a bridge between the concept of complex and archetype. The question Jung addressed in this work was, where do symbols come from and what is their function?

In a sense, all the rest is history. For, as we know, in attempting to answer these questions, Jung elaborated a new, more encompassing, definition of the notion of libido. He discarded Freud’s notion that libido was “nothing but” sexual energy, a primitive sexual force that could only be controlled by the censor (later the superego) in collaboration with the ego through the various defence mechanisms.

Jung was convinced from the evidence of clinical material, that the libido included, but reached far beyond, personal psychosexual experiences to a much more generalized energy source, namely the total life force that pulses through all the forms and activities of

the integrated psyche–soma system. The psychic manifestations of this generalized energy take the form of images, and these in turn become symbols when they act as transformers of energy, eventually offering the possibility of new resolutions of old problems. We know that the archetypal image can reside both at the personal and at the collective level. The concept of generalized libido, containing its own symbolizations, was Jung's second major contribution, and formed the basis of what would become the tradition of analytical psychology.

For Freud, symbols were translations, or more exactly, sublimations, of libidinal (sexual) pressures into another area of imaging: a compromise between id and superego, according to the demands of the reality principle operated by the ego.

For Jung, however, symbols could be that, but could also be much more: they could be creative, purposive, healing, psychological inventions. He considered them to be "the best possible expression for a complex fact not yet clearly apprehended by consciousness" (Jung, 1957, para. 148). Jung's vision can be characterized as teleological, forward looking, and synthetic; Freud's as reductive, radical, and analytic.

As he continued to elaborate his idea of the complexes, Jung began to stress the powerful similarities between the images that represent them across individuals, cultures, and historical periods. Hereby, he was developing more and more concepts about the deep collective structures of the psyche. We need only remember that, in *Symbols of Transformation*, Jung studied the written fantasies of a young American woman, drawing parallels between her fantasies about a lost lover and themes from ancient mythology. Jung's explorations of myth in this work changed his views on the nature of the unconscious. The unconscious was no longer simply the repository of the repressed personal unconscious, it was also the well-spring of human spiritual and cultural creativity.

Little by little, in his writings Jung's terminology was changing. Using the broader concept of libido, and substituting for the concept of the complex, that of imago, he sought to show that it is not just one's personal mother or father about whom one has conflicts, it is the complex network of often culture-bound associations which centre on the mother and father imagos, which he later called the archetypes, which, in combination with personal experiences,

produce psychic difficulties and conflicts. An imago is a collection of associations expressed in thematically related images or symbols. The imago is autonomous and is expressed independently of the ego's will. This is similar to Plato's notion of the Idea (*eidos*), an inherited archetypal configuration that is collective and forms the template through which we perceive the world. It is a view expounded much later by the German philosopher Kant, for whom reality was perceived and thought about through a limited number of categories available to the human mind.

Thus, the mother and father complexes were seen as the sum of the individual's personal experience, positive or negative, of their real mother and their real father and the collective experience, the "mother" and "father" imagos, which we all have inherited by virtue of being human. In ethological terms, an individual's personal experiences of their own mother and father are functions of an innate inherited predisposition to experience them in particular ways.

Archetypes are variously thought of as unconscious universal structures, inherited blueprints, or templates, which organize psychic energy along certain repeatable and recognizable lines. These innate patterns or predispositions to the formation of typical ideas or behaviours become manifest through images, or symbols. These images have a particular kind of power; we speak of the individual being in "the grip of the archetype". We often think of patients in particular phases of treatment as embodying archetypal figures, such as the trickster, the hero, the *puer aeternus*, or the *puella*. Or, conversely, they may de-identify with them through projection: the father/analyst may be the trickster where the patient may be identified with the victim/child.

Archetypal images reside at the imaginal pole opposite to the instinctual/biological (even perhaps biochemical) pole of the psyche-soma system. They signify the shape of instinctual goals, and are conceived of in opposite pairs, polarizing at the extremes into instinctive bodily behaviours at one end, when acting out is most apparent, and spiritual or numinous experiences at the other, when subjective experience is maximal (the apperception of beauty, or religious experiences, may be classed in this area).

The principle of bipolarity governing the archetypal imagery is expressed through extremes of the positive and negative attributes: good versus bad, dark versus light, loving versus hating. The mother

archetype can be nurturing, caring, loving; or devouring, annihilating, evil; or abandoning, empty, bad. The father archetype can be helpful, supportive, strong, admired; or (at different times) tyrannical, dominating, castrating, sadistic; or weak, useless, absent. The archetypal aspects of the important figures that we carry inside us by virtue of being human depend to a large extent on the way our real experiences have mediated the bipolar possibilities of the archetypal images. In ordinary development, a series of good-enough experiences, in Winnicott's sense, will prevent extreme polar positions from getting stuck on either positive or negative poles, and thus will facilitate the ego's growth and increasing ability to tolerate the ambivalences that are thought of as belonging to the depressive position, including recognizing simultaneous loving and hating feelings towards the object.

At this point I would like to reintroduce my patient Sally, who encountered two policemen on her way to see me. I hope to show through Sally's material that the notion of archetypes as deep structures is substantially similar to the notion of unconscious phantasy, which is at the basis of object relations theory. The negative father imago or archetype had not been modified, but rather had been reinforced by her own personal experience of an abusing father who was experienced as keeping her away from the protection of her mother. Also, the abuse was thought to have taken place during a period in her childhood when her mother was hospitalized. This piece of detective work took about a year for us to unravel. But then, as a result of a dream, we began another, different phase in our detective work. She dreamt of her mother in the hospital in which she had been when she, Sally, was six years old. Her mother's head was in plaster. The plaster began to crack.

This dream heralded a new phase in our reconstruction work. The picture is rather more complicated than I initially made out. In a way, I have tricked the reader, deliberately, just as Sally and I were tricked in the consulting room by her unconscious inner family. What we learned in this next phase of the analysis was that her mother had been hospitalized during an acute psychotic breakdown when Sally was six years old. A further elaboration during reconstruction revealed that when the mother herself was six years old, her own mother died, and she was sent to live with a maternal aunt and uncle. The uncle had abused Sally's mother.

So, in fact, Sally was not herself abused; but her mother had been. In reconstruction we found that there was a layer of inner experience (her quasi-conscious idea that she had been abused) that she had internalized and identified with, but which really belonged to her mother. In other words, although it was true that the mother had had a psychotic breakdown at the time when her daughter, Sally, had reached the age when the mother had been abused, it was not true that Sally's father had abused Sally. But he had been a strict disciplinarian and therefore did not contribute much to softening the negative pole of the archetype.

The importance of this piece of reconstruction was to demonstrate that Sally had internalized through identification her mother's experience of having been abused at a specific time in her childhood. The fact that her mother had a breakdown at the time when Sally reached the age at which her mother had been abused meant that Sally experienced her mother's absence as attributable to her father. She had thus joined up the negative pole of the archetypal father figure and her own experience of a dour and rigid father with an internalization of her mother's experience of a bad uncle figure, to arrive at, or colour, her feeling that her father blocked her mother's availability to her as a source of protection, and her semi-conscious belief that she had been the victim of his incestuous attack. All this we learnt painfully, over time. In the transference, I was experienced at times as the mother who was not able to protect her, or the abusing father, or the abused analyst mother who required her submission through identification.

Returning to our historical survey, the present interpretation of the development of the concepts common to both psychoanalysis and analytical psychology at the deep structural level is mirrored by the history in the patient's reconstructive analysis. The history of the relations between psychoanalysis and analytical psychology became bedevilled by real history (i.e. the events in Europe) and the vicissitudes in the relations between individuals. Although Klein and her followers developed ideas akin to those that Jung and his followers were addressing, Klein never referred to Jung, and most of her followers eschewed any connection between their concepts and those of Jung, although certainly Winnicott and Bion had read him and had attended his Tavistock lectures in the early 1950s. But even Winnicott and Bion went on to write up their own particular

and extremely important ideas without reference to Jungian literature, despite similarities in orientations. The splits that have occurred between and within the psychoanalytic and analytical psychology movements were at worst wasteful. At best, they allowed for the development of theoretical differentiations that were valuable in accruing the theoretical and conceptual excellencies of each tradition. Had the situation remained at the level of difference, and not of disparagement, then perhaps the divisions could have heralded creative cross-fertilizations in the arena of theory building. But as it happened, much time was wasted, many opportunities for communication lost, and the inevitable shadow projections muddied the waters of collegiate discourse between different analytic orientations. There is some sense in which we could say that the split took the form of a dialectical clash of opposites and was historically determined, in the Hegelian sense. It took the efforts of certain Jungian analysts, particularly those at the School of Analytical Psychology who formed around Michael Fordham in his work with children (Fordham, 1980), to begin to incorporate and synthesize the ideas of the two traditions. This book attempts to take the thinking on in that same spirit.

Unconscious phantasy

Turning now to object relations theory, some care is needed in expounding certain concepts in order to demonstrate the link between them and their forebears in analytical psychology.

Object relations theory could be thought to have begun when Freud and his followers were forced to pay more attention to transference phenomena and when Freud decided that reports from his patients of early childhood sexual abuse were the result of fantasies and not of reality. A highly simplified definition of transference would revolve around the notion of a re-enactment in the present of a relationship or situation that belongs to the past. When this happens in the consulting room, a satisfactory understanding of the transference offers an immediate and detailed way in which the past can be witnessed, experienced, and understood in the present.

The next theoretical building block of object relations theory pertinent to the present discussion was the notion of the introjection of objects. In *Mourning and Melancholia* (Freud, 1917), Freud

introduced the concept of a lost loved object that cannot be properly mourned and let go of, but rather remains inside the person's own psyche and goes on relating to it there. Freud argued that the reason for doing this is a particularly strong element of hatred and fury towards the loved object as it is internalized in the ego. This hatred and fury become directed at the ego as if it were the object. The famous phrase, "The shadow of the object falls on the ego", was coined by Freud to relate the pathological state of melancholia to the process of identification and internalization: in other words, the internalization of an object and its identification with a part of the individual's own personality.

In the 1930s, object relations became the major focus for the school of psychoanalysis developed particularly in London. Melanie Klein came to England before World War II to establish a base for her own investigations into early infantile life, the results of which were to radically question some of Freud's basic tenets. She developed a method of observation with her play technique, and from her observations, the bases of object relations theory were conceived. The two important aspects of internal objects that concern us here are that they are mental representations of instincts, and that they are given their particular shape by internalizing the experience of a real object, which modifies the original mental representation.

The term "object" is a technical one, and was used originally in psychoanalysis to denote the object of an instinctual impulse. The object was the person, or some other thing, that was the object of the satisfaction of a desire. In Freud's early scientific writing, the object had very little about it that was personal. Rather, it was something upon which impulses of energy were discharged, recognized only for the purposes of the subject's pleasure-seeking, satisfaction, and relief.

Through Klein's work, it was possible to see that, in their play, along with real happenings and real relationships, children were enacting also their unconscious phantasies. The immediacy, energy, and vigour of the re-enactment suggested that play was in earnest. It was the child's way of mirroring back to himself his own worst fears and anxieties. The different modes of enactment in the consulting room were seen as the child's efforts to understand powerful experiences in his daily life. Thus, in working with adults, transference can give us an idea of the history of the person's efforts

to understand these traumas. It was in this area, bridging infantile and adult mental life, that the notion of unconscious phantasy became vital in the theory building.

Klein achieved a theoretical amalgam between Freud's concept of the instincts and her notion of object relations with the idea that there was a primary instinct for relatedness, and that these relations were defined by the attributes of impulses from libidinal sources (oral, anal, urethral, phallic, genital). She found that the child believed the object to be suffused with intents and motivations aligned with the child's own particular libidinal impulses active at the moment. Thus, the child relating from the oral phase could believe that its object was another who might itself bite, swallow, spit, chew, or suck the infant, and that often this was conceived as a negative activity, born of envy, frustration, and retaliation. Thus, the object was conceived not just as a means by which instinctual libidinal impulses could be discharged; rather the child's relation to the object constituted a phantasy narrative with particular internal and external figures with particular attributes which were appropriate to the erogenous zone most pertinent at the moment.

The theory building Klein achieved with her group during the War years in London, culminating in the Controversial Discussions within the Institute of Psycho-Analysis, represented a fine-tuning at the developmental level of constructs that could be understood to be shared by analytical psychologists. In particular, her notion of unconscious phantasy, the fundamental construct of object relations theory, is essentially akin to the theory of the archetypes. We are aided in this conceptualization by recalling what we have said about dialectical theory and of psychological deep structure.

This is illustrated in part by the fact that, as analytic theory building progressed, the frontier of the investigation was pushed increasingly back in psychological time. First, Freud focused his interest at around four to five years old, at the time of the Oedipal complex. But the second wave of psychological investigation pushed back through psychological time to the earliest phases, to the time of birth and even before, to intra-uterine life. Both the theory of the archetypes developed by Jung and that of unconscious phantasy elaborated by Klein pursued the investigation to the roots of mental activity. At the personal level, we might understand this by remembering that Jung's own self analysis led him to experiences

that today we might call psychotic, and that the hospital patients for whom he was responsible were generally psychotics and schizophrenics. Freud, on the other hand, centred his self analysis around the events in his family at the time of his own passage through the phase that he would subsequently call the Oedipal stage, already representing a developmentally later stage than the mental events we think of as leading to psychosis and schizophrenia. Freud's patient group also consisted of more neurotic patients, or perhaps he concentrated on their neurotic material. He was not attached to a psychiatric hospital as Jung was, but instead was consulted by private patients, and much has been written about the implications for his theory building that he treated mainly upper-middle-class patients, and often women.

Phyllis Grosskurth, in her biography of Melanie Klein (Grosskurth, 1985), points out that Klein may have been particularly interested in exploring the early mental life of very young children because of her own difficulties in mothering and her own early history as a daughter of a highly depressed and disturbed mother and with very difficult sibling relationships. In later life, she was in constant conflict with her own daughter, and they became bitter enemies within the psychoanalytic movement.

Jung in his work with psychotic adults and Klein in her work with the pre-Oedipal child were investigating essentially the same area of the psyche, that which had not yet reached the Oedipal stage of development (it had not yet achieved the capacity for reliable whole object perceptions which is thought to pertain in the depressive position). Essentially, Jung and Klein arrived at similar findings, albeit couched in very different terminology. They both proposed the existence of deep, innate psychological structures that directly link to, and serve as vehicles for the expression of, the earliest biological and instinctual experiences of the infant. For both Jung and Klein, the experience of these deep innate structures is mediated by real experiences with the real environment.

Both Klein and Jung took as given the absolute reality of the inner world, first and foremost. Klein wrote:

My hypothesis is that the infant has an innate unconscious awareness of the existence of the mother. We know that young animals at once turn to the mother and find their food from her.

The human animal is not different in that respect, and this instinctual knowledge is the basis for the infant's primal relation to the mother.

(Klein, 1959, p. 248)

This quote exemplifies Klein's idea of the internal object that preexists the experience of the real mother but which will be mediated by the experience of the real mother. Written in 1959, it is in essence no different from many that could be cited in Jung decades before, concerning the archetypal component in our understanding of the psyche with its fundamental links to the instincts. For example, in 1936, he wrote:

The instincts form very close analogies to the archetypes—so close, in fact, that there is good reason for supposing that the archetypes are the unconscious images of the instincts themselves; in other words they are patterns of instinctive behaviour. The hypothesis of the collective unconscious is, therefore, no more daring than to assume that there are instincts.

(Jung, 1936, para. 91)

For both Jung and Klein, the quality of the experience of the contents of this inner world would depend on actual experiences of external reality as they are filtered through and interact with the innate structures that were there already. And, for both, how these innate structures were given shape and attributes was a vital consideration.

A seminal paper written in 1948 by Susan Isaacs, a follower of Klein, given during the Controversial Discussions, describes how the instincts find a mental expression as a phantasy in the unconscious mind, a phantasy of a relation with an object. Isaacs makes a useful distinction between phantasy written with a "ph" or fantasy written with an "f". Fantasy with an "f" is more like a day-dream available to consciousness. But phantasy with a "ph" belongs to the unconscious. She says, "Phantasy may be considered the psychoanalytic representative or the mental correlate, the mental expression of instincts" (Isaacs, 1948, p. 84). The same is said about archetypal images. Thus, both reside at a universal deep level structure within the mind. Both have an instinctual base, and both are expressed imaginally by more or less unconscious mental representations.

These images are experienced on a spectrum, or through a series of bipolar opposites. In early life, when the child is unable to experience reality in the round, and whole object representation has not yet been achieved, whatever is being felt at the moment is felt to be infinite and monolithic, not attenuated by any degrees of uncertainty or contingency, for example, the baby experiences states of being either completely satisfied or completely hungry. This concept of experience in pairs of bipolarities forms the basis of the idea of the mechanism of splitting (Klein) and of the opposites of the archetype (Jung).

Just as the collective unconscious, a layer primitive to the personal unconscious, is conceived of as containing the archetypal images, so the Kleinian pre-Oedipal unconscious is thought of as containing the contents of unconscious phantasies. Each theory, based on clinical material, posits these phantasies and images to be in dynamic and oppositional relation to other internal phantasies and images, waiting, as it were, for personal experience to modify and humanize them.

Both the notion of archetypal imagery and unconscious phantasy imply that in each of us is a level of mental representation pertaining to a phylogenetic endowment such that life is experienced along broad lines already laid down over the ages and the generations. The ethologists have shown us that the animal's instinctual inner life is ordered through innate releasing mechanisms, triggering already imprinted responses: chicks emerging from eggs at the right time, birds building nests when it is time to mate, the infant seeking out the breast when it is time to feed. Both John Bowlby (Bowlby, 1969), a psychoanalyst, and Anthony Stevens, an analytical psychologist (Stevens, 1982), point out that similar genetically programmed behaviours take place between mother and baby. The baby's helplessness and dependency, coupled with its immense repertoire of sign stimuli and approach behaviour, trigger appropriate maternal responses. Similarly, the smell, sound, and shape of the mother's breast trigger, for instance, a feeding, sucking response in the infant.

All this is instinctually and biologically sound and has to do with basic survival. Jung called the archetypal image a "self portrait of the instinct" (Jung, 1919, para. 277); mind giving mental expression and shape to body sensations and impulses, thereby helping the body to behave as it is programmed to do. Isaacs also said, "There is no impulse, no instinctive urge or response which is not experienced as unconscious phantasy" (Isaacs, 1948, p. 83). Hannah Segal writes

from the Kleinian viewpoint about this:

The “ideas” representing the instincts will be the original primitive phantasies. The operation of an instinct is expressed and represented in mental life by the phantasy of the satisfaction of that instinct by an appropriate object. Since instincts operate from birth, some crude phantasy life can be assumed as existing from birth. The first hunger and the instinctual stirring to satisfy that hunger are accompanied by the phantasy of an object capable of satisfying that hunger. As phantasies derive directly from instincts on the borderline between the somatic and psychical activity, these original phantasies are experienced as somatic as well as mental phenomena.

(Segal, 1964a, p. 191)

Having considered the relationship between analytical ideas and those of the deep structuralists, including the linguists and the ethologists, we can now refer to dialectical theory as an explanatory model linking many of the components we have been considering. Particularly important in this are the components of theory building and in clinical work that have to do with the experience of the opposites, of deep structure, and of the interaction between internal and environmental influences. All of these in turn are contained in the concept of the archetypes, unconscious phantasy, and internal objects. Just as Kleinians talk about good and bad breasts as polarizations of the quality of the mothering experience, so Jungians speak of the good (nourishing) mother and the bad (devouring) mother. Similarly, for both there is the important experience of the real mother and how this experience impacts on the archetypal or phantasied mother. It is possible to visualize graphically a matrix that would have on its horizontal axis the attributes good/nurturing versus bad/devouring and on the vertical axis objects (either part or whole) the personal/real mother versus the archetypal/phantasied mother. Such a matrix would make sense to both Jungians and Kleinians, and would apply to any archetypal figure, or to any internal object.

Michael Fordham’s (Fordham, 1955) elegant construct of the deintegration–reintegration process in the early infantile psyche provides a picture of the movement between these bipolar opposites.

Fordham's construct posits a primary or original self as existing at the outset of life, which contains all the innate, archetypal potentials that reside within an individual. These potentials are manifested through the processes of deintegration and reintegration as they emerge from the original unconscious integrate, the self, and to a greater or lesser extent find correspondences in the external world. The precipitates resulting from the active meeting and combining of an infant's archetypal potential and the mother's responses are reintegrated as internalized objects. These represent the ego fragments that gradually cohere, to form the developing ego. The deintegrative–reintegrative process continues throughout life:

... whether in an adult or a baby ... any object perceived is composite. It is not only a record of what is "out there" but is also contributed to by a part of the self which is put into it to give the object meaning. When the object is mainly a record of reality, it may be called a reality object; when it is mainly constructed by the self and so records states of the self, made out of extroceptive and introceptive sense data, then it may be called a self object. It used to be assumed among analytical psychologists ... that a baby's perception was predominately through self objects and that he lived in a sort of mythological world, all the time only gradually building up a picture of reality. That is a very misleading account of infancy. If, however, a sliding scale is envisaged (real object–self-object) then one can study observations in that light ... It appears that self objects increase in affectively charged states, whilst in quiet contemplative exploring activities real objects predominate.

(Fordham, 1985a, p. 56)

The question remains as to how the internalized objects and self objects, in Fordham's sense, combine, unite, aggregate, or war within the individual. There is a sense in which we could say that the whole drama takes place in the individual's own psyche, where the "parents" are not the parents at all but only their imagos. Here we return to Jung's early writing:

... they are representations which have arisen from the conjunction of parental peculiarities with the individual disposition of

the child. The imagos are activated and varied in every possible manner by an energy which likewise pertains to the individual; it derives from the sphere of instinct and expresses itself as instinctuality.

(Jung, 1912b)

The dialectical model is concerned with providing an explanation for processes of change that takes account of the role of conflict, of the play between opposites, and of the movement towards greater and greater integration over time. Thinking about the steps in the evolution of the personality, the dialectical model can be used to explain how a series of incremental steps take place as a result of the collision of, and play between, opposite experiences (good/bad, separate/merged, through an infinite list of polarities) and how they gradually might achieve an internal synthesis. Implied in the model is an explanation of how a failure to develop might occur, when breakdown or a rigid defensiveness would arise through a conflict of opposites with too great pressure on the system and with no means of synthesis. At the same time, it could explain how internal part objects, experienced as opposites, eventually might combine in a whole object perception, assuming a good-enough containing environment, inching towards the achievement of the depressive position (Klein), or the capacity to be alone in the presence of another (Winnicott), or the more individuated personality (Jung).

By using the dialectical model as it concerns the processes of change in conditions where oppositional states are liable to occur, as in infancy where the capacity to experience reality as a whole has not been achieved, it may be possible to avoid the antithetical theoretical positions between splitting and deintegration as illustrated by Fordham (Fordham, 1985b) and discussed by Astor (Astor, 1990). The dialectical model provides for the possibility of value-free statements about the inability of the infant to perceive both of the opposite attributes together at any one moment. Whether or not this results in value-laden perceptions about pathology (the ego splitting of Kleinian theory) or about further accretions of ego integration (the deintegration–reintegration process of Fordham) would depend on what has happened at the point where the change from oppositional to synthesizing processes might occur. Either the resolution is creative and achieves a forward-moving, synthesizing

progression in the psyche, or else the conditions within and without the conflictual situation have led to disintegration or a defensive rigidity maintaining the status quo.

Similarly, Daniel Stern (Stern, 1984), along with other researchers of early infantile development, has made an important distinction between the "observed infant" (the actual infant observed) and the "clinical infant" (the adult patient reconstructing his infancy and childhood along with the analyst). Zinkin (Zinkin, 1991) in his comments on the implications of Stern's contribution to the work of discerning, as he calls it, the "Klein connection in the London School", enumerates some of the differences and similarities between Kleinian and London Jungian concepts. Further work is needed to judge if the dialectical model, as it is proposed here, could be used to understand whether and when the deep structural contents and events are liable to become pathological (splitting) or non-pathological (synthesizing).

In analysis, the central dialectic resides in the opposites of consciousness and the unconscious. There can be no conscious mind without an unconscious mind, and vice versa. "The dialectical process is centrally involved in the creation of subjectivity . . . the sense of 'I-ness' by which experience is subtly endowed with the quality that one is thinking one's thoughts and feeling one's feelings" (Ogden, 1986, p. 209). The patient, whose panic attack when coming across two policemen while she was on her way to see me, provided the first of a series of quasi-conscious steps beginning with the belief that her father had abused her at the time her mother had been hospitalized when she was six years old; then to the identification with and internalization of her own mother's experience of being abused by her uncle when the mother was six years old. The way we learned this, over time, provided us with a history of the dialectical build up of an inner picture of the relations between her own and her mother's internal objects. Needless to say, the play between the transference and countertransference experiences was a central resource in gathering the history.

There is a sense in which we could say that the pivot of the argument between Freud and Jung revolved around how literally to take analytical material concerning parental intercourse. The argument might be explained in part by the different type of patient material that Freud and Jung addressed: Freud focused largely on

Oedipal material, whereas Jung focused primarily on material in the adult that could be presumed to have its source in earlier, more primitive levels of mental functioning. Freud insisted on the literalness of the primal scene as detected via screen memories, and this may to some extent be explained by the fact that ego development in the four- to five-year-old child allows for the fairly reliable discernment of whole objects by this time. (This is different from the arguments about whether there had been real or imagined incest.)

Jung, however, considered that many primal phantasies of adult patients did not arise from real childhood experiences of the primal scene, but were better conceived of as projected into what are experienced as memories from childhood. The sources of these projected "memories" are the archetypal images of the collective unconscious, images of, for example, the anima and animus in *coniunctio*.

The centrality of the coniunctio

For Jung, the *coniunctio* was an alchemical symbol of central psychological importance, denoting the union or marriage of opposites in an intercourse which would have, as its fruition, the birth of a new element, the *tertium quid non datur*. Here, it is possible to see the connection between *coniunctio* and the dialectical vision, both dealing with the conflictual movement between opposite elements, with an outcome in the creative synthesis of the two. Thesis, antithesis, and synthesis replicate King, Queen, and Divine Child: thesis and antithesis, and the King and Queen, invest, as it were, in the futurity of things by creating a third element, endowed with the potentials of the divine (that is, archetypal) couple, but possessing so much more. In clinical terms, we would say that the synthesis occurs through the fiery furnace of the inner world.

This paradigm of psychic functioning denotes a universal pattern of relating between two or more conscious or unconscious elements. Because the *coniunctio* symbolizes psychic processes, rebirth and transformation images are essential to it. Like all archetypes, *coniunctio* represents two poles of possibility, positive and negative. Therefore, death and loss as well as rebirth are reflected in its imagery.

Returning to our discussion about the theoretical importance of the primal scene in analytical thinking, it is interesting to note that,

in this context, although he eschewed the notion of archetypes of the collective unconscious, Freud left scope in his own writings for developing ideas about the archaic sources of adult phantasies concerning the primal scene. In 1916 he wrote:

Whence comes the need for these phantasies [of sexual abuse of a child by its nearest male relatives] and the material for them? There can be no doubt that their sources lie in the instincts . . . I believe these primal phantasies . . . are a phylogenetic endowment. In them the individual reaches beyond his own experience into primaeval experience at points where his own experience has been too rudimentary . . . I have repeatedly been led to suspect that the psychology of the neuroses has stored up in it more of the antiquities of human development than any other source.

(Freud, 1916, pp. 370–1)

Unfortunately, this was not pursued by Freud, and it was “left to” Melanie Klein to develop the “archetypal” side of the argument. In her work, the imagery of the *coniunctio* is of fundamental importance. For Klein, the infant’s unconscious phantasy is imbued with the image of the parents in an almost continuous state of intercourse. In Hannah Segal’s words,

The infant will phantasy his parents as exchanging gratifications, oral, urethral, anal or genital, according to the prevalence of his own impulses . . . This gives rise to feelings of the most acute deprivation, jealousy and envy, since the parents are perceived as giving each other precisely those gratifications which the infant wishes for himself.

(Segal, 1964b, p. 173)

The central archetypal image of the primal scene, the image of the coupling parents in all its vicissitudes, including incest phantasies, leaves room for the oppositional couple, with its negative and terrifying affects, as well as for a unifying, containing, and mediating image which signals the potential within the infant for future integration (Samuels, 1982).

It is likely that an explanation of the old truism that Jungians tend to emphasize the positive aspects, and Kleinians and Freudians the negative aspects of the same experience, resides in the perceived potential for destructive versus creative forms of conflict. Klein pursued the notion of aggression as a manifestation of the death instinct, whereas Jung and his followers elaborated a model of the archetypes in their bipolar oppositions based on a teleological notion of the appropriateness of gradual separation and individuation, a developmental view that encompasses conflict, anger, and aggression within a potentially positive, albeit contentious, framework, without necessitating viewing them as ultimately destructive. This culminated in Fordham's notion of the gradual processes of deintegration and reintegration within and through a primal self.

Jung chose alchemy as the vehicle through which to explore those elements in the psyche that could be observed in the transference, and much of the alchemical metaphor centred around the *coniunctio* image, a meeting within the *vas hermeticum* of the base or primitive psychic elements and those processes they undergo in a series of transformations from base to precious substances. We could see the alchemical vessel as the analytic or therapeutic setting, and the elements to be transformed as aspects of the conscious and the unconscious of both the patient and the analyst. In alchemy, the elements to be combined are conceived of as opposites, the combination leading the alchemist to the production of something that was the *tertium quid non datur*. The new condition was unnatural, in the sense of not being found naturally. The alchemical metaphor is rich in its potentialities for viewing the processes that occur within any relationship, particularly that within the transference, because it is concerned (in a similar way to the dialectical vision) with how individuals influence each other, impact upon each other, and how their experiences are internalized by each other: what we call the various modes of projection, introjection, identification, and projective identification.

The interrelations between therapist and patient, the openness of both to changes in each other, are clearly valued by Jung:

Hence the personalities of doctor and patient are often infinitely more important for the outcome of the treatment than what the doctor says and thinks . . . For two personalities to meet is like

mixing two different chemical substances: if there is any combination at all, both are transformed. In any effective psychological treatment the doctor is bound to influence the patient; but this influence can only take place if the patient has a reciprocal influence on the doctor. You can exert no influence if you are not susceptible to influence.

(Jung, 1931, para. 163)

Two further dominant images linked to the present theme, and studied extensively by Jung in alchemical texts, are those of the hermaphrodite, a combined male–female image, unconscious and lacking differentiation, and the androgyne, the integration of male and female aspects in conscious balance. They are seen, in clinical material, in terms of the wish to merge, at the undifferentiated hermaphroditic end of the spectrum. The more differentiated androgyne imagery, often contained in dream and other material, can point to vicissitudes and variations in the *coniunctio*. It is possible to think of the development from less to more differentiated imagery as being achieved in part through processes facilitating the formation of what Schwartz-Salant has called the subtle body. An unconscious couple, separate from but connected to the couple in the consulting room, is created and interact together. This occurs by virtue of both the consistent therapeutic setting as a container and through the subtle communications that can occur through the interplay of projective identification, or, in Jung's terms, through *participation mystique*:

Projective identification can initiate the process of gaining access to, and transforming, interactive fields of linking or relating. These fields are imaged, for example, by the couples in the *Rosarium*. The alchemical process is devoted to overcoming the dangers of fusion states, of the tendency to concretize processes in the third area into something belonging to the ego.

(Schwartz-Salant, 1988, p. 44)

Marital or long-term partnership is a further example, wherein a relationship is built up over time and across major life occurrences. It is imaged in the *coniunctio*, in the androgyne, and in the idea of the combined parents, and is mirrored in the analytic relationship. *Hierosgamos*, the image of the *coniunctio* of the sacred marriage, is

visioned, in alchemical terms, as the meeting of opposite elements, male and female, which unite to produce a third substance. In the real marriage, it may be a real child. At the symbolic level, the partners will engage in exchanges that will lead to internal transformations that could not have occurred without the other partner.

We are now coming full circle, and return to the image of the mother and infant who form a nurturing couple not without negative as well as positive experiences of each other, who by their very coming together, create a third element, which we could identify as aspects of the subtle body, or the *tertium quid non datur* that transcend each of them as separate entities but contain the potentiality for their further mutual and individual differentiations and development as re-internalized by each.

Conclusion

Throughout our lives, there is a constant dialectical process that enables our essential personal *coniunctio*, our internal and external families, to elaborate and grow. This chapter has attempted a synthesis between what some clinicians hold as opposing theoretical points of view, illustrating with clinical material how this explanatory model may be of use in the elaboration of the intricate and subtle build up of the personality over time in its relation to important others.

The infant's personality is built up through a constant, dynamic, three-way interaction between the unique real individual baby (primal self); the common innate predisposition to perceive the world through certain fixed categories (i.e. through the archetypal patterns, or the images of the instincts, with which each of us is invested by virtue of being human); and the real parents, both as individuals and as a couple and how their care for the baby with its variations and vicissitudes moderates the experience of I-ness of the infant and the shape of the archetypal structures.

This third category, the quality of the parental environment as it is transmitted in subtle ways to the infant, is itself a result of an interaction between all three categories in the previous generation. The real mother, the real father, and the other carers, themselves carry an ongoing dynamic process between the three categories from their own history.

The infant responds to this complex mixture, and the real parents respond in turn to the developing infant, through a constant to and fro communication. How all this happens, back and forth, over time, building up a complex feedback set of stimulus and response patterns that become the foundation of each individual's personality is the stuff of our analytic work. This represents a vision of the history of the mental functioning over the life of an individual that is common to both archetypal analytical psychology and to object relations theory.

So image creates image, and in the work of analytic reconstruction, a history of the internal image building is recreated. This may be similar to, different from, or overlap with the real or objective history. It has fundamental implications for concerns about epistemology in analytic theory building. How do we know what we know and what is it exactly that we do know?

This chapter proposes a way of understanding the intricate and subtle processes of change and development that are described in both the traditions of analytical psychology and object relations theory through the mediation of the dialectical model. In order to accomplish this, theories concerning deep structures are invoked, of which the dialectical model is one.

The developmental school in analytical psychology

Analytical psychology as elaborated by Jung and his immediate followers did not focus on the depth psychological aspects of early infant and childhood development. Freud and his followers made the imaginative leap required to link the two pivotal areas of analytic investigation—the early stages of development and how such states of mind may manifest in adult patients on the one hand, and the nature and varieties of transference and countertransference in the analytic relationship on the other—and to include them in psychoanalytic theory. Analytical psychology was slow to follow suit, despite Jung's early and continued insistence on the importance of the relationship between analyst and patient, and his study of the *Rosarium* (Jung, 1966) as a way of understanding the vicissitudes of the analytic couple.

For Jung and the group that had formed around him, the rich and attractive field of creative and symbolic activity and collective and cultural pursuits appeared to be more engaging. Nevertheless, in certain respects it could be said that creative psychic activity, as well as its destructive and distressing aspects, could be located within two pivotal areas of investigation, and could be seen rightfully to belong to the examination of the relationship between primary process (that is, the earlier, more primitive mental processes with infantile foundations) and the later secondary mental processes.

The lack of a clinical and theoretical tradition of early infantile mental states and the vicissitudes of transference and countertransference phenomena left analytical psychology impoverished in an

important way. This would need to be rectified if analytical psychology was to go on developing as a credible professional and clinical endeavour. Jung's considerable contributions to understanding the prospective functioning of the psyche, including the self, were in danger of becoming limited because of the lack of grounding in historical and genetic (i.e. early-life) mental activity.

In London in the decades after World War II, vigorous psychoanalytic debate was taking place regarding the impact of early infantile states of mind on the adult patient, how these were discernible in the analytical relationship, and the transference and counter-transference.

At the same time as psychoanalytic understanding of these areas deepened, certain analytical psychologists in London, in particular Dr Michael Fordham, became increasingly aware of the necessity of integrating Jung's valued prospective approach to work with the unconscious psyche with a need to ground such work in an understanding of those primitive states of affect and mentation by which the infant and child made its experiences comprehensible to itself.

There was also a recognition of the need to protect the analytic space by maintaining a boundaried and safe frame within which to explore these mental contents in adult patients so that the patient could safely regress, when appropriate, to whatever depth of the psyche he or she was able, or needed, in order for transformation and growth to occur.

The historical context

Although Jung did not focus the major portion of his researches on a detailed understanding of infantile states of mind, the popularly held view that Jung was completely uninterested in childhood mental activity will need to be re-examined in light of the forthcoming publication of the previously unpublished *Children's Dream Seminar* (in press). Jung did not generally consider that the child had an identity separate from the unconscious of his or her parents. Equally, he was not especially interested in studying the manifestations of early experiences within the transference of the patient to the analyst. He considered these the proper subject of the reductive approach of psychoanalysis, to be used when it was appropriate to locate and

address the sources of a patient's present neurotic conflict and symptoms in his early childhood conflicts.

However, Jung was interested in formulating a model of the mind that was concerned with those higher states of mental functioning which included thinking, creativity, and the symbolic attitude. He focused a large proportion of his psychological enquiry on the second half of life during which, he believed, these aspects were most likely to manifest. He devoted much of his own creative energy to the exploration of some of the most developed cultural and scientific endeavours throughout the centuries. His emphasis on myths, dreams, and artistic creations, as well as his extensive knowledge of alchemical texts and his interest in the new physics, appears to have drawn him away from the study of childhood development, which seemed to fall more within the purview of psychoanalysis with its emphasis on analysing back to the sources of mental activity. It was almost as if, like the popes of old in face of the globe as it was then, Freud and Jung had divided up the map of the human psyche, with Freud and his followers concentrating on its depths, and the exploration of the early childhood developmental stages, while Jung and his followers focused on its heights, and the functioning of the more mature states of mind, including those creative and artistic states responsible for the invention of the finest cultural, spiritual, and scientific pursuits of mankind.

This division of the psyche could be understood to have arisen because of the different philosophical attitudes that informed Freud's and Jung's approaches. Freud's psychoanalysis was based on the reductive method that sought to provide a detailed account of the development of the personality from its earliest sources in childhood. Psychoanalytic understanding of early development was based on a view that a reconstruction of the psyche was possible through a careful decoding of the manifest contents of psychological functioning back to the hidden or latent content. The manifest content was understood as representing a compromise between unconscious pressures arising on the one hand from repressed libidinal (i.e. psychosexually derived) impulses and on the other hand from the demands of the internalized objects, especially the parental superego. The aim of psychoanalysis was to decode the evidence from the manifest level to reveal the latent repressed and hidden contents in order to bring them to light and into consciousness. The

psychoanalyst's task was to disclose, via interpretation, the real motives and intentions hidden within the individual's communications, an epistemological approach. This has been called the "hermeneutics of suspicion" by the philosopher Paul Ricoeur (1967), because it does not accept at face value the conscious motivation or intention but proposes instead that embedded within any conscious mental content, is an unconscious compromise between the oppositional demands of id and superego.

By contrast, Jung's philosophical approach was based on a teleological understanding of the psyche, whereby all psychological events, including even the most severe symptoms, were considered to have purpose and meaning. Instead of being viewed as solely the repressed and disguised material of unconscious infantile conflict, they could also be the means by which the psyche had achieved the best solution available to date to the problem that had confronted it. At the same time, they could act as the starting point for further growth and development. Furthermore, the meaning of such symptoms was accessible to consciousness through the analytic method of interpretation, association, and amplification. Jung's approach included an understanding of the contribution of early experiences in the development of the personality, based on the historical accumulation of the individual's conscious and unconscious experiences and the interplay of this personal history with the archetypal contents of the collective unconscious. He was interested in the processes of integration and synthesis of these aspects, through the innate resources of the individual for creative and symbolic activity.

Jung's exploration of the *bases* of personality took a different tack from that followed early on by Freud in his understanding of the *stages* of personality development. Although Jung always acknowledged the importance of the psychoanalytic understanding of the early *stages* of childhood development, his interest was not in examining them through the regression of the patient in the presence of the analyst. Instead, he developed an understanding of the *bases* of human personality via his own enquiry into the deep psychological *structures* of the psyche, which he conceived of as the archetypes of the collective unconscious. He revealed that archetypes were expressed through certain universal images and symbols. These deep structures, laid down through the ages and existing in each

individual from birth, were understood by Jung to be directly connected to and an influence on the most developed, sophisticated, and evolved of human artistic and cultural creations. At the same time, he thought of these deep structures as being the source of the crudest, most primitive, and most violent feelings and behaviours of which human beings were capable.

Jung initially culled the information for his core clinical enquiry through his main patient group: adult patients with severe psychiatric disorders, including those in psychotic states. He also drew on his own self analysis. Jung's career began with patients whose symptoms and pathologies arose from the most primitive levels of functioning of the combined psyche-soma system. His examination of their disturbed communications was tantamount to an enquiry into the earliest disorders of experiencing, feeling, thinking, and relating. Through his work with these mentally ill psychiatric patients, as well as through his own dramatic and disturbing self analysis, Jung studied the sources and roots of the personality via the various psychopathologies, expressed in archetypal images of the collective unconscious. These earliest disturbances are now often thought of as the pathologies of the self, belonging to the core of the personality, situated developmentally earlier than the more neurotic disorders that Freud examined when he began the psychoanalytic enquiry.

Increasingly, however, amongst certain Jungian clinicians and theoreticians, there arose a recognition that the treatments of adult patients and children were impeded by the lack of a tradition of understanding and closely analysing the structure and dynamics of infantile states of mind and how these might be manifested in the transference and the countertransference. There was disquiet lest the Jungian emphasis on the more developed, differentiated, creative, and symbolic states of mind avoided the exploration of the more difficult primitive material that could emerge in those states of regression so often encountered in the consulting room. In some training institutions, the lack of a coherent theoretical understanding of early mental states was felt to be a deficit. The need to develop such an understanding that was also consistent with the broad Jungian *opus* was felt urgently by a number of clinicians.

It was quite natural that this led some Jungians to turn to psychoanalysis to gain a clearer picture of the infantile mind. Jung

had always insisted on the importance of locating the roots of the libido in the earliest psychosexual stages. This included Freud's important understanding that the experiences of the infant and toddler were organized chronologically according to the libidinal zones—oral, anal, urethral, phallic, genital. Indeed, this acknowledgment is found as early as 1912 in *Symbols of Transformation*, the work that would herald the cessation of his collaboration with Freud. But, as we have seen, Jung's own interests lay elsewhere, and this meant that the Jungian enquiry tended to bypass the developmental phases of early childhood.

It happened that a number of outstanding clinicians and theoreticians, including Anna Freud, Melanie Klein, Wilfred Bion, Donald Winnicott, and John Bowlby, were based in London, and published major contributions during the 1940s, 1950s, 1960s, and later. Klein, Bion, and Winnicott became central figures in the development of the "object relations school" which grew up within the British Psycho-Analytical Society during those decades and has continued to develop thereafter. There are several diverse theoretical strands within the object relations school, and many other theoreticians and clinicians of note have made subsequently important contributions to the field. However, the main theoretical bifurcation centres around whether the infant or child is driven to gratify basic instinctual impulses which are represented mentally by personifications of body parts, or whether the infant or child is essentially motivated to seek out another, a caregiver in the first instance, with whom to have a relationship in order to fulfil its basic needs, including the need to have human contact and communication in order to learn and grow, as well as to be protected and nurtured.

Whatever the sources of disagreement, the main tenet shared across the various strands of the object relations school is a view of the infant not as primarily driven by instincts, as originally formulated by Freud's economic theory, a kind of "scientific biology of the mind" (Kohon, 1986), but rather as possessing from birth a basic capacity to relate to its important caregivers, or objects, as they were called. The term "object" was used originally in psychoanalysis to denote another person who was the object of an instinctual impulse. It was used by the object relations theorists in two distinct ways:

1. To denote a set of motivations attributed by the infant or child as belonging to the other, usually the caregiver, but in fact defined by and located in the particular libidinal impulses that were active at the moment internally within the infant or child, or
2. To denote the person in the infant or child's environment, again usually the caregiver, with whom the child sought to relate.

Patently, each could overlap and the boundaries between the internal and external experiences of objects would blur. This would be particularly apparent when trying to describe the experience of the patient. Klein was able to bridge the two views by proposing that in the unconscious phantasies¹ of the infant or small child, as well as in the infantile phantasies of adults, there was a dynamic relationship between the self and the other, or the object, which was represented internally as motivated by impulses that in fact reflected the instinctual drives (oral, anal, urethral, etc) of the self. For example, the object might be experienced by the infant as the mother's breast (and then technically it would be called a "part object", i.e., a part of the mother's body). However, the quality of the experiences with the real person determined whether the infant accumulated overall a more positive or more negative relationship with the important others and their internal counterparts, with direct implications for subsequent emotional and intellectual development.

Klein held the view that the infant was liable to attribute to the other motivations which in fact were experienced internally to the infant, as expressions of instinctual impulses. The question of whether the experience of the object should be viewed as that with a real person in the real caregiving situation, or whether it should be conceived of as solely an internal representation of the infant's own instinctual repertoire, became the focus of heated theoretical debate and controversy.

At the same time, in London, during the decades when object relations theory was being developed, Dr Michael Fordham and some of his colleagues trained as Jungian analysts and founded the Society of Analytical Psychology, where they established analytic training for those working with adults and, later, for those working with children. They read with interest the innovative psychoanalytic

contributions and began researches that sought to elaborate a coherent theory of infantile development consistent with the Jungian tradition, while at the same time able to benefit from and to some extent incorporate the relevant new object relations findings and techniques, in particular those pertaining to early infantile development and the transference and countertransference. Closer scrutiny of these theoretical developments will allow a greater appreciation of why there was so much interest amongst certain Jungians in these areas of the psychoanalytic enquiry.

Klein, Winnicott, Bion: London object relations

Certain Jungian clinicians found the Kleinian development to be the most approachable of the psychoanalytic investigations into early mental life. Klein's conception of body or instinct-based experiences as the root of all psychological contents and processes echoed the findings of Jung concerning the existence of deep psychological structures, which were grounded in instinctual experiences and represented mentally via archetypal images. In this way, Jung's investigations could be linked to the reductive view of the psyche insofar as he examined, as did Klein, the earliest phases of mental life back to its very roots, to the earliest mental representations of instinctual experiences. Jung called these mental images of instinct or body-based experiences "archetypal images", whereas Klein called them "part objects". Despite the difference in language, they both referred to the early relationships of the self with the internal representations of the different functioning capacities of the caregiver. For example, in Jung's language this was expressed as the experience of the dual aspects of the mother (the "Great Mother" or the "Devouring Mother"), while in Klein's language it was expressed as the experience of the "good" and "bad breast", such that the self was understood to experience the mother/breast (or, indeed, the analyst) as loving, nurturing, available, or poisonous, attacking, withholding, or empty, unexciting, or depressed. Thus, the quality of the experience that the self has in relation to the functioning of the other toward itself was of vital importance.

At the same time, Jung's concept also refers to the spontaneous occurrence and presence of archetypal imagery as a function of the self as it develops over time, throughout the whole life span, thereby

able to generate new meanings that can carry the self forward creatively into the future, with the potential to tap into a universal cultural and imaginal reservoir. In this sense, the concept is richer and more complex than Klein's concept of part objects, which essentially refers to the early world of the "paranoid/schizoid" position, prior to the achievement of whole object constancy in the "depressive" position.²

Jung in his work with psychotic adults and Klein in her work with the pre-Oedipal child investigated essentially the same area of the psyche: that which had not yet reached the later, Oedipal stages of early childhood development in which both good (protective, supportive, or nurturing) and bad (frustrating, aggressive, or limited) aspects of the same person could both be kept in mind. The gradual achievement of the capacity to relate to both good and bad aspects of a caregiver was described by Jung as the "integration and synthesis of the opposites". Kleinians used the term "whole object" to express this capacity to have the knowledge of ambivalent feelings toward the caregiver. Jung addressed the wholeness of the personality in terms of '*coincidentia oppositorum*' that expresses and characterizes the self (Jung, 1955/1963, para. 176). For both theories, this achievement of wholeness could never be consistently available, but would always vacillate between greater or lesser capacities.

Both Jung and Klein proposed the existence of deep innate mental structures which directly link to and serve as vehicles for the earliest biological and instinctual experiences of the infant, expressed in terms of archetypal figures (Jung) or parts of objects (Klein). Both understood that the experiences that arise through these deep structures are mediated by real experiences of the environment, via the quality of nurturing and rearing made available. The attraction to Klein, especially for those Jungians who wished to incorporate the analysis of infantile material into their clinical practice, was the solid foundation in work with children applied to the understanding of the activity of early mental states in the experiences of adult patients.

Klein had also made a pivotal clinical contribution through the development of her play technique (1920; 1955): an adaptation and application of traditional psychoanalytic technique to the treatment of very young children. She evolved methods of analysing children through observing their play, enabling her to make substantial contributions to understanding early infantile states of mind. She inferred from her analytic work the states and processes whereby

the infant and child organized their perceptions and experiences, both mental and physical, in terms of motivated impulses relating to body areas or parts located either internally or in the caregiver (usually, at first, the mother).

The aim of this early mental organization, according to Klein, was to protect the emerging self from the dangers posed by states of excessive emotion, such as rage, hatred, anxiety, and other forms of mental disintegration. Klein later thought that these intensely negative states would be directed back at the self if caregivers were incapable or inadequate in responding to them. Klein called these destructive impulses an innate death instinct. To protect itself against the ravages of such powerful emotions, the child would activate what were called *primitive defences* (Klein, 1946). Just as the infant or young child is not sufficiently physically developed to carry out complex, integrative, and adaptive activities at the physical level, so too the mental apparatus of the infant is not sufficiently evolved to manage by itself those tasks of thinking, perceiving, and emotional sifting and sorting adequate for its self protection. In order to organize these mental and physical impressions, the infant would typically seek to establish by itself a rudimentary mental organization, especially if left by and large without adequate care. The processes by which this organization took place included such mental activities as splitting, idealization, and identification.

Jungians were accustomed to conceive of certain unintegrated mental states as the split aspects of the archetype, and used the concept of compensation to denote the psyche's natural tendency to hold opposites in relation to each other. Klein's findings through her clinical work with children appealed to some Jungians who sought to bring an understanding of early mental states and processes more directly into their clinical practice.

Klein showed that, depending on various factors, the good or bad experiences were felt by the infant to be located either internally or externally, through processes of identification such as projection and introjection. Hence, if the infant felt the source of the good feeling to be within, then the bad would be projected into and identified with the environmental caregiver, or parts of the caregiver, such as the breast. However, the bad feeling could be relocated (or "reintrojected", in Kleinian language) within the self through further identificatory processes. These would be experienced as persecutory feelings, and would result in further splitting of good and bad

feelings, leading to ever more projecting and reintrojecting activity. The quality of the environmental responses to these dramatic states, along with the infant's own capacities for self-regulation, would determine its tendency towards normal and adaptive or pathological and maladaptive development. In Klein's terms, this meant greater or lesser control and mastery over the death instinct, the instinct which seeks to destroy the good parts of the self.

In the Jungian model, the concept of *enantiodromia* is suggestive of a sudden collapse from one state into its opposite under certain conditions. Also, the term "shadow" is often used to denote those negative aspects of the self which are disavowed and therefore projected onto another.

Klein developed the notion of the paranoid/schizoid position to describe what happens when the infant is overwhelmed by feelings of possible annihilation of the integrity of the self as a psyche/soma system. The consequent anxiety that the self will be flooded by negative affects results in aggressive impulses towards the source of the bad feeling, wherever it is felt to reside. The death instinct was thus understood as the experience of aggressive impulses directed inwardly. Destructive, envious aspects of the self could become split off from the caring, loving aspects of the self, with the resultant fear that the source of goodness had been destroyed. The defence against such an overwhelming negative experience was the splitting of the self or the splitting of the caregiver into only good or only bad characteristics, as demonstrated in Figure 4.1.

Klein elaborated a subsequent developmental phase, called the *depressive position*, in which the infant could experience feelings of remorse and concern about the effects of its aggressive attacks upon the internal representation of the caregiver or the real external

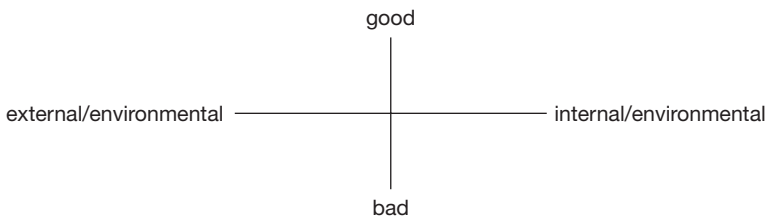


Figure 4.1: Jung/Klein model of split archetypal/environmental objects

caregiver. This occurred when the infant achieved the realization that its love and hatred were directed towards the same person. Experiencing the person as a whole brought unconscious feelings of ambivalence and an impulse to repair the damaged other, based on unconscious guilt.

Klein's emphasis on affects as experienced in relation to the important functions of caregivers, or objects, in relation to the self led to her being considered as a founder of the British object relations school. Just as Jung conceived the archetypal images as figures, in personified form, innate to the psyche, giving mental representation to affect-laden instinctual experiences, so Klein thought of the internal representation of important caregivers, or parts of their bodies such as the breast, as the source of affects. The child's experiences of the real caregivers were considered by Klein to be secondary to the innate conceptions and experiences that the child had in relation to that aspect of the caregiver that the child was relating to instinctually at any particular moment in its development.

A basic tenet of Jung's theoretical approach concerned the importance of the quality of environmental mediation of early experience. This had a parallel in the understanding of the importance of the quality of interaction in the consulting room between the patient and the analyst. Jung had written extensively on certain aspects of the transference and countertransference, both in the clinical context (1966) as well as through the examination of alchemical imagery (1963). However, Jung had not studied in depth the infantile content in the relations between patient and analyst.

Many London Jungians found Winnicott's clinical approach to the complex and sensitive relationship between infant and mother, and between patient and analyst, particularly compatible with their own analytic practice, as summed up in his famous phrase:

"there is no such thing as a baby" meaning that if you set out to describe a baby, you will find you are describing a baby and someone. A baby cannot exist alone, but is essentially part of a relationship . . .

(Winnicott, 1964, p. 88)

This denotes the importance that Winnicott gave to what happens at the interface between the self and the other, between the experi-

ence of personal creativity and of relatedness, in what he called “the third area”. By this he meant that there is an area of experience which is neither internal nor external, but rather a “potential space” between, for example, the infant and mother, in which a shared and meaningful reality is created over time, a position already emphasized by Jung.

Winnicott was especially interested in the crucial role of play and illusion in the development of the self and its capacity for imagination and creativity. He thought that it was through the spontaneous gestures of play that the sense of self developed in relation to another. In a typically paradoxical formulation, Winnicott put forward the view that the true self of the individual, the sense of uniqueness and being real, happened through moments of illusion, where the inner world met and engaged with the outer world, and where the boundaries between the two were blurred. Thus, the infant’s illusion that it creates the breast because it appears at the moment it is hallucinated. Similarly, when the experience of the archetypal image, in Jung’s language, occurs simultaneously with the experience of the real object, there is a match. The mother is “good enough” to meet her infant’s omnipotent needs. If the infant’s spontaneous gesture is not met by an empathic response on the part of the mother, perhaps of her own depressive or anxious needs, then it is possible that the infant will experience a disruption in the sense of its developing self. If such negative experiences accumulate disproportionately over time, the infant will erect self-defences through excessive adaptation to these external pressures. A false self is thereby created to deal with the external world, while the true self is protected from annihilation or fragmentation.

Winnicott shared Jung’s teleological view of human nature. His basic premise was that, given a “good-enough environment”, the infant and child would have every chance to develop, grow, and be creative, despite inevitable failures and frustrations in environmental provision. This view recognized that, in large part, the infant’s physical and psychological protection was dependent on the capacities of its caregivers.

As theory and clinical practice developed and inter-developed in the middle decades of the century in London, the status of such concepts as internal and external objects became increasingly crucial. The contributions of Wilfred Bion were of particular interest

to Jungians who focused much of their clinical attention on issues pertaining to the inter-subjectivity of patient and analyst. Bion showed how early forms of communication based on “projective identification” could be understood as normal forms of empathic processes between infant and caregiver. Projective identification was a term used especially by Kleinians to denote an aggressive attempt to force a part of the self into another in order to take over or control an aspect of the other’s thinking or behaving, particularly in relation to the self. Bion emphasized the benign aspect of this in the infant–mother dyad where the mother could contain and detoxify often explosive physical or emotional states in the infant through her empathic responses.

Bion’s contributions made available new ways of thinking about certain aspects of the transference and countertransference whereby the analyst could experience him- or herself as responding or behaving towards the patient in a manner that reflected the projected content of the patient’s inner world. In later formulations, Bion conceived of projective identification in dynamic, intrapsychic terms, where parts of the self were seen as behaving in autonomous ways. For example, unwanted aspects of the self could be projected into external objects, then identified with and reintrojected as persecuting or damaging agents. Just as Jung’s work with psychotic patients had led him to formulate the notion of autonomous complexes, Bion’s work (1957) with psychotic processes in his patients led him to devise a theory of internal objects as split-off aspects of the self that acquire a life of their own. Through a process of containment, whereby the caregiver receives and adapts to the mental contents projected by the infant, these elements are made available for further transformations.

Relatedness in the analytic setting: transference and countertransference

The theoretical elaboration of subtle and pre-verbal forms of communication from the earliest days of the infant’s life, based on the vicissitudes in the capacity for relatedness of both the infant as much as the caretaker, was increasingly understood to apply to analytic technique itself, and to the clinical role of the analyst’s countertransference in response to his patient’s primitive, non-verbal

communications. Again, this area of psychoanalytic investigation was proximate to the Jungian interest in the states of *participation mystique*, in which the self, or parts of the self, are in states of identity with another. In psychoanalysis, this is termed “projective identification”, and is involved in the varieties and vicissitudes of the analyst’s and patient’s mutual and reciprocal relationship. Variations in empathy or negativity, and closeness or separation, in relation to the patient, were understood to be communications between analyst and patient. The analyst was no longer a neutral mirror whose technique of “free-floating attention” was used to ensure non-involvement in the patient’s inner world. Now it was considered an important part of technique that the analyst be available enough to be affected by the patient, but not in an abusive, impinging way. The valuable clinical information gleaned from the availability of both patient and analyst to these channels of communication echoed Jung’s early belief that the analyst had to be changed by the relationship with the patient in order for therapy to be effective for a patient (Jung, 1966, para. 163).

It was as if those Jungians interested in developmental understanding had found clinical and theoretical corroboration of Jung’s dual emphasis on the innate structures represented by the archetypal images *and* the central importance of the intensive and ongoing relationship between patient and analyst as it changed over time. At the same time, they found a developmental theory based on careful clinical observation and experience that seemed to have been missing in the Jungian *opus*, namely an understanding of early infantile states of mind and how they impact on the analytical relationship.

Winnicott had written convincingly about the link between the understanding of early infantile states of mind and analytic practice with deeply disturbed and regressed adult patients. He stated that adult patients treated intensively on the couch can:

... teach the analyst more about early infancy than can be learned from direct observation of infants, and more than can be learned from contact with mothers who are involved with infants. At the same time, clinical contact with the normal and the abnormal experiences of the infant–mother relationship influences the analyst’s analytic theory since what happens in

the transference (in the regressed phase of some of these patients) is a form of infant–mother relationship.

(Winnicott, 1965, p. 141)

Winnicott thought that the blurring of the self–object boundary led to transformations in the development of the self in the “transitional space” between the infant and mother, as well as between the patient and analyst. The infant’s experience of the transitional object as both “created and found” is similar to the patient’s experience of the well-timed interpretation which happens at the very moment of it being “realized” by the patient. Winnicott called this the mirroring capacity of the analyst, which, like that of the good caregiver, enables the growth of self in relation to the object. With the benefit of Daniel Stern’s (1985) major contribution to infant psychological development, analysts might be more inclined to use the vocabulary of “attunement” to indicate the importance of the quality of the match between both. The studies of Trevarthen (1984) in Scotland and other recent researchers have indicated that, well before speech begins to develop, “pre-speech” exchanges between mother and infant which possess rhythm and pitch form a kind of “pre-music” dialogue between them which ensures interpersonal communication from birth onwards. Similarly, many other research findings indicate how attuned the infant is in many aspects of sense perception, thus allowing it to take in stimulation from and to interact proactively with its caregivers (see A. Alvarez, 1992, for a useful review of this research and its relevance to psychoanalytic theorizing).

The large body of research concerning the capacities of very young children to respond to stimuli from the environment well before the development of any speech facility, and to actively engage in relating to their caregivers in effective ways that do not require speech, indicates the significance of non-verbal communication in the consulting room. With the current understanding of the breadth and depth of these interactive capacities of the neonate, and possibly also of the foetus (see Piontelli, 1987, for intriguing evidence of the foetus’s capacity for learning and interaction within the intra-uterine environment), there is every reason to believe that a significant proportion of the interaction in the consulting room includes both verbal and non-verbal exchanges. Infant observation has corroborated this view.

Infant observation

A tradition of infant–mother observational studies grew up in London at the Tavistock Clinic from 1948, and at the Institute of Psycho-Analysis from 1960 (Bick, 1964). These studies provided regular close and detailed observations over a period from birth to more than two years. The one-hour observations take place weekly in the infant’s home with mother, and sometimes father and other siblings and caregivers. The observations are followed by weekly small group seminars in which the observations are discussed. The seminar format ensures that a number of infants are closely monitored and discussed by each of the groups.

Dr Michael Fordham, the founder of the Developmental School in London, who was a child psychiatrist experienced in child analytic work, joined such a group, led by Gianna Henry from the Tavistock Clinic, in the early 1970s (Fordham, 1994). Subsequently, further groups were organized at the Society of Analytical Psychology, and in the Jungian Analytic Training of the British Association of Psychotherapists, where a two-year infant observation became a requirement for training candidates and a preclinical MSc on Human Development included a major infant observation component. These detailed observations and the discussions that take place around them have contributed to the development of Fordham’s theory on Jung’s notion of the self and its unfolding over the lifetime of the individual.

A culture of careful and non-intrusive observation was developed in which the scientific method was applied in an atmosphere that accepted that there were inevitable constraints in formulating theories concerning pre-verbal mental states. An important aspect of observing an infant in a non-active, non-intrusive way is the development within the observer of heightened sensitivity to information contained in non-verbal communications. This benefits the later capacities of the analyst to develop countertransference responsiveness, which had become recognized as an essential tool in the patient–analyst interaction.

Fordham’s model

Fordham’s theory has evolved over time and comprises several different elements which derive from his clinical experience and

observational researches. The relevance to Fordham's model concerning early object relations and the pathologies of the self, as well as the knowledge gleaned from the growing number of infant observations and concurrent seminars, allowed an expertise in childhood development to be established within Jungian psychological enquiry.

This expertise included the recognition of the importance of the subtle communications between patient and analyst that contribute to an enriched use of the countertransference in understanding early states of mind, and the close scrutiny of the changing transference and countertransference modalities within the treatment of the patient, even within one session and certainly over a long and intensive analytic treatment. To these elements Fordham contributed his own remarkable innovations of clinical and theoretical understanding that formed the foundations of what is now often referred to as the "Developmental School" of analytical psychology (Samuels, 1985). Although Fordham would not separate his developmental theory from other aspects of the Jungian tradition, especially the archetypal, there is no doubt that he introduced a new strand in Jungian theorizing that was grounded in intensive clinical work with very young children and the observation of infants, and was influenced by the object relations view of the importance of the earliest interactions with the infant's caregivers. Fordham demonstrated the theoretical viability of integrating Jung's interest in the origins and development of the self, including the many archetypal configurations, with his own careful observations of how the young mind develops. In so doing, his achievement has been:

to give Jungians their childhood and a way of thinking about it and analysing it—not as one aspect of the archetypal relationship, but as the basis for the analysis of the transference within archetypal forms . . . [Thereby] he has shown how the psyche oscillates between states of mind—sometimes mature, sometimes immature—which continue with greater or lesser strength throughout the life of the individual.

(Astor, 1995)

Through deductions from his clinical work, Fordham showed that the concept of the self, as first described by Jung, could be revised

and grounded in infant development by positing a primary self, or original integrate. This primary integrate comprises the original psychosomatic unity of the infant, its unique identity. Through a series of encounters with the environment, initiated either from within or from without, called “deintegrations”, the individual gradually develops a history of experiences which, in successive “reintegrations”, build up over time to comprise the unique self of that individual. This is a phenomenological view of the self as an active instigator as well as a receiver of experience, which links both biological and psychological experience. The individuation process occurs through the dynamic adaptations that the self makes to its own activities both within itself and within its environment.

Fordham’s model describes how the self deintegrates through contact with the environment and subsequently reintegrates the experience through sleep, reflection, or other forms of mental digestion in order to develop and grow. Put more concretely, a part of the infant’s self is energized from within to meet an external situation, perhaps because it is hungry (it cries) or because the caregiver has come into its field (the mother smiles and talks to the infant). This kind of interchange, which in the early days happens most often between the infant and its mother or other important caregivers, is imbued with a variety of qualitative experiences—for example there might be a good feed, with a sympathetic or attentive mother, or a disrupted one, or one in which the mother might be emotionally absent. The quality of the experience is reintegrated into the self, with resultant modifications in the structure and repertoire of the self, thus leading to ego development, as the ego is the most important deintegrate of the self. Fordham’s model ensures that infant development is understood as having physical, mental, and emotional content, where the self is actively engaged in its own formation and the realization of its own potential over time, while adapting itself to what the environment and particularly the caregivers offer in terms of the variety, quality, and content of experience.

Fordham’s achievement is to have integrated Jung’s pivotal concepts of the self and of the prospective nature and function of the psyche with a view of the psyche–soma development of the infant and child, at the same time demonstrating how this has a direct bearing on the understanding of what happens in the consulting room *between* patient and analyst and *within* each of them.

Fordham's approach has been enriched by psychoanalytic contributions concerning the impact of early infantile states of mind on the experience between the adult patient and the analyst in the ever-changing and developing transference and countertransference situation. Astor (1995) has pointed out that Fordham's understanding is linked to Jung's view that:

the instability of the mind gives rise to fierce struggles internally, principally against negative forces of mindlessness, cynicism, and all their derivatives and perverse clothings. Throughout these struggles the beauty of the continuity of the self, of what Jung called the "prospective" nature of the psyche, with its capacity to heal itself, can carry forward the interested enquirer who does not give up the struggle. Fordham's legacy is to have shown us, through his example and published work, that the self in its unifying characteristics can transcend what seem to be opposite forces and that, while it is engaged in this struggle, it is "exceedingly disruptive" both destructively and creatively.

(Astor, 1995)

Jung was not interested in the various modalities of the infantile transference, but he did study early states of mind in his work with adult psychotics. Fordham showed how, in the transference, the energy previously directed into the symptom could be focused on, or transferred to, the person of the analyst (Fordham, 1957). Fordham brought together Jung's emphasis on the "actual situation of the patient", the here-and-now situation, and the clinical understanding of the transference of early childhood material into the analytic relationship, by examining the meaning of the constituent elements of the contemporary neurotic conflict of the patient.

If, however, the actual situation be defined as the totality of the present causes and the conflicts associated with them, then the genetic (historical) causes are brought into the picture in as much as they are still active in the present as contributing to the conflicts there manifested.

(Fordham, 1957, p. 82, cited in Astor, 1995)

The analysis of the transference is reductive, in the sense of analysing psychological conflicts found in the here-and-now relationship

between patient and analyst back to their childhood causes. The aim is to thereby simplify apparently complex structures back to their basic foundations. Fordham, with his long experience of working clinically with children, recognized that children could both receive projections from their parents and project their own affects into their parents, and equally he understood that this process could also happen between patient and analyst. Thus, Fordham, and those influenced by his work, began to place increasing importance on the analysis of the transference through the use of the couch. This enabled greater clarification and elucidation of the contents of complex mental structures and their historical/genetic location within the patient's psyche.

At the same time, Fordham placed great value on Jung's view of the importance of the analyst's availability to the patient's inner world via a state of mutual unconsciousness (Jung, 1966, para. 364). He therefore increasingly allowed himself to be affected by the relationship with the patient. This experience could be thought of as a partial identification, whereby the analyst deintegrates in relation to the patient in order to better understand the patient's inner world. Fordham called this process of heightened availability on the part of the analyst to projective and identificatory processes from the patient's unconscious the syntonic transference/countertransference (1957). It involved:

... simply listening to and watching the patient to hear and see what comes out of the self in relation to the patient's activities, and then reacting. This would appear to involve deintegrating; it is as if what is put at the disposal of patients are parts of the analyst which are spontaneously responding to the patient in the way he needs; yet these parts are manifestations of the self.

(Fordham, 1957, p. 97, cited in Astor, 1995)

Naturally, this capacity of the analyst would only be effective and useful if the "affective stability of the analyst is maintained" (*ibid.*). Later, he was to understand that what he had termed "syntonic countertransference" was in fact parts of the patient that he had projectively identified with. As such they belonged to the interaction between patient and analyst and were therefore qualitatively different from countertransference phenomena as usually conceived.

Jung's recognition of the need for the analyst to be influenced by the patient and the reciprocal nature of the treatment relationship is well documented (for example 1966, para. 163 and 1966, para. 285). The danger arose if the analyst was available to the patient in a personal way that impeded the patient's freedom to explore his or her inner world with safety and without undue impingement from the analyst. In grounding analytic treatment in the understanding of the infantile transference, Fordham guarded against the possible disavowal by the analyst of the analytic attitude through emphasis on a certain kind of mutuality in the consulting room, which could run the risk of being an abuse of the patient who was in a dependent relationship to the analyst. The subjective openness of the analyst to unconscious communications from the patient did not imply equality in the analytic relationship. The analytic attitude was fostered by protecting the patient from undue self-revelations on the part of the analyst, thereby leaving the patient's fantasies about the analyst available to be understood and be used as potential material for the patient's inner transformation.

Many Jungians have found Fordham's model helpful in showing how, through a process of deintegration and reintegration, the psyche accrues depth and identity over time. Equally, the model shows how impediments to this process may occur, when either inner or outer impingements interfere with healthy development, such that pathological or maladaptive states of mind result.

Recent developments

Jean Knox, a London-trained Jungian analyst, has applied the evidence from the cognitive and neural sciences to help understand Jung's notion of the archetypes as emerging from the deep organizing unconscious (Knox, 2003). Drawing on insights from attachment theory (for example, Bowlby, 1988) regarding the importance of interpersonal relationships in the internal world of the child, Knox offers a model, based on scientific findings regarding the interaction between genetic potential and environmental influence, that demonstrates the emergent self-organization of the brain. In particular, she argues that archetypes are "emergent structures resulting from a developing interaction between genes and environment that is unique for each person" (Knox, 2003, p. 8). For Knox, archetypes are

image schema which provide the initial scaffolding for processes that organize and pattern experience, building over time as the child interacts with its environment.

Another Jungian analyst, Margaret Wilkinson, has also contributed to the growing interest in how recent findings from developmental and affective neurosciences can enrich and be enriched by Jungian analytic understanding of early cognitive and emotional development (Wilkinson, 2006). Drawing on the pivotal research findings in psychoneurobiology of Allan Schore (for example Schore, 1996) and other leading researchers, she develops a particularly Jungian perspective on the link between neurological models of the brain and psychological models of the mind, including their implications for the clinical encounter between patient and analyst. Wilkinson shows that the development of the right hemisphere neural networks implicated in the higher cognitive and affective foundations result from the earliest emotional interactions between infant and carer. This has crucial relevance for the differential understanding and treatment of psychopathological states often encountered in the consulting room, particularly in relation to deficits arising from physical and emotional relational dysfunction and trauma.

Wilkinson states that "in the infant the optimum development of circuits in the prefrontal cortex, the early development of mind, is dependent on the quality of the earliest experiences, with significant consequences for the emotional growth of the young mind" (Wilkinson, 2006, p. 8). In an earlier paper (Solomon, 2000), I argued that an important implication of this "system of reciprocal mutual influences" (Schore, 1996, p. 60), in which both caregiver and infant are proactive and the quality of attunement between them has a direct impact on the maturation of those cortical and subcortical limbic areas that will eventually mediate socioaffective functions, is that the infant thus participates directly in the formation of its own neural structures in the development of its brain.

This crucial, scientifically based understanding of the participation of the young child in the development of the neural structures underlying those higher order levels of brain and mind functioning, is especially appropriate in linking with Jungian theories of the self and may be the source of those processes of psychological growth and transformation that Jungians call "individuation". Indeed, we

might even speculate that it is the infant's capacity to contribute to its own neurological development, a process that recurs during adolescence and later in life, which underpins the psychological unfolding that Jung elaborated in his concept of the "transcendent function" (Jung, 1957).

Conclusion

This chapter has sought to offer an understanding of the theoretical and clinical situation of analytical psychology in England which gave rise to the so-called Developmental School. It is by necessity an overview which has not included the contributions of many psychoanalysts and analytical psychologists, both in England and elsewhere, who have made advances in the theory of the development of infantile states of mind, and in the theory of the pivotal role of the transference and countertransference in analytic practice.

It is of course ironic that, in the field of depth psychology, the great traditions of Freud and Jung have been kept apart by history, personal philosophies, and professional politics. Seen as a whole, the movement of a conjoint analytic tradition comprising psychoanalysis and analytical psychology together might offer, despite whatever real differences may exist, a more inclusive and potentially more creative arena in which fruitful formulations in the broad area of depth psychology in general, and the content and processes of the self in particular, can take place.

Notes

- 1 The specialized spelling of "phantasy" was used by Melanie Klein from the time of her early pioneering work in the analysis of children. Susan Isaacs formulated the notion of "unconscious phantasy" in 1943, in a paper given during the Controversial Discussions held at the British Psycho-Analytical Society (Isaacs, 1948). Unconscious phantasy is the mental representation of instinctual impulses, the psychological correlate of the individual's biological nature, and is present from birth. Unconscious phantasy is differentiated from conscious fantasy, which is more like day-dreaming, or wish fulfillment, a consciously available mental content.

- 2 The paranoid/schizoid position refers to early states of mental functioning prior to the development of the depressive position. In the paranoid/schizoid position, the child's relationship to its objects, or caregivers, is characterized by defensive processes such as splitting and projection in order to manage a particular quality of persecutory anxiety, such that the object is alternatively experienced as either all good or all bad, and is perceived as a "part object", such as a "good breast" or a "bad breast". The depressive position is achieved when these parts are brought together into a more realistic perception of a "whole object", towards whom the child experiences feelings of guilt and wishes for reparation. Throughout life, there is a progressive alternation between these positions, according to the various anxieties and defences aroused by the psyche's need for self protection.

Recent developments in the neurosciences

This chapter will seek to show how the archetypal and developmental analytic traditions can be correlated theoretically through an examination of the recent literature on the implications of early intersubjective exchanges, especially those between the infant and its mother, and the neural and biochemical consequences of such exchanges.

Since this chapter was first written in the late 1990s and subsequently published (Solomon, 2000), many more articles and books have appeared that bring forward the enquiry regarding the connections between depth psychology and further new discoveries in the neurosciences. Two notable extended studies by Jungian analysts are recommended to the interested reader for their relevance to the growing understanding of the overlap between Jungian theory and practice and findings from cognitive and neurosciences. Jean Knox in *Archetypes, Attachment, Analysis: Jungian Psychology and the Emergent Mind* (Knox, 2003) has offered a revision of Jung's archetypal model and the emergence of symbolic meaning through a close study of attachment theory. Similarly, in *Coming into Mind: The Mind–Brain Relationship: A Jungian Clinical Perspective* (Wilkinson, 2006), Margaret Wilkinson has made a detailed investigation of the relevance of current neuroscientific findings in Jungian clinical practice, and at the same time demonstrates how Jungian theory and practice are supported by neuroscientific findings.

Traditionally, Jungian and psychoanalytic approaches to thinking about the self have been broadly conceived according to two separate,

overarching perspectives. Jungian archetypal theory has understood the self as organized from birth to unfold according to universal, inherent, deep, structural patterns of experience that correspond more or less to the instinct-driven stages of the life cycle. This view was based on Jung's theory of the archetypes, the innate mental structures that organize much of our perception, emotion, and behaviour throughout life. As the self passes through the developmental stages, its passage through this life cycle is charted and represented mentally via a number of archaic and typical images and symbols. These draw, for example, from the image of the Divine Child through to the image of an integrating mandala; from our beginning to our ending.

The psychoanalytic developmental model offers a structural view of the self that is also instinct driven. However, it has a greater emphasis on the organizing principle of the psychosexual stages and the tripartite structural model of id-ego-superego. This is charted by the structure of internal objects and their processes of formation, and the varieties of conscious and unconscious mental exchanges and ways of relating that inform the contents of the developing mind. Psychoanalytic theory has tended to focus on an understanding of the complex nature of the early developmental processes of the self, while Jungian analytic theory has focused on the rich area of creative and symbolic activity, and collective and cultural pursuits, which are especially relevant to the second half of life.

It takes only one imaginative step to perceive that each approach has roots firmly embedded in the other, and that to consider the infant without its organizing (archetypal) mental foundations and processes, or archetypal processes without their infantile, primitive derivations and early relational vicissitudes, encourages a false and unhelpful dichotomy. Psychoanalyst Mark Solms has found it lamentable that "Freudian metapsychology has become insulated from scientific progress [in the physical sciences] . . . [as much as] contemporary cognitive scientists are hampered by a woefully inadequate acquaintance with the knowledge gained by psychoanalysts . . . about the inner workings of the human mental apparatus from the viewpoint of subjectivity" (Solms, 1997, p. 701). It is equally woeful that, in many quarters, the Jungian and Freudian analytic traditions have become so insulated from each other that they are unable to profit from the understanding each has achieved in respect

of the self and its experience and perception of its internal and external reality.

Although Jung was mapping the imaginal contents of the psyche through his enquiry into the archetypal patterns and images, which are the mental representations of the instincts, this does not mean that the imaginal contents of the psyche have a direct correspondence to the mind's neural substrate. To the extent that mental imagery corresponds to the biological, and therefore ultimately to the genetic, bases of the self, these internal images and figures can be understood to arise from the meaning the mind makes concerning the universal instinctual experiences in which the self participates. This is not to say that the neurological hardwiring of the self gives rise to specific mental images. The importance of the new psychoneurobiological research is that it provides morphogenetic evidence of the impact of the universal patterns of the meaningful affective relationship between infant and caregiver that influence the processes underlying the growth and development of the infant's brain. To the extent that archetypal imagery is implicated in these mental representations, there is a direct link between this research and archetypal theory. No rationale is being offered here for positing the neurobiological basis of archetypal imagery or of the archetypes themselves. It is the instincts that derive from neurobiological and neurochemical sources, and it is the instincts that give rise to the archetypal components of the psyche. It is interesting to note that, as early as 1905, Freud addressed a similar distinction between the explanatory principles of cause and effect and those of correlation. He emphasized that, in arranging the facts of psychopathology philosophically, he was:

making no attempt to proclaim that the cells and nerve fibres, or the systems of neurons, which are taking their place today, are these psychical paths, even though it would have to be possible in some manner which cannot yet be indicated to represent such paths by organic elements in the nervous system.

(Freud, 1905, p. 147, quoted in Solms 1997, p. 702)

Another crucial point of convergence between the findings of the new neurobiology and Jungian theory and practice concerns the advances in Jungian thinking regarding the understanding of early states and processes of the mind. The post-Jungian developmental school,

through the work of Michael Fordham and his colleagues in London (see Chapter 4), amplified by the rich field of infant observation studies, grounded the understanding of the bases of mental life in the early internal experiences of the real child. It was then possible to link theoretically the archetypal roots of the psychic functioning of the real child to information arising from clinical practice that included transference and countertransference phenomena and the symbolic activity of the psyche in transformation (Solomon, 1997). Thus, it was possible to conceive of an integrated matrix consisting of traditional archetypal Jungian psychology and what had until then remained within the purview of the psychoanalytic study of the early mind that could lead on to further theoretical integrations. We are currently in a position to elaborate the understanding of this archetypal/developmental self. A particularly fertile area of future research involves recent findings from the new field of psychoneurobiology.

Psychoneurobiology and the intersubjective perspective

Recently, and particularly within the last decade, research into the development of the brain of the neonate has pointed to the crucial role of the nature and quality of the affective interactions between infant and mother. These interactions trigger the unfolding of the biochemical and neurobiological processes that underpin the maturation of the cortical and subcortical structures of the infant's brain after birth. These neural structures are responsible for the self's capacity for eventual self-regulation, underpinning the social, affective, and cognitive development and identity of the self. What has emerged is that the two major brain growth spurts that occur during the first two years of life are dependent on what psychoneurobiology researcher Allan Schore calls "the system of reciprocal mutual influences" (Schore, 1996, p. 60) within the infant-mother dyad.

During the first growth spurt, at about ten to twelve months, the finely tuned reciprocal patterns of interactions between the infant and mother/caregiver ensure appropriate amounts of neurochemical production via the generation of optimal levels of arousal, leading to the infant's eventual attainment of the first early capacity for self-regulation of affect. The mother uses her ability to appraise and match, through finely attuned responses, the infant's internal states,

and the infant learns to initiate through its "spontaneous gestures" (Winnicott, 1960, p. 145), especially through eye contact, physical movements, sounds, and cries, the regulatory responses of its mother. The second spurt of neural development, at about eighteen months, is preceded by a period of dramatic change in the patterns of relating between infant and caregiver, with a direct impact on the production of related neurochemical substances. As the child becomes increasingly self-motivated, driven by curiosity and the uninhibited pleasures of its own internal body and psychic experiences, the mother takes on an increasingly socializing role, restricting uninhibited freedoms and pleasures and thereby inducing feelings of shame and humiliation. These unexpected inhibiting responses from the one who had been experienced as a finely (narcissistically) attuned caregiver give rise in the child to states of physiological and psychological distress, which persist and are not immediately resolved by previous patterns of dyadic attunement. A shift from high to low arousal states in the form of a shame reaction is activated and persists until repair and recovery can again be attained through carefully timed reattunements. In a thorough and detailed analysis of current neurobiological and psychological research findings, Schore demonstrates that "these experiences trigger specific psychobiological patterns of hormones and neurotransmitters, and the resultant biochemical alterations of brain biochemistry influence the experience-dependent final maturation of the orbitofrontal cortex" (Schore, 1996, p. 72).

Schore's contributions (1994; 1996) have been especially valuable in pointing out that "the self-organization of the developing brain occurs in the context of a relationship with another self, another brain . . . [who thus acts] as an external psychobiological regulator of the 'experience-dependent' growth of the infant's nervous system" (Schore, 1996, p. 60). In other words, the formation of the attachment bond between infant and caregiver gives rise to experiences that shape "the maturation of structural connections within the cortical and subcortical limbic areas that come to mediate socioaffective functions" (Schore, 1996, p. 60). This is a skin-to-skin, brain-to-brain (in particular, right hemisphere to right hemisphere) model of psychological development, in which the quality of attunement between mother and infant, which both members of the dyad play an active role in creating, is as crucial to the infant's ongoing neural

development (as supported by its own biochemical processes), as it is to its psychological development. To the extent that the infant contributes actively in these exchanges, the infant directly participates in the formation of its own neural structures. This has important implications for the theoretical understanding of the nature of the self and of object relationships, as well as for clinical treatment techniques when the “system of reciprocal mutual influences” has led to pathogenic rather than adaptive results, when exchanges in the early dyadic functioning have led to things going wrong.

This evidence of the mutuality of exchanges leading to the growth of the infant’s brain at the neural and biochemical levels provides hard data that has direct relevance to the findings from analytic and developmental studies, including infant research and clinical reports of work with children and adult patients, concerning the critical interactive role of infant and mother in ensuring a stable and secure foundation for the self to develop and grow. For example, in the closely associated field of developmental psychology, Daniel Stern (1985) has been at the forefront in mapping the impact of the varieties of attunement responses, or their failures, that form the basis of the psychosocial development of the infant through the relationship with its earliest caregivers. The concept Stern calls “RIGs” (repeated representations of dyadic infant–mother interactions) denotes generalized patterns created through the interactions in the early dyad. These constitute the basic units of the core self, integrating the multiple experiences the infant has with its caregiver into an internalized affective pattern that is fully established pre-verbally. Stern’s developmental work has close affinities with Schore’s psychoneurobiological findings concerning the system of reciprocal mutual influences.

In the early days of his investigations regarding questions of analytic technique, Jung gave a clear indication of his appreciation of the importance of the analyst’s own capacity to be subjectively responsive to the impact of the relationship with the patient (Jung, 1929, para. 163). However, little work relating to the importance of the relationship between the two partners in the analytic dyad, in particular regarding the crucial role of the analyst’s subjective responses to the patient, was carried out until the 1990s. A spate of analytically oriented publications were then published concerning various aspects of what is being called intersubjectivity and the

interactive field (for example, see the work of Aron, 1996; Kumin, 1996; and Stein, 1995).

In a recent in-depth study, psychoanalytical marital psychotherapist James Fisher (1999) closely examined the vicissitudes of dyadic relating in respect of marital couples. Fisher usefully distinguishes between narcissistic and genuine forms of object relating, which he sees as a fundamental human tension characterized by ongoing oscillations between the two states. Chapter 12 shows how the capacity to attain an ethical attitude is predicated on the quality of early intersubjective exchanges. Recently there has been increased interest in the conditions and effects of the analytic relationship on both partners, which has resulted in a spate of papers that seek to examine the impact of intersubjective states on each member in the analytic dyad.

In this connection we should observe that Schore bases his analysis of the therapeutic implications of the two-stage model of neural growth in the infant on the principles of attachment theory as applied to adult psychotherapeutic treatment (Bowlby, 1969). Although this is clearly a worthwhile clinical pursuit, it has, nevertheless, kept Schore's enquiry to some degree, but not wholly, separate from many of the intricacies of psychoanalytic theory. In particular, the detailed understanding of those subtle intersubjective, often pre-verbal, communications that are called projections, identifications, and projective identifications, involved in the laying down of internal worlds and their transformations across the life cycle. This separation is not necessary, in the same sense that Solms (1997) found that the parceling of the psychoanalytic and neuroscientific enquiries was wasteful of human knowledge, and can be bridged theoretically and clinically through acts of translation, such as this chapter attempts.

For example, there is a common link between attachment theory and archetypal psychology in the importance the two traditions have placed on the work of the first ethologists (for example Tinbergen, 1954; and Lorenz, 1977). Ethologists demonstrated the crucial role of the first attachment object in the ongoing development of the self. It is the first attachment figure that triggers the onset of developmental processes, the quality of which informs the next cycle of development and the nature of the self's identity, including its capacity for relating (see Solomon, 1991, and chapter 3 of this volume) for a discussion of this connection). The notion of "critical periods"

for the emergence of self-regulating systems via the influence of various attachment modalities is common to ethology, clinical psychology, depth (including archetypal) psychology, and the complex processes at work in the psychoneurobiological development of the infant. This in turn has implications for psychotherapeutic theory and technique.

The two-stage developmental model

The two stages of the model proposed by Schore correspond roughly to the first and second years after birth, and are differentiated according to the type and quality of attunement required from the caregiver to ensure the infant's optimal development. In the first phase, the development of "mutually attuned synchronized interactions is fundamental" (Schore, 1996, p. 61). The mother and infant are delicately matched and resonate with each other, each transforming the other's emotional and physical states for optimum pleasure and receptivity. Stern (1985) has called these "vitality" or "crescendo" affects, components of overall "affect attunement". The mother's very presence and the quality of her interactions with the infant ensure that:

... the mother is not only acting as a modulator of the child's current affective state, she is also regulating the infant's production of neurohormones and hormones that influence the activation of gene-action systems that program the structural growth of brain regions [specifically of the right hemisphere orbital pre-frontal cortex and limbic systems] essential to the future socioemotional development of the child.

(Schore, 1996, p. 61)

The maturation of this brain area is more or less completed at the end of the first year of life and is predicated on the fine-tuned responses between mother and infant, which ensure that the infant has internalized basic self-regulating physiological and psychological mechanisms at the core self level by this time.

In the second stage, there is a significant change in the relationship between infant and caregiver. The caregiver now increasingly takes on the role of an agent of prohibition and socialization, arousing

generally more negative, as opposed to generally more positive, feelings within the infant. Shame inducement and the tension and negotiation around the restoration of positive affect, mean that the regulation of attunement exchanges becomes more complex, problematic, and stressful. Different neurochemical, hormonal changes and neurobiological growth spurts in the frontolimbic and orbito-frontal cortex accompany these behavioural affective developments, culminating in the structural changes in the brain of the growing infant during the neural growth spurt of the last half of the second year (Schore, 1996, p. 71). Through these two critical stages of neural growth, with their cognitive and emotional correlates, the patterns of affect regulation are laid down as the core foundations of the self.

Psychotherapeutic implications of the brain–brain model

The two-stage developmental and interactive model as outlined by Schore has implications for analytical theory and clinical treatment techniques in a number of ways. Schore argues that if those socioaffective, attunement exchanges that would lead to optimal neural development in the first two years of life have not occurred, then real functional deficits will result, leading to variations in self and attachment pathologies. Moreover, these exchanges need to arise at two critical periods in infancy, when changes at the biochemical and neurobiological levels occur that underpin important changes at the psychological level, thus shaping the emerging self's capacity for self-regulation at both the physiological and psychological levels of functioning (Schore, 1996, p. 75). Early-forming psychopathology is a "disorder of attachment [which] manifests itself as failures of self and/or interactional regulation" (Grotstein, 1986, as reported in Schore, 1996, p. 80). In archetypal terms, this would include the activation in a dyadic setting of archetypal potentials that may not be adequately "humanized" by optimal attunement exchanges. Instead, they remain unmitigated in their power to polarize affects, thus impairing the capacity for self and interpersonal regulation.

Within a treatment context, affects that were hitherto not triggered developmentally or regulated interactively within an attachment framework might be thought of as unactivated potentials that require an appropriate analytic setting in which to unfold, including variations in the quality of the practitioner's responses to the patient

appropriate to the level of functioning that might trigger their activation. This notion may at first glance appear to be advocating a similar approach to the erstwhile advocacy that the analyst should provide the patient with "a corrective emotional experience", that is, as a corrective to transference expectations (Alexander, 1961). However, this latter notion fell from favour when some practitioners took it to mean that the analyst could and should seek to provide a compensatory, often a parenting, experience via some concrete enactment (perhaps, for example, offering a cup of tea when the patient was reliving painful memories of lack of parental sources of nourishment). This approach was criticized for having deteriorated into concrete enactments, and having become detached from symbolic meaning and analytic understanding.

The two-stage developmental model advocated by Schore suggests a different treatment technique. Starting from the idea that structural deficits at the neurobiological level result from early failures in dyadic regulation, an alternative view is provided regarding the inclination to understand negative events in the consulting room solely in terms of different forms of unconsciously motivated attacks on analysis, such as negative therapeutic reaction, unconscious resistance, or disavowal. Instead, the understanding based on the two-stage developmental model would revolve around identifying functional deficits and providing optimal conditions for neurochemical and neurobiological correction via appropriate interactive attunements in the analytic relationship. This would include the provision of different types of empathic care through monitoring and moderating excessive or limited arousal states. These are the states that originally led to the creation of a "growth-inhibiting environment that produces immature, physiologically undifferentiated orbitofrontal affect regulatory systems" (Schore, 1996, p. 82). Schore offers a long list of such "empathy disorders" (Trevanthen & Aitken, 1994, quoted in Schore, 1996, p. 83), including autism, schizophrenia, mania, unipolar depression, phobic states, post-traumatic stress disorder, drug addiction, and borderline and psychopathic personality disorders (Schore, 1996, p. 83), all of which belong to the territory of depth analytical work.

Crucial to this therapeutic understanding is the central role of the analyst's involvement in the patient's processes; his or her personal capacity to be involved subjectively, such that optimal attunement

interactions with the patient can occur. It follows that there is a need for greater emphasis on the overall quality and variations within the analytic relationship than has generally been allocated in analytic training, which tends to stress the vicissitudes of the transference/countertransference relationship as essentially a function of the patient's inner world. The implication of the input from the neurobiological perspective concerns the need to factor in the importance of appropriate empathic responses of the analyst. Along with other right hemisphere to right hemisphere interactions, such as non-verbal psychobiological attunement processes, mirroring and patterning of the subtle transferential and countertransferential visceral-somatic responses between patient and analyst, this picture points to the necessary inclusion within a thoughtful treatment modality of the analyst's spontaneous, subjectively attuned responses to the patient.

The two-stage psychoneurobiological developmental model implies that the analyst may need to participate differently at different stages in the patient's development, as well as according to the variations in the psychopathologies of different patients. This may include the tone, quality, and import of the analyst's responses to the patient's mental and physiological states.

Theoretical implications

The major theoretical implications of recent psychoneurobiological findings tracking the two-stage maturation of the corticolimbic system of the neonate in the two years after birth concerns the capacity of that neural system to reproduce, or internalize, working models of patterns of affect regulation arising from the interactive relationship between the infant and its caregiver. These begin with a presymbolic sensorimotor capacity, similar to Stern's concept of vitalizing attunements, which would also include Fordham's idea (1985) of the patterns of deintegration and reintegration, through to a symbolic representation in which more complex interactions incorporating negative, but reparable, experiences are possible. These are seen to happen via the self's expectation that a transformation of a dissonant state to a more comfortable one will occur; an expectation based on experience of things having gone well enough. This has implications for the explanation of the development of the self at the teleological level, but in fact it is a process that happens

equally at the biochemical level, thus producing neurological correlates that may have archetypal representations. Thus, at various levels of self functioning, there are powerful contributions to the ongoing developmental drive of the self, the foundational core of which is seen to be achieved by experience-dependent dyadic interactions via “a system of reciprocal mutual influences”. Complex, finely attuned right brain to right brain interactions between infant and caregiver have as their later interpersonal correlates the subtle, interactive, and often unconscious processes so elegantly schematized by Jung (1946) as an intersubjective matrix, and subsequently developed psychoanalytically in terms of the subtle projective and introjective processes especially encountered in transference/countertransference phenomena.

A further important implication of this is the idea that the imprinting of the model of self-regulation depends on the quality of the interaction with, and internalization of, the mother’s own cortical activity. The mother’s own internalization of an appropriate pattern of attunement responses will depend on her own experience of the *post-partum* two-stage developmental process via reciprocal mutual influences in her own childhood. Hence, the importance of generational models in understanding psychopathology cannot be disregarded. The relative balance of excitatory–inhibitory processes that eventually result in the enduring quality of the self have a direct bearing on archetypal theory as providing an explanation of the derivation of mental correlates of instinctual development and how these are then mediated by real experiences. Because the experience-dependent nature of brain development in the neonate, based on mutual affect regulation, is interactive and causes similar development in the caregiver, archetypal potentials unfold in each member of the dyad.

Thus, those psychobiological and interactive states of mind underlying affect, cognition, behaviour, and bodily functioning point to the Jungian model of the deep structural bases of dynamic mental functioning, linking instinct and mental representation via archetypal images. We have considered the implications of this for psychotherapeutic treatment requiring involvement of the therapist in the patient’s inner processes. This is a brain–brain treatment, especially important in evoking “hot moments”; those enactments and adjustments to them that can subsequently be internalized,

encoded and replace the prevailing, more defensive or pathological patterns. The integration of neurobiological and psychological perspectives is essential to achieving a deeper understanding of adult affective and behavioural dysfunction, understood as the result of early failures in interactive and therefore archetypal regulation.

Conclusion

We are now in a position to synthesize archetypal theory, the ethological bases of attachment theory, psychoanalytic object relations theory, and Jungian developmental theory, all of which can now be hard-grounded in the skin-to-skin, brain-to-brain neurobiological interconnectedness between the infant and its primary caregiver. This in turn may provide a holistic account of the primary self and its unfolding processes, which includes the absolute importance in terms of neurobiological development of the quality of the earliest interactions between self and other.

In that intimate space created between the infant and mother, which psychoneurobiologist Alan Schore has called “the system of reciprocal mutual influences” and psychoanalyst Kenneth Wright (1991) has called “the positively amplifying circuit mutually affirming both partners”, successive stages in the formation of neurobiological structures that underpin those developmental achievements in psychological functioning, linked with states of self identity and intersubjectivity, are forged. Thus can we link the current neurobiological and depth psychological understanding of development.

PART III

CLINICAL EXPLORATIONS:
THE SELF, ITS DEFENCES,
AND TRANSFORMATIONS

Clinical explorations: the self, its defences, and transformations

This section comprises five clinically based accounts of intensive analytical work with patients, or supervision of patients, in long-term intensive analysis.

Chapter 6, “The not-so-silent couple in the individual”, examines the nature of the self, with its foundation in the concept of a primary self, which may achieve a sense of coherence over time, and the nature of internal objects, a concept that forms the basis of theories concerning part selves and sub-personalities. These concepts might be integrated to provide a unified model of the self, thereby integrating theoretically disparate aspects of mental structure and functioning. Through an examination of clinical material, the archetype of the *coniunctio* is evoked to offer an understanding of how, in the absence of a stable conjunction of (maternal) reverie and (paternal) thinking functions, a series of linked but oppositional internal couples may be created, which lends to the self either the experience of a combined and sustaining inner couple, or an internal warring couple, to the detriment of an integrated self.

The internal couple creates a source of psychological survival for the self, with the function of providing a reliable structure in which the processes of the self may unfold, but equally requiring strict adherence to a system of internal defences that allows for little interaction with important others outside the self or internal flexibility in the face of survival crises. These defences inevitably become blocks to further development, and the work of transformation is thwarted. For transformation to occur, it is necessary for the self to find another,

often the analyst, who may be allowed to partake in the internal conjunction, thereby promoting a better grounding for the self.

Chapter 7, "The self in transformation: the passage from a two- to a three-dimensional internal world", describes some of the steps in the process of transformation from a two-dimensional to a three-dimensional inner world as experienced by a patient who had used up the remaining vital resources upon which the survival of her self depended. An important hurdle had first to be crossed when the analyst was required to demonstrate her capacity to survive with her in a two-dimensional claustrum, in a solitary confinement. Here an oppositional defensive system had been created in which positive and negative personifications of vital but withdrawn energies ensured that she was locked within an interior world that sought to bar entry to anyone else and where the possibility of the transformation of her self was disallowed. The patient had to accept the risk of breaching the system of self-defence before the analyst was allowed a mutual position within her inner world. A series of dreams tracks this transformation internally and in relation to the analyst.

Chapter 8, "Love: paradox of self and other", discusses the many contexts of love and self in relation to another. Love that encompasses the experience of self and other as a genuine subjectivity related to in substantively non-narcissistic ways may be uncomfortable and difficult to achieve at times, but it carries the deepest potential for the realization of the self and what it means to be human. The underlying principle is the capacity of the self to realise itself in relation to another. It is illustrated by a discussion of twin studies *in utero*, which suggest that there is a primary self and a primary capacity for relating and loving. A clinical example of a patient who had repeated attachments to absent objects suggests that, through careful analytic work over time, the psyche is ordinarily propelled to repeatedly reach out from within the self to find an object to love, notwithstanding accumulated failures in this attempt.

Chapter 9, "Did Freud and Jung have a 'clinical' encounter?", speculates on the psychodynamics at play in the powerful relationship between Freud and Jung and the elements of their respective personalities that made for an impassioned encounter and subsequently a tragic split. The eventual schism between them was probably the result of the difficult profound psychological needs that each had for the other. Freud considered Jung as a collaborator who

would not deviate from the principles at the basis of psychoanalysis. From Jung's point of view, Freud fulfilled the role of a respected father figure who, Jung hoped, would grant him the autonomy and freedom to pursue his own scientific enquiry, based on Freud's ideas, but which he would revise according to his own researches. These led Jung to certain revisions and additions, such as the nature and function of the libido, the broadening of the idea of the complex beyond the centrality, according to Freud's view, of the Oedipus complex, to include a number of universal, archetypal themes, and the elaboration of the concept of the self.

During the years of their relationship, they shared a mutual psychological support which was deeply important to each, based on reciprocal love and respect but also on a fantasy that each would be able to supply to the other a key capacity that the other lacked. Jung was able to offer important scientific verifications of a number of psychoanalytic notions via the Word Association Test, such as the concept of repression, the complex, including the importance of the Oedipus complex, and the proof of the existence of the unconscious dynamics that mediate conscious activity. However, neither could supply to the other what each looked for in the other at the psychological level. The pivotal role of Sabina Spielrein in their relationship is considered, dynamically and symbolically.

The final breakdown and rupture in their relationship was caused by their theoretical differences, particularly regarding the nature of libidinal energy, and by the fact that they became bitter competitors in a race to publish treatises on the nature and origins of spirituality and religion. It has left in its wake the implicit traces of discord and misapprehension which have characterized much of the subsequent professional relationships between the two traditions.

Chapter 10, "Self creation in face of the void: the 'as if' personality", develops a clinically based theoretical construct regarding a particular type of personality formation that the author has encountered in a number of patients and supervised patients. These patients, despite disturbed backgrounds, had managed to become high and valuable achievers in the outside world. However, at a certain moment, they had become stricken with an overwhelming sense that whatever internal resources had sustained them had now been used up. The self finally had to face a long suspected, underlying internal reality, a kind of ever-present background sense of living in

a void or facing a vast emptiness at the core of the self. This absence appeared devoid of any resources to nourish or sustain the self. Instead, a primary existential anguish or panic, a sense that life was no longer sustainable on the basis that it had been lived, would often be accompanied by a physical illness or psychological dysfunction that put survival into question. The “as if” personality is contrasted to Jung’s concept of the persona and Winnicott’s “false-self”, both liable to be misconstrued as the “as if” personality in the clinical setting, with important implications for treatment.

The not-so-silent couple in the individual

This chapter addresses two of the most pressing questions in psychoanalytic psychotherapy and analysis today. The first question concerns the nature of the self, its structure and functioning. The second concerns the nature of internal objects.

Is the self divided, as in R.D. Laing's (1960) famous phrase, and, if so, in what way? Is there one vertical division represented by, for example, theories of the life and death instincts or the psychotic and non-psychotic self? Or are there multiple divisions, as represented by theories of multiple personalities or sub-personalities? Who, or what, does the dividing? How does it happen, and under what conditions? Both psychoanalysis and analytical psychology offer divided views on this subject, for the debate revolves around whether there is, first and foremost, a self (the view of Jung), or a primary self (the view of Fordham, and many post-Jungians, and, by implication, of many Kleinians) or whether, in the famous phrase of Donald Winnicott, "there is no such thing as a baby, but rather, a nursing couple" (with similar reverberations in the theory of the Jungian Neumann). These two theoretically divided positions, emphasizing the relative influences of nature and of nurture on the

This chapter was originally presented to the Inaugural Conference of the Society for Psychoanalytic Marital Psychotherapy, held at the Tavistock Marital Studies Institute, London, in December 1993. The title of the Conference was "The Silent Couple in the Individual".

development of personality, lead us into a host of fascinating questions about the nature of the self, its make-up, and its processes.

The second question concerns the nature of internal objects. Are they to be thought of as introjects, figures that are internalized by virtue of the individual's varied and various relationships to those in his external world? Are they better conceived of as archetypal configurations whose deep structural roots are universally present in us all by virtue of being human, where environmental factors have in essence and origin only a secondary role to play?

When we speak about "the individual", common sense would have it that we are referring to a psychological unit, a person who speaks with one voice. Analytically, we know that this is simply not the case, and that often in the consulting room we are listening to a medley, and sometimes a cacophony, of different voices, different figures or personalities, within the individual. Some of these voices may be known and familiar to the person speaking, and some may not be known and come as a surprise ("I don't know why I said that", or, "it seems silly, but I . . .", or, better still, "I don't know why I did that"). Perhaps it is not so much a matter of a "silent couple" in the inner world of the individual, but rather a series of sub-personalities who find themselves embodied imaginatively in a series of couplings, where they are more or less vocal, more or less pressing for space and acknowledgement, in various forms and guises at different times within the analytic work. Basic to this view of the inner world as populated by a series of embodied couples in different varieties of intercourse is a third, fundamental question: whether they represent a potentially infinite series of internal couplings, or whether they are inhabitants of an organization and structure in which, although they may put on different guises, they are representative of fairly stable, delineated, and powerful functions.

To whom I think I am addressing my remarks in the consulting room is often a question that benefits from close analytic scrutiny. Often, I find that I am referring to a linked pair of voices, in which one may be more positive and the other more negative, one more active and the other more passive, through a host of complementary or oppositional figures. Whether I address one or other of the figures, or else the couple, or another faculty of the individual (whether it be the ego or the self) is a matter of style, technique, and the strengths and limitations of my own understanding of who is speaking, and to whom, at any given moment. The creation of a third space in

which observation and comment about the not-so-silent couple can occur between patient and analyst in the consulting room allows for the possibility of a dialectic essential to the development of the self as much as the ego. The creation of that space by and between the other important couple, the patient and analyst, in both their conscious and unconscious aspects, can then provide an overall good-enough environment for other inner couples to emerge, have a voice, and, it is hoped, be understood.

I have come to hold this view of the situation in the consulting room through a coupling that has gone on within me through my training as an analytical psychologist working with adults, with interest in both psychoanalytic and analytical psychology theory building, and my training with what was then the Institute of Marital Studies in psychoanalytic psychotherapy with couples. In observing the unconscious dynamic processes that occur between two people within a relationship, I saw an externalization of those subtle unconscious processes, such as splitting, projection, and projective identification, that I observed in the consulting room within individuals, and within and between the analytic couple. This marriage of individual and marital clinical experience, the understanding of which was nurtured by both Jungian and Freudian traditions, has created within me a series of not-so-silent couples, couples who are in fact in constant dialogue, and sometimes in argument. This has enabled me to hold together in my mind apparently disparate strands of theoretical and clinical understanding, some of which I seek to describe here.

Archetypes and unconscious phantasies

I would like first to offer a brief description of the concept of the archetype, particularly of the archetype of the *coniunctio*, after which I will discuss the concept of unconscious phantasy. Both concepts (the first Jungian, the second Kleinian) offer a similar portrayal of the ubiquity of the capacity for relatedness between internal objects (or, rather, part objects) and how this is mediated by the self in its relationship to external objects, initially that between mother and infant, but eventually, of course, as it extends across the whole field of possible object relations. The idea is that in all of us there are certain fundamental psychic structures through which the self mediates its experiences and relationships, whether these be internal

or external, and that the interactions between the self and these experiences, with their multitudinous imageries, build up over time to make us the person we are, a kind of inner and outer family. This internal and external family and the dialectical nature of the development of the self over time through the interaction of opposites in conflict are discussed in Chapters 2 and 3. In this chapter, I will concentrate on discussing how the archetype of the *coniunctio* provides an image of that psychological process whereby an individual develops and grows through their relatedness to their inner and outer objects.

Melanie Klein's concept of unconscious phantasy can be thought of in many respects as the psychoanalytic equivalent of Jung's explorations of the archetypal layer of the psyche, in that the configurations within unconscious phantasy imbue early object relations with their experiential quality. Both the theory of archetypes and of unconscious phantasy seek to understand the vicissitudes of relatedness through a view of the psyche that grants the influence of external, environmental factors on psychological processes and contents, but sees these as experienced through deeply embedded structures of the mind, propensities to live life along certain broad lines of experience. These deep structures contain the mental representations of instinctual patterns of behaviour shared by all of us by virtue of being human. The Jungian term for the archetypal capacity for relatedness is the *coniunctio*. Kleinians, without the benefit of this concept, nevertheless conceive of the mental functioning of infants in terms of an instinctual unconscious relatedness between parts of the self and parts of the other. For example, Klein's view was:

... that the infant has an innate unconscious awareness of the existence of the mother. We know that young animals at once turn to the mother and find their food from her. The human animal is not different in that respect, and this instinctual knowledge is the basis for the infant's primal relation to the mother.

(Klein, 1959, p. 248)

Both the idea of internal objects and that of archetypes suggest that there are deeply embedded psychological propensities to perceive objects in certain ways that are instinct related, which predate the experience of the real object. Both agree that these propensities will be mediated by real experiences, but that individuals will vary

in their potential for experiencing them in more or less positive or negative ways. Both concepts represent a universal deep structural view of the mind, instinctually based and expressed imaginally through mental representations that have the power to transform energy into feeling, thought, and behaviour. Both agree that primitive psychological states are commonly experienced in pairs of bipolarities. Jung conceived this as the conflict of the opposites, Klein elaborated the primitive defence of splitting, and thereby each described a similar early unconscious dynamic organization. Both Jung and Klein derived their views from their clinical work with either very ill psychotic and schizophrenic patients (Jung's experience) or the mental life of very young children (Klein's experience). Thus, each addressed early, primitive states of mind. In Hannah Segal's words:

Since instincts operate from birth, some crude phantasy life can be assumed as existing from birth . . . as phantasies derive directly from instincts on the borderline between somatic and psychical activity, these original phantasies are experienced as somatic as well as mental phenomena.

(Segal, 1964, p. 191)

This chapter shows the interrelations between the following three concepts: first, archetypal propensities experienced, in Jungian language, as psychologically linked pairs of opposites or, in Kleinian language, as the bipolarities of unconscious phantasies; second, archetypes as deep structural capacities of the psyche to experience the inner and outer world along certain broad lines that are universal; and third, the model of the self with its capacities for deintegration and reintegration, which gives us a way of viewing how archetypal potentials within the self meet other components of the internal and external worlds and thereby impact on the internal unfolding of the self.

The self, its sub-personalities, and narcissism

One of the essential issues that divided Freud and Jung was the question of whether there is such a thing as the self. Freud never developed a concept of the self as separate from the ego. In his developmental and structural theories of the mind, he elevated the locus of consciousness, the ego, to a central and organizing position

in the personality as a whole. Jung, however, was interested from the outset in questions concerning the self and the complex processes that constitute it. Essentially, Jung thought of the self as that organizing principle of the personality as a whole, within which it is more or less possible for particular personality constituents to enter into some form of relatedness, which I refer to as variations or vicissitudes in the capacity for *coniunctio* (Figure 6.1). The self then is thought of as the central, organizing archetype that contains the ego, as well as other archetypal potentialities, but is not equivalent to any of these. The ego then becomes more like an island of consciousness within a much larger and highly populated global sphere. Thus, the self and its constituents are relational, and it is about pathologies of the self that we speak when we address those aspects of early deficiencies in relating that we identify in narcissistic, borderline, and schizoid personalities.

The notion of the self as having a dual function as both the organizing and relational capacity of the personality overall, and also an



Figure 6.1: The primary self deintegrates through its dealings with archetypal aspects of “not self” within the normal range of experience

archetypal potential for integration and wholeness, represents a highly simplified view of a very sophisticated psychological theory which Jung and the post-Jungians have developed over many decades of work. A conference on Jung's concept of the self, held in May 2007, at the British Association of Psychotherapists, attested to the richness and generativity of this theory (BAP, 2007).

Jungians who have followed the work of Fordham (1979) have tended to see the bipolar organization of early primary archetypal experiences less as defensive splittings in Klein's sense (although they consider that defensive splitting occurs under extreme conditions of intrusion or deprivation), but rather more ordinarily as early ways of structuring the mass of information that the infant and child has to cope with. Thus, Fordham's theory of deintegration and reintegration offers a view of the primary self with its successive integrations, and then of parts of the self (deintegrates) that go out to meet something in the environment, interact with it, and withdraw back into the self, reintegrating within the self and adding to it its experience. Deintegration is thought of as the spontaneous division of the self into parts as it meets the environment. The subsequent reintegration will depend on two interacting elements, the quality of the capacity for internal *coniunctio* and the quality of the encounter, that is, the extent to which it is facilitating or good enough. If the deintegrative moves are not met, or not well-enough met, disintegration may occur. The resulting negative affective experience can then lead to a defensive pathology of the self, inhibiting further deintegration. It is easy to see how this negative feedback loop might lead to an increasingly impoverished inner world. Thus, there is a twofold, dynamic interaction, firstly between the parts of the self as they meet aspects of the environment, and secondly between these deintegrates as they reintegrate back within the self.

Vicissitudes in the capacity for healthy *coniunctio* will depend on the regularity and intensity of failures in meeting the deintegrative attempts, including failures to protect from gross disturbance or intrusion, as well as the inherent capacities of the individual to foster life-enhancing rather than life-destructive choices in internal and external relating. As Jung says:

The ego stands to the self as the moved to the mover, or as object to subject, because the determining factors which radiate out from the self surround the ego on all sides and are, therefore,

supraordinate to it. The self, like the unconscious, is an *a priori* existent out of which the ego evolves. It is, so to speak, an unconscious prefiguration of the ego. It is not I who create myself, rather I happen to myself.

(Jung, 1942, para. 391)

Thus, the view offered by Jung is of a self that is primary, separate, and proactive. Successive experiences, located both in psyche and in soma, whether originating internally or externally, occur in relation to a person and are experienced as personifications that are organized according to those activities that shape experience (food seeking, for example). Thus, the so-called state of primary identity between mother and child is in fact a development, for even in moments of seeking and experiencing such states, the original self of the baby remains separate, active, and proactive (Figure 6.2).

Perhaps the central question that vexes psychoanalytic and analytic clinicians and theory builders today is the extent to which the environment may be attributable for gross disturbances of the self, or whether the person's own contribution to their disturbances is more important to the development of personality and character than any environmental constituent. In other words, are those



Figure 6.2: The integration of the divided self

processes manifested in relation to conscious and unconscious phantasies of what is experienced as “not self”, actually a sub-system of self all along, derived from within the self, rather than from the external object?

Alongside Fordham, other Jungian writers have added to the tradition of discourse on the self begun by Jung. Redfearn (1985) in particular has made major contributions to the Jungian literature, especially regarding the self and its sub-personalities, and Beebe (1988), Gordon (1980), Samuels (1989), Jacoby (1990), and others (more recently, for example, Colman 2007) have also made important contributions. Despite their different approaches to the self, its structure and process, these writers all take as a starting point the deep foundations of thought and scholarship that Jung originally brought to the subject.

The history of the concept of the self in psychoanalysis has taken a different route from that of Jungian enquiry. Klein (1959), Hartmann (1950), Fairbairn (1952), Federn (1953), Winnicott (1960), and Kohut (1971; 1977) have all made major contributions, but no one tradition within psychoanalysis has developed a coherent theoretical or clinical understanding of the self. Increasingly, however, it has become evident that it is not possible to understand certain psychopathologies, particularly narcissistic, schizoid, and borderline pathologies, without reference to a concept of the self. A spate of recent major psychoanalytic publications provide testimony to this recognition of the fundamental importance of a concept of the self. Phil Mollon in *The Fragile Self* (1993) demonstrates that the whole array of narcissistic disturbances cannot be understood without a model of the self. John Steiner in *Psychic Retreats* (1993) describes object relationships “not with a person, truly seen as separate, but with the self [or part of self] projected into another person and related to as if it were someone else.” Christopher Bollas has also contributed to the argument about the need for a concept of self in his book, *Being a Character: Psychoanalysis and Self Experience* (1993). Similarly, Neville Symington published *Narcissism: A New Theory* (1993), which demonstrates the impossibility of thinking about certain clinical phenomena encountered in the consulting room, as in our everyday lives, without reference to a teleologically based theory of the self. By teleological, a term at the core of the Jungian understanding of the psyche, Symington argues that

the clinical evidence we have of the origins of deep splits in the psyche can only be understood as residing in an individual's choice, however unconscious, for what he calls "the lifegiver", or conversely, away from it. Jungians would call these choices steps in the individuation process.

The position that begins the present enquiry is that of an infantile self that imbues its objects with the infant's phantasies of the object's motivations towards itself, such that the object becomes identified with a projected part of the self. Difficulties arise for the young self when it is met by a hostile environment, or one which does not take into account the substantive and subjective reality of the self, but, rather, treats the self as if it were a part of the other's self; that is, the object relates narcissistically towards the young self.

Through the notion of the bipolar nature of archetypal images, the Jungian equivalent of unconscious phantasies, it is observable clinically that each part self, either in projection or experienced internally, is represented in phantasy by a series of linked couples in which a "self" and an "other" are related to each other, often according to the laws of the paranoid/schizoid position. The transformative work of the self through the individuation process then seeks to incorporate successive integrations of these. Thereby, the depressive position (i.e. whole object relating) may eventually and on occasion be achieved. This provides a model that can offer a way of understanding a host of clinical phenomena encountered in the consulting room. The following is but one such example.

Clinical example

Let us imagine an analytic reconstruction, gathered carefully, over time, in which a patient, Mrs A, and I arrived at the view that as a child she repeatedly experienced a persecuting nipple that forced poisonous milk into the middle of her being, with the consequent need to evacuate those forced-in internal contents, in order to forestall her dismembering the nipple from the breast. In order to preserve the breast, she would sometimes choose to dismember her self. Would we assume that this is a consequence of a noxious environment? If so, we might hypothesize an envious and/or narcissistic mother. Or, on the other hand, would we say that it is the result of her own infantile uncontained paranoid phantasies that were being projected onto the environmental mother/breast/nipple?

So, the question was, do the impingements come from the environment or from the infant's own phantasy? Of course, at a certain level, it does not matter where the source of the experience lies, since either way there is an impact on the self as a whole. However, the theoretical understanding of the source of the noxious impact, and of the responses to it, have consequences at the technical and metapsychological levels.

Mrs A had been liable to convert a reasonably positive experience in the analytic work with me into a failure, particularly at break times, either to experience me as being capable of holding her in my mind or, conversely, of herself being able to hold me in her mind, thus demonstrating to me the quality of her repeated early experiences within her family of failures in relatedness. Her mother's actions towards her daughter appeared narcissistically driven, and she did not seem capable of relating to her baby daughter except as her own interiorally located part object. Nor was it possible to imagine the parental couple as having achieved anything like a healthy, whole object, depressive-position relationship. Rather, they seemed locked in a mutually annihilatory symbiotic phantasy which the patient naturally and inevitably internalized. This skewed her own archetypal potential for relatedness, which she demonstrated to me through a series of internal couples. It was to her credit that by and large she contained the pernicious *coniunctio* within, that is to say, within the area of her internal part object relations. Her marriage remained relatively stable and committed, she successfully brought up her children, and her commitment to the analytic work was conscious, reliable, and longstanding, with some ordinary vicissitudes between positive and negative feelings in relation to me. I was fairly consistently of use to her by remaining a reliable and thoughtful background self object, providing safe containment in which we worked to understand the ravages that continued within, despite her avowed wish to finally free herself of this continuing torture. She also realized that if she were not to find a way out of her predicament, all that she had done to protect her children from becoming victims of narcissistic appropriation by the maternal object would be to no avail, and that as witnesses to her struggles they were liable themselves to eventually fall prey to their power.

My countertransference responses were on the whole syntonic with this self-purposive underlying position, and I noted that I tended to maintain an evenly supportive attitude towards her

without losing my capacity to think. I remained largely identified with the self object function she projected into me, and lent my mind to the task of seeking to enable her as she strove towards achieving steps in the transformation process. The drama was located largely within her self, as it had always been.

We were aware of this arrangement, which we understood to include the wish to protect me from noxious attack as well as to keep the locus of control firmly with her. However, there was a powerful sense of my being entrusted with the responsibility of overseeing the unfolding of the entire drama. I felt myself to be identified with a Prospero figure, towards whom self projections could safely be made, whose task it was to oversee the unfolding of the drama, offering at certain moments facilitations in the right direction.

Through the analytic work, we observed a process by which, alongside an able, creative but vulnerable self, another, more pernicious self would emerge, which we came to understand as a defensive manoeuvre aimed at protecting the more vulnerable self. The destructive version would attack the creative one to which it was linked, in order to establish an insurance against those inevitable attacks she encountered when seeking to relate to her external objects, particularly to her mother and her father. She thereby created a closed oppositional system, in which one component attacked another. Each component was imagined as an embodied figure, with certain specific attributes and a name. Because she was unable to metabolize highly noxious experiences, she engaged in long bouts of anorectic and bulimic activity, which had only been relieved during her pregnancies and in sustained periods throughout her analysis, although not without clear lapses during the course of our work together. Her greatest fear was that, should she be able to overcome this automatic form of self attack, she would only do so at another's expense, either mine or her children's. On the other hand, to remain as she was felt tantamount to an attack on me and on her efforts to transform the ground of her object relations, and the very real possibility that she would put her children's future capacities for healthy *coniunctio* at stake, despite the considerable inner sacrifices she had made to ensure the opposite outcome. The overarching image was that any coupling, whether within or between, inevitably resulted in the poisoning of the one element by the other, such that any attempt to achieve healthy relatedness was

doomed to fail. This pertained both to her inner and outer relationships. Only by observing the strictest inner control and by submitting to a horrifyingly persecuting internal dictator, could any guarantee of safety be maintained.

An intelligent woman who had chosen to bring up her family rather than embark on a career, she had grown unaccustomed to expressing her creativity outside the home, thus making it difficult to embark on any external activities, even though her family no longer required her constant attention. Thinking became unavailable in the presence of others who might evoke the need for her to retreat behind a defensive structure. At those times, she was liable to be flooded with phantasies in which a denigrating internal figure would deprecate her attempts to be a separate person, with thoughts and ideas of her own. In Rosenfeld's (1971) terms, she was hostage to a Mafia gang, graphically illustrated by the woodcut in Figure 6.3, which offered protection from the experience of nameless and horrifying states of disintegration and anxiety in exchange for complete identification with the persecuting inner gang. Exploration of the relationship between paternal thinking and the nurturing breast showed successive refusals to bring together their mutual functions and so create a combined object, a thinking breast, thus



Figure 6.3: The "protection" of the Mafia gang

perpetrating internally the external lack of conjunction. This inner experience was reinforced by a real parental situation in which neither parent was experienced as a life-enhancing object capable of any positive *coniunctio*.

Mrs A would describe how, without the help of a functioning maternal reverie, an urgency would grow inside to get rid of noxious, noisy, anxious maternal ego fragments. When she learned that she could vomit up actual crammed-in food, she was left with the experience of having created for herself a sense of lightness, clarity, and freedom, and the feeling of enormous relief, to which she became habituated and then addicted. This she called her "slipping-through-the-raindrops" self, an almost two-dimensional existence, which was as close as possible to feeling totally in control of herself. There, in her thin ethereal state, she was not encumbered by the impediments of flesh, curves, roundness or solidity of any kind, a heaviness that made her feel at the mercy of her internal predators. Any extra flesh was carrion for the attackers and had to be brutally lopped off. For a long time, the "slipping-through-the-raindrops" self was experienced as a sympathetic helper who would ensure her survival in the face of an internal witch hunt, while at the same time enabling her to elude the mother's attempts to evacuate her noxious inner world into her daughter. The mother's world seemed populated by contents that represented paranoid anxieties of which she, the mother, seemed totally out of control. By creating the "slipping-through-the-raindrops" self, Mrs A felt that the mother's contents could not be pushed into her any longer as they had been in the past. Thus, she avoided the requirement to act as a mother to her own mother, transforming the mother's bad objects through her own mental capacities, and robbing her of her ability to be in touch with her own thinking.

A series of inner personalities were delineated in the face of repeated experiences of annihilation through her identification with the paranoid anxieties projected into her by a mother whose thought processes were essentially out of control unless they were organized by the gratification of her own narcissistic needs. Mrs A seemed to have been able to overcome this early trauma to some extent because, endowed with a capacity for good-enough *coniunctio*, she could respond to a reliable nanny who had been provided during the first five years of her life, and who had been able to give her a sense of good-enough nurturing. However, the nanny left the family when

Mrs A was five, promising the distressed little girl that "everything would be all right". Mrs A waited and waited for "everything to be all right". But eventually she realized that this was not to be, the nanny would not return to rescue her, and she retreated into herself psychically, to the original narcissistic wound, and there gave birth to a figure that personified the experience of her bad self. Later this figure acquired a name, the "pubic baby", which summed up the overall experience of her bad, unwanted self. The "pubic baby" was so named because of her own dark hair and eyes, the opposite to her mother's blonde, blue-eyed colouring. Because of the narcissistic need for her child to reflect back to her a desirable blonde, blue-eyed self, the mother constantly sought to transform her daughter into a narcissistic replica, while at the same time indicating that the task was impossible. Thus, the dark features of the patient became identified with denigrated shadow aspects, and the "pubic baby" became the source of a series of negative inner personalities. Nevertheless, although the "pubic baby" was endowed with negative, anti-libidinal aspects, there was at the same time a genuine sense of care and concern for this rejected self on the part of the patient. Thus, her allegiance to the "pubic baby" ensured at the same time her psychological survival by registering and cleaving to her own identity, however negative it was felt to be.

The picture grew up between us of an original good-enough primary self experience, represented by a figure that she called "Surefoot". However, this experience was transformed under the pressure of cumulative trauma into a negative force that offered protection from further pain, but at the price of a psychological take-over, demanding complete obedience in return for a promise of survival. Further divisions occurred, which organized psychological experience according to pairs of opposites, in which one partner would be the strong, dictatorial, sadistic figure, and the other would be the weak, impotent, masochistic figure. The noisy, tumultuous inner world that they created ensured that any attempts to relate through the depressive position, to integrate and grow, and indeed to think, were immediately attacked by the representatives of the internal group that protected the "pubic baby". There were constant battles, where the "cocky one" attacked the "cowed one", the "whiplash person" attacked the "beaten-to-a-pulp person", the "saboteur" attacked the "terrified person".

Every once in a while, “Surefoot” would make his return, coming over the hill, offering contact with her self that continued overall, despite many setbacks, to develop and grow in a teleological process, making positive choices and ensuring positive outcomes for her self. Her individuation continued.

Much of the analytic work consisted of detailing the attributes of each warring pair (Figure 6.4). The elaboration was in itself therapeutic in that it gave shape to what was felt previously as an inchoate mass of instinctual and emotional responses. The calling forth of the mental contents seemed in itself mutative, such that spontaneously, after sufficient time in a protective and protected analytic space that was experienced as consistently benign, regardless of the vagaries mentioned earlier, there emerged a third position where thinking was possible, from which she was able to mediate the dramatic effects of the “not- so-silent couples” within. She likened herself to a chrysalis that suddenly becomes a butterfly, although she knew that there had been many stages of transformation along the way. It was as if at each point where delineations of internal figures were met, they became the points of future growth.

The primitive primal scene fantasies of very young children, and the ways in which they are impacted upon by real experiences in the external world, form the basis for all future *coniunctio* capacities.



Figure 6.4: The anti-libidinal ego sub-divides into warring opposites

The life-and-death situation that pertained when Mrs A accepted an identification with a "pubic baby" that led to a series of warring opposites reflected an experience of cumulative trauma, the sources of which were both internal and external. The real mother no doubt contributed to an inner experience of hysterical, intrusive appropriation and the father to the inner experience of weak, contemptuous, and contemptible emasculation. The fact that she had been able to achieve a much more than good-enough capacity to parent her own children, despite the raging couples buried at war within, attests to a primary capacity for a benign and creative *coniunctio* that has remained with her overall, although, at certain points in her life, it deserted her in the face of the noisy, clamorous battlesounds of the warring couples.

I have described some aspects of a long process by which Mrs A responded to the experience of cumulative trauma by a series of choices, personified by a series of internal couples, the creation of which ensured psychological survival while at the same time erecting defences of her self which were eventually experienced as blocks on the way to greater psychological integration. The notion of primary splitting, whether it be of the ego or of the self, has been a feature of both psychoanalysis and analytical psychology through the decades. The view being offered here reinforces recent psychoanalytic work that demonstrates that primitive splitting mechanisms and their psychological representations cannot be understood within ego theory alone, but require a concept of the self which is teleological. The teleological dimension, originally found in Jung's work, is required if we are to understand the relative capacities of individuals to choose either more life enhancing or death instinctive and self destructive internal or external libidinal object choices. The drama that unfolded in the consulting room was a battle of mammoth proportions in which Mrs A was again and again faced with life and death decisions between choosing or forswearing steps in the individuation of her self, between choosing for or against what Symington has called "the lifegiver".

The coniunctio, the self, and paired internal objects

Let us turn to Jung for an early description of how internal objects form in the psyche and operate there:

... they are representations which have arisen from the conjunction of parental peculiarities with the individual disposition of the child. The imagos are activated and varied in every possible manner by an energy which likewise pertains to the individual; it derives from the sphere of instinct and expresses itself as instinctuality. This dynamism is represented [mentally] ... by ... symbols.

(Jung, 1912, para. 505)

In Chapter 2, I developed the idea that the dialectical model can provide us with a schematic explanation for the processes that occur within individuals and between individuals that takes account of the role of conflict and the play between opposites, while at the same time achieving steps in the move towards greater and greater integration over time. Thinking about the evolution of the personality, the dialectical model, with its elements of thesis, antithesis and synthesis, provides a way of viewing the incremental steps that take place as a result of the collision of opposite experiences (good/bad, separate/merged, through an infinite list of polarities) and how they gradually might achieve an internal synthesis. Implied in the model is an explanation of how a failure to develop might occur, when breakdown or a rigid defensiveness would arise through a conflict of opposites with too great pressure on the system and without a means of synthesis. If the archetypal image of relatedness is most universally conceived of in terms of phantasies of parental intercourse, then the quality of the observing self in relation to the couple will both impact on the coupling as well as be influenced by it. Psychologically, these attempts to control impingements from the internal or external environments that threaten the integrity of the self can often be experienced as autonomous figures with attributes, intentions, and motivations towards another object which itself can be either internal or external.

One fundamental rendering of the archetype of the *coniunctio* is expressed in the ubiquitous imagery of the container/contained, as studied by Jung in his alchemical investigations. Here, Jung used the metaphors found in the writings of those earliest unknowing psychologists, the alchemists, to understand the myriad and varied combinations of elements that make up a relating couple, and their transformations within the human psyche. If the container/contained

is not functioning well enough, then psychological catastrophe equivalent to disintegration or dismemberment occurs, along with the concomitant attempts by the flailing psyche in distress to reconstitute some balance and order. Usually these attempts are required to be cast in extreme ways, to match the sense of catastrophe that is occurring, and this happens often in bodily terms. One such way is the forceful evacuation of bad affects and their objects, whether this is seen in the smelly stools of a distressed infant or the eating/vomiting cycle of the anorectic or bulimic sufferer. In Bion's terms, the catastrophic *mêlée* of confused and terrifying emotions and sensations must be processed by the reverie of the mother into alpha elements to which the infant can projectively identify.

In the consulting room as well, within the transference and countertransference, a series of more or less unconscious couples emerge. Jung chose alchemy as the vehicle through which to explore those elements in the psyche that could be observed in the transference/countertransference, that classic example of *coniunctio*, *par excellence*. Much of alchemical imagery is centred around the *coniunctio*, which illustrates a meeting within the *vas hermeticum* of base or primitive psychic elements and the processes they undergo in a series of transformations from base to precious substances. We could understand the alchemical vessel as the analytic or therapeutic setting, and the elements to be transformed as the myriad conscious and unconscious figures of both patient and analyst. In alchemy, the elements to be combined are conceived of as opposites, the combination leading the alchemist to the production of something new, the *tertium quid non datur*, the new element not present at the outset. The new condition was unnatural, in the sense of not being found naturally. The alchemical metaphor is rich in its potentialities for viewing the processes that occur within any relationship, particularly that within the transference, because it is concerned, in a similar way to the dialectical vision, with how individual figures, inside and/or outside of the personality, influence each other, impact on each other, and how their experiences are internalized by each other: what we call the various modes of projection, identification, introjection, and projective identification. Jung clearly valued the openness of therapist and patient to responses and changes in each other:

Hence the personalities of doctor and patient are often infinitely more important for the outcome of the treatment than what the doctor says and thinks. . . . For two personalities to meet is like mixing two different chemical substances: if there is any combination at all, both are transformed. In any effective psychological treatment the doctor is bound to influence the patient; but this influence can only take place if the patient has a reciprocal influence on the doctor. You can exert no influence if you are not susceptible to influence.

(Jung, 1946, para. 163)

Two further dominant images linked to the present theme, and studied extensively by Jung in alchemical texts, are those of the hermaphrodite, a combined male–female image, unconscious and lacking differentiation, and the androgyne, the integration of male and female aspects in conscious balance (Figure 6.5). They are seen, in clinical material, in terms of the wish to merge, at the undifferentiated hermaphroditic end of the spectrum. The more differentiated androgyne imagery, often contained in dream and other material, can point to vicissitudes and variations in the *coniunctio*. It is possible to think of the development from less to more differentiated imagery



Figure 6.5: The creative multi-faceted self

as being achieved in part through processes facilitating the formation of what Schwartz-Salant has called the subtle body. An unconscious couple, separate from but connected to the couple in the consulting room, is created and interact together. This occurs by virtue of the consistent therapeutic setting that acts as a container, and the subtle communications that can occur through the interplay of projective identification, or, in Jung's terms, through *participation mystique*:

Projective identification can initiate the process of gaining access to, and transforming, interactive fields of linking or relating. These fields are imaged, for example, by the couples in the *Rosarium*. The alchemical process is devoted to overcoming the dangers of fusion states, of the tendency to concretize processes in the third area into something belonging to the ego.

(Schwartz-Salant, 1988, p. 44)

Marital or long-term partnership is a further example, wherein a relationship is built up over time and across major life occurrences. It is imaged in the variations of the *coniunctio*, and is mirrored in the analytic relationship. *Hierosgamos*, the image of the *coniunctio* of the sacred marriage, is visioned, in alchemical terms, as the meeting of opposite elements (male and female), which unite to produce a third substance. In a marriage, it may be an actual child. At the symbolic level, the partners will engage in exchanges which will lead to internal transformations that could not have occurred without the other partner. Within the partnership, conscious and unconscious couplings will take place over time, leading to enactments of various forms of the shared unconscious phantasy (Williams, 1989).

Conclusion

We have now come full circle, in developmental terms, and return to the image of the mother and infant who form a nurturing couple, with negative as well as positive experiences of each other, and who, with each act of coming together, create a joint third element, each one for the other, as aspects of the subtle body that transcend each as separate individuals but contain the potentiality for their further mutual and individual differentiations and developments as re-internalized by each.

Winnicott provided a statement of early instances of this most subtle and complex interaction in the following apt and aptly paradoxical quote:

What does the baby see when he or she looks in the mother's face? I am suggesting that, ordinarily, what the baby sees is himself or herself. In other words, the mother is looking at the baby and *what she looks like is related to what she sees there.*

(Winnicott, 1967, p. 131)

In 1935, Jung gave a series of five lectures at the Tavistock Clinic, which was attended by notables such as W. R. Bion, H. G. Baynes, Hugh Crichton-Miller (founder of the Tavistock), and others. At one point, he addressed the assembly with the following words:

. . . The so called unity of consciousness is an illusion. It is really a wish-dream. We like to think that we are one; but we are not, most decidedly not. We are not really masters in our house. We like to believe in our will-power and in our energy and in what we can do: but when it comes to a real show-down we find that we can do it only to a certain extent, because we are hampered by those little devils the complexes. Complexes are autonomous groups of associations that have a tendency to move by themselves, to live their own life apart from our intentions. I hold that our personal unconscious, as well as the collective unconscious, consists of an indefinite, because unknown, number of complexes or fragmentary personalities.

(Jung, 1935, p81)

Jung referred to the complexes in terms similar to the present discussion concerning the *coniunctio* as an autonomous creation with bipolar attributes. It follows that a "part self" is created to which another aspect of the complex, also a "part self" and often an opposite, is in relationship. I am proposing the view that, given the ubiquitous framework of the phantasy of opposites in various combinations, the psyche can be thought of as being structured as a couple in a notionally infinite variety of relations, an elaboration of the view of the unconscious as consisting of an "indefinite, because unknown, number of complexes" as stated in the quote by Jung

above. This would provide us with a concept of the self that depended, for the evolution of the internal experience of the self, on the idea of the self as a unique individual, arising from a primary integrate, and, at the same time, on the experience of an internal and external parental couple in interaction and intercourse in all its various forms and qualities. This would lead us away from the need to adhere to a strictly plural view of the psyche to one in which a sense of unique individuality is possible at the very moment when the self can experience itself in all its richness, variation, contradiction, and paradox. It would also provide us with a way of understanding how psychological transformation can take place within an individual, providing a unified model of the self that includes both the notion of a primary integrate with an inborn and unique combination of qualities and capacities, as well as that of many selves in dynamic and oppositional combination. This would offer the ground, or matrix, for understanding how acts of transformation can occur as the result of an "I" that has a unique personal identity and is also responsive to influence from external and internal sources.

Thus, however they are denoted, whether as complexes, sub-personalities, or many selves, these are the varied aspects of an individual, with, at its source an original integrate. This original integrate, over time and through the dynamic interaction between personal capacities and the accumulation of internal contents and encounters with the myriad aspects of the external environment, builds up a sense of the person we are. These interactive processes are imbued with great subtlety and complexity which accumulate throughout an individual's history to endow them with the sense of being themselves. It represents a coupling that allows the use of the word "I" with a more or less stable sense of conviction and coherence, while acknowledging that each discrete act of "I" does not correspond to the whole of "me". This sense of coherence of the "I" would not be tantamount to a denial of internal contradiction, dichotomy, unconscious repression, splitting, or projection, in a fretful attempt to eradicate the discomforts of an inner sense of plurality. Rather, it offers a way of viewing the "I" as able to maintain a relationship with itself and so with others, no matter how troubled such relationships might be, based on good faith and supportive of future internal transformation.

The self in transformation: the passage from a two- to a three-dimensional internal world

Whether we call it individuation, development, or psychological change, the idea of the transformation of the self is central to the analytic endeavour. But what is transformation? And how shall we think of the self that is in the process of transformation? What is happening when transformation is impeded? It is axiomatic that patients come into analysis because they seek to develop and transform their inner and often their outer environment. They attend more or less intensively over a considerable period of time in the face of often the most arduous circumstances and pitched resistances, both internal and external, surrendering themselves to a process that is in every respect experienced and expressed in immediate, questing, intense, and ardent ways. This passion for change that brings the patient faithfully to the consulting room can quickly turn into its opposite, into another order of experience, that can feel to us more like a passion to destroy, dismember, and diminish or detach from the analytic work that has taken place, robbing the patient of the fruits of the potential transformations that the patient along with the analyst had worked for so assiduously.

Change occurs only perilously, and as clinicians we are aware of the experience that, as much as there are positive forces that seek to move the psyche into the future, there are powerful retrograde forces that seek to prevent such movement. These inevitably jostling positions often create the experience of a shared area of tumult and turmoil that requires engagement from both parties in the analytic consulting room.

When we consider the nature of psychological change, individuation, and transformation, and how these may happen within individuals at the deepest levels of their being, we immediately face questions concerning the nature and functioning of the self. These issues reach deep into the history of psychoanalysis and analytical psychology. In his work on the transformation of libido (Jung, 1912), Jung addressed the nature of the transformation of psychic energy and the conditions under which transformation can occur within the self. In developing these concepts, Jung was engaged at three levels of discourse: firstly, he was in the midst of his own dramatic self transformation, his own self analysis; secondly, he was engaged in his own theoretical enquiries that would lead him to propose radical alterations in Freud's psychoanalytic theory concerning the purely psychosexual nature of libidinal energy, thus broadening and deepening understanding of the dynamic nature of psychic energy; and, thirdly, the theory itself that Jung was developing focused on the nature of psychological change and transformation.

Jung showed that mental events could be understood as taking place along a continuum that stretched from the earliest instinctual body-based drives through to the most conscious, purposeful cultural creations of which humankind was capable. At the heart of the idea of the transformation of the energies of the psyche–soma unit, which we call the self, rested the governing teleological principle: that the self possessed purpose and meaning demonstrable throughout the various stages in its development and transformation. Furthermore, if, as Jung argued, the archetypes were based in both instinct and psyche, then the self, a primary archetype, was clearly rooted in the psyche–soma unit. This view was elaborated by Fordham, providing the basis for the developmental model concerning the primary self and its deintegrates, as discussed in Chapter 4.

For decades, theorizing about the self in the field of depth psychology had remained essentially a Jungian endeavour. It has become evident in all analytic circles, however, that it is not possible to address some of the most distressing phenomena that arise from the disorders of the psyche–soma entity met in the consulting room without a concept of the self and the ways in which it may or may not change. It is now prevalent to think of those disorders termed narcissistic, borderline, and psychotic as disorders of the self. But we then return to the question, how do we conceive of the self? Jung

thought of it as an integrating function of the personality. But is it liable to be divided, as in “the divided self”? And, if so, how divided? One vertical split? Many selves? Multiple personalities? A primary self that evolves over time, one firm identity but many metamorphoses? And how does the self extend its ways of knowing and perceiving itself and the world, from body to soul, from the basic drives through to the most spiritual experiences?

Jung offered a view of the self that contained dual aspects, a kind of alpha and omega of the self. On the one hand, the self was conceived as the core identity of an individual, and, as such, was imaged by the archetype of the Divine Child:

The symbols of the self arise in the depths of the body and they express its materiality every bit as much as the structure of the perceiving consciousness. The symbol is thus a living body, *corpus et anima*, hence the “child” is such an apt formula for the symbol.

(Jung, 1959/1968, para. 291)

On the other hand, the self represented the organizing aspect, the whole of the personality, responsible for the individual’s progression through his or her destiny, towards increasingly integrated or individuated states of being. In this aspect, the self was imaged by the mandala figure. Essential to Jung’s view was that the transformation of the self happens through a teleological progression over time, from a state of psyche–soma identity, through to an increasingly differentiated integration of complex internally and externally derived experiences, never complete but always striving towards wholeness.

Jung’s idea of psychological transformation arose from his teleological and dialectical view of change as occurring through the conflict of opposites leading to moments or stages synthesis. His notion was of a self that, like the embryo, contains from its beginning the seeds of its ultimate identity, a vision that encompassed the whole life span, extending at either end backwards and forwards in space and time via the generations, both biological and cultural. In Jung’s theory, under the right conditions the self possessed the means necessary for its own transformation through the processes of the transcendent function. Thus, embedded in any psychological state

could be found the sources of growth and renewal. The psyche accomplishes its transformation through the creation of symbols that are capable of bringing together opposing aspects of the self.

Inevitably, there were further areas of psychological enquiry that later Jungians would address. These included the important task of achieving a better understanding of the infantile components in an individual's history, which Fordham (1985 and earlier) and his colleagues developed in the model of the primary self and its transformation through successive deintegrations and reintegrations. This ensured that Jungians had a powerful explanatory model for the understanding of early mental development. Another area that needed to be addressed was how the transformation process occurs throughout the life cycle from conception to death, and in particular, an understanding of how the self's capacity and desire for change may be undermined by the ubiquitous propensity embedded within the totality of the self to attack and to subvert its own efforts towards growth and renewal. (Some of these processes are discussed in Chapter 6). A further area that needed exploration and elaboration was the impact of intersubjective experiences in the self's development and capacities for transformation.

Theoretical discussion

We know, from analytic work with adults and children, and the inferences drawn from infant observations, that in extreme states of stress, when the ongoingness of the psyche–soma system is put in danger and the self's very survival is in question, defences of the self (Fordham, 1974) are constructed as a protection. However, this can cause the self's existence to be so constrained that transformation of the self is impossible, even though survival may thereby be ensured. In certain abusive, traumatic, or overly stressful and deprived states, for the self to go on being at all requires extraordinary conditions and stratagems. What is involved is nothing less than the demolition, at the basic level of the psyche–soma unit, of the grounds for transformation of the self to occur in relation to another in space and time, in favour of a two-dimensional environment in which inner and outer processes and interactions are highly controlled, leaving only enough space for the self, but nothing and no one else, to exist: an existence in a void.

I use the image of two dimensions to denote a plane, with no depth or contour, and no space for another, a "solitary confinement" of the self. Preemptive, defensive manoeuvres take place to ensure the protection and survival of the self in the face of the psychic risks necessarily involved in undergoing the processes of transformation and individuation. This happens because the ongoing viability of the self is threatened precisely by the evocation of the circumstances of the early traumatic experiences that had brought about the necessity to erect the original defences, that is, the self's readiness to be open to the reality of the existence and impact of another on itself. It is this readiness and openness which must be extinguished. Indeed, the fear of taking such a risk is often the source of the inevitable attacks on analysis that account for various phenomena described clinically in such theories as "negative therapeutic reaction", "malignant regression", "death instinct", "anti-libidinal ego", and the like. Essentially, and at a deep level of psychic functioning, this amounts to a foreclosure on object relatedness in preference for an existence in a two-dimensional solitary confinement, where all that can really be known about are the conditions necessary for the survival of the self, fuelled by the conviction that to risk being open to experiencing the reality of another, an existence in three dimensions, is to risk psychological annihilation. By contrast, I use the image of three dimensions to denote the interactive space created by the self's readiness and openness to relating with another. This position allows for mutuality, change, and exchange, within an open-ended relational system. It is where the transformation of the self can occur.

Jung's theory of the bipolarity of the archetype has provided us with the background principle by which we are able to formulate the possible circumstances in which the self might go on surviving in the face of unconscionable pressure by opting for life lived in two dimensions. Jung showed that archetypal images contain both positive and negative aspects: for example, the Great Mother and the Devouring Mother, or, in the terminology of Melanie Klein (1946), the good and bad breast. The defensive splitting mechanisms that occur in unconscious phantasy in the paranoid/schizoid position, as described by Klein, are similar in structure and function to the duality of the archetypal components of the psyche. In Klein's conception, the possibility for transformation resides in the

depressive position where whole objects can be conceived. Although Klein did not envisage a sense of the teleological nature of the struggle between opposites which would lead to transformation from within that struggle, as did Jung, nevertheless, for Klein, the achievement of the depressive position is eventually possible through the struggle of the opposition between loving and hating via guilt and the wish for reparation.

In the dire internal circumstances that I am addressing, the self must mobilize a defensive structure that uses omnipotent, positive, and negative attributes in order to secure its own survival, thereby creating a rigid, two-dimensional oppositional world in which transformation is precluded because any change is anticipated as threatening the self's survival. Each part of the defensive structure assumes its own personifications, its own disguises, often in pairs of opposites (for example, a violent version versus a vulnerable version of the defensive pair). A young and vulnerable ego is thereby protected, but by necessity it cannot develop and grow, since a defence is always at the ready to meet and defeat any attempt to alter the grounds of the two-dimensional existence into which no inter- or intrapsychic movement is admitted. A battle ensues between the different manifestations for predominance, absorbing much libidinal energy and creating a state of deep division within the self. Rosenfeld (1971) has described this state as creating the illusion of protecting the self, when, in fact, it is a manifestation of the death instinct. Kalsched (1996) has provided a Jungian view of this situation in which the life-saving nature of the defences is emphasized, with the purpose of preventing the unthinkable dissolution of the self, a self-portrait of the psyche's own archaic defences, its self-care system.

This situation is maintained by a profoundly held belief that complete control is necessary if survival is to be guaranteed, requiring the self to abolish all connection to and intercourse with more life-enhancing experiences with the outer world, since they are thought to be deeply unreliable, unsafe to be entrusted with the vital task of ensuring the self's survival. Instead, in this divided state, the self is persuaded that its existence depends on its reliance on a watertight internal system of emergency services and internal advisors which provide an immediate and monolithic defence against the danger of attack on or dissolution of the self through mutuality with another.

Any question of relinquishing or sacrificing this monolithic defence through relating, for example to the analyst, sets off a pitched inner battle, a life-and-death struggle for possession of the patient's ongoing being, spirit, self, body, and soul as described in Chapter 6.

For any change in these harrowing circumstances to occur, a sacrifice must take place of both the positive and the negative attributes of the defence, so that a synthesis and a new integration may be achieved. This passage from a two-dimensional to a three-dimensional existence is possible only under the most gruelling conditions. The psychological situation in which this sacrifice is demanded is located at the very core of the self and arouses anxieties concerning the self's survival.

Following Fordham (1974), the understanding of the ubiquity of early infantile defences of the self in cases when ordinary relating has been perverted was further developed by Ledermann (1979) in her discussion of narcissistic disorders. In the circumstance of a disastrously bad fit between infant and mother, when healthy deintegration and reintegration cannot take place and the very survival of the self is at stake, the self's integrity may be preserved by erecting an early defence system, prior to the formation of the ego, which requires the annihilation of the breast from the internal world of the infant, that is, the annihilation of the possibility of the self experiencing not-self. This manoeuvre has the positive outcome of ensuring that the self remains intact rather than disintegrated, even in the face of catastrophic deprivation. But at the same time it has the negative outcome of ensuring that processes of relating to, and reintroducing encounters with, the external world are rendered null and void, an immunity to the self's own experience. Through the processes of identification and internalization, the excessive deprivations in the external environment have been introjected, creating an internal experience of a void. The self feels itself alone in the universe, and at its core finds a void, an empty, blank space, instead of a rich array of internal objects and a secure sense of self.

Case example

Let us consider the internal situation of a woman in the throes of a life-and-death struggle. She has endured in early life a series of inordinate losses and traumatic experiences characterized by intrusions and abandonments by important caregivers. Through the

analytic work, we have reconstructed a picture in which she had no sense of being thought about by her mother, no experience of another who could reflect back to her a sense of a self that could be known about, identified, and restored to her mother's mind. In vivid contrast, her father was ferocious, angry, and capable of annihilating and intrusive behaviour, having wilfully destroyed his own capacities for an early artistic career. He opted instead for a steady but empty clerical job, and went on to take out his frustrations and furies at lost creativity by physically and emotionally abusing his children while idealizing his psychologically vacant but beautiful wife. My patient escaped the largest part of his abusive behaviour through her own wits and an evolved sensitivity to his moment-to-moment needs. She was, of course, a witness/victim to the abuse of her siblings.

She learned to compensate for the early failures in relating by developing a completely self-reliant self, having early on begun to invent deeply creative ways of providing self-nourishment. These included an early and deep appreciation of nature and the arts, a facility for sports, and, later, a successful professional and family life. From all these sources she had drawn the means to sustain a rich and productive existence. But at a certain moment, a dramatic breakdown in the internal self-care system occurred, psychologically and physically. Her self had simply exhausted its own resources, and it now became a question of real survival. It could have been a psychological crisis, a physical illness, an accident with dire consequences, or someone in her life might have had to carry the disaster, in order that she realize it was no longer possible to go on depending upon using up constantly depleting energy and personal resources for mere survival. A new basis for living would have to be found if life was to continue.

When this revolution takes place in the consulting room, through states of deep and regressive dependency, we are witness to a dramatic transformation from one situation, in which it was not possible to experience the existence of another mind capable of thinking empathically about the self, to another situation in which two minds might be active and in relation to one another. This is a transformation from total investment in the omnipotent phantasy of self-sufficiency to a realization that dependency, inter-dependency, and mutuality are possible and indeed essential to survival of the self. This recognition is a requisite to the birth of true consciousness of

the self, since the self cannot develop a capacity to know itself except in relation to another. But this recognition is excruciatingly dangerous to accomplish. To bring about such a change requires that the analyst be drawn into the two-dimensional entrapping and driven world of the patient, in order to experience and thus for her to know the force of the torturing dictats and threats that are proffered as guarantees of survival.

The patient was stricken with the deep anguish, of which she was usually unconscious but which had infiltrated her internal world and her physical well-being, of a life of solitary existence in an empty universe. She lived out a constant repetition of her earliest experiences of not being acknowledged by her mother, so that it was to her own self that she looked for containment and self experience, and from which she took sustenance. She had no deeply felt conviction that she shared the universe with anyone else. She would nourish her self by identifying with a landscape, a piece of music, or the sound of her analyst's voice, to create the illusion of a nourishing relationship, which would then act as a substitute for a real, shared experience. It was an imaginative internal creation through imitation of the relationship that she never had as an infant, but had deeply longed for.

She was overcome by terrifying archetypal experiences, suffused with extremely toxic internal material with no way of metabolizing it on her own. She needed to find help; but at the same time she felt completely unable to relinquish her conviction that she survived solely by exerting total control over her existence in space and time, by ignoring her physical and emotional needs, and thereby overstretching her physical and mental resources. She was under a double attack.

She recalled a dream she had had at ten years of age, in which she felt that nothing was fixed in the universe and that she was spinning through outer space with no point of reference. Similarly, at weekends and holiday breaks, I became completely lost to her, and she returned to the empty universe that she was accustomed to inhabiting, imagining that I inhabited at those times a rich, enhancing, and gratifying world from which she was perpetually excluded.

In the period before a long summer break, she had struggled to find a way of safeguarding the knowledge she had gained of me as an analyst capable of keeping her reliably in my mind, such that I

could impart to her an experience of being thought about. However, over the break, her knowledge of me became lost to her. Similarly, she believed that my knowledge of her was lost to me. She had a deep belief that both our minds had disappeared in their capacity to co-exist. Consequently, as far as she was concerned, I had exited from her universe and she was left utterly alone in a cold, lifeless, unrelenting space in which the only sources of sustenance were her own ruminations. She became extremely ill.

A series of three dreams took place during the weekend at the end of a long summer break and just after her recovery from a serious medical crisis. These illustrate the quality of a life lived within a two-dimensional matrix and the attempts at transformation to a freer and more life-enhancing existence in three dimensions.

Dream 1 There is a primate in a cage eating its own vomit. Passers-by stare uncomprehendingly and unempathically at the isolated and abandoned creature.

The image was of self feeding off itself in order to live, but inevitably attacking itself in the process. The passers-by represent the original situation in which no attunement took place. They offer no sustenance, no empathy or understanding. Existence occurs in a two-dimensional, unfree environment, whereby the cage fosters an illusion of a protected, creative space, but this is a zoo, not a park; the primate is an exhibit, not free to explore and be creative, in proper contact with others.

Dream 2 She returned to a park, a childhood area of play. To the left was the air raid shelter, set in menacing surroundings “down there”, and to the right was the area where play could take place safely. She went to the area of the air raid shelter.

In associating, she remembered a bench near the air raid shelter, where once as a young child she had pointed out to a foreign man that the word “Private” inscribed on the bench was spelt wrongly. This precocious knowledge had impressed the man, which had pleased her, a powerful, narcissistic pleasure. But the danger and menace evoked by the scene remained unconscious. In the dream, she has chosen to revisit the area of the air raid shelter, this time aware of the potentially

perverted and dangerous place “down there”, in a “private place”, near to the cage-like air raid shelter that had appeared to provide a place of safety in a time of war. “Down there” is a phrase suggestive of the private genital area, the area of potential creativity as well as of potential danger. The dream represents an intermediary space between life in an enclosed, narcissistic, and possibly perverse world, and life where proper relating is a possibility.

Dream 3 There was a sense of having spent a very long time with me. A feeling of deep, safe loving suffused the dreamer with an extraordinary sense of well-being.

She was profoundly moved by the dream images, at the very moment of feeling utterly isolated and alone, of having access to an empathic figure who would be sufficiently available for a proper intercourse in a safe area to happen. There was a sense of potential transformation that felt numinous. In the process and development of the transference, experienced during the weekend before my return after the break, I had been transformed from an uncomprehending and unempathic passer-by, a visitor to a zoo, to a potentially sadistic transgressor into the patient's inner world and wreaking havoc there, through to a nurturing mother/lover who is able to perfectly respond to her need to create an experience of a self held in a state of suffusion with benign and protected ease.

This dream sequence, occurring as it did in the pivotal moment between my absence and presence, when the dreamer had been shockingly unwell, denotes the psyche's movement out of the two-dimensional state of self creation into a three-dimensional world in which the growth of the self is possible through a capacity for relatedness. Although the former self-protective situation had provided shelter in an internal and external war situation, the effects were inevitably self-abusive: the continued use of the self as a survival object had long since exhausted its own vital resources and capacities, and had become an addictive and self-referential activity with a ruminating quality. But now there were no further margins available to sustain survival, no more degrees of freedom.

The lessons of this period of transformation had to be experienced over and over again, during which time she continued her progress

through a cycle in which she found me, lost me, and refound me as an analyst who could demonstrate my ongoing relatedness to her. She was utterly surprised that I remembered, thought about, and understood her. A critical moment occurred when, in the very middle of an exceptionally bitter and despairing episode, and feeling that I had failed her miserably by my absences, she surprised herself and me with the following dream.

Dream 4 She was a little girl in bed. I stood over her and said, "I understand." She had a sense of my being in possession of my understanding of her real self that I was then able to impart to her.

She said that she felt "recovered" by me, conscious that the use of the word "recovered" imparted a sense of being found, of being protected, and of regaining health. I was becoming properly established as a self object, and available for use in the further steps that she would take along the path of her recovery, successive steps in the transformation of her inner world from a two-dimensional to a three-dimensional existence.

In such ways did she begin to accumulate experiences of her self as held in mind by me. The resources that she had come so close to sucking dry now began to be replenished. She began to take more effective care of herself. She was more able to make provision for her physical needs, which had been woefully neglected, reducing her work load and ensuring other arrangements were more supportive, especially concerning her illness.

As we approached the next long break, she dreamt the following:

Dream 5 She was perched on an examination couch in a field hospital in a war zone. She was very ill and without any vital force. Two medical consultants were in the room, but not related to her or to each other. She wondered if she could find the necessary inner force that could hold them together, and to mobilize their care of her. Then she saw that she held a beautiful blue plate on which was a slice of wholemeal bread, the kind her sister-in-law baked. It was very rudimentary but nevertheless nourishing, and she thought that she would eat it.

This dream points to the possibility that she might be gathering enough of a force field around her self to ensure that those who were responsible for her care would gravitate around her as around a centre. We could say that her experiencing self was now constellated by an organizing principle. This would be the beginning of a capacity to attract and be nourished by benign resources outside herself. Although the dream depicts that she is still in the middle of a war zone, she is enclosed in a field hospital, a protected place for treatment where she might be safe from further damage and receive the care she needs to begin to make a recovery. The double mandala in the dream, the idea of the need to create the force field of the two consultants who would gravitate around her as if around a sun (self), and the beautiful blue plate filled with nourishing wholemeal bread, another image of the self, indicates the possibility of a strengthening of her self through her capacity to receive replenishment from sources other than her own self (her sister-in-law / analyst). She was no longer eating her own vomit.

Conclusion

I have described some aspects in the processes of transformation from a two-dimensional to a three-dimensional mode of existence in a woman who had essentially used up the remaining vital resources upon which the continuation of her self depended and for whom it was a matter of life and death to find another mode of sustenance in order to have any chance of survival. For a long period of time she used processes of what she called "extrusion" in the transference, as she had in real life, in order to represent to herself an experience of a psyche-soma unity which she could then introject as a self representation. This patient had been gifted in creating an environment that sufficiently compensated for the deep deprivations of her early existence. She had learned to imitate in order to reproduce the conditions in which her mind could develop in parallel to her body, and her achievements were indeed many and valuable. But, at a certain level, we could say that in accomplishing this she had had to create a self that inhabited a two-dimensional world in which no other could be allowed entry. To engage with another would inevitably re-evolve experiences of those very circumstances that had created the original trauma which had been so catastrophic.

Although this was a strategy that had guaranteed survival for a certain and important period of time in her life, while she built up a family, important friendships, and a career, it nevertheless had precluded the possibility of a self experienced creatively in relation to another. Eventually, all the resources that she had used to develop her self were exhausted, and it had become a matter of acute urgency that she seek out the conditions in which she might find another with whom to experience mutuality. This experience was inevitably interspersed with feelings of disappointment, frustration, separation, and loss, which had to be borne and overcome. In doing so, she had to risk the humiliation and despair of the possibility of not encountering the object she so desperately needed.

This transformative task she accomplished by seeking out an intensive analysis, through which she was able to monitor whether she really did have in me an analyst whom she might trust enough to test out the possibility of allowing entry into her internal world, so as to contribute to the replenishing of her sense of self. An important hurdle had first to be crossed when I was required to demonstrate that I could survive existence in the two-dimensional claustrum with her, in her solitary confinement. This involved periods of intense pain felt by both of us when she experienced the agonizing effects of my ordinary human limitations and failures and my own need for recuperation and recovery at weekends and holidays. The gaps thereby created were almost unbearable, and so I was punished for her humiliation in face of the intensity of her narcissistic suffering. She had to experience the repetition in small doses, such as the weekend breaks, of the original monolithic environmental failure. When reconstituted in the present between us, the impact of these "small doses" of ordinary failings was indeed of mammoth proportions, equivalent to the original catastrophic failures. Only after repeated experiences of surviving these blows was she sufficiently encouraged, as well as sufficiently desperate about her own chances of survival, to go on risking allowing me to occupy with her a three-dimensional space in which her existence, as well as mine, were recognized. This included suffering in relation to me terrible psychological and physical pain, deep longings, and humiliating dependency needs which had hitherto been denied.

When early trauma has taught a young self that searching for experiences that could lead to growth and change in relation to

another is not only humiliatingly naive but also psychologically and physically dangerous, leaving the self open to damage and exploitation, the self has no other recourse but to withdraw back into its self, channelling its energies into a one-person realm, where a high degree of inventiveness may afford the self much creative energy for some crucial amount of time. This could include the years of studying, or those of bringing up a family and developing important friendships, or of building a career. The energy that might have been available for transformation of the self in relation to another is instead taken over for use by a defensive structure which divides the self in order to dominate. It thereby creates an oppositional system in which positive and negative personifications of those withdrawn energies afford ample scope for locking the self in mortal combat with itself, within a cage of its own making, where transformation of the self is disallowed. Feelings of humiliation, shame, and self-deprecation may for some time be avoided, but at the cost in the long run of increasingly vicious inner self attacks which eventually leave the self resourceless and lacerated, thus adding to the likelihood of further retraumatization.

In thinking about psychological transformation, I have had to think about the self, its defences, and how, in order to survive in the face of horrendous circumstances, the self's defensive system divides so to rule, making change impossible. If the risks involved in the transition from two- to three-dimensional existence are accepted and undertaken, the participation of the analyst will be required for the duration of the process. Then the analyst will inevitably be open to suffusion by the patient's terror of the appalling potential for retraumatization, given the inevitable failures that occur within the context of human relatedness. At the most harrowing of times, patient and analyst may feel locked together in a life-and-death struggle, the outcome of which cannot be known in advance.

Love: paradox of self and other

Unlike fictional literature, analytic literature contains relatively little about love. Of course, there are exceptions,¹ but by and large, analytical attention has addressed other, often negative, emotional states much more consistently and systematically, as if they were, for the clinician, more pressing, more interesting, more exciting, or perhaps more easily thought about. Attention to hatred, envy, jealousy, perverse and violent feelings, anxieties, depressions and psychotic states, and various forms of attacks on and retreats from the possibility of psychological transformation, has ensured that much of our analytic thinking remains focused on negative states of mind. And yet, states of loving are nothing less than the driving emotive force underpinning much of the physical development of the self and propelling much of the self's psychological development from birth until death. Love is certainly one of the primary emotions at the core of object relating, and this has deep implications for the impact of love on the relationship between patient and therapist.

The term "erotic", however, is used frequently (for example, the "erotic transference", and the far less frequently described "erotic countertransference"), as if the feeling being described is

This chapter is based on a paper presented to the Annual Conference of the Institute for Psychotherapy and Counselling, held at Fitzwilliam College, Cambridge, in July 1997. The title of the conference was "What is this thing called love: should psychotherapists love their patients?"

pathological. We see little in the analytic literature about the love that a patient might feel for their therapist, or the therapist for their patient, or indeed about the love that might be shared between them.

This chapter explores love through the principle that underlies all of the various manifestations of love: that is, the self in relation to another, a not-self. In Jungian terms, this is the self in *coniunctio*, where “the other” need not necessarily be another person but may include elements interior or exterior to the self: the *coniunctio* of inner and/or outer elements, of parts or wholes, of conscious or unconscious; what we might call internal and external object relations. It is the quality of the coming together that is important and takes up so much of what is experienced and explored in the consulting room.

A major principle that permeates Jung’s psychotherapeutic approach, and therefore the theoretical concepts that underpin it, is the teleological principle. A teleological understanding of the self offers the view that psychological events and states have purpose and meaning and may, under the right conditions, provide the means by which the self achieves not only the best available solution to date to problems confronting it, but also how it may develop and grow. This concerns the nature of change, and, in particular, the grounds on which the self attains its fullest possible actualization. The teleological principle in turn underpins Jung’s concept of the transcendent function, which provides us with a way of thinking about how the self may access the inner sources of its own creativity and maturation through the struggle and conflict between dialectical opposites and their union, when a synthesis and integration in a third thing, the *tertium quid non datur*, may be achieved. This may happen internally, and it may also happen between the self and another. It is an archetypal situation, a protophenomenon, whereby the self reaches out to bridge what is experienced as a gap between self and not-self, thereby creating a new situation as described in Chapter 2. These are the conditions in which any universal human affect, including love, may be experienced and expressed.

Of course, where there is the possibility of a coming together, there is also the possibility of a sundering. The self’s capacity to be in states of *coniunctio*, but equally to be divided against itself and against others, has a correlate in the Jungian distinction between the symbolic function and the forces of the diabolic shadow. The shadow is that aspect of the self that it seeks to disavow and project outside itself.

It is an aspect of the self felt to be “diabolic” in the sense that its Greek derivation, *dia-ballein*, suggests, to throw or tear apart, in contrast with “symbolic” which derives from *sym-ballein*, to throw together. The diabolic aspect of the psyche is essentially anti-relational, it eschews loving states of mind, and divests the symbolic function of its value and human quality. It is, instead, intent on its own triumph over the other through destruction, deprecation, dismemberment, mayhem, or death (Kalsched, 1996); the opposite of love. In contrast, the symbolic capacity signifies the possibility for integration and the symbolic life through the holding together of opposites and the creation thereby of a third thing, the fruits of particular acts of *coniunctio*. We may think of the symbol, therefore, as the manifestation of the potential for loving in its ability to unite both concrete presence and intangible meaning. In this sense, love in its different manifestations underlies the Jungian notion of the transcendent function.

Having set out the conceptual matrix into which I would like to locate my thoughts about love in this chapter, I propose to attempt to think about the earliest love situations in order to search for an understanding of the bases of love, which I assume are the primordial links to an understanding of what happens in later life, including in the consulting room. The view of love I wish to explore here is based on what we can say about the earliest affects experienced by the infant. The assumption is that the manifestations of transference and countertransference that we encounter in the consulting room contain direct links to these earliest affective sources. Inevitably, we will have to address those pre-verbal exchanges that happen between the first couple in love (the first loving couple) the mother and her infant, and the infant and its mother, which form the basis of all later exchanges. In other words, the examination of the origins of love begins at the pre-verbal level and is part of the self/other interpenetration that occurs at that time and thereafter. Can there be any evidence of earlier forms of loving than this primordial pair?

Infant observation in utero

Although we are well aware of the dangers of extrapolating from infant observation studies to adult psychological functioning, nevertheless the wealth of theoretical and clinical conceptualization

derived from this new method of enquiry has already reaped a rich harvest and will no doubt continue to do so. The following is an extract from an unusual sort of infant observation, that of an *in utero* observation made via ultrasound scan, of twins, one male, one female. Like most twins they were dizygotic and separated in the womb by a fine and very pliable membrane. The observation was made by Tavistock-trained Dr Alessandra Piontelli (1992) in Italy and I am grateful to Elizabeth Urban for drawing my attention to it.

The following extract is taken from an observation at twenty weeks *in utero*, some four and a half months after conception. I think it touches directly on the issues raised above about the primary nature and uniqueness of the self, about innate differences in character, despite the same uterine environment, about early relations between self and other, and about early manifestations of a capacity for what we could identify as expressions of loving. The little girl, Alice, was always the quieter one, more sleepy, apparently pleased to be contained by the womb environment, whereas the little boy, Luca, was always the more active of the two, initiating movement, searching out and exploring the boundaries of his uterine environment. The twins were very much wanted and accepted by the parents, who were both excited and curious about the character of each.

The little boy (Luca) seemed much more active than the girl. He kept turning and kicking and changing position and stretching his legs against the uterine wall . . . As his mother remarked, "Oh, my God! . . . look at him . . . he is so small and he already seems fed up with being in there . . ."

. . . From time to time Luca would interrupt his motor activities and seemed to turn his attention towards his sister. He reached out with his hands and through the dividing membrane he touched her face gently, and when she responded by turning her face towards him, he engaged with her for a while in a gentle, stroking, cheek-to-cheek motion. From then on we nicknamed them "the kind twins". His sister, Alice, seemed much more sluggish. Most of the time she seemed asleep, or moved her head and hands slowly, almost imperceptibly, but each time she responded to his gentle stimulation. Once he went back to his turning, stretching, and so on, however, she seemed to plunge back into her state of passivity and/or sleep.

A small extract from the twenty-fourth week:

Dr S: And this is the other twin . . . they are very close . . . their heads are in contact . . . they seem to be hugging each other . . . they still have some space at this stage . . . but they seem to like each other's contact . . . they are really very close . . . they are not Siamese though . . . they are almost certainly a boy and a girl . . . and divided by a membrane . . . nor could they become Siamese at this stage . . . they simply like each other's company . . . last time too they were hugging each other . . . look how this one keeps its hand close to the other . . .

Dr F: It is just moving its face . . . sort of stroking each other's face . . . cheek to cheek . . .

Again at thirty-six weeks:

Dr F: Look what the boy is doing! . . . he keeps banging his head against the cervix . . . he wants to get out! . . . he is rather independent this one! . . . his sister is much more quiet . . . he is also doing something with his legs . . . sort of touching his sister with them . . . rubbing his feet against hers . . . he is not kicking her though . . . they always seem to like stroking each other . . .

These twins continued their very close relationship throughout their childhood, yet each child retained the dominant features of their personalities as observed *in utero*, the little boy bright, precocious, seeking freedom to grow but still very attached and loving towards his sister, and the little girl, slower, more passive, more dependent, but nevertheless related to and loving and responsive towards her brother. Throughout, the parents demonstrated their continuing capacity to relish and hold in mind the differences in their personalities, and they went on to provide the home and school environments that suited each one.

The extracts show that from at least five months after conception there is a capacity for repeated exchanges between the twins, *in utero*, that appear to be loving, tender, and that demonstrate an attachment to each other that is confirmed *post partum*. Equally demonstrated are the very different temperaments of each, such that we might say that a compensatory relationship developed between them, as if they

had somehow found a kind of partnership between the thrusting, seeking, more extroverted aspects and the more introverted, quiet, passive aspects of a combined personality. The twins began their uterine development with different but compensatory temperaments, and at the same time they were sensitive to each other, regularly seeking each other out with tender demonstrations of physical contact. *They were two separate selves within one relationship.* During foetal gestation, the attitude of the parents towards their infants and between themselves was reflective of the quality of the relationship between the infants *in utero* and *post partum*. A regular and consistent pattern of being and behaving developed *in utero* differently for each twin, but at certain and regular moments they would join in a mutual exchange.

Lest we are tempted to think of the situation *in utero* in idealized terms via the example of the "kind twins", Piontelli also provides ultrasound observation of other sets of twins with much more problematic *in utero* relationships, including fighting, parasitism, and other kinds of aggressive power struggles or depressive withdrawals. These negative modes of relating are seen to continue *post partum* between the twins and within their families, in large measure reflective of the emotional climate pertaining in the extra-uterine environment. We might conjecture along with Piontelli that the primordial bases of those human emotions and responses that later develop into states that can be identified as loving and hating might find their roots in these earliest emotional climates in the intra- and extra-uterine environment.

Fordham (1988) has described a model of the self that might explain the dynamic pattern in the twinship observed by Piontelli between tender, shared relatedness on the one hand and separate individual behaviour on the other. In Fordham's model, the self oscillates rhythmically between states of deintegration and reintegration, a dynamic pattern observable from infancy throughout life. He writes:

In essence, deintegration and reintegration describe a fluctuating state of learning in which the infant opens itself to new experiences and then withdraws in order to reintegrate and consolidate those experiences. During a deintegrative activity, the infant maintains continuity with the main body of the self (or its centre),

while venturing into the external world to accumulate experience in motor and sensory stimulation . . .

(Fordham, 1988, p. 64)

Astor (1995) describes the process as follows:

Fordham called the dynamic of the self deintegration and reintegration since the self was an integrate. Deintegration was the term used when referring to the energy going outwards towards objects and reintegration when the energy was returning to the self.

(Astor, 1995, p. 237)

The observation cited above suggests that this pattern is already well established *in utero*, such that the self, from within its own self, at certain moments ceases being in a state of interiority on its own, and reaches out for, finds, and exchanges something with another entity, a not-self, eventually returning back to itself. This searching–finding–exchanging–returning-to-self protophenomenon, constructs patterns of being and behaving, and is an innate, archetypal, deep structural capacity from the start. If the baby is a singleton, it can be observed *in utero* to be responsive and related to aspects of its uterine environment, both through its own behaviour, movement, patterns of sleeping and waking, as well as through the sensory stimulation coming from within and outside the mother's body, and also through the provisions unique to each intra-uterine milieu (the umbilical cord, placenta, amniotic fluid, and the various sources of extra-uterine stimulation), sounds, vibrations, movement, and changes in the composition of the uterine environment during the nine months of gestation. The view of this early situation that I am offering here is of a primary self and, at the same time, a primary capacity for relatedness from the earliest weeks after conception. Furthermore, and of particular interest to us, there is evidence of affectional states, including loving states, from very early on, in fact from as early as it is possible to observe *in utero*.

This *in utero* responsiveness to, and capacity to reach out towards, another, a kind of primordial mutual containment, attachment, and attunement, may account for the often stunning evidence we glean from our patients. Despite their own experiences of deprivations and

deficits in the early caring environment, and despite inevitable difficulties during various stages of development, they are sometimes able to muster capacities for loving or enhancing relationships in later life that could not have been predicted from their remembered histories.

Further evidence from studies of neonates show that the foundation of shared affects and emotions is located very early, and certainly pre-verbally. The work of Stern (1985), Brazelton et al. (1975), Trevarthen (1980), Gaddini (1992), and many others whose theories were developed from the pioneering work of Klein, Winnicott, Bick, Tustin, and Fordham in the treatment of and theorizing about early infant development, attest to the fundamental and universal propensity for the young infant to experience, and for its mother to share in, profoundly felt affective states that are registered, exchanged, recalled, and modified between them. Especially interesting in this respect is the increasing body of psychoneurobiological evidence demonstrating that, as the infant's brain is only partially developed at birth, the maturation of the corticolimbic system that occurs during the first one to two years of life is dependent on the quality of the relationship between the infant and its mother, or other caregivers (Schor, 1996). In other words, as described in Chapter 5, there is now experimental evidence from the field of psychoneurobiology that shows that the future development of those right hemisphere structures that regulate attachment and other emotional and cognitive behaviours is determined by the quality of the mother–infant interaction in the first weeks and months *post partum*, in which the infant is an active, and proactive, participant. In this sense we may say that the infant actively participates in the development of the very corticolimbic systems that underpin the quality of their cognitive and affective behaviour, including loving behaviour.

The *in utero* observations of the “kind twins” provide strong evidence of a primary impulse to love that is nourished by proximity, physical contact, responsiveness from the other, and by the containment of the parents who relate to and enjoy the growing foetuses. From the start, the twins experienced a three-dimensional world in which there was space and time to be in their different states of self and to be in relation to the other twin. In Fordham's terms, this resembles the rhythmic deintegrations and reintegrations that mark

the periodic movement of the self from within itself to outside itself and back again, via contact with a not-self, imaged in our example *in utero* by the periodic exchanges of physical contact, of caressing, across the fine differentiating membrane that separates them. Here is a tender pre-verbal and pre-visual object relationship, where, without the stimuli of language or sight, a mutuality exists and develops, and carries on consistently over time, to create the particular quality of relationship that the twins continued to share after birth. Even though the little girl seemed inactive by nature, she responded to her brother's affectionate overtures in kind.

But what if the object is not satisfactorily available to maintain contact, containment, and mutual exchange? In Stern's language, attunement may be unavailable; in Bowlby's model (1969), there may be no reliable presence with whom to form an attachment. What if there had been a responsive object, however bizarre, but once available for love, who then became lost, absent, vacant, empty, or crazy? What happens, then, to love? We know that when the self has not experienced satisfactory containment within a consistently loving relationship, an enormous deficit occurs. A massive narcissistic wounding follows after the first unmet deintegrations, and the self, in order to survive, has then to seek out, or possibly even to create, its own substitute for containment and a semblance of loving mutuality.

When a loving relationship with a present object is not available, a loving attachment to an absent object may develop as a substitute in order to provide a phantasy of a presence, albeit a present absence (Bion, 1962). Later on, this may evolve into an addiction to absent objects, as it becomes increasingly impossible to achieve a satisfactory loving relationship with a present object. Sometimes, a perverse object choice is made, in an attempt to find a better solution than the attachment to an absent object, the inevitable failure of which then provides the self with further evidence that love is simply too risky a business and must be forsworn. Anger or hatred towards the absent object is equally unavailable, for strong negative emotion also runs the risk of piercing the unconscious delusion that has been created of an attachment to an absent or perverse object. In the example that follows, far from engendering negative affects such as anger, rage, or hatred in the face of real loss, the loving attachment to an absent object which arose from the original narcissistic wound developed

into a characteristically confused, fazed, and perplexed state of mind that was also experienced for certain periods in the transference/countertransference relationship.

Clinical example

Fay was seven months *in utero* before her mother realized she was pregnant with her. As a baby, she was maintained in a quasi-sterile environment for no medical reason. Her mother, along with a succession of nurses who were employed to look after her, wore surgical face masks when they fed and tended her, and when she slept, her cot was covered by mosquito netting, although the family lived in a major Western city. Some time after her birth, a subsequent pregnancy was aborted. Her mother developed a serious psychiatric disorder when Fay was about four years old, from which she never fully recovered; she was hospitalized for the next fifteen years. She was discharged when Fay was in her late teens, after a bitter divorce from her father, but she was not properly rehabilitated and continued to live a limited and often bizarre life until her death, shortly before Fay entered into a second analysis with me. Her father was generally well-meaning towards Fay but uninvolved in her day-to-day care, leaving an increasingly unwell wife and a series of nurses to get on with things, while he pursued amorous relationships, which he then required Fay to evaluate as potential partners for him. Once Fay started school, her father set high standards of achievement, employing, as substitutes for the nurses, a series of tutors and professionals to provide lessons in sports, elocution, dance, and other skills. She felt that she invariably performed below the standard set by her father and his delegates, the professionals. Conversations with him were like legal debates, and to negotiate an increase in pocket money or permission to go out with friends, she was obliged to present her case as if she were a little lawyer.

Fay always felt herself to be profoundly alone. She has sad memories of banging on the locked door of her mother's study while her mother remained out of touch and unresponsive behind it, wrapped in her own activities. She felt defeated in her attempts to achieve the skills that a growing child usually acquires by playing with and imitating adults and other children. Instead, there were nannies, nurses, coaches, tutors, and doctors, all treating her as an

object they were paid to care for. It was difficult for Fay to feel that she received safe and therefore truly loving care, sustained over time, and personally related to her. To compensate, she would use concrete objects as symbolic equivalents for the relationships she longed for, especially with her mother. She would wrap herself up in her mother's fur coat, enjoying sensuous and sexualized feelings, and was fascinated by her mother's feminine accoutrements. She would play for hours with hair nets, jewellery, lipsticks, mascara, cigarette holders, clothes, shoes, and gloves. She created breast-like enclosures from pillows and cushions which she would place at the bottom of the stairs so that she would be near anyone who came by. She kept with her, in her bed, dozens of stuffed and several real animals when she slept.

By the time Fay's mother was hospitalized and perpetually absent, the material objects that Fay had used as symbolic equivalents for a loved but bizarre and inconsistently available mother became spoiled and hateful for her. Bits of tobacco in coat pockets and at the bottom of satin bags, hair pieces that resembled rats' tails, disgusting old tubes of lipstick and mascara brushes, all became emblematic of the crazy mother that she could not possibly internalize and identify with, for fear of risking or compromising her own sanity. Fay developed allergies and other physical symptoms that ensured that she remained in a fuzzy, woolly world where a clear and cogent sense of her self in relation to others was unavailable. She moved awkwardly, as if in a daze and unsure of her footing. As an adult, she moved next to a prominent landmark as a point of orientation in an otherwise featureless (i.e. loveless) internal world.

Fay had little experience of being loved for the person who she was. Her mother was unable to hold on to reality, let alone hold on to a realistic perception of her daughter, which might have helped Fay to negotiate the hurdles of the developmental stages and the mental passage back and forth between the paranoid-schizoid and depressive positions, and her father was unable to provide an adequate substitute for the experience of a benevolent combined parental presence. This meant that Fay's attempts to reach out for love, containment, and attunement were repeatedly thwarted and responded to only intermittently and in a limited way.

However, at the same time, Fay did not fail to thrive. She developed social skills that ensured that she had constant companionship

from friends. She also developed psychosexually, even though her choice of partners inevitably reflected a certain absent and/or bizarre quality imparted by her earliest object relations. She successfully bore and reared a child, to whom she was able to demonstrate more or less consistently the love and thoughtful commitment she felt she had not received herself. Her educational achievements were solid and impressive, she became an expert in a particular field, and she lived an active and interesting life. However, there was a lack of consistency in loving object relations. When Fay chose her lovers, they were usually absent in an important way, either emotionally, or concretely; if present, the archetypal qualities of their personalities were so unmitigated that they tended to be abusive and/or sadistic.

When, in phantasy, the loved other can only be absent, a pattern of trauma is laid down that will remain difficult to change, being reinforced in a repetitively compulsive way by object choices that lead to further subsequent failures (Covington, 1996). This is particularly so if the original defence occurred at a very early stage in the development of the self, since to dismantle the defence, for example through analysis, is tantamount to jettisoning the only place of safety in an otherwise overwhelmingly chaotic and unstable inner world. In such circumstances, overwhelming negative feelings, such as hatred, may be unavailable because they are too threatening to the defensive structure. The opposite of love in such circumstances may be experienced in the analytic relationship not as hatred but bewilderment, disorientation, and a profound sense of loss, as if wandering in a fog. In these cases, hatred can be an achievement, when the fantasized attachment to the absent object is allowed to be relinquished.

As a substitute for a satisfactory *coniunctio* that might have provided a context in which a fulfilling and creative life could be lived, Fay would instead continuously have to indulge in a semblance of creative activity, "generating hypotheses" as she called it, about herself, the world, and the motivations of others. In this way she convinced herself that an intercourse had occurred which had led to the creation of interesting and lovable mental babies that would attract the appreciative attention of her mother, father, and thereafter her parental substitutes. The illusion belied deep feelings of powerlessness, emptiness, and isolation, filled as she was by phantasies of absent objects, the only sources able to evoke in her inner world

access to the memory of loving experiences. Fay's attachments to absent objects represented her repeated attempts to keep present the only kind of object that she could love safely, that is, an absent one. If she did attempt to keep an object present, she was hampered by the archetypal nature of her internal object relations such that she would seek either to devour them with stifling acts, particularly of anxious overfeeding and sexual voraciousness that mimicked loving attachment, or else she would choose objects who were potentially dangerous and violent towards her.

Fay was terrified of discovering either that she loved me or that I loved her, or else that one of us was crazy. Our earliest encounter provided a snapshot of the internal object relationships that we would only understand in depth much later. Fay attended an initial consultation in the summer term, when we agreed to begin analysis of four sessions per week directly after the summer break. A letter awaiting my return in September informed me that she had decided not to embark on treatment. A year later, Fay approached me again, out of the need she felt, and we agreed to begin, this time building up from one to four sessions weekly over the course of a year. Later, Fay explained that, between the first consultation and her decision to abort the therapy in September, I had been transformed from an accessible, containing, and thoughtful analyst with whom she looked forward to working, into a monstrous, crazy witch figure, of whom she was deeply terrified.

Love entered the consulting room slowly, hesitantly. At first, Fay seemed to be very wary of me and would express this by her vague and distant demeanour. In turn, I would feel dislocated from her and noticed that I could not keep details of, in particular, her psychosexual history clearly in my mind. I had a singular difficulty in recalling whether her ex-husband was now dead or alive, an uncomfortable feeling in the countertransference of which I did not relieve myself by asking clarifying questions, as I thought that my discomfort must be related to Fay's own feeling about, so it turned out, her mother after she was ensconced in the mental hospital, not literally dead but not alive or available to Fay.

However, over time, a warm and gently loving atmosphere began to grow between us. Fay explained how extremely important my constant, reliable, and accepting presence was to her, particularly the repeated vision she had of me as I opened the door to her in the

same way each time. She seemed to marvel at my constancy. And she had a particular way of responding appreciatively to my comments, observations, and interpretations that evoked loving feelings in me. We were embarked on a joint meaning-making project in the face of her tremendous inner struggle to keep value and a sense of relating to me accessible in her inner world. I think we created, in Ken Wright's (1991) felicitous description of the earliest infant-mother exchanges, a "positively amplifying circuit, mutually affirming both partners". Schore (1996) calls it the "system of reciprocal mutual influences". This I would identify as a state of loving, akin to Piontelli's *in utero* observation of the "kind twins".

Discussion

I have attempted to show that love is the element that links the two most important areas of psychological enquiry, firstly the primary self and its growth and development, and secondly the self in relation to another. The evidence from infant observation *in utero* shows that, from its very beginnings, the self can be identified by consistent modes of being and behaving that include a capacity for loving exchanges. This means that there is, at the same time, both a primary self and a primary capacity for relating and loving that are contiguous.

This view is underpinned by exciting developments in psychoneurobiological research that demonstrate that the earliest exchanges between the infant and its mother or caregivers shape the postnatal maturation of the structural connections within the cortical and subcortical limbic areas of the right hemisphere that come to mediate socioaffective functions as the self matures (Schore, 1996). Thus, the "positively amplifying circuit that mutually affirms both partners" directly determines the growth of the neonate's brain in its capacity for emotional and relational attachments, at the same time as the mother is captured by and devoted to her infant.

In Fay's case, repeated attachments to absent objects, evoking objects that can be safely loved because they are absent, suggest that the psyche is propelled to reach out from within the self and find an object to love, even if it must be an absent one. Indeed, for Fay, attempting to love an available object represented an early situation that was dangerous to her self. In the face of the danger that might

have led her to create, through internalization, an inner world populated by overwhelmingly crazy and/or persecuting internal objects, Fay responded by repeatedly accessing her potential for loving and for relatedness through her unerring attachment to absent but safely lovable objects. In so doing, powerful negative emotions such as rage and hatred were eschewed in order to keep her internal world intact.

It is the linking function of loving that deepens and widens our inner worlds, from our earliest moments of being and throughout the rest of our lives. The first loving link is the prototype for all subsequent mental linking, whether reaching out towards another, or indeed towards any ideas or pursuits that, through reintegration, allow the psyche to grow. Winnicott said, "A child is lucky if 'conceived of' as well as being the result of physical conception" (Winnicott, 1964, p. 191). I take this to mean that an act of love between man and woman that results in a real conception and that includes the mental conception of a potential child is for that couple and for that child a very great expression of humanity and human potential. Fay had to keep on "generating hypotheses" in her repeated attempts to restore and transform internally her own unconceived conception. She eventually allowed herself to re-enter analysis, thus providing an opportunity for an intimate and intense relationship as a means of helping her to achieve this restoration.

Conclusion

The experience of paradox derives from the basic paradigm of simultaneous contradiction and inclusion. This has to do with the nature of being human, where being a self and the knowledge of self co-exist. The self cannot know itself, nor achieve its fullest expression in individuation, except in relation to another. The self first knows itself through another, and the earliest pair in primary mutual preoccupation is, of course, mother and infant.

The paradox of love is that, at the very moment that the self searches out and finds another with whom it is possible to relate, it enhances and enriches itself. Analytic literature is full of discussion about the vicissitudes and difficulties of unloving states that preempt the conditions upon which love can be most fully lived. Paradoxes, however enriching, can also be deeply uncomfortable to experience;

so too, love. Love that encompasses self and other may be uncomfortable and difficult to achieve at times, but it thereby carries the deepest potential for the realization of what it means to be human. This is the capacity of the self to realize itself in relation to another.

Note

- 1 There are a number of Jungian contributions on love (as distinct from the erotic transference or countertransference) including Jung (1926), Spielrein (1912), Kast (1986), and Colman (1994). From the psychoanalytic literature, Gerrard has provided a useful biography and literature review in her account of *Love in the Time of Therapy* (1996).

Did Freud and Jung have a “clinical” encounter?

That an important encounter took place between Freud and Jung, one which was enriching and stimulating for them both, is undeniable. They collaborated intensively over six years, during a decisive period in the history of psychoanalysis. That they shared a friendship of deep psychological complexity is also without doubt, as attested by the collection of 359 letters that they exchanged between 1906 and 1913. It is reasonable to suppose that, from a psychological standpoint, their deep personal affinity was predicated on a father–son relationship (Jung was Freud’s junior by nineteen years). The early love each clearly felt for the other evolved significantly as the years passed, since the need each had for the other was different in essence. The dynamic that developed between them was one where, having first declared Jung his “heir apparent”, Freud would go on to call him “mad” six years later (Kress-Rosen, 1993, p. 12). Their relationship came to a bitter and sudden end in 1913. However, before its final breakdown, there had been a long period of difficulties, ostensibly over theoretical issues, primarily focused on the question of the nature and function of the libido, and on the question, equally absorbing for each, of the origin of religion in the

This paper was first presented (in French) at a conference entitled “Freud et Jung: une rencontre manquée” organized by the International Association of the History of Psychoanalysis, in Paris, February 2002. The point of departure was a Jungian commentary on Freud’s *An Autobiographical Study*.

human psyche. I shall return to these points later. Here I wish to stress that their theoretical arguments betray the very considerable psychological difficulties between them. At the heart of their rift was the problem of Freud's insistence on his authority, and on the adherence to those principles of psychoanalysis that arose from Freud's own clinical work, including his own self analysis, and Jung's insistence on his autonomy and freedom to pursue the study of the human psyche in which he was vigorously engaged.

In expecting that Jung, as his adept and chosen heir, would display uncritical devotion to the theory of psychoanalysis that he had conceived, Freud had badly misjudged the younger psychiatrist. Ever since the twelve-year-old Jung had a dream that God dropped a turd on Basel cathedral, the possibility that Jung could pay blind obeisance to any figure of authority had become unthinkable. It was in fact the very characteristics of Jung's personality, such as his capacity for creativity and innovation, allied to a profound intelligence and thirst for scientific and cultural knowledge, that would have been at the source of Freud's love for and estimation of Jung. It was also the source of their differences, at least for Freud. Nor should it be forgotten that as Clinical Director of the Burghölzli hospital, at that time one of the three leading psychiatric institutions in Europe, Jung was at the heart of the European scientific and medical establishment. He also played an active role as a professor at the University of Zürich. Freud, by contrast, found himself painfully exiled by the establishment for several reasons, the most important being that he was the author of what was seen as the "Jewish science", psychoanalysis. Jung's covetable professional position, along with his great clinical, intellectual, scientific, and scholarly capacities, provided Freud with the impression that in Jung psychoanalysis had found a worthy champion. But he was a champion with a mind of his own.

From our contemporary point of view, at the turn of another century, we could, with justification enquire as to why they were not able to reach out to one another and renew their relationship. Such a rapprochement was no doubt impossible for them, in the aftermath of the pain, anger, and grief which each had caused the other. A return to their early collaboration would also have been impossible, based as it surely had been, on mutual respect and enthusiasm, and on what I would dare to call, love.

We, the inheritors of their profound discoveries, continue to be marked and burdened by their tragic rupture. In the light of a history of enthusiastic collaboration followed by mistrust, of an impassioned meeting and of a failed encounter, a history which has been passed down to us, we are faced with a choice. We can opt to turn away and ignore what came to pass between the founders of the depth analytic approach to the psyche, or we can opt to confront it. Some have chosen to turn away from this sorry tale of a passionate encounter and a subsequent failure to remain in relationship. The turning away is often couched in terms such as those who say: "I do not know the vocabulary"; "I do not have the time to try to understand a different model of the psyche"; or else "that does not interest me". But there are others, possibly fewer in number, who have chosen to confront the issues and to search for a meaning in the history. Perhaps we could even take matters further forward and note that by taking the other tradition for our "other", we have an opportunity to deepen our knowledge of ourselves?

Here I am making a personal statement: I cannot be fully a "Jungian analyst" without having an intimate knowledge of and without pursuing in depth my study of the foundations and theoretical developments of "Freudian psychoanalysis". It is a genuine desire, the desire to know the other is intimately linked to a desire to know and understand myself better. If I had turned away from an intimate knowledge of the other, I would be less myself. In stating this, I am broaching my underlying theme, for in contrasting love based on libidinal identifications, which Freud called "happy love", which I will consider later, with another, more differentiated, love that can lead to expressions of personal and collective creativity, based on a mature love shared by separate individuals, I am invoking precisely the issue that led Freud and Jung into their passionate encounter and propelled them towards their final break-up, unable to achieve a more mature love, shared but differentiated.

I have used the term "desire" quite deliberately, as it refers to a philosophical idea that strikes at the root of contemporary European thought, and thus at our understanding of life. I am alluding to the philosopher, Hegel, whom I discussed in Chapter 2. His thinking and work would certainly have been known to Freud and Jung. I want to speak of the double aspect Hegel awards to the notion of desire as the basic drive of all life, the "breath of life", as Hegel called it: at

once the desire for the other, and also, perhaps paradoxically, the desire to be most fully oneself, what Jungians refer to as the self. For Hegel this is the dialectical situation *par excellence*, the condition underlying all growth and transformation. The dialectical principle is inherent in Jung's notion of the transcendent function, that teleological principle which lies at the heart of all psychological transformation and therefore of the process of individuation. It is the dynamic transformation of energy that spans the range of human activity, from instinctual, psychosexual, relational, artistic, cultural, scientific and spiritual.

It can be conceived that, after their tragic break, Freud and Jung focused on two different aspects of the psyche, which were nonetheless complementary. Freud concentrated on the personal history of the patient (which Jung called the reductive method of psychoanalysis), to study and unravel the content of the unconscious, structured by the individual's psychosexual history, as manifest during treatment, a notion reinforced by the concepts of repression and the repetition compulsion. On the other hand, with his interest in the universal images and symbols of the collective unconscious, Jung concentrated on the most primitive aspects of the psyche, which go on to form the basis of all future creativity, according to the teleological principle. Jung's enquiry would be deepened through his lifelong work with psychotic and schizophrenic patients. For Jung, symptoms have a symbolic function, in that they are carriers of meaning and psychic value for use in the future transformation of the patient's psychic life. As such these symbols carry cultural and spiritual values. Jung called the analytic exploration of this aspect of the psyche the prospective method. It is possible for us to see that Freud's personal unconscious, explored by the reductive method, and Jung's collective unconscious, explored by the prospective methods together make a whole, which could act as the basis for an integrated understanding of psychic life. Why has such an integration failed to happen?

In my view, the long and unhappy history of schism between the Freudian and Jungian traditions has constituted a tragic and unnecessary split in the overall joint depth psychological quest. This regretfully enduring split, still perpetuated in certain quarters, itself represents a professional collective pathology crying out to be healed. On a more positive note, it could be said that during the

century since Freud and Jung so bitterly parted company, each so disappointed in the other's inability to be responsive to the other's psychological needs and expectations, nevertheless the two traditions of psychoanalysis and analytical psychology have developed parallel bodies of expertise and a depth of clinical and theoretical understanding that may now be ripe for the exercise of mutual generative dialogue.

In Chapter 2, I attempted to show how the transcendent function can be understood as Jung's attempt to think about and provide a schema for understanding the perilous experiences he was living at that time. In evoking the dialectical schema, Jung was proposing a model that held together conscious and unconscious processes, which we can easily understand as referring to his own experiences in his self analysis, and offering a view as to how this can lead to the creation of meaning in a dialectical process that he saw as innate to the psyche. We could say that if *Seven Sermons* is a record of Jung's lived experiences in his encounter with the unconscious as an object of transference, then *The Transcendent Function*, written in a parallel process at the same time, is a record of his countertransferential reflection of that lived encounter. At the same time as he was undertaking his self analysis, Jung was acting as patient and analyst to himself and as such was enacting the very model of the dynamics between the conscious and unconscious psyche that he revealed through the two texts. We could say, following the dialectical model, that by being able to tolerate holding the dynamic tension of the opposites of conscious and unconscious experience, Jung was thereby creating the grounds for his own eventual psychic synthesis, both personally and in the development of his theory of the psyche, leading to his own self healing. Through this process of self healing, at the same time he developed a healing psychology based on the *telos* of his dialectical vision. In this way, the man and his theory are expressions of each other; psyche and text are in a dynamic, reciprocal relationship.

Freud's autobiographical Study

Freud's *An Autobiographical Study*, is a lucid and structured document, published in German in 1925 (with a postscript added in the 1935 edition). Freud was commissioned by a German publisher

whose aim was to publish a series of monographs on contemporary medicine via autobiographical sketches written by 27 important medical authorities of the time. The aim was “to present an account of the recent history of medical science from the pens of those who had played a chief part in making it. Thus Freud’s study is essentially an account of his personal share in the development of psychoanalysis” (1935, p. 4, editor’s note).

Freud’s text is not an autobiography in the classic sense. By contrast, Jung’s autobiography, *Memories, Dreams, Reflections* (1961), reveals in a very vivid way a great deal about his personal and professional life. His theoretical and clinical ideas are interwoven with evocative descriptions of the personal circumstances in which these ideas arose. It is therefore a very lively and reflective work, a work of his advanced old age, written along with his secretary, Aniela Jaffé, who edited many of the passages. Freud’s text is more of a reasoned exposition of his ideas, with, here and there, a few passing references to his personal, as well as to his professional life, as he had experienced it. Obviously Freud cannot be blamed for not doing something else, as he was writing within the conditions and constraints set by his publishers. Nevertheless, it is to be regretted that he omitted to reveal from his point of view some of the background to the complexities of that remarkable, if incomplete, encounter between himself and Jung, which had ended so unhappily, eleven years earlier.

I will now explore some passages in *An Autobiographical Study* that have a direct bearing, sometimes an implicit one, on his encounter with Jung, in order to try to understand better the polemic that poisoned his feelings towards Jung at the point of their break-up. I broach, first, the perspective of their scientific encounter, then go on to the theme of the father complex and its relation to the Oedipus complex, then to the role of Sabina Spielrein in their relationship, and finally to the narcissistic aspects of their relationship that would end in their rupture.

The scientific encounter

During his exploration of the unconscious, Freud, as Jung was to do after him, wove the very structure of psychoanalysis from two threads: that of treating as clinical material his own self analysis,

based on the "abundant communications" from his unconscious (Freud, 1925, p. 39), and the clinical material emanating from his patients. In his *Autobiographical Study*, he emphasized that he was mainly self-taught, as "there was no satisfactory opportunity of learning the subject, and one was forced to be one's own teacher" (Freud, 1925, p. 11). Freud always identified himself with the role of the lone pioneer. He would only accept conclusions drawn from his own self analysis or from the analyses of his patients. Of the few personal details that he reveals at several junctures in this *Autobiographical Study*, he includes the fact of his Jewishness, although he was not religious or practising, and that he could be disputatious and in a certain sense a domineering figure, clearly highly intelligent and very innovative, yet confined outside the contemporary scientific and medical establishment. That this embittered him, and that he experienced financial constraints as the father of a young and growing family, are some of the personal aspects to which he makes only glancing, slightly sardonic, allusions.

One can easily imagine the importance that Jung's loyalty held for him, at the personal level, but also from the standpoint of the survival of psychoanalysis and its acceptance by the scientific establishment. Jung was part of that very establishment so coveted by Freud. Thanks to his scientific brilliance and to the research he carried out with colleagues at the Burghölzli Hospital, Jung demonstrated the first scientific evidence of the theoretical value at the foundations of psychoanalysis. He showed through his Word Association Tests: firstly, the very existence of the unconscious; secondly, the mechanism of repression, which governs the dynamics between the conscious and the unconscious, and between the id, the ego, and the superego; and thirdly, the idea of the complex, according to which personal experience constellates in the unconscious memory around great universal themes often linked to the major life events during the course of a person's life.

From the theory of complexes Jung would go on to develop the pivotal concept of the archetype of the collective unconscious, which is at the basis of analytical psychology. In his view, each individual will have a number of complexes derived from his personal experiences but organized around certain deep structural, archetypal themes. For his part, Freud would go on to found a large part of the theory of psychoanalysis on one complex, the Oedipus complex, a

term borrowed from Jung's work on the complexes but whose content would be drawn, for the most part, from his own analysis. It should be noted that in psychoanalytic theory the Oedipus complex is considered a universal complex, and Freud discusses it in archaic and typical terms, therefore as a universal archetype, although the term is not found in psychoanalytic theory.

From the first, attacks against psychoanalysis were based on the challenge that its fundamental concepts were neither scientifically verified nor verifiable. Thanks to his work on the Word Association Test, Jung was able to dispose of such criticisms on a scientific basis. We have here, therefore, one of the proofs of the importance of the encounter between Freud and Jung. From the start of their encounter, Jung was able to make an extremely important gift to psychoanalysis, that is to say, to Freud, a first gift to this revered father figure, whose approbation Jung so needed psychologically. To this revered father, Jung offered what the father most needed, that is the first scientific validation of psychoanalysis. Was this a failed encounter between Freud and Jung? I do not think so.

Do we have the means that would enable us to attempt to understand the nature of the psychological need each of these two giants had for each other, as well as why their relationship ended in a rupture? In what follows I propose to examine some of the reasons that might have led to their incomplete encounter.

Father complex or Oedipus complex

Freud had inspired the young psychiatrist by his first psychoanalytic writings. It is interesting to note that for Jung the seminal text at the time was the *Interpretation of Dreams*, published in 1900. Having read it when it first appeared, Jung reread it in 1903, at the time he was starting his first researches into psychoanalysis. In this text, Freud interpreted some of his own dreams and his apparent openness in communicating some aspects of his internal world through a public medium might have suggested to Jung that Freud was inclined to be open about such matters, and perhaps even more so in a personal relationship. This work inspired and fertilized Jung's early thoughts and researches into the concepts of psychoanalysis. His first communication to Freud, which marks the start of their relationship, took place in 1906, coinciding with the publication of his essay on

the results of his Word Association Test, having set out from the first to put psychoanalysis on a scientific footing.

An intense relationship between Freud and Jung ensued. But, as Nicole Kress-Rosen points out (1993, p. 95), it was the constraining intensity of the affection Freud immediately felt for Jung that led Jung, schizoid by nature, to adopt a cautious approach to the respected father figure. Jung always needed to establish some measure of psychic space between himself and the other, for fear of being devoured, or else disappointed, by the other. At the same time, there is a passage in Jung's autobiography that shows how much he respected and revered Freud: "Freud was the first truly important figure that I had met. No other among my relations could measure up to him. There was nothing trivial in his attitude. I found him to be extraordinarily intelligent, penetrating, remarkable from all points of view." (Jung, *Memories, Dreams, Reflections*, 1961, p. 172). During the course of their long and intense correspondence, Freud would address Jung as "Dear Friend", while Jung would address Freud as "Dear Professor," maintaining his respectful distance to the older man.

We know that Freud and Jung had agreed to analyse each other's dreams during their trip to Clark University in the United States in 1907. But we know also of the decisive moment when Freud refused to divulge his dream associations to Jung, stating that he feared compromising his authority. There was, in addition, a famous dream of Jung's upon which Freud sought to impose an interpretation which Jung found neither valid nor acceptable. It was a pivotal dream, which signalled the difference between them: Freud insisted on an Oedipal interpretation; but for Jung, the meaning of his dream lay at the collective, archaic and universal level of the psyche (Jung, 1963, pp. 154-6). This would be the moment when one could speak of a failed encounter. The mistrust had sprung up between them. By denying himself a free exchange with Jung and by insisting on his authority, Freud lost Jung's trust, as the latter was constitutionally far more open to a relationship between respectful equals. But at the same time, Jung desired from Freud a paternal strength sufficiently robust to withstand their vigorous exchanges.

In their correspondence, Jung often mentioned his father complex towards Freud. It seems that it was an expression that they used in an agreed sense: Jung was given the status of a son, albeit a very

elevated status, since he was the favoured son. Yet at the same time, if he occupied this position, one can understand the extent to which Jung felt trapped by Freud's need to find in this young hero, with his stature of a handsome and brilliant young psychiatrist, someone who would salvage psychoanalysis from its designation as a "Jewish science". But for Freud, only a hero totally obedient to the terms of psychoanalysis as he had conceived them would, in the end, be acceptable. In this situation lay a complex network of contradictory expectations.

Triangulation and the relationship between Freud, Jung, and Spielrein

In this chapter it is not possible to introduce a host of relevant themes that spring to mind, but I should not like to miss the opportunity of mentioning the transference and countertransference passion that was experienced in parallel between Freud and Jung, and between Jung and Sabina Spielrein. She was a brilliant patient who became an analyst and, eventually, a psychoanalyst member of the Psychoanalytic Society of Vienna. The passion that unfolded between them can be seen, at least in part, as a sublimation of the passion that was being played out between Freud and Jung. Sabina became the third person in a triangular constellation. If Jung stepped out of the analytic boundary in relation to Sabina (to what extent we cannot be certain), Freud would play the role of a very ambivalent patriarch. If Freud gave Sabina protective advice, in his letters to Jung, he spoke of her with a certain condescension, while at the same time excusing Jung of any guilt towards his former patient. Here I wish to evoke the name given by Sabina and Jung to the product of their analytic union, Siegfried, a name suggestive of the theme of the hero, a theme so important in the relationship between Freud and Jung.

David Lotto, an American psychoanalyst, in a recent study (2001), focuses on Freud's repetition of triangular relations in the service of his homoerotic feelings. He quotes Freud who states of himself: "... my emotional life has always insisted that I should have an intimate friend and a hated enemy. I have always been able to provide myself afresh with both, and it has not infrequently happened that ... friend and enemy have come together in a single individual" (Lotto, 2001, p. 1301). Lotto locates this troubling polarization

in the ambiguity of Freud's homosexual feelings, remarking that Freud's aggression towards the woman in triangular relationships would allow for a perfect homosexual connection. He suggests that this is what was perhaps experienced between Freud, Jung, and Sabina Spielrein, and that his subsequent mentoring of her was reparation for having first treated her badly (*ibid.*, p. 1309). He cites, for example, the disparaging attitude towards women Freud expresses in his letter to Jung when Jung sought his advice over the disturbing relationship he had with Sabina: "... these women ... manage to charm us with every conceivable psychic perfection until they have obtained their purpose ... " (*ibid.*, p. 1302).

If this is a question of a failed encounter (and I prefer the designation of an incomplete encounter), it is because for each the meaning of their encounter was rooted in very different foundations. In this connection, I would differentiate between the father complex, as described by Jung in his letters to Freud, and the Oedipus complex as elaborated by Freud and his identification with the totemic patriarchal father. Freud, the jealous father of psychoanalysis, felt obliged to find a suitable heir, and he chose Jung. But in choosing Jung, he chose someone whose character was such that he would be likely to revise the doctrines created by Freud. Freud was never able to give Jung the freedom he needed to pursue his researches into the very primitive, and the very penerative unconscious, which Freud, having remained at the level of the Oedipus complex, was not able to tackle himself except in terms of sublimation. Freud was never to accept Jung's revisions, and therefore was never to yield his authority.

For his part, to the extent that he would identify with the role of Freud's chosen son and heir, Jung would seek from Freud the blessing of a father figure whom he could truly respect. As we know, his own father, a pastor consumed with religious doubt, was weak in his eyes and a source of disappointment to him, someone not able to resolve his own inner conflicts. Jung sought in Freud the revered father, whom he could finally respect sufficiently to believe in his granting him the sense of autonomy needed to fulfil his own destiny. Here is the important Jungian theme of the self, a concept which, until recently, has been missing in psychoanalytic theory building, presumably because it was considered to be too Jungian, and therefore not psychoanalytic.

I have sought to discern those mutual and unconscious, unmet expectations that I have called the paternal in contrast to the Oedipal constellations that ensured that the encounter between Freud and Jung would fail or be incomplete, to the extent that we could say it was a tragic encounter. I consider it “tragic” for those of us who are marked by the often malign consequences of its aftermath; and also for the protagonists themselves who experienced it and who were unable to find a way of overcoming their mutual dilemma, neither on the personal, nor the theoretical level. The Hegelian dialectical model described in Chapter 2 again springs to mind, the model which structures much of Jungian theory regarding of the dynamics of the psyche: Freud and Jung remained in a state of opposition without being able to find a resolution. They acted out their conflict by separating and polarizing, and, as happens in dysfunctional families, the next generation is at risk of blindly repeating the pattern.

During the time of the deterioration of their relationship, Jung was immersed in his work on the unconscious sources of religious experience, the publication of which as *Symbols of Transformation* (1912) would be the final cause of their break-up, in the sense that it marked a radical revision of Freud’s theory of the libido. During that time, Freud had also decided to investigate the sources of religion, knowing that Jung was equally engaged in the topic. Tempted by Jung’s enquiries into the universal and collective foundations of the religious spirit, Freud became preoccupied with the same territory, hoping not to be outdone by Jung, as is suggested by Nicole Kress-Rosen, and wishing to ensure that the results of the enquiry would be firmly based on psychoanalytic understanding, particularly in terms of Oedipal theory. He published *Totem and Taboo* in 1913. In a letter to Abraham, he declared that “he already knew the solution”, even before completing his preliminary researches. He was to write to Jung that he was certain that Jung, too, would find the solution in psychoanalytic, Oedipal terms. Nothing could be further from reality.

For Freud, all religious experience is based on a dynamic of guilt emanating from the Oedipus complex—the domain of the fathers. Kress-Rosen states the issue clearly: in all Freudian explanations of the bases and sources of the religious manifestations of the psyche, including the moral sense, women only count as the sexual objects of the father, and by extension of the sons and of the horde. In all

fundamental matters of psychological functioning, Freud's thinking is organized around the Oedipus complex, with the theme of the dominant male and the woman as the object. For Jung, in contrast, the issue of the sources of religious experience is a wholly different matter. Jung had always insisted on the importance of the feminine in religion, as demonstrated in his study of Sophia, Mary, the importance of the archetypal couple, of the king and queen in the *hierosgamos*, and the sacred marriage as a fundamental constellation of the psyche. Only much later would psychoanalysis explore the importance of the couple as an archetypal constellation, finding a particular resonance in British psychoanalytic thinking in the concept of the "combined internal parental couple", as Klein, Bion and others were to describe it.

In Chapter 11 I have attempted to show that the origin of the ethical function could be found in the vision of the "combined internal parents": firstly, in the mother's capacity to sacrifice her narcissistic needs on behalf of her baby, as Winnicott had described in the concept of the "good-enough mother". I suggest that from this basis these would combine with the experience of the function of paternal judgment and reflection, often symbolized in masculine terms and images. Following the internalization of these two experiences, the child will eventually have an internal couple capable of "reflective devotion and devoted reflection". I suggest that this is what forms the basis of the sense of the "ethical self", and from this I conclude that it is the same combined capacity in the analyst that makes the analytic relationship a profoundly ethical one.

Our enquiry into the dynamics between Freud and Jung and into the reasons for the incompleteness of their encounter leads us to the double but allied problem of their different understanding of the nature of the libido and of religious experience (including its spiritual, artistic, and cultural expressions). Freud had found it a diabolic and tortuous task to do the preparatory work for *Totem and Taboo*, probably because, as he had claimed, he knew the results beforehand. He wrote to Ferenczi: "the work concerning the *Totem* is a mess. I read fat tomes without any real interest as I already know the conclusions, it's my instinct which informs me" (Freud/Ferenczi 1992/94, p. 249F). Freud's "instinct" told him that the Oedipus complex lay at the base of religious experience and practice, and he expected Jung to arrive at the same conclusion. In 1911, Freud wrote to Jung:

... my work in these last few weeks has dealt with the same theme as yours, to wit, the origin of religion. I wasn't going to speak of it for fear of confusing you. But since I can see from a first reading of your article in the *Jahrbuch* ... that my conclusions are known to you, I find, much to my relief, that there is no need for secrecy. So you too are aware that the Oedipus complex is at the root of religious feeling. Bravo!

(see McGuire, 1974, p. 270F)

At the same time Freud continued to suffer from his work on *Totem and Taboo*. He further writes to Jung:

My study of totemism and the other work are not going well. I have very little time, and to draw on books and reports is not at all the same as drawing on the richness of one's own experience. Besides, my interest is diminished by the conviction that I am already in possession of the truths I am trying to prove.

(see McGuire, 1974, p. 288F)

During this entire period, Jung did not answer Freud's letters.

Let us return to Freud's *An Autobiographical Study*, written thirteen years after this episode. In the chapter that refers to Freud's theoretical developments dating from the meeting and collaboration with Jung, he states:

I myself set a higher value on my contributions to the psychology of religion ... My starting-point was the striking correspondence between the two taboo-ordinances of totemism (not to kill the totem and not to have sexual relations with any woman of the same totem-clan) and the two elements of the Oedipus complex (getting rid of the father and taking the mother to wife) ... there rose before me out of all these components the following hypothesis, or, I would rather say, vision.

(Freud, 1925, pp. 66–8)

What constituted this vision? In the words of Freud: "the father of the primal horde ... had seized all the women for himself; his sons, being dangerous to him as rivals, had been killed or driven away. One day, however, the sons came together and united to overwhelm, kill, and

devour their father, who had been their enemy but also their ideal" (Freud, 1925, p. 68). But this had profound consequences for the sons: "After the deed they were unable to take over their heritage since they stood in each other's way" (Freud, 1925). From this "sprang man's sense of guilt (or 'original sin') and . . . was the beginning at once of social organization, of religion and of ethical restrictions" (Freud, 1925). Thus, as Freud himself announced, the rise of religion would be found in the area of the father and Oedipus complex, built on guilt, ambivalence, and the management of sexual relations with women. He concluded that "the primal father, at once feared and hated, revered and envied, became the prototype of God himself. The son's rebelliousness and his affection for his father struggled against each other through a constant succession of compromises . . . This view of religion throws a particularly clear light upon the psychological basis of Christianity . . ." (Freud, 1925). In these passages it is as if Freud is interpreting Jung's rebellious behaviour, as he saw it, towards psychoanalysis and the patriarchy of Freud.

These passages bring to an end Freud's account in *An Autobiographical Study*. All he had left to do was add a list of other psychoanalytic applications, which he did in a few small paragraphs, and to add a postscript, ten years later, for the new edition published in 1935. In these final extracts regarding his theory of the sources of religion, written in a very lively style compared with the preceding ones, he elaborates his totemic "vision" of the devoured father at the basis of religion, the themes that related to what had occurred between himself and Jung. If the tone is explicitly "cool and entirely objective", as James Strachey states, the implicit content would have evoked the matters at the heart of their final quarrel. But Jung, for his part, would have experienced their quarrel quite differently. A failed encounter, or an incomplete one?

These important penultimate passages of Freud's *An Autobiographical Study*, on the origins of the religious spirit, the writing of which had so tormented him, and which had been undertaken at the moment he felt Jung was distancing himself from him and from his psychoanalytic theory, show how much Freud was still preoccupied with the themes that had dominated the period of his relationship with Jung. These themes link us to those touched on at the beginning of this chapter, notably the different psychological needs of each for the other. To conclude, I want to touch on the theme

of narcissism, on which rests, in my opinion, an explanation of the incompleteness of their encounter.

The British psychoanalyst, Ron Britton, has made a helpful distinction between libidinal narcissism and destructive narcissism. The first is characterized by a defence against the experience of polarized object relations, whereas the second is essentially profoundly hostile to object relations (Britton, 2001). He draws attention to a note added by Freud in 1910 to his *Three Essays on Sexuality*, at a time when he was becoming increasingly preoccupied with the deterioration in his relations with Jung. In the note theorizing about male homosexuality, Freud wrote:

... in the earliest years of their childhood, [they] pass through a short lived but very intense fixation to a woman (usually their mother). And that, after leaving this behind, they identify themselves with a woman and take *themselves* as their sexual object. That is to say, they proceed from a narcissistic basis and look for a young man who resembles themselves and whom they may love as their mothers loved them.

(Freud, 1905, p. 144–5)

In the essay, *On Narcissism: An Introduction* written in 1914, thus not long after their break-up, Freud states that “falling in love ... depletes the self in favour of the object, whose reciprocal love is the only means of remedying this haemorrhage of libido” (quoted in Britton, 2001, p. 5). Britton goes on to quote Freud:

The return of the object libido to the ego and its transformation into narcissism represents, as it were, a happy love once more; and, on the other hand, it is also true that a real happy love corresponds to the primal condition in which object libido and ego libido cannot be distinguished.

(Freud, 1914, pp. 99–100, in Britton, 2001, p. 6)

Both these ideas are essential to my argument: the libidinal narcissist is in love with himself when in love with another person; and “happy love”, which is primary love, is based on “the primal condition in which the object libido and the ego libido cannot be distinguished” (Freud, 1914, pp. 99–100). Britton emphasizes the fact

that whether it be "an external or an internal object, the positive relationship is conditional on the elimination of difference" (Britton, 2001, p. 6). The equivalence of external and internal objects and the elimination of difference constitutes, I suggest, the two decisive conditions for Freud's emotional responses in relation to Jung and are also the very conditions that distanced Jung from Freud. Freud sought such a "happy love" in his relations with Jung, insofar as he sought to maintain the condition of non-differentiation between the libido of the object and the libido of the ego therein. This would explain why Freud could not accept Jung's revisions to his psychoanalytic theory, because then he would have shown himself as different and separate from Freud, with the capacity for autonomous thought and observation. It would have shown also that the psychoanalysis with which Freud was profoundly identified was not, after all, completely identifiable with Freud, because it was in the public domain—it was not his inseparable possession, even though it was based, as so much of it was, on his own self analysis. Moreover, it explains why, in the course of their voyage to the United States, Freud could not agree to give Jung his associations to his own dreams, because then Jung would have effectively made interpretations that Freud might not have thought of himself, thus making a notable difference to Freud's internal world, and to the psychoanalysis he was developing.

What I am proposing is that Freud aspired to find in Jung his internal twin, whom he hoped would be keen to take over the psychoanalytic mantle without altering it. In fact, Freud had indeed selected the most worthy and competent successor from amongst those who had presented themselves, but the most worthy one could not have lived a life of identification, adopting another's ideas without development and growth. As Jung said in one of his last letters to Freud, quoting Nietzsche's *Zarathustra*, "One repays a teacher badly if one remains only a pupil" (McGuire, 1974, p. 303J). Jung, because of his own internal needs, could not respond to the "happy love" Freud was offering him, because this primary love was based on the need for identification. The incompleteness of their relationship resides in the fact that the love and the need each had for the other were based on unconscious demands that were utterly different, and, in many ways, oppositional.

Conclusion

Seeing Jung as his successor, Freud was not able to regard him as anything other than a twin, a psychical double. It is undeniable that Freud had felt a powerful love for Jung, to which Jung responded profoundly. But Freud's love was based on a libidinal narcissism, which required that Jung should be identified with him. This meant that Jung should not deviate from the basic principles of psychoanalysis which, at that time, were related to Freud's self analysis, hence based on the Oedipus complex. Freud had looked for a "soul mate" in Jung; a twin from whom there could be no separation, no difference, and, therefore, no revisions to psychoanalytic theory.

If it had been possible for Jung not to deviate from the psychoanalytic path as drawn by the patriarchal father, Freud could have, for his part, identified with the figure of the hero, Jung, as his own ego ideal. He could have allowed himself to fall into the arms of a "soul mate", thus in turn, making Jung into a father upon whom to lean, as he did in real terms, when twice he fainted in Jung's presence. We know that in the final account, poignantly, it was to be his daughter, Anna, so identified with her father's work, with his very words, who would care for him during his final illness, a cancer of the mouth. She would herself proceed to mount a heroic campaign, in London, against the revisions to psychoanalytic theory brought by Klein and her followers.

For his part, Jung had sought in Freud a validation from a very revered and respected father figure, the respect he never experienced as a son in relation to his real father. He was destined never to experience it in the way that he longed for.

Susan Rowland demonstrated very convincingly the existence of "the indissoluble bond between Jung's story as history and Jung's story as myth-becoming-psychology" (Rowland, 2005, p. 32). I have attempted to show some ways in which an understanding of the complementary vision of how psychic change and growth can occur in a dialogue between the Jungian and Freudian traditions, developed within a mutual relationship, where the members of both analytic traditions share a deep interest in the psyche's encounter with the unknown. If we are able to continue these joint efforts to understand the nature of our history and the contents of our theories and practice, then we may be in a better position to reveal that

indissoluble bond between our mutual histories and the theories that have evolved, and continue to evolve, from them, so to learn more about the nature of our "myth-becoming-psychology" which is the analytic endeavour. This is an open-ended, never to be finished activity, an infinitely alluring possibility. As Jung said, "... if the subject of knowledge, the psyche, were in fact a veiled form of existence not immediately accessible to consciousness, then all our knowledge must be incomplete, and moreover to a degree that we cannot determine" (Jung, 1947, para. 358).

How shall we proceed, then, we their inheritors, following this incomplete, if not failed, encounter between Freud and Jung, impassioned and creative throughout its duration, but confused and troubled by immense unconscious dynamics and a bitter rupture at the end? I think it is up to us, as the generations who follow, to draw from it the richness that is undoubtedly there, to the extent that we dare to exploit it by exploring our common ancestry and common ground. Let us hope that this time, our encounter will be far more durable and therefore much more fruitful.

Self creation and the limitless void of dissociation: the “as if” personality

In this chapter I discuss a particular state of the self, which I think of as a defence of the self, and which I have come to call the “as if” personality. This derives from work I have done with a number of patients whom I have treated or supervised in intensive, long-term analytic work. I began to notice a recognizable pattern and shape to the psychic life and personal histories in patients who, despite often very disturbed backgrounds, including physiological and/or psychological neglect and abuse, nevertheless had managed to become high and valuable achievers in the outside world; creative people making substantial and valid contributions of quality and distinction to their profession or field of work. In order to do so, they had called up extraordinary internal reserves and resources that nevertheless were limited in nature by the very fact that their internal worlds were not populated by nourishing objects, leaving the self depleted. Thus, at a certain moment, either just before or during entering analysis (and it might be their second or third analysis), they became stricken with an overwhelming sense that whatever internal resources they had been able to find to sustain them along their developmental path had now been used up. The self had finally to face a long repressed but often suspected, underlying internal reality, a hauntingly ever-present background sense of living in a void or facing a vast emptiness; an absence devoid of those resources formally used to nourish and sustain the self. Instead, a primary existential anguish or panic, a sense that life was no longer sustainable on the basis that it had been lived, would often be accompanied by a

real physical illness or dysfunction that put actual survival into question.

My experience with such patients has accumulated slowly but, in retrospect, steadily over a couple of decades, and my thinking about them has developed out of earlier clinical writings, summarized in Chapters 6 and 7. I have conceptualized this accumulated experience into a definable clinical state, with a cluster of recurring features. I have presented these ideas in various professional venues, including in an ongoing clinical discussion group of English and French colleagues, whose responsive input I greatly appreciate.

The task of the group was to attempt to grapple with work at the edge of analytic understanding, where accepting, tolerating, and exploring the nature of the analytic engagement, which sometimes was experienced as non-engagement, was often felt to be an encounter so powerful as to test in dramatic ways the analyst's understanding and the analytic boundaries. The analyst's clinical capacity and technique, and her theoretical understanding, are then brought sharply into question. In the countertransference, the sense that the analyst has of being tested to the extreme derives from the patient's experience that their very survival is being put into question, psychologically and/or physically. Phrases like "working at the coal face", "at the edge", "in extremis", "in a void", "in no man's land" were used to refer to the quality of work with such patients.

A paper by Francois Martin-Vallas provided the starting point of the group's clinical exploration (Martin-Vallas, 2002). George Bright subsequently presented a case in which he described a sense of being in a "no man's land", to which I had a spontaneous association to the phrase, an "as if" personality, to refer to the quality of the patient's psychic reality. I felt very engaged with this phrase as it seemed to organize my thoughts and perceptions about many experiences of clinical work that I had been thinking about for a long time. I began to formulate what I now think of as an observable "clinical fact", the "as if" personality, and then began to examine the relevant literature for other references to the concept of the "as if" personality and similar clinical profiles.

Having offered this brief history and contextualization of my personal experience of coming to think about the "as if" personality, it is now appropriate to proceed to a review of how the term the "as if" personality has been used already in analytic and psychoanalytic

literature. I also want to make a clear distinction between the notion of the “as if” personality, the Jungian notion of the persona, and Winnicott’s concept of the “false self.”

History of the concept of the “as if” personality as a (psycho)analytic concept

There is no long-term or coherent theory building around the concept of the “as if” personality in psychology, psychotherapy, psychoanalysis, or analytical psychology. However, a computer search for references to the use of the term “‘as if’ personality” in both the titles and the texts of psychology (in general) and psychoanalytic and analytical psychology texts in particular, revealed over 300 entries. These were mostly from the work of non-analytically oriented psychologists and psychotherapists, and seemed to be used spontaneously by the various authors in their attempts to find a phrase to evoke a particular quality in the work with patients. These usages would occur with very little or no cross-referencing, hence they were one-off instances of the use of an evocative phrase without building on the work of previous authors, and were thus reflective of the subjective experience of the quality of their patients’ lived lives.

In psychoanalytic literature, the term, the “as if” personality, has appeared rarely, with references scattered over a number of decades, again with no real cohesion in terms of theory building. The term does not appear in Laplanche and Pontalis’ (1973) *The Language of Psychoanalysis*, the important dictionary resource regarding the evolution of Freud’s concepts, nor in Hinshelwood’s (1989) *A Dictionary of Kleinian Thought*, the equivalent Kleinian resource. However, three psychoanalytic authors of note have used this term, and I propose to look at these three more closely, albeit briefly.

The psychoanalyst Helene Deutsch discussed a type of patient she called “as if”, “in which the individual’s emotional relationship to the outside world and to his own ego appears impoverished or absent” (Deutsch, 1942, p. 301), with feelings of depersonalization and emptiness. Deutsch explains her use of the term “as if” thus: “My only reason for using so unoriginal a label for the type of person I wish to present is that every attempt to understand the way of feeling and manner of life of this type forces on the observer the inescapable impression that the individual’s whole response to life

has something about it which is lacking in genuineness and yet outwardly runs along 'as if' it were complete" (Deutsch, 1942, p. 302). Deutsch emphasizes that such personalities are "intellectually intact, gifted, and bring great understanding to intellectual and emotional problems" (Deutsch, 1942, p. 303). However, she states that "although they produce good work it is based on imitation rather than true creativity, just as in their affective relationships there is a lack of true warmth" (Deutsch, 1942, p. 303). This is a picture that resembles in part Winnicott's (1960) notion of the false self, of which more shortly. It also resembles Bollas' (1987) concept of the normotic personality. But neither pertains to the "as if" quality that I am seeking to describe. Deutsch emphasizes the aspect of the self's adaptation through multiple identifications and mimicry. Although the element of multiple identifications is related to the self's attempts to resource the personality I call the "as if", I have not seen in the patients I have treated or supervised under this rubric the "sham existence" (Deutsch, 1942, p. 315) with the emotional and moral impoverishment which Deutsch rather censoriously describes, which seems to me to indicate a moral prejudgment on her part. Again, although Deutsch refers to the deficits incurred when the self identifies with a devalued and sexualized object, I do not consider that this adequately covers the full aetiology or description of the internal psychic world that I wish to present here. However, Deutsch does helpfully distinguish the "as if" from the hysterical personality, with which it can be easily confused because of the intensity of affect dramatically expressed. She also emphasizes the narcissistic aspects of the "as if", although in referring to this aspect she adopts, again, a rather deprecating tone, suggesting a moral deficit in the patient, rather than behaviour resulting from early narcissistic damage, as I would see it. She also identifies the pronounced intellectual and gifted aspect, but does not give an aetiological account for the existence of such capacities.

More recently, two British psychoanalysts have addressed the "as if" personality in different ways. Ruth Malcolm Riesenbergs considers that the "as if" construction is similar to a false self insofar as it is a response to a lack of maternal devotion or an alpha father. "This results in fragmentation which becomes precariously enclosed in a false structure . . . based on a falsely idealized object" (Malcolm Riesenbergs, 1992, p. 115). She employs the term "splicing" for the defensive longitudinal splitting that characterizes the destructive

attacks on the analysis that lead to the sense of meaninglessness in the analytic work, in her view the result of the operation of minus K in Bion's sense. Malcolm Riesenberg suggests that the underlying pathology is envy and the internalization of the mother's pathology, but she avows that she is left with questions as to how the particular type of splitting she calls "splicing" establishes itself as a primary way of functioning.

By contrast, my understanding of this clinical situation is based on a view that the sense of impoverishment of the self is due to the effects of dissociation from traumatizing experiences with an original longed for and idealized other. Dissociation is a survival strategy, necessary to maintain the sense of intactness of the self by separating the self from its noxious experience, which may include the experience of the absence of the other, but it leaves at the core of the self a void where the now dissociated experience ought to be lodged. If and when the experience is eventually retrieved, the self is then left to re-experience the original trauma in an acute and vivid way.

I will take leave of Malcolm Riesenberg by quoting an observation she made when working with a patient with holes in her sweater who was speaking in a particularly grandiose way. Her thought as the patient spoke was: "Are holes the substance of this garment, and will the wool hold them together?" (Malcolm Riesenberg, 1992, p. 115). This observation is emblematic of what I am seeking to evoke in using the term "as if" to denote the psychic reality of this type of personality in all its precariousness as well as its potential for true creativity.

In *The suspension of belief and the "as-if" syndrome*, Ron Britton describes an important aspect of the "as if" make-up when he notices that in the face of traumatizing experiences, both internal and external, the "as-if" patient maintains a state of "either/and", "remain[ing] poised between what they fear in their own minds and what they fear in the world outside them" (Britton, 1988, p. 61). Consequently afraid of both projection and introjection, "they are refugees from the external and internal world. Their refuge is . . . what Winnicott called *transitional space* . . . 'the resting place of illusion' . . ." (Rodman, 1987, p. 123), making of "this resting place or reservation a permanent home" (Rodman, 1987, p. 61). This kind of dissociation, or disavowal as he describes it, from unacceptable reality in favour of "practical fictions", results in what he calls a "Never-Never Land", "an illusion of infinite postponement" (Rodman, 1987, p. 63). This is done through

the maintenance of a substitute internal holding environment, which uses the principle of inverse symmetry "to accommodate opposing ideas without reconciling them" (Rodman, 1987, p. 68), as both subject and object are diametrically split and identified with. "By this means [the patient forms] a half-identity in projective identification with one object and another with its negative" (Rodman, 1987, p. 63). In my view, this may be more the result of the internalization of the pathologizing dynamics in the parental couple locked in an unconscious cross identificatory defensive illusion, or a shared unconscious phantasy (Fisher, 1999).

Amongst Jungian writers, Maureen Sheehan (2003) has discussed John Steiner's notion of "psychic retreats" (1993), a self-care system affording illusory protection from undue psychotic or depressive anxiety. She notes that through countertransference identifications in the analysis of the "as if" personality the analyst risks feeling like an "as if" analyst herself. I will elaborate the importance of the countertransference in working with "as if" patients later. Margaret Wilkinson (2003) has likened the "as if" personality to cloning, where the identificatory processes so necessary for the "as if" to survive are as if appropriating aspects of other objects, people or experiences in the environment to furnish the otherwise empty internal void. Psychoanalytic psychotherapist Nina Farhi, influenced by the work of Winnicott, considers the capacity for this kind of imitation "annealed indentification" (Farhi, 2003).

The "as if" personality and Jung's concept of the persona

Jung identified the "persona" as one of the major archetypes in his system of the archetypes of the collective unconscious. The persona is thought of as having a more social than personal psychic function, in that it is the configuration that the self presents to the world. It is therefore considered to be the most exterior in the constellation of archetypes, with the self envisaged both at the core and as the entirety of the person. Although not inherently pathological as the false self, Jung's concept of the persona is, like the false self, an adaptation to the demands of the external world. This view of the persona can be contrasted to what I am calling the "as if" personality, which is a construction central to the self in a situation where the self has not met a sufficiently well-attuned environment. There follows an

internalization of an experience of emptiness, when the self has not been met sufficiently well by another, a sense of a void at the centre of the personality, what one patient called a “no man’s land”. In adapting to this, the self seeks out experiences that are more syntonetic and promising to identify with—a scene in nature, beautiful music, a pet loved more than any other object. There then follows a cumulative series of internalizations and identifications, building up a sense of internal resources, which the self then uses as if its own. However, at the core of the self there is a feeling of “*faute de mieux*”, as one patient called it, a sense of this internal state of affairs as a “second best” solution in the face of the empty and absent void that is experienced as primary and central.

The “as if” personality and Winnicott’s concept of the false self

The “as if” personality differs from Winnicott’s (1960) concept of the false self in important ways. The false self arises in order to protect a true self that is in jeopardy of losing the sense of its own viability through the pressures of a hostile environment, usually of a pathologizing family. It is a compliant adaptation to the outside world, and overlays a sense of the self’s identity, which is in peril. A false self construction is not a substitute for the true self, but rather serves as a protective covering to it. In the case of the “as if” personality, however, the unfolding of the self, which includes seeking out nourishing attachment figures meets instead a blank, hostile or inappropriate environment that is so misattuned to their subjective reality that the person feels unseen and/or noxiously related to. As a result, the person seeks sources of nourishment from the wider environment through a series of identifications that are built around the initial experience of a void. Dream images of a carapace or scaffolding, often occur in analyses where this level is being accessed. There is an aura of precociousness—a patient learned French and German as a little girl because she borrowed operas from her local library and listened to them again and again, internalizing the sound of human affect that was so missing in her environment.

For the “as if” personality, it is a question of psychic survival. The self may have been brilliant at seeking out, identifying with, and internalizing non-toxic experiences in order to build up a more

benevolent and creative internal psychic structure; nonetheless, there is always a sense of emptiness or void at the centre of this construction. Hence, a sense of secure self identity and secure attachment capacity is not available. Successive experiences have met with emptiness, blankness, or absence, an experience which is then internalized through the processes of deintegration and reintegration as described by Fordham (1957), creating the sense of the emptiness at the centre. In the case of the false self, however, the self has met with a series of harsh or inappropriate expectations from the outside world, which it then seeks to protect itself against by creating a false structure of compliance around the true self in order to be accepted and at the same time ensure the true self's protection.

A note on confidentiality, consent, and methodology

Writing about "as if" patients brings with it a number of particular risks. So much of the pathology has to do with the loss of trust towards an important other, that the project of using their material in case presentations is particularly perilous, even though they have given their consent. Seeking the patient's permission to publish their material has now become generally accepted. In the case of "as if" patients, however, there is an increased possibility of two risks in particular. The first is that they will give consent in an "as if" way, based on idealization of and identification with the analyst, but then at a deeper level feel exposed, abandoned, and used by that very analyst, thus repeating their traumatic history. The second is that they may easily come across the published material, either because they already work in the field or have ready access to information about the author over the internet and in other ways. For these reasons, in writing about "as if" patients I have decided to present "composite patients". In this chapter, I will present "Della", who will carry my representation of the aetiology and psychic state of the "as if" personality. A further reason for doing this, besides that of confidentiality and the protection of the patient's trust and my wish to avoid risking a sense of betrayal, is that I am writing about my own cumulative clinical experience, which I have already begun to address in previous publications using material from a number of patients. Of course, presenting a composite patient to represent in aggregate form the material of various patients under the same

conceptual umbrella has its own drawbacks, but it feels, overall, *faute de mieux*—an “as if” case presentation about the “as if” personality which has some poetic justice to it. Some of these knotty questions have already been considered by writers concerned about issues of consent and publication, such as Gabbard and Lester (1995), Tuckett (2000), and Wharton (2003).

Some of the patients who have gone into composing Della are in the broad psychotherapy, healthcare, and education professions; some are artists and scientists. All have made important contributions to their field. A certain level of sophistication, knowledge of, and interest in the analytic enquiry may be an important component in acting as an auxiliary holding environment for accomplishing the analytic task, reinforcing the experience of the analyst’s holding capacities, in the face of often unconscionable psychic pain, fear, pressure, and panic. It was familiarity with and overall confidence in the analytic task that contributed to their capacity to tolerate the sheer terror and deep distress that they were being caused by bringing to mind former traumatizing experiences and of testing the analytic relationship and container for its usefulness and trustworthiness. In Chapters 6 and 7, I have addressed the particular benefits of the containing aspects of the internal marriage of the analyst to the analytic attitude that represents an experience of a nurturing couple for the patient. As much for the analyst as for the patient, the containment of the analyst in his or her marriage to the analytic attitude, a kind of analytic third, gave structure, protection, meaning, and confidence to the joint analytic endeavour, supporting the hope that investment in it could bring therapeutic results—although certainly there was no guarantee of this at the outset. It made it possible for both to tolerate the real existential anguish, doubt, and sheer “not knowing” that were required in risking the eventual outcome.

Introducing the “as if” personality

The “as if” personality can be thought of as consisting of several components that appear to cluster together in the personality, much like the elements of a compound chemical. Glasser (1979) described the “core complex”, which he considered as a cluster of elements found in the perversions and psychopathic behaviour. My view

focuses on a different profile from that described by Glasser's "core complex", but I find the cluster model helpful in listing the component elements. Typically, in the "as if" situation, the cluster forms into a disturbing psychosomatic "pocket" or "space" within the "greater personality" that appears to function well, often very creatively, seemingly separately from the "as if" area. However, the greater personality is certainly deeply affected by its "as if" component, acting as a parasite as it does, often leading to physical ill health, certainly to great psychic distress and alarm, and to difficulty in maintaining prolonged intimate relations with another. The "as if" patient can suffer from a limited capacity for transcendent functioning, integration, and individuation, since at the level of the "as if" there is a deficit of symbolic function, despite the availability of this function in other respects, particularly in the capacity to work with sophistication, finesse, and a level of abstraction. Thus, it can be quite startling for the analyst to suddenly be confronted with concrete and inflexible psychic states in a patient who just a moment ago had been speaking with symbolic sophistication about a recent dream or an important encounter. The consequent difficulties in the analytic relationship can be quite acute, and may be experienced as intractable because inevitably the characteristics of the pathologizing environment will be re-experienced in the transference and countertransference. The substantive reality of the existence of the patient's self was eschewed by their important others, and hence the other was experienced as extremely poisonous to the self, or as a bizarre object that was liable to appropriate a part of the self and render it alien or mad. In the analytic situation, the analyst can be experienced in a similar way.

Furthermore, the rule of abstinence that ensures appropriate boundaries are maintained between patient and analyst will be likely to be called into question for two important reasons. Firstly, often in the history of "as if" patients there have been experiences of abuse, physical or emotional violence, undue intrusions, or both, or else the witnessing of abuse within the family context. By the very nature of the transference and countertransference relationship these experiences will re-emerge in order to be dealt with. Equally, the rule of abstinence will be evoked between patient and analyst because the felt needs of the abused and deprived infantile aspects of the patient yearn for those physical and psychological experiences of

attunement that have been missed developmentally. Instead other, more noxious experiences had supervened, forcing the self back onto defensive strategies of self care. If an important part of the work with "as if" patients consists in dealing with these noxious deficits and the needs of the small child for secure physical and psychological containment, then it is not surprising that the wish for physical as much as for psychological contact between the analytic pair will be felt intensely. At the same time, a part of the urgency of the felt need will belong to that aspect of the patient's experience that came from the abuse. Much careful analytic work is necessary in distinguishing and managing these needs, which are felt as life-and-death emergencies that could lead to psychic, or physical, dissolution.

One of the most prevalent of the self-care defences is dissociation, with the concomitant effect that the memory of the trauma is cut off from mental representation and stored in the body, particularly in those neurological structures and systems that deal with self regulation and self protection, such as the cortical and subcortical limbic and the autoimmune systems. The analyst is sorely tested in the transference relationship to discover if he or she is really trustworthy or is yet again another who will betray, abuse, or otherwise endanger the patient. This possibility is watched for with enormous vigilance, to the extent of constantly anticipating—and thus provoking—retraumatization. For example, for a number of such patients their first analysis ended in sexual acting out. The intensity of hypervigilance persistently threatens the progress of the analytic work and the patient's capacity to trust the analyst, repeating old patterns of abuse. Analytic insight into the coping strategies adopted by the psyche in order to survive a traumatizing past, thus increasing the capacity for secure object attachment threaten to dismantle those defensive strategies, with resulting psychic panic. Self-care systems fight back at the point where they may possibly be jettisoned. This may be what has been designated as negative therapeutic reaction. However, I think that often it has as much to do with the autonomy of the defences *in extremis*, when the old defensive strategies that had at least ensured psychic and sometimes physical survival are ready to be abandoned. At this time, such defences are weakened in order to be replaced by more trustworthy attachment relationships, which may feel too risky to bear. In a terrible vicious circle, analytic gains are felt as carrying increased

risks of retraumatization as the self becomes increasingly permeable to influence from environmental objects.

Dissociation and the embodied self

Perhaps the most central factors concerning the "as if" personality are focused around the internal management of psychic functions regulating the processes of internalization, identification, and dissociation in relation to the embodied self. As analysts, the notion of the embodied self is finally and firmly embedded in our understanding about early experience and its links to what happens in the consulting room. We know through the work of numerous writers, not only from our own analytic disciplines but also from the fields of psychoanalytic intersubjectivity, child development, attachment theory, and the neurosciences, that lack of appropriate early caretaker relatedness leads to multiple deficits, neurophysiologically and psychologically, that have cumulative and interactive correlates at the emotional, cognitive, behavioural, relational, and neurophysiological levels. This has been addressed extensively by Stern (1985), Trevarthan (1989), Schore (1994), Pally (2001), Beebe and Lachmann (2002), Cozolino (2002), Solms and Turnbull (2002), to list a few outstanding contributors. In this context I would like to mention in particular the work of two Jungians, Jean Knox (2003) and Margaret Wilkinson (2003), who, through their different approaches, have each made important links between Jungian analytic theory, attachment theory, and the benefits of neuroscientific understanding, to show the real and serious effects of these early deficits, including their eventual impact on the analytic encounter.

The integration of attachment theory and developmental psychoneurobiology in the work of Allan Schore (2003) has achieved a far-reaching contribution in the understanding of varieties of post-traumatic stress disorder (PTSD). The description of the underlying processes of dysregulation of the right brain following early relational trauma is particularly relevant to the present discussion. He emphasizes the role of the biochemical changes leading to hyperarousal and hypervigilance on the one hand, and to the parasympathetic mechanisms of shutdown, avoidance, and dissociation on the other, both of which are largely determined by right hemisphere systems in the developing brain. This pattern of

traumatic dysregulation has direct consequences for understanding the transference–countertransference dynamics in the treatment of the “as if” personality. In Schore’s view, “the ‘affectively charged traumatic memory’ is . . . a reevocation of a prototypical disorganised attachment transaction with the misattuning social environment that triggers an intense arousal dysregulation” (Schore, 2003, p. 259). This situation underpins the experience in the transference–countertransference of dramatic swings between high activation and anxious phobic states and the deadening shutdown and dampening of relational affect related to withdrawal and dissociation. For a fuller discussion of the implications of the neuroscientific underpinnings of the dissociative disorders relating to trauma than is possible here see Knox (2003) and Wilkinson (2003; 2004).

Into this already extant and well-documented view of the embodied self, I wish to add and emphasize that for the “as if” personality, the effect of early experience of an absent, unresponsive, or abusive other and the exposure to abusive and hateful behaviour by the other leads to neurophysiological stress and traumatic dissociative responses. Dissociation is followed by the internalization of a terrifying sense of an absence, an emptiness, or a void, and threats to the survival of the self, in that place where there had been the archetypal expectation of finding a responsive, benign other who would facilitate the self’s physiological and psychological growth and unfolding through good-enough attunement. The ordinary “good-enough” routes of communication, healthy responsive exchanges between self and other where archetypal expectations of the self unfolding have enabled the establishment of a secure sense of identity and self-regulation have been massively put into jeopardy throughout early and then later development. Instead, the experience of the environment as traumatizing, abusive, or abandoning have occurred to the young self prior to the self’s capacity to conceive of the experience in any realistic way. Ego syntonic methods of self protection and regulation are then unavailable. This is because the abusive or deficient experiences, too high and/or too low levels of physical and psychological arousal, including sexualized, eroticized arousal, and other forms of abuse, with the accompanying sense of abandonment and insecurity, have occurred before there exists sufficient capacity to process the environmental onslaught. An experience, say, of sexual arousal

occurred precociously, in developmental terms, when the psychosomatic system was not yet equipped to cope with or integrate it. Then the more primitive limbic system supervenes over the higher order cortical processes. The self cannot continue to be mindful of its own experience and is forced into dissociation. There follows the collapse of the ordinary psychosomatic means of self-regulation. In such circumstances, for instance in the case of precocious sexual experiences in situations of childhood sexual abuse, the self's natural, imaginative self-explorative experiences in physical and psychological relation to another have been usurped in the service of another's narcissistic use of the self as an object. The resulting physiological and psychological states of hypervigilant high arousal emerge and are re-evoked in the course of the analytic work, when the patient is bearing the agony of retrieving vivid, traumatizing experiences, which had been lost to explicit memory, eschewed through denial, disavowal, or dissociation.

Introducing Della—the self created self

Della sought intensive, long-term analysis, after having risen rapidly in her profession, becoming the director of a number of leading organizations. Because of her many capacities she had taken on extensive responsibilities throughout her working life, which she was able to handle conceptually and creatively, but which she was beginning to experience as increasingly burdensome, physically and psychologically. Despite her successes, there was a sense of not having found her real niche, the place that would afford her a sense of satisfaction, both professionally and personally. Indeed, she was exhausted and felt ill a lot of the time. She had very little sources of physical or emotional replenishment outside of the work satisfaction that she enjoyed and the physical activities she pursued. She had won widespread recognition for the quality of her work, and she excelled in the pastimes she pursued. There was a high degree of narcissistic satisfaction in her achievements, which was both valid but clearly compensatory to feelings of physical and mental depletion.

Della was in an unfulfilling and childless relationship. She feared that she might repeat her experiences of growing up in a highly dysfunctional family, and yet she had excellent relationships with young people, and was sought after as a godmother and aunt. She

had been neglected as a child and there was a constant query about possible sexual abuse of which there was no explicit memory. She was aware of overwhelming impulses to take on inappropriate tasks and responsibilities towards her family that left her feeling even more depleted and abused. She had always been exceptionally bright and gifted, and was particularly adept from childhood at compensating for the deficits of nurturing in her family by finding sources in the environment of nourishment and restoration that enhanced her intellectual and human capacities. I began to understand that she would seek out nurturing experiences in order to internalize and identify with them, so adding to her real capacities for work and relating. For example, as a young girl, she would watch romantic movies over and over again in order to hear the sound of love in people's voices and to see them relating to each other in loving ways. She saw one particular foreign language movie so often that she learned to speak that language adequately enough to pass an examination in it. She took opera records out of the library before she was in her teens in order to listen to and take in the quality and timbre of the voices, becoming familiar with a number of languages in so doing. There was an area in the local park that filled her with a sense of beauty and steadfastness. There was an important figure in childhood who performed a caring and thoughtful, if limited, parental function—these could have been a grandmother, a sibling, a cousin, a nanny, a pet. None of these figures, or experiences of culture, or of nature, could stand in for the enormity of the loss of ordinarily devoted, caring, and loving parental figures, whose psychological and physical absence had created such an experience of void in Della's inner world. But they were sufficient in catalysing an archetypal self experience which then made subsequent helpful experiences possible, thereby building up a repertoire of identificatory experiences with benign objects that could be used as vehicles to develop the self into its future, indeed, precociously so.

This type of internalization and identification is emblematic of compensatory experiences that Della was able to employ to create a self that was closer to her ego ideal than would have been possible had she remained identified with her family of origin. The clinical picture that Della presented did not seem like a false self or have a superficial quality to it, although there were narcissistic features. But there was no doubt that she was in jeopardy, physically and

psychologically. Della fell into a debilitating depression prior to seeking analysis with me. She had suffered a number of disastrous life events that had left her feeling bereft of many of the supports she had put in place, including those in her work. And yet she recognized at the same time that she needed to make necessary adjustments to the overly demanding and hypervigilant way of living that she had habitually required of herself previously. Della was aware that behind her hypervigilant, overly active involvement in her various activities, she experienced a continuous sense of living in a void, a land with no topography, a fortified encampment in the middle of a no man's land, where all around her was fog and haze, with no means available to orientate herself.

Della's mother had been emotionally and often physically unavailable, dependent on drugs and prone to serial relationships with violent men. We thought that she was likely to have been clinically depressed on several occasions throughout Della's childhood. She was distant and averted her eyes, literally and symbolically, as she avoided acknowledging the abuse that was happening to her daughter in her own house. The parental couple was highly dysfunctional and father was certainly not a trustworthy man, being prone to violence but essentially weak and ineffectual. Della did not have a specific recollection of being abused by him, but she was conscious that one of the reasons she became so physically strong and adept, was to develop a powerful physical and emotional presence. Once, in adulthood, during a relationship with an intimidating man, she found the strength to warn him that if he touched her again, she would kill him.

*The body as the location of early traumatic memories—
somatization of dissociated experiences*

The experience of early traumatization, often sexualized, or some disastrous abandonment, is a feature of the "as if" personality. The reality of the traumatizing experience is most often dissociated from and may be lost to memory, or, if not, it is held in memory in a way that one patient described as "eternally terrorizing". Because traumatic experience happens before the higher cognitive functions are ready to process it, it is liable to be stored in body memory, or in an unintegrated area of the psyche, a psychic "pocket" that can

only be approached analytically when certain conditions and safeguards are met. In the consulting room, there is often a rhythmic pattern of active vigilance, followed by a loosening of the defences if the self feels itself safe enough in the presence of the analyst, a regression back to primitive states of mind around the trauma, intense excitation and disturbance in the transference with concurrent distress in the countertransference, and then some kind of resolution, albeit temporary, only to be rekindled by a new source of excitation. Given the degree of distress, it is often the case that the patient is held in analysis by a conscious motivation, for example not to pass down to their children or to important others the pathologizing tendency inherited from their family of origin; or they may be in analytic or psychoanalytic training with requirements for maintaining ongoing personal analysis; or they may be intrigued by the analytic enquiry enough to stick it out.

In almost every case that I have had experience of, the patient's body has had to share the burden of the traumatizing experience with the psyche. It is as if the psyche could not tolerate the full impact, or else could not make sense of the experience except by rendering it into organic form, or because the traumatizing history had such real toxic effects on the physical system underpinning the self's psychological experience. I think of these physical diseases as symbolic not in the sense that "psychosomatic" illness used to be understood, as the physical effects of avoiding the conscious effort and pain needed for psychological insight, but rather because thereby the body represented to itself its own trauma. Eventually when the self's vital resources dry up, a collapse occurs and often physical illness results. The symbolism lay in the fact that these were either autoimmune or neurological diseases or conditions. In my experience, this could be rheumatic arthritis, lupus, or other neurological complaints such as eczema or ME. The body is made to carry the physical manifestation of the unconscionable complaint in two ways: firstly, as a self attack, in that the traumatizing experience was like the attack on the self against which the self had no defence, it thus broke through the usual immunity that the self has by virtue of its being a self-regulating system supported by a good-enough environment; and secondly, as an acknowledgement on the part of the psyche/soma system that the ways on which the self had habitually relied to deal with the effects of such trauma were no

longer viable. To rely on the expenditure of prodigious amounts of the self's reserves of psychic and physical energies, along with the ongoing hypervigilance and inordinate alertness to the possibilities of retraumatization, was no longer either possible or appropriate.

Della's inordinate efforts, which had made her so successful in so many ways, eventually took their toll. She continues to be treated for a multitude of symptoms including irritating and unsightly skin complaints, excessive adrenal production, and a vital organ malfunction. The narcissistic losses entailed in foreclosing on her high-achieving efforts and the resultant underlying toxicity, depression, and despair that had always been lurking, were almost intolerable when they surfaced psychically. There were times when she was certainly not sure whether the analysis had left her in a better or worse state than before, but she acknowledged that in any case she could not have carried on at the pitch she was living previously. Reconciliation to the current losses in her life became linked to the realization of the extent of the disastrous failures of her original environment. A further breakthrough occurred when she could really begin to know that essentially she had a benign, if ordinarily limited, analyst who would not abuse her and on whom she might attempt, at times, to feel dependent and related to.

Countertransference and the role of enactments

Not surprisingly, the nature of the countertransference in the work with "as if" patients is critical, both in the information about the patient's internal states which is thereby made available, but also in the dynamic between patient and analyst that can catalyse change in both benign and malign ways. Through the vehicle of projective identificatory processes, the analyst inevitably experiences at different times much of the psychological and physical contents of the "as if" patient's experience. However useful this is, it is also perilous and leaves the analyst vulnerable to being infected by the toxic contents. Due to the nature of the pathologizing history, this is liable to include psychosomatic precipitates, states of ill health, psychic numbness and fugue states related to dissociation, and openness to the possibilities of intrusion. In my work over these years, I have been prone to a number of such responses. Through my own reflection processes and the help of peer consultation, I hope

that it has been possible to process and metabolize these sufficiently well so that neither the patient nor I were too negatively affected. Much of the work has been to distinguish and differentiate my own liability to react in certain ways particular to myself and my history, from those reactions that the patient is evoking. Ongoing reflection about how my responses are different from those of my patients has been essential in the internal preparation to appropriately respond to these countertransference experiences. The importance of being open to states of "imaginative identification" in Fisher's (1999) helpful notion assists this process, allowing empathic understanding as well as focused thinking regarding what is experienced by patient and analyst alike as toxic and repelling, and therefore liable to be eschewed. This is particularly crucial when there is work to do on the retrieval of experiences of childhood sexual and other sorts of abuse, which the psychosomatic whole would naturally rather avoid, and against which there are already well-established defensive habits. If the analyst becomes aware of their own sleepiness, internal anaesthetization, day dreams apparently irrelevant to the patient, avoidance of the patient's material, or undue impulses towards the patient, then they have likely come under the influence of identificatory processes in relation to the patient's dissociative defences. A particular sign of this is the somatic nature of the analyst's responses.

Perhaps the central area of concern in the countertransference is the possibility for unconsciously informed enactments to occur. We know that the potential for enactments in analytic work is ubiquitous (Chused, 1991), but in work with "as if" patients it becomes extremely important because of the amount of inappropriate, intrusive acting out that have occurred in their backgrounds, and the hypervigilance that is experienced in the here and now lest retraumatization recur. Kalsched (1996) has been eloquent in his evocation of the extent to which the psyche defends itself against the possibility of retraumatization, such that it creates and identifies with an internal psychic function in the very image of the persecutor it is defending itself against. The factors that seem to be most potent here are the sexualization of object relations and the disinhibitions and intrusiveness that characterize them. In imaginative identification, the analyst becomes particularly vulnerable to a readiness to receive the hypercathected experience, whether it is extremes of idealization or

deprecation. Then any word or phrase, any physical gesture or facial expression that was meant in one way is liable to be experienced as its opposite, usually sexualized or otherwise suggestive of the pathologized contents of the "as if" personality. The analyst is then left with the excruciating feeling of having revealed an unconscious content or suggested a lewd meaning that did not exist in conscious thought. All this happens with split-second timing, with a sense of damage done without immediate means of repair, characteristic of the traumatizing experience itself. Of course all this is useful information about the patient's internal psychic state, but it increases the pressures experienced by the analyst in relation to the patient, which the analyst must in turn find ways of regulating so as to advance the treatment by modelling to the patient new ways of appropriate self-regulation.

Concluding remarks

The group of elements that can be included in the clinical picture I have been describing under the term the "as if" personality appears to be applicable to a subcategory of patients falling within the spectrum of the dissociative disorders. These can be seen as responses to a variety of traumatogenic situations to which the self responds with varying degrees of cognitive or affective dissociation. Although not all of the elements are required to form the "as if" cluster, it has been remarkable in my clinical experience to have come across patients in whom usually all appear.

To summarize, the cluster of psychoanalytic elements that form the "as if" personality includes: a sense of void at the centre of the self; traumatic early experience including abuse and neglect; psychosomatic collapse, often including autoimmune or neurological pathology; hypervigilance and hyperarousal, which also places high demands on the psychosomatic whole; high levels of creative achievement; with value and meaning; excessive demands on the analyst's countertransference.

Working with "as if" patients is a remarkable experience, where both patient and analyst feel tested but also engaged in meaningful work. Is it worth the risk? With hindsight it is possible to state that—as a minimum—there were psychic gains in all cases, greater life freedoms became available, even though the possibility of total

release from the deficits, impacts, and exigencies of the past was too optimistic. The investment in terms of time, money, and psychic suffering were certainly colossal. However, as Della once said, "There is no going back; the void is being filled with me—I am being re-covered."

PART IV

ETHICS IN THE PSYCHE: ETHICS IN THE CONSULTING ROOM

Ethics in the psyche: ethics in the consulting room

This Part brings together three papers on professional ethics and its sources in the acquisition of an ethical capacity of the self.

Chapter 11, "The ethical self", shows how Jung's model of the psyche offers an understanding of how an ethical attitude develops personally and how the nature of the ethical attitude underpins analytic practice. Throughout the *Collected Works*, Jung stressed the centrality of moral and ethical values in psychotherapeutic treatment. The recognition and integration of the shadow is crucial to the self's capacity to develop and grow, to individuate and to fulfill the self's ethical nature.

It is argued that the ethical capacity is at least in part, innate, derived from the earliest, instinctually driven exchanges with the primary caregiver. The identification and internalization of the agapic function in the parental figures may catalyse a nascent ethical capacity in the young mind. The primitive acts of discriminating the bad and splitting it off from the psyche by projection into the caregivers, constitute the preconditions for the creation of the shadow, which eventually will require a further ethical action of reintegration.

In Chapter 12, "The ethical attitude: a bridge between psychoanalysis and analytical psychology", the ethical attitude is shown to be an essential part of the analytical relationship and is not just an addendum to the practitioner's work functioning, as an analytic superego. A Code of Ethics is not merely a checklist that may be

forgotten as long as it is not transgressed. A genuine ethical attitude, compared with living according to an existing code, allows for transformation and integration. It provides a thinking space in which the other can be apprehended and treated as other, and not appropriated by the self in the service of its own needs. Analytic practice and the ethical attitude are intimately bound together; each permeates the other and defines and gives value to the other. This reflects the analytic relationship itself in which, as Jung stressed, both partners make themselves available to, and are liable to be changed by, the encounter with the other. This is the essence of analytic work and of the ethical attitude.

Professionally, ethics is with us all the time. Every action we take has an ethical aspect, which, if ignored, can have serious implications for our capacity to maintain appropriately professional conduct. What makes me an ethical being is the unique and non-reversible nature of my responsibility to another, regardless of whether the other sees their duties in the same way towards me. In the consulting room, the analyst undertakes the maintenance of an ethical attitude, which the patient is not called upon to adhere to in the same way.

Unconscious identification between patient and analyst, without the discriminating function of thinking and reflection, can lead to the perversion of the ethical attitude. The “special act of ethical reflection” as it appears in the consulting room, requires special conditions, in particular the maintenance and protection of boundaried space.

The ethical attitude can function as a bridging concept between psychoanalysis and analytic psychology. It causes us to stretch deeply into the bases of the developing psyche and includes commonly held, collective core values, thus providing an opportunity for the joint study of the sources and conditions for maintaining one of the deepest expressions of our humanness. How to deal with pragmatic ethical issues in the consulting room, in our analytic organizations, and with our colleagues is a common concern for psychoanalysts and analytic psychologists. Our shared analytic attitude is essentially an ethical attitude.

In Chapter 13, “The ethics of supervision: developmental and archetypal perspectives”, the importance of ongoing supervision post-qualification in helping to maintain ethical thinking and practice in clinical work is considered in terms of the provision of a third space that enables emergence from the cross identificatory processes

inherent in the analytic relationship of the transference/countertransference dynamic. Ensuring the provision of a sustained triangular space through supervision creates the opportunity for further analytic reflection, where two people work together to think about a third, whether the third is an individual, couple, family, or an idea or aspect within the analyst that is relevant to their clinical work. The archetypal nature of the triangular relationship underpins the achievement of the mental capacity for ethical thinking. The creation of a third space creates an opportunity for analytic reflection and fosters the capacity to be properly related to another.

Supervision has an ethical as well as a clinical role to play in all analytic and therapeutic work, regardless of the practitioner's experience. It fosters an ethical attitude in the candidate as they internalize the expectation that all analytic work, including that of their own analysts and supervisors, is subject to reflection in this third space. Fostering this expectation is more likely to engender a commitment to the analytic attitude as the tradition of good clinical practice is passed down the training generations. However, this may mean that the primary training aim—that of assessing that the candidate is ready to work independently—has to be revised. Instead, the expectation that the practitioner will ensure they have continuing supervision or consultation on their clinical practice is a sign of maturation.

The ethical self

The peculiarity of “conscience” is that it is a knowledge of, or certainty about, the emotional value of the ideas we have concerning the motives of our actions.

(Jung, *CW 10*, para. 825)

[F]or Jung . . . ethics [is] the action of the whole person, the self.

(Stein, 1995, p. 10)

Preamble

Common usage often conflates ethics and morals. In this paper a distinction is implied throughout between morality and ethics. Morality is indicated by the adherence to a set of stated principles or rules which govern behaviour (for example, the Ten Commandments, or a professional Code of Ethics), whereas ethics implies an attitude achieved through judgment, discernment, and conscious struggle, often between conflicting rights or duties (for example, the duty of confidentiality vs. the duty of protecting a person from potential harm). In this I follow Jung who made the following useful distinction:

. . . in the great majority of cases conscience signifies primarily the reaction to a real or supposed deviation from the moral code, and is for the most part identical with the primitive fear of anything unusual, not customary, and hence “immoral.” As this

behaviour is instinctive and, at best, only partly the result of reflection, it may be “moral” but it can raise no claim to being *ethical*. It deserves this qualification only when it is reflective, when it is subjected to conscious scrutiny. And this happens only when a fundamental doubt arises as between two possible modes of moral behaviour, that is to say in a conflict of duty.

(Jung, *CW 10*, para. 855)

Introduction

This chapter seeks to address the question of whether Jung’s model concerning the structure and processes of the psyche can offer us a specific and helpful approach to understanding the ethical attitude, and, in particular, the ethical attitude underpinning psychotherapeutic practice. Inevitably, any discussion of Jung’s model of the psyche brings us to the core concept of the self, including its defences and dynamics, both in personal as well as in archetypal terms. The nature of the self has direct bearing on the question of Jungian thought and the ethical attitude. Are we born with a capacity for ethical thinking and behaviour, or do we learn it through the socialization processes of identification, internalization, and introjection?

Depth psychologists approach issues about the self according to two main theoretical frameworks, roughly corresponding to the nature/nurture debate. It is tempting, indeed in classical scientific conceptualization it has been habitual, to keep the terms of the nature/nurture debate regarding the ontology of the self as separate lines of enquiry. When it comes to identifying the sources of the capacity to understand complex situations in ethical terms, and to behave in ethical ways, the nature/nurture debate is of central importance in assessing whether, or the extent to which, the ethical attitude is innate or learned. Both have implications for our understanding of the ethical bases of our behaviour as human beings and as psychotherapists and analysts.

The first framework, corresponding to the nature side of the debate, centres on the idea of a primary self with innate, universal deep structural features that are instinctual but which have archetypal imaginal correlates connected to and often arising at the time of the individual’s passage through the major life stages. This is the self that the individual is born with, containing the potential for his

or her future development. It includes the very hardwiring of the brain that underpins such functions as the instinctual drives, emotional responses, and intellectual capacities.

It is not immediately evident that an enquiry into the sources and origins of the ethical attitude might be found on the nature side of the debate, where the focus is more often on understanding the hardwiring components of the self. However, recent scientific evidence gives some support to the view that there is an innate, genetically based ethical capacity. From the field of evolutionary genetics, Sober and Wilson (1998) have argued that altruism has evolved for purposes of survival and reproduction (the so-called "altruistic gene").

Intuitively, it might at first seem plausible that the sources of the ethical attitude are located in environmental caretaking, partly because the self's relationship and conduct towards another is the foundation of the ethical attitude, and partly because, in reflecting on the instinctual life of animals, who, as far as we know, are sentient but not conscious, we do not usually attribute to them a capacity for ethical judgment and behaviour.

Thus, on the nurture side of the debate, there is abundant evidence of the impact of the environment on developmental processes. Winnicott's famous phrase "... 'there is no such thing as a baby'—meaning that if you set out to describe a baby, you will find you are describing a *baby and someone*. A baby cannot exist alone, but is essentially part of a relationship" (Winnicott, 1964b, p. 88) succinctly expresses the depth of the impact of those external sources on the self's ontology by articulating the view that the self can never, from its very beginnings, be considered apart from another self: this is clear from the fact that the neonate is totally dependent on others for its protection and sustenance. The methods and modes of relating that contribute to and are the vehicle for the development of an individual's identity have been elaborated variously by object relations theory (see Kohon, 1986, for an overview), attachment theory (Bowlby, 1969), intersubjectivity (Aron, 1996; Kumin, 1996; and Stein, 1995).

An interactive model of the impact of innate and environmental influences on the origins of the self would seem the most credible, and recent scientific evidence supports this view. For example, the new field of psychoneurobiology has shown that the development

post partum of the neural circuitry and structures of the infant's brain which regulate the development of the higher human capacities are dependent on the existence and quality of the early interactions between infant and mother or caregiver (see my discussion of the implications of these findings in Chapter 8 in this volume, and in particular, Schore, 1994; 1996). Daniel Stern (1985) has made a powerful contribution to this area from the field of developmental psychology, where he has analysed the different modes of fit and attunement between the infant and its mother that create the basic patterns of being and becoming that characterize individuals as their unique selves. The emphasis here is on mutuality, with both infant and mother actively generating exchanges, which have a direct impact on the development of the neural circuitry of the infant.

Thus, since the infant instinctively seeks to participate in activating the type, number, and timing of these mutual exchanges, we can infer that the infant, a proactive partner, is thereby participating directly in the development of its own neural circuitry, in its own neural growth. Moreover, it is this particular circuitry that determines the cognitive and socioaffective responses which must eventually have bearing on and underpin the achievement of the ethical capacity. This suggests that there are grounds for considering that the ethical capacity is, at least in part, innate, derived from the earliest, instinctually driven exchanges with its primary caregiver, and, at least in part, influenced by environmental factors, by the impact of that very caregiver's capacity to be responsive to and to initiate appropriate and meaningful interactions with the self.

It is for these reasons that the ethical capacity should be located firmly in the overall study of the self, and, in particular, that it has a claim for a central place in analytic thinking. It is therefore surprising that, with some notable exceptions, there is a dearth of theoretical work or published clinical material within the broad psychoanalytic and Jungian analytic *opus* that directly seeks to address an understanding of the origins of the ethical attitude, to integrate it within a view of the self in developmental and archetypal terms, and to locate it as an intrinsic, *a priori*, component of the analytic attitude, in which the exchanges between patient and analyst are so intimately connected to these earliest levels of the self's experience.

Whereas the major focus of this chapter will be within the discourse of analytical psychology (Jungian theory and practice), the relevance of the psychoanalytic enquiry is enormous, and will be integrated where appropriate. The underlying assumption is that, as the ethical attitude is an inherent human capacity, whatever we might venture to propose from the study of ethics within a depth psychological framework will pertain to both the Jungian and Freudian theoretical and clinical traditions. There is no doubt that an ethical or moral dimension is deeply involved in the sense of self and plays a major role in the development of the self over time as it unfolds both through its genetic endowment as well as within its environment.

The contemporary Jungian position concerning the self

Jung pursued his studies concerning the structure and dynamics of the self throughout the decades of his working life until his death, and a number of contemporary Jungian theorists and clinicians have carried on the enquiry that Jung had begun. The Jungian enquiry into the nature, structure, and processes of the self does not claim to offer a definitive or unified theory. Nevertheless, it has provided the means for a discourse that avoids the pitfalls of envisioning the self as a unified whole, while at the same time affording the possibility of thinking about the self as a psychic totality, encompassing many disparate, often conflicting aspects. I consider that this can be most satisfactorily accomplished by adopting a theoretical position that encompasses the nature/nurture polarities.

In this chapter I will follow Fordham's view (for example, Fordham, 1985a), as offering a useful and persuasive theory concerning the archetypal and developmental roots of the self, and how the concomitant processes continue throughout life. Starting with the concept of a primary self, Fordham suggests that the basic identity of the individual, known as the primary integrate, is the fundamental given from which the self unfolds through the processes of deintegration and reintegration. The self develops when a part of the self reaches out to the environment and has an experience there (deintegration). For example, a toddler plays a game with its mother, and then rests contentedly for a time in the playpen. The toddler has an experience of playing with the mother (deintegration) and has

reintegrated it back within the self. The shape and quality of this experience becomes part of the self's ongoing growth, development, and identity, attaching itself to the ego or to other aspects of the psyche. A relaxed and happy experience with the mother will make a very different impact on and contribution to the internal world of the self than will, say, an anxiety-ridden experience.

Through the processes of deintegration and reintegration, the quality of experiences with the external world inevitably influences the quality of experiences in the internal world, and vice versa. Fordham offers a guiding theory concerning the self that allows us to place it theoretically and clinically within a developmental and an archetypal, nature/nurture framework. Here we have a view of the self both as a primary integrate endowed with a capacity to reach out and gather experience with its environment which it can then internalize and use to grow, allowing for a view of a multiplicity of selves, or part selves, arising partly through childhood complexes, partly through identifications with internal and external archetypal figures that form the foundation of each person's self experience. At the same time, it is possible to understand the conditions under which a habitual attitude might develop in a very young self to turn away from experiences with another, particularly when the other is the source of trauma and pain to it.

The dynamic growth of the self can thus be thought of as the result of a constant interaction between the impact of nature and of nurture. These influences, both internal and external, will vary in both type and in quality, because of the ordinary variation of differences between individuals as well as because of variations in the environment in which growth occurs. Thus, how the self as an ethical agent may arise, and also how the ethical capacity may be thwarted, can be considered according to two intersecting dimensions: on the one hand, the deep structural aspects of the self, its innate capacities; and on the other hand, the environmental influences impacting on the self and interacting with the deep structural components of the self.

Along with these underlying concepts regarding the foundations of a primary self and its development over time, there remain further possible dimensions that contribute to a view of the complexity and richness of the internal world of the self. These have to do with understanding the self not as an entity that achieves a state of wholeness and integration through a unifying process of integration

and combination of all elements, but rather a self that seeks wholeness or a totality in the sense that it is composed of a multiplicity of internally and externally generated components, subsystems, complexes, divisions, splits, structures, internal objects, and unconscious phantasies (to name only a few concepts found in analytic theory). This self is in turn dependent on important others in its external environment for a sense of its identity and continuity, others who themselves are equally subject to such complexity and multiplicity of internal and external influences on their self identity and behaviour.

Jung stressed the self's capacity for integration and wholeness. For example, he documents in his autobiography (1963) that he turned to drawing mandalas in 1916¹, having just written *Septem Sermones ad Mortuos* (Jung, 1916). This occurred in the face of his "confrontation with the unconscious" following the loss of his close professional and personal relationship with Freud. Drawing mandalas was a way of self-healing, representing the state of the self at any given moment, and thereby creating a container for "the self, the wholeness of the personality, which if all goes well is harmonious" (1963, p. 221). The *Septem Sermones* was a powerful and immediate record of how Jung was overtaken by numerous intense and disturbing fantasies, numerous figures, complexes, subpersonalities, and oppositions that erupted into his conscious mind from his unconscious. So rich and multiple were these fantasies that Jung considered that:

All my works, all my creative activity, has come from those initial fantasies and dreams which began in 1912 . . . Everything that I accomplished in later life was already contained in them, although at first only in the form of emotions and images.

(Jung, 1963, p. 216)

Thus, Jung was clearly fully aware of the self as "an extremely composite thing, a 'conglomerate soul'" (CW 9i, para. 634).

On the other hand, there is the view propounded eloquently by Jungian analyst Polly Young-Eisendrath in which "selves are created and sustained in relationship, from birth to death" (Young-Eisendrath, 1995, p. 22). She emphasizes that the sense of the self's continuity in time and space, in face of its own plurality, is dependent on the context of human relationships.

Thinking about the complexity of the self that we are evoking here, divided as it is in a number of ways, with a panoply of internal archetypal imageries, identifications, projections, and warring opposites, hence a self that is both primary and plural, brings us back to the topic at hand, to ethics. What are the implications of this view of a complex, multiplex self for our depth psychological understanding of the self's ethical capacity, where the self is nevertheless expected to have to struggle within this complexity and still achieve an authentic ethical attitude, to arrive at an authentic ethical decision, or to perform authentic ethical behaviour? Which part of this multiplex self is ethical? How are ethical doubts and uncertainties to be understood? And what would it mean if two individuals, struggling with ethical concerns, do not agree?

The ethical self

Unlike developmental psychology,² neither psychoanalysis nor analytical psychology has offered a unified view of the growth of an ethical attitude within their general theories of the overall development of the self. However, both have formulated theories, at least implicitly and in some respects explicitly, that seek to understand those psychic states and mechanisms that can effect the attainment of the ethical attitude and the conditions that underpin it, and, at the same time, of what may happen within the personality that can pervert or block its attainment. Freud and Jung each made considerable contributions to this understanding. They shared a starting position that regarded the psyche as suffused with the ubiquitous presence of unconscious conflict, of psychological processes and behaviour that are multi-determined and multi-motivated, of unconscious and subversive impulses and desires that can undermine conscious intent,³ and of the counterbalancing possibility in the psyche of conscious ego choice, moral energy, and ethical struggle. To this shared view Jung added a deep conviction regarding the overriding teleological nature of the self's continued search to become itself, even in the face of dire internal resistance or malign external forces. All these elements are components of a profound view of the psyche that have a direct bearing on our understanding of the attainment of an internal ethical position.

(a) Freud's contribution

Through his metapsychology and his clinical writings, Freud formulated a rich and complex view of the workings of the mind that have direct relevance to considerations regarding the origins of the ethical attitude. In brief terms, classic psychoanalytical metapsychology delineates two regulating systems relevant to moral behaviour: (i) the superego, which first emerges around eighteen months and is related to the internalization of figures representing power and authority (hence the role of shame and humiliation, and their opposite, triumph, in regulating human behaviour); and (ii) the notion of the ego ideal, which generally develops around the time of the child's working through of the Oedipus complex and is based on empathic guilt and the wish to preserve and identify with the internalized good parents.⁴ It is the quality of the caregiving that the child receives at both these stages, and the child's responsiveness to it, that will determine his or her capacity to develop a moral or ethical sense, whether this is experienced as the imposition of a set of commandments or constraints, or whether it is integral to and congruent with the sense of self. Since they were first elaborated by Freud, there has been much further discussion concerning the nature and development of these two capacities, but they point to two roughly distinct modes of mental functioning that remain salient to our understanding of the achievement of an ethical attitude.

Freud's notion that all behaviour is motivated, including unconscious behaviour, meant that the psychoanalytic task was to bring to the light of consciousness the motives that are embedded in the unconscious, as in his famous phrase, "Where id was, there ego shall be" (Freud, *SE* 22, p.80). The implication, although not stated as such, is that thus all behaviour has an ethical dimension, at least in the sense that the impulse to fulfil instinctual desires (the id) must be met by conscious judgment and control in order to protect both the self and others (through the ego or superego). Whether this is accomplished through the agency of a harsh superego, or the more flexible and discriminating agency of the ego ideal, depends upon the developmental stage and the quality of the internal world. Through the mechanism of sublimation and the ego's eventual capacity to take responsibility for the actions of the self, choices can

be made that will ensure that the social nature of the self is active in moral ways. As he stated, “[t]he patient’s capacity for sublimating his instincts plays a large part [in the cure] and so does his capacity for rising above the crude life of the instincts” (1940, p. 181, quoted in Wallwork, 1991, p. 243, n43).

The later psychoanalytic contribution of Melanie Klein (for example, Klein, 1957) and her followers is relevant to our discussion. Klein described the impulses belonging to the more primitive internal world as functioning through part object representations that operate according to the talionic principle, a ruthless, aggressive, and vengeful reaction to the past, present or possible future pain of relating felt by the self. This way of relating is characteristic of the paranoid–schizoid position. The dynamics of whole object relating, called the depressive position, however, are characterized by a capacity for concern and impulses of reparation towards the other. These are akin to agapaic responses, whereby the other is perceived in a more realistic way, as a subjective other, a real person occupying a real position in the world external to the self.⁵ Britton (1998) has described how the ongoing cyclical oscillation between the paranoid–schizoid and the depressive positions can account for the possibility of a continued psychic growth and development—how well-established psychic systems can “unfreeze” in order for new levels of integration to be achieved. The Kleinian and post-Kleinian view has clear implications for the development of an ethical capacity through the development of a capacity for concern and the wish to make reparation.

(b) Jung’s contribution

Although taking account of the importance of the classic psychosexual stages, a Jungian approach to understanding how the self may achieve an ethical attitude can be located within the context of the unfolding of the self over the stages of an entire life. Thus, an ethical capacity would be considered in the context of a teleological view of the self, imparting meaning and value at each stage. This suggests a universal ethical capacity that is innate (as might be understood by archetypal theory) but which also depends on the quality of caregiving that the child receives during its early development to unfold.

If human beings have an innate capacity to behave both individually and in groups in recognizably ethical ways, such that unethical or immoral behaviour is also recognizable and demonstrable, then we can say that embedded in the human psyche are templates or deep structures that correspond to this moral intent, shaping thoughts, feelings, and our ethical behaviour accordingly. Any such archetypally based theory which considers there is an innate capacity that seeks to identify, struggle with, and eschew unethical or immoral behaviour is bound up with the ubiquity of what Jung called the shadow. The outcome of this struggle brings us right to the heart of the psychic effort to find and maintain an ethical attitude, for it is a matter of whether the self retires into a self-protective, defensive, or autistic state where no other is admitted, or whether the self allows itself to recognize and engage with another, the not-self, acknowledging the other as having a place in the self's universe, with all the consequences and risks to the self that this entails.

The struggle between the shadow and the self

The concept of the shadow is central to Jung's understanding of the self as an ethical entity, and its recognition and integration is crucial to the self's capacity to develop and grow. For Jung, the shadow is that portion of the self that the ego designates as bad and unwanted. The shadow carries what is treacherous and subversive—what is unethical—in the self, and hides it, relegating its contents to unconscious areas in the psyche where it can then be lived out in projection, using the other as a vehicle to hold the bad aspects of the self. When the ethical capacity is still undeveloped and in a compensatory relationship to the shadow, then the shadow assumes archetypal, unmitigated proportions. In order for the self's nascent ethical capacity to achieve human dimensions, the archetypal and personal shadow must be brought to consciousness, or somehow to be tolerated in the dynamics between unconscious and conscious, thereby to be mitigated. Jung was in no doubt about the tremendous struggle that this process requires. It is tantamount to acknowledging and integrating to the fullest extent possible at any given moment the most comprehensive knowledge of oneself to date, whether positive or negative, including the full, horrific nature of the shadow. Thus, we could say that a certain primitive moral discrimination

operates as a function of and in relation to the shadow. The shadow is the inferior part of the personality, and as such is incompatible with the conscious attitude.

In the face of the pain of shame and humiliation in acknowledging hateful and undesirable aspects of the self, the shadow is usually first dealt with by projecting its attributes outside the self. The bad aspects of the self are thus located elsewhere, in a friend, a parent, a lover, a spouse, or a child. In the meantime, the shadow has gone underground, deep into the personality, thus avoiding the light of consciousness, seeking to remain hidden and incognito, and taking with it the self's knowledge of its participation in what is deplorable in and to the self. In the depths of the unconscious, the shadow struts about, in a parody of rectitude and decked out in all its moral finery, crying "Shame!" at its neighbour, oblivious to the fact that what it finds reprehensible in the other is located within. While this state of affairs pertains within the psyche, there are enormous psychic blindspots about oneself and about the reality of others. When the shadow is in command, there can be no knowledge of the reality of the other. A state of narcissism prevails.

Jung's notion of the shadow belongs to an understanding of the primitive splitting mechanism of projection that seeks to protect the self against the pain of traumatization that has already happened to the self when the self had reached out to another and was injured. The effect of such retreats from relating is to:

. . . isolate the subject from his environment, since instead of a real relation to it there is now only an illusory one. Projections change the world into the replica of one's unknown face. In the last analysis, therefore, they lead to an autoerotic or autistic condition . . .

(Jung, *CW 9ii*, para. 17)

Jung points time and again to the difficulty of the moral task of acknowledging one's shadow, since to do so requires that the self face the painful recognition that the shadow projections belong within:

The shadow is a moral problem that challenges the whole ego-personality, for no one can become conscious of the shadow without considerable moral effort. To become conscious of it

involves recognizing the dark aspects of the personality as present and real. This act is the essential condition for any kind of self-knowledge, and it therefore, as a rule, meets with considerable resistance. Indeed, self-knowledge as a psychotherapeutic measure frequently requires much painstaking work extending over a long period.

(Jung, *CW 9ii*, para. 14)

The idea that shadow projections can and must be withdrawn and reintegrated within the personality is often stated by clinicians, but it may be difficult to reckon on the degree of struggle and suffering that the task requires. And yet, this is the very grounds for the eventual transformation of the self, the aim of analysis. Jung was very clear about the struggle involved:

Although, with insight and good will, the shadow can to some extent be assimilated into the conscious personality, experience shows that there are certain features which offer the most obstinate resistance to moral control and prove almost impossible to influence. These resistances are usually bound up with *projections*, which are not recognized as such, and their recognition is a moral achievement beyond the ordinary.

(Jung, *CW 9ii*, para. 16)

A battle of titanic proportions ensues, whereby the self struggles to risk letting go of its habitual protective barriers erected via defensive splitting and projecting of the shadow which guard it against acknowledging the existence of another who may cause the self pain. The shadow aspects of the psyche pit themselves against the forward movement of the self, forcing psychic splits to come to the fore. The splitting of internal experience into pairs of opposites is often the method by which the self seeks to defend itself against unbearable and overwhelming pain that accompanies being open to another human being, thereby maintaining the reign of the shadow. The effort to manage and tolerate the reintegration and metabolization of such states can be gruelling. In this situation, the self is liable to evoke its narcissistic self-care defences (Solomon, 1997b; Kalsched, 1997).

Archetypal, instinct-based experiences occur initially in very early or primitive states of mind as pairs of opposites, thus providing a

way of ordering experience according to either/or categories, making it possible for the self to gain some sense of safety and primitive understanding. Defensive patterns of splitting in order to organize experience and protect the self can become hardened, habitual, and difficult to shift, even if the circumstances that first called forth the defence no longer pertain. Jung understood this situation in the psyche in dialectical terms (see Chapter 2 in this volume, and Solomon, 1994). In order to overcome the conflict of opposites, he evoked the concept of the transcendent function (Jung, *CW* 8, paras. 131–93), the symbolic function of the psyche which is essential to it if it is to change and grow. The transcendent function, characterized by its teleological function to bring the psyche forward out of polarized, oppositional defensive states, thus enabling the individuation process, operates through symbol creation. In the self's agony as it labours within the split and stuck inner situation, the unconscious may, perhaps through a dream image, offer a symbol or image to conscious awareness which is meaningful and can be used by the self to move forward. This process inevitably brings pain, suffering, and resistance, as the old order breaks down and before new habits and more adaptive ways are securely established. Nathan Field's (1996) notion of "breakdown and breakthrough" is relevant in this respect, as is Britton's (1998) notation ($Ps(n) \rightarrow D(n) \rightarrow Ps(n+1)$) regarding the cyclical oscillation between the paranoid-schizoid and depression positions.

Although it is contentious to speak of change occurring at the neurobiological level as a result of psychological shifts, the degree of suffering that is often involved cannot be discounted, and at times may be tantamount to giving up an addiction, with its attendant neurobiological and neurochemical correlates. This has a parallel with the earlier discussion in this chapter concerning the infant's participation in its own self-regulatory processes, including the energy and effort involved in initiating interactions with another. The quality of the humanity of the patient is thereby attested to, through their recognition of the pain, waste, and destruction that the old ways of living life have exacted of the self, and indeed how others in the person's life have suffered as a result of the ongoing struggle—and at times failure—to integrate the shadow. It is through engaging in this struggle that the ethical capacity is activated, and meaning and value thereby generated.

The struggle to find the other

The self is not called upon to be ethical in a vacuum. The ethical attitude implies recognition and value of the substantive reality and subjectivity of the other. It requires the withdrawal of shadow projections so that the reality of the other can be known about, acknowledged internally, and responded to. This idea is reminiscent of Buber's (1958) concept of the "I-Thou" relationship as a dialogistic encounter between two subjectivities. The teleological project of the self to achieve wholeness requires in the first instance the withdrawal of projections, since the self cannot be whole if parts of it are unknown and projected outside itself. In particular, what is often projected is exactly that which the self experiences as an immoral, unethical, bad part of itself.

A clear theme that emerges both in this chapter and throughout this volume is that the self becomes itself gradually over time as it unfolds in relation to another. My subjectivity impacts on the subjectivity of the other, and vice versa. Helen Morgan (2000) has discussed the perspective of the new physics which demonstrates that the observer changes what he observes by the very act of observing. Similarly, the observer will be changed by being observed. Just as the self may treat itself as either subject or object in healthy or unhealthy ways, so it may treat the other. Thus we can say that the primary self is imbued with a primary instinct for relatedness, if for no other reason than that the infant must seek out interactions with its caregiver in order to ensure nourishment, care, and protection, so that the optimal development of its own neural networks, particularly those that regulate cognitive and socioaffective behaviour, can occur. (See Chapter 5 in this volume for a fuller description of this situation.) This is an expression of a general self-protective and self-generative purposefulness which also includes acts on the part of the self to rid itself of unwanted, bad aspects, a self-protective, self-immunization. Thus, we have an archetypal and developmental relational set-up in which the other is both needed and desired but may also be deprecated and eschewed by the self as a receptacle of unwanted, bad internal aspects projected by the self outside itself.

The self is at once separate and related, divided against itself and instinctively seeking integration. How is the self to properly find the

other in these circumstances, in order to find the fullest expression of its self as an ethical being? The contemporary British moral philosopher Bauman (1993) has pointed out that it would be incorrect to consider as equivalent subjectivities the two persons interacting in an ethically laden situation. Contrary to Buber's supposition, in ethical discourse "I" and "Thou" are not equals in a reciprocal relationship:

The "we" . . . is not, therefore, a plural of "I" . . . In a moral relationship, I and the Other are not exchangeable, and thus cannot be "added up" to form a plural "we". In a moral relationship, all the "duties" and "rules" that may be conceived are addressed solely to me, bind only me, constitute me and me alone as an "I" . . . The moral person and the object of that person's moral concern cannot be measured by the same yardstick—and this realization is precisely what makes the moral person moral . . . Being a moral person means that I *am* my brother's keeper . . . whether or not my brother sees his own brotherly duties in the same way I do . . . It is this uniqueness . . . and this non-reversibility of my responsibility, which puts me in the moral relationship.

(Bauman, 1993, pp. 50–1)

Bauman points out the ontological separateness of each one from the other, as exemplified by God's question to Cain, "Where is your brother?" and Cain's reply, "Am I my brother's keeper?" This emphasizes that the ethical attitude is predicated on the reality of the separateness of the self from the other. Following the French moral philosopher Levinas (1979), Bauman argues that ethics comes *before* ontology (Bauman, 1993, p. 71). Morality is a transcendence of being, a face-to-face experience, an authority which I give to you that you then have over me. Thereby, he states, "I am fully and truly for the Other . . . I give myself to the Other as hostage . . . My responsibility . . . is unconditional" (Bauman, 1993, p. 74). The ethical capacity cannot be derived from shared ontological reality, the facts of existence; rather, it is derived from value and meaning, which are different, "higher", and unconditional.

Bauman and Levinas seem to be pointing to a fundamental human mode of relatedness that has as its first expression the "ordinarily

devoted mother" (Winnicott, 1964b), a deeply ethical mode in its instinctual and unconditional devotedness to another, her infant. This must include the mother's capacity to struggle with her own internal shadow impulses to rid herself of the ethical and nurturing burden that she has accepted in attending to her infant. The first ethical experience of the infant, no doubt at a deeply unconscious level, is as a "me" at the breast of another who is devoted to me, despite whatever struggle she may have with her shadow impulses towards me. So the infant is free to use the breast ruthlessly (Winnicott, 1971b), without fear of retaliation. In so doing it becomes possible for the infant to experience itself as an authentic being, without undue regard for its survival on placating another, which would have the effect of skewing the development of the infant's self at this early stage.

I am proposing here that this is the condition that lays the foundation for the infant's potential to eventually develop an ethical capacity. The infant takes in the experience of non-talionic relating at the primordial, pre-verbal level of being, at the breast. Through the experience of the unconditional availability of the mother, who has had to manage internally, through her own capacity for containment (as in Jung's idea, CW 12, para. 187, of the *vas bene clausum*), her inevitable negative, shadow responses towards her infant, the infant is nourished physically, mentally, and emotionally thereby. This may be the *a priori* condition through which the ethical capacity is catalysed. Equally, this may be the *a priori* condition through which the infant falls in love with the beauty of the breast (Meltzer & Williams, 1998). The link between the ethical and aesthetic capacity has also been signalled by Bauman (1993). These events trigger the next stages in the development of the young mind, those primordial acts of discriminating, splitting, and projecting, that organize the subjective experiences of the early world of the infant.⁶ These discriminating, splitting, and projecting activities are in turn the very preconditions of the creation of the shadow.

So the situation of self which struggles to find the other reconfirms elements of the situation of the self we have been examining when we posited the self as a primary integrate—I am alone as a moral being—while at the same time I find my moral nature in relation to another. In order to find its inherent moral condition, the self must

struggle to find another, whether or not the other is moral in relation to the self. It represents a transcendence of narcissistic ways of relating, in which the other is appropriated by the self for "use" in the self's internal world, such that the object's subjective reality, their freedom to be other, is attacked or denied, through to a capacity to encounter the truth of the other, a genuine capacity to relate to another, a move in the furtherance of, or development beyond, the depressive position. This situation has direct implications for what happens in the consulting room between the analytic couple. The ethical attitude develops, personally and professionally, through the self progressing from a narcissistic mode of relating. Just as the basis for the eventual development of the infant's own capacity through its earliest experience of unconditional devotedness of the caregiver, notwithstanding the infant's attacks and the caregiver's own inevitable (but hopefully not too overwhelming) failures, such that the infant is allowed to develop mentally and emotionally, as well as physically (as does the caregiver in a way appropriate to his or her self); so in the consulting room the patient experiences an ongoing capacity in the analyst to maintain an unconditional analytic and ethical attitude that survives, despite the patient's attacks on or denial of what is available, and despite the inevitable (but hopefully not too overwhelming) failures of the analyst, such that the patient may develop and grow (as does the analyst in a way appropriate to his or her self).

The struggle to find the other in the consulting room

Jung provided in the concept of the *coniunctio* a way of conceiving the self's archetypal capacity to enter into relation with another in all its various aspects and vicissitudes, while at the same time remaining the unique individual self as it was born and has become. Much of the work between patient and analyst in the consulting room concerns the variations in the modes of and capacity for *coniunctio*. A major difficulty that is often addressed in the analytic work is that of finding and sustaining a relationship with another. In the patient's unconscious search for what he or she needs from the analysis and from the analyst, two opposing scenarios often present themselves: either the self may hide itself from the possibility of intercourse with

the other, locking itself away in an internal asylum; or else the self may attack or otherwise seek to invade, damage or undermine the other, thus avoiding the possibility of true relating. Both scenarios preempt the freedom of authentic interaction with another, in this instance, with the analyst.

Of the many possible vicissitudes of the *coniunctio*, there is an archaic and typical one that is often encountered in analytic work, or during some phase of it, whereby the *coniunctio* itself is negated, with the consequence that the experience of the difference between self and other, as well as the potential to relate to each other, is annulled. The reality of the other as a separate self is denied, exchanges between self and other occur in projective and identificatory ways such that it is difficult to decipher the two separate entities in the consulting room. The person may never have experienced a safe-enough *coniunctio* with an important other in order for the self to allow its defensive self-care system to fall away (see Chapter 6 and Solomon, 1997b); or else he or she may never have experienced another who was available mentally or emotionally and so instead survived by using up his or her own vital resources in an empty void where no one is allowed entry (see Chapters 7 and 10, and Solomon, 1998b and Solomon, 2004); or else the person may have experienced an early loving relationship, but with another who was crazy or unable to relate in a way which was enduring (see Chapter 8 and Solomon, 1998a).

Jung emphasized the importance of the mutuality of the relationship that patient and doctor enter into in undertaking analysis, and at the same time he was very aware of the psychological dangers inherent in the situation and ethical considerations that arise from this:

... in therapy, ethical values must not be injured on either side if the treatment is to be successful. Yet what happens in the therapeutic process is only a special instance of human relationships in general. As soon as the dialogue between two people touches on something fundamental, essential, and numinous, and a certain rapport is felt, it gives rise to a phenomenon which Levy-Bruhl fittingly called *participation mystique*. It is an unconscious identity in which two individual psychic spheres interpenetrate

to such a degree that it is impossible to say what belongs to whom. If the problem is one of conscience, the guilt of the one partner is the guilt of the other, and at first there is no possibility of breaking this emotional identity.

(Jung, *CW 10*, para. 852)

In the notion of *participation mystique*, Jung clearly identified the strengths and dangers of these primitive levels of communication, as they were liable to lead to a state where there was little distinction or difference between two individuals within the relating pair. The positive aspect of this is that an immediate and intimate communication between them is possible; but there is a negative aspect in that, because self and other can become mixed up, there is a very real danger that the discriminating function essential to the capacity to behave according to the unconditionality of the ethical attitude may be perverted. To counter this danger, Jung warned that

For this a special act of reflection is required . . . Although the first step in the cognitive process is to discriminate and divide, at the second step it will unite what has been divided, and an explanation will be satisfactory only when it achieves a synthesis.

(Jung, *CW 10*, para. 852)

(a) Differentiation: the notion of boundaried space

The notion of boundaried space has a long analytic tradition. For Jung, the idea of the *vas bene clausum* (*CW 12*, para. 187), and for later psychoanalysts that of the analytic frame (Langs, 1977; and Gabbard & Lester, 1995, for a fuller discussion), referred to the boundaried and protected space of the analytic vessel within which analytic work can take place safely and therefore to its fullest extent. This chapter has emphasized that analytic work brings together the two fundamental conditions of being human: the unique individuality of the self, which implies the unique individuality of the other, and, at the same time, the possibility of the intermingling of psychic states of mind between the self and the other such that the boundaries between them can become blurred. In the analytic situation, this

happens in a context of an avowedly unequal relationship between the two participants, patient and analyst. In this situation, the analytic frame provides the possibility of experiencing the fundamental conditions of the self in relation to another within the safety of a boundaried space. Within the secure and protected analytic frame, the analytic work proceeds through exploring the patient's conscious and unconscious inner world, as well as through the unfolding relationship between the patient and the analyst. As Gabbard and Lester point out:

One of the central paradoxes of the analytic situation is that the professional boundaries must be maintained so that both participants have the freedom to cross them psychologically. In other words, processes such as empathy and projective identification oscillate back and forth across the semipermeable membrane constructed by the analytic dyad. The analyst expects a therapeutic regression to occur in both participants so that more primitive states of fusion and exchange are possible.

(Gabbard & Lester, 1995, pp. 42–3)

Above, I suggested that the emergence of a capacity for an ethical attitude in the young mind was predicated on the mother's secure attachment to her own capacity to offer an unconditional devotedness to her infant at the breast, whatever inevitable failures might occur and whatever subsequent interactions unfold through the developmental process. I am arguing here that it is by the very nature of the analyst's secure attachment to their own inner ethical attitude, within the safety of the boundaried analytic space, that the patient may themselves safely divert from their usual moral or ethical attitudes at the adult level, including the socially accepted norms of behaviour to which the social self usually adheres. Instead, the patient can allow him or herself the psychological freedom to seek to test, assault, damage, or destroy, as well as to love, cherish, protect, and nurture, the contents of their own inner worlds, the inner world of the analyst, and the world of the analytic relationship. Only thus can they achieve whatever unconscious need they had of the analytic process when they entered analysis. This is what Jungians

understand as steps towards wholeness and psychic integration, which will inevitably include regressions to disturbing states of mind. Without the analyst's capacity to maintain the ethical attitude in the face of the dramatic, often life-and-death struggle that can occur during the course of an analysis, if talionic rather than agapaic responses prevail within the analyst, then the assault on the ethical attitude within the analyst and between the analyst-patient pair will have prevailed. The primitive defences of the patient, or the analyst, or both will have triumphed over the search for greater health and integration within each. This does not mean that knowledge is to be eschewed of the talionic, aggressive, sadistic, masochistic, or narcissistic responses, as well as of the loving and nurturing responses, evoked within the analyst through working with the patient. On the contrary, the fullest knowledge that the analyst can achieve of those experiences in their own inner worlds, including their shadow side, along with the interaction of their inner world with that of the patient, is exactly the "special act of reflection" which the analyst is called upon to perform (Jung, *CW 10*, para. 852).

The unbalanced nature of the analytic dyad resembles the situation described earlier by Bauman (1993) in which one person takes on unconditional ethical responsibility towards another who is not obliged to reciprocate in an equal way. Essential to this is the recognition of the differences between the pair in the analytic dyad, and the special responsibilities of the analyst in maintaining an agapaic attitude towards the patient while allowing for the more primitive, talion responses of each to be known about. Within the urgency of the situation, which can at times reach dramatic, archetypal proportions, both patient and analyst may feel that no solution is evident or forthcoming. It is then, Jung stated, that "the transcendent function manifests itself as a quality of conjoined opposites" (*CW 8*, para. 189). This is tantamount to finding how the self in its separateness and uniqueness can with safety be open enough to the reality of the existence of another such that authentic relating is possible. This requires evidence that neither the self nor the other will in fact revert to talionic acts of defence and aggression. If the analyst maintains his or her ethical attitude, it should be possible to meet such a challenge, even if with a struggle, particularly as the analyst will already have faced through their own analysis a

similar struggle to the one that faces the patient. For the patient, within the special conditions of the analytic frame, this will be won only through a struggle of enormous proportions. It means going from a two-dimensional existence in which the other may be ignored with impunity, to a three-dimensional existence in which the other is acknowledged and related to. However, the enormity of the struggle may lead to a creative solution and to further integration of the personality, through the work of the transcendent function:

Only the creative power of the ethos that expresses the whole man can pronounce the final judgment. Like all the creative faculties in man, his ethos flows empirically from two sources: from rational consciousness and from the irrational unconscious. It is a special instance of what I have called the transcendent function, which is the discursive co-operation of conscious and unconscious factors or, in theological language, of reason and grace.

(Jung, *CW 10*, para. 855)

(b) Maintaining relatedness in boundaried space

In the situation we are imagining, provided that the safety of the boundaried space is maintained, the patient is not required to heed the usual ethical or moral imperatives in relation to the analyst. Scope is created thereby for the analytic exploration of exactly the internal position of the patient where there is no experience of another with whom to relate. Here, the self may be sequestered into a closed, internal space, uninhabited by others, the *claustrum* (Meltzer, 1992). This is the area patrolled by the defences of the self which seek to control the traffic between the self and the other in order to protect the self from the conditions that made possible the original trauma and required such defences to be erected (Kalsched, 1997). Where these conditions prevail, admitting another into this space would be tantamount to the most enormous achievement, a revolution in the internal world of the patient, an achievement with deep moral implications since the other would be discovered, acknowledged and related to.

We know that in such circumstances there can be a life-and-death struggle in the consulting room between what Kalsched (1997) has called the diabolical shadow and the forces of health and life in the patient. This includes the analyst's relationship to his or her ethical attitude, since inevitably the analyst will be tested in one way or another at this level by the patient. The opposites have now been constellated, and there appears within the analytic situation no solution available to the conscious mind. In Rosenfeld's (1987) terms, a psychic impasse has been reached, which requires a creative breakthrough, but which may end up in a defensive splitting or psychic retreat (Fairbairn, 1951; Steiner, 1993).

It is here where the analyst can feel most fully engaged in a struggle which has ethical dimensions. The analyst adheres to the knowledge that the patient eschews knowing about the reality of the existence of another, usually the analyst, for profound reasons that have to do with the survival of the self. There may be a defence against relating to an object that must inevitably be shared, as amongst siblings or with the other parent. But usually the trauma has come from narcissistic damage caused when the self had been seeking contact with another who was then catastrophically traumatizing to the self. Perhaps there was an inability to respond, or a sudden absence, or an inappropriate mode of relating that was intrusive or abusive. Whatever the circumstances, the self had learned to create a place of safety for itself by ensuring that the other was excluded and thereby rendered impotent and incapable of going on harming the self. Inevitably, of course, maintaining such isolation requires that the self uses up its own resources for self-nurturing. A real life-and-death situation may then arise when there are fears for the patient's physical or psychological safety. These situations have already been alluded to and described clinically in the Chapters comprising Part III of this volume.

In this situation, the analyst is required to be empathically with the patient in their internal solitary confinement, while at the same time to maintain a knowledge of and relationship to the possibility for proper *coniunctio* in which self and other may live in separateness and mutuality. This is an achievement which is equivalent to a position beyond the terms usually understood as the depressive position.

Beyond the Depressive Position

Much of the argument of this paper has suggested that the attainment of the ethical attitude is a developmental achievement, such that it is possible to venture a view that the ethical attitude is a developmental position. Here, “developmental position” is meant in much the same way as Klein (1957) or Bion (1957) when they referred to the paranoid–schizoid or the depressive positions as stages in the developmental process. Hinshelwood defines the term “position” as “the characteristic posture that the ego takes up with respect to its objects”, adding that Klein adopted the term “to convey . . . a much more flexible to-and-fro process between one and the other than is normally meant by regression to fixation points in the developmental phases. She wanted also to convey an emphasis on relationships.” (Hinshelwood, 1989, p. 382)

In the Kleinian framework,⁷ there evolves a gradual demarcation between self and other, as the self achieves a fuller experience of its own subjectivity in relation to the subjectivity of another. Involved in this view is the infantile equivalent of the withdrawal of the projections of those negative aspects of the self that in adults we might call shadow projections, through to a gradual capacity to view the self along with the other as separate but interrelated subjectivities. It must be emphasized that the view offered here is of a continuous oscillation, an ongoing dynamic, between these states, or positions.

As Jung stressed at the level of adult functioning, so Klein stressed the importance of internal integration and synthesis of the self in relation to the other at the earliest level of infantile mental functioning, although she did not bring out the teleological implications of this:

. . . from the beginning of life the ego tends towards integrating itself and towards synthesizing the different aspects of the object. There appear to be transitory states of integration even in very young infants—becoming more frequent and lasting as development goes on.

(Klein, 1948, p. 34)

However, without recourse to a teleological explanation for this ongoing process of integration, the Kleinian formulation can only

be predicated on the mother's capacity to maintain and support the infant at those earliest times when the young mind is liable to be overwhelmed by the force of its own experiences without adequate means to achieve integration on its own. And yet, Klein's explanations were centred on the internal dynamics of the self. Although she acknowledged the importance for the infant's development of the quality of the mothering provided, she did not particularly elaborate on how this interaction would impact on the infant's self.

None would deny the crucial role of early nurturing and the provision of a "good-enough environment" for the self to develop and grow (Winnicott, 1965). Jung stressed the teleological implications of a view of the self in which the innate capacity for the self to become itself through the process of individuation was a fundamental aspect. It seems to me that this represents a crucial difference between the Jungian and Kleinian view of the self, with implications for the understanding of the development of an ethical attitude, as discussed above. In that view, the ethical attitude is not predicated on the ethical behaviour of the other towards the self, but rather is triggered by the earliest experience of the unconditional devotedness of another in relation to the self, regardless of the self's relation to the other. In Klein's view, on the other hand, the capacity for guilt, concern, and the wish for reparation seen in the infant results from the self's capacity to imagine the damage it has caused the object and thus how the object's wish or capacity to go on loving the self will be diminished. Here is an internal accounting system at work which remains related to the talion law.

In the teleological perspective in which the self is always becoming more itself, there is a further dimension in which the self is supported in its development through the symbolic capacity of the transcendent function and the creative resources of the unconscious. In speaking about the self's struggle with an ethical conflict which can leave the self feeling locked in a dilemma from which there seems to be no development or recourse, Jung states:

The deciding factor appears to be something else [than an accepted rule or custom]: it proceeds not from the traditional moral code but from the unconscious foundation of the personality. The decision is drawn from dark and deep waters. . . . If one is sufficiently conscientious the conflict is endured to the

end . . . The nature of the solution is in accord with the deepest foundations of the personality as well as with its wholeness; it embraces conscious and unconscious and therefore transcends the ego . . . a conflict of duty [finds] its solution through the creation of a third standpoint.

(Jung, *CW 10*, paras. 856–7)

We have seen that it is not always possible to achieve a positive outcome to the struggle to find another in such a way as to relate in an ethical manner. This is as true in the consulting room as outside it, and involves an ethical struggle on the part of patient as well as analyst. It may be that the achievement of an ethical attitude will depend on the apprehension of being related to ethically prior to the development in the self of an ethical capacity. Freedom from appropriation for use in another's intimate, internal world, may precede the ability to relate ethically to an intimate other. In conditions where such freedom was not available, the self may have had to devise ways of protecting itself from such incursions, and a loss of ethical capacity may have ensued. Much analytic work is then devoted to reinstating such freedom.

Conclusion

The struggle for psychological wholeness and the integration of the projected shadow brings pain and requires sacrifice. But it is also a satisfying achievement to the self to attain ever increasing states of truth, moral freedom, meaning, and value. The achievement of an accommodation between the conflicting needs for closeness and the need for differentiation require the self to be in constant struggle with itself and with the close other, the pitfalls of which are seen in the varieties of narcissistic object relating that occur outside and inside the consulting room. This struggle is at the source of the ethical capacity. It is when the fit between states of closeness and states of differentiation are wrong, skewed, or intolerably uncomfortable, that we can find ourselves cast out of the ethical domain and into a part object, perverse way of relating.

In this chapter I have explored the ways in which the self finds, defines, creates, and struggles with ethical. In Chapter 12 I will discuss the ethical attitude in the consulting room.

Notes

- 1 In the inscription on the back of his first mandala painted in 1916, Jung wrote the following handwritten note: "This is the first mandala I constructed in the year 1916, wholly unconscious of what it meant." He interpreted it at length in alchemical terms in 1955 (Jaffé, 1979, p75).
- 2 See, for example, Kohlberg (1963; 1984) and Kohlberg & Lickona (1986) who have made a particular study of moral development of children.
- 3 All of these can be included under the rubric of philosopher Paul Ricoeur's idea that the practice of psychoanalysis is tantamount to a "hermeneutics of suspicion" (Ricoeur, 1967). The implication is that embedded in the psyche are latent meanings that cannot immediately be made sense of, or be made conscious, for a variety of motivated reasons (for example, to avoid the experience of psychic pain). Things are not what they appear, but although concealment is motivated, there is enough revelation of concealed meaning for interpretations to be more or less safely made.
- 4 Wallwork (1991, pp. 221–2, n2) has provided a close study of the ethical implications in Freud's writing. For example, he states that:

Freud sometimes seems to equate the superego or conscience, with the whole of moral functioning (see *SE* 22 [1933], pp. 61, 66–7). In *The Ego and the Id*, Freud states that the "injunctions and prohibitions" of parents and other authority figures that are introjected into the ego at the close of the Oedipal complex "remain powerful in the ego ideal and continue, in the form of conscience, to exercise the moral censorship" (*SE* 19 [1923], p. 37). "In this way," Freud writes a year later: "the Oedipus complex proves to be . . . the source of our individual ethical sense, our morality" (*SE* 19 [1924], pp. 21, 170; [1930], pp. 136–7).

- 5 Jungian analyst Kenneth Lambert (1981) made the useful distinction, relevant to our ethical enquiry, regarding the activation of the talion law vs. the agapaic response in the context of the relations between analyst and patient. In particular, he warned the analyst against expressing the natural talionic instinct to reward or punish like by like, for example to retaliate against a patient's negative transference by making punishing interpretations designed to hurt, humiliate, or create distance from the patient. By contrast, he encouraged the

analyst to adopt an agapaic attitude towards the patient, characterized by a respectful, reliable approach that is without exploitation or retaliation.

- 6 James Fisher provides a lucid account of this situation arising from work as a psychoanalytic marital psychotherapist and as an individual psychotherapist (Fisher, 1999). He proposes a two-stage developmental model. In the first stage, the infant achieves a capacity to face the reality and truth of its own experience as a result of the mother's capacity to respond meaningfully to her infant's spontaneous gesture. In the second stage, the self achieves the capacity to face its own truth as well as that of the other in all their subjectivity, a situation in which both struggle to maintain their internal truths while at the same time to come to terms with their experience of a shared external world. This creates triangular space that allows for the possibility of genuine intercourse such that a new creative solution, an unpredicted outcome, or a real child, can emerge. Most importantly for our discussion here, Fisher considers that "the achievement of the first stage may be dependent on an intimate relationship with someone who has achieved the second stage." (1999, p. 8) This is a profile of exactly the situation that is being considered here.
- 7 It might be useful to briefly review at this point Klein's formulations concerning the development of the young mind. At the most primitive level, Klein considered that, because of the massive onslaught of internal and external stimuli on its limited mental capacities, the infant was suffused with psychotic states of mind causing profound anxieties that were primarily managed defensively through splitting and projection, where communicating, relating, and using the other psychologically take place via projective identification (Klein, 1946). Hence self and others are mixed up, and parts of each are allocated to different and separate psychic locations, either internally or externally in the self or in the other. Klein called this the paranoid-schizoid position, where the bad and good parts of the self and the other are not found together, and where relating was at the level of part objects. In a later development, called the depressive position (Klein, 1935), the infant is more able to experience the other as a whole object, containing both good and bad aspects. Thus the infant's feelings of love and hatred for the object, which had previously been experienced as separate, are now capable to being held together in the infant's mind, giving rise to feelings of ambivalence towards the object, as well as feelings of guilt and the wish to repair the damage

that the self might have wrecked on the object in the previous, part object mode of relating. Ogden (1989) made a further contribution to the Kleinian view of the primitive mind of the infant when he offered the concept of the autistic-contiguous position, the earliest of the three positions, in which the sense of the boundary between the self and the other was derived from the rhythmicity, periodicity, and "skin-to-skin 'molding' . . . that are the ingredients out of which the beginnings of rudimentary self-experience arise" (Ogden, 1989, p. 32).

The ethical attitude: a bridge between psychoanalysis and analytical psychology

The expectation that high ethical standards be consistently maintained in clinical practice is common to psychoanalysis and analytical psychology. Both the International Psychoanalytic Association (IPA) and the International Association for Analytical Psychology (IAAP) have this principle enshrined in their constitutions and Codes of Ethics, and as a matter of good governance review their ethics provisions on a regular basis. However, with some notable exceptions, pragmatic ethics does not receive much exposure, if at all, in training curricula. Even less, theories about the origins and functioning of an ethical capacity or attitude in human beings rarely appear in analytic literature. We insist on “high ethical standards” but what is our psychodynamic understanding underlying these principles? We require at the institutional level that ethics be taken as a core value, but we seem not to address the bases for this core value within the personality.

It is, therefore, surprising that there is a dearth of theoretical work or published clinical material within psychoanalysis or analytical psychology that seeks directly to address the nature and origins of the ethical attitude, whether in developmental or archetypal terms.¹ Furthermore, there is little attempt to locate it as an intrinsic component of the self and of the analytic attitude that seeks to protect the development of the self and the relationship between patient and analyst.

Of course, there are some quick and simple ripostes to my apperception of this state of affairs. Some may point to concepts such

as the superego, or the ego ideal, or the feelings of care and concern that characterize the depressive position. Nevertheless, in the literature these concepts are not discussed as constituting the basis of the capacity to form and maintain an ethical attitude. Can we really subsume what we mean by acting in an ethical way or struggling with ethical dilemmas under any of these theoretical concepts, or do we need further understanding of the origins of the ethical attitude?

It seems to me that one of the reasons there has been a dearth of theorizing about the origins and dynamics of the ethical attitude in analytical and psychoanalytic literature is that many analysts practise according to the assumption that as long as they have not contravened the Code of Ethics, they can forget about it and the principles underlying it, and get on with the task of analysing the patient. It is as if they consider that ethical thinking is an unwelcome disruption or intrusion to the analytic task, and that as long as they are not contravening the Code of Ethics, then they are relieved of the burden of worrying about ethics in their practice. I hope to show that where this attitude about professional ethics occurs, then there is an ethical deficit—that disclaimers, conscious or unconscious, about the place of ethics in analytic practice constitute the tell-tale signs pointing to the shadow side of professional ethics.

I will consider such fundamental questions as, from where do the ethical principles that underlie our professional practice derive? Are the ethical principles that form the professional basis of our clinical practice related to our psychoanalytic and analytical psychology theories? Where does a capacity for ethical thinking and behaviour come from? Is the ethical attitude innate, or do we learn it? Is it an archetypal potential that awaits activation by the right circumstances, or do we learn it through socializing processes and the quality of our object relations? And why is there so little about the origins of the ethical attitude in analytic literature?

The more I thought about these questions, the more I realized that ethics is with us professionally all the time in the consulting room, day by day, hour by hour. Even though we are not necessarily made consciously aware of our ethical attitude as we work, we are, as professionals, constantly living within an ethical dimension. Every action that we take in relation to our patients, supervisees, and our colleagues, has an ethical aspect which, if ignored, can have serious implications for our capacity to maintain the analytic attitude, the

analytic frame, and to do our analytic work in an appropriately professional context.

Historical perspectives

Freud pointed to the development of two regulating systems relevant to moral behaviour that seem to reflect the operation of the talion law and the principle of agape. The superego is related to the internalization of (usually) the parental figures representing power and authority and capable of evoking in talionic ways such affects as shame, humiliation, the fear of revenge, and the desire for triumph. The ego ideal is based on more agapaic emotions, such as empathic guilt and the wish to preserve and identify with the internalized good parents. Klein later elaborated the dual system of the paranoid-schizoid and depressive positions. Although she did not specify them in these terms, the paranoid-schizoid position may be thought of as operating according to talionic principles, and these may give way to the more agapaic responses of the depressive position through the capacity for concern and reparation.

In the *Collected Works*, Jung stressed the centrality of moral and ethical values as being deeply implicated in psychotherapeutic treatment. He stressed the emotional value of ethical ideas and the fact that ethical issues require that affect and thought struggle together to reach ethical discernment (e.g. Jung, 1964, paras. 855ff).

For Jung, the understanding of the teleological unfolding of the self operating through the transcendent function over the stages of an entire life underpins a view of the self's ethical capacity. In particular, the recognition and integration of the shadow is crucial to the self's capacity to develop and grow, to individuate and thereby to fulfil the self's ethical nature. As Murray Stein (1995) has said, "for Jung . . . ethics is the action of the whole person, the self."

Jung repeatedly acknowledged (e.g. Jung, 1959, paras. 14–16) that the shadow is a moral problem that challenges the whole of the personality, requiring considerable moral effort to overcome, and meeting considerable resistance in the process of gaining self-knowledge. To withdraw shadow projections can require a tremendous struggle of an ethical nature, bringing to consciousness what is unconscious and projected.

To the extent that the other is used as an object of projection, the self remains thereby split and diminished, evoking narcissistic self-care defences that are often perverse in nature. Thus, can the knowledge of the true and subjective reality of the other be lost. In accepting the pain of engaging in the struggle to overcome such splits and to integrate the shadow, the ethical capacity will have been activated, and meaning and value thereby generated.

Philosophical perspectives

The self is not called upon to be ethical in a vacuum. In the struggle to integrate the shadow, the self must recognize the substantive reality and subjectivity of the other. Buber's (1937; 1958) concept of the I-thou relationship as a dialogistic encounter between two subjectivities has relevance here. The teleological project of the self to achieve wholeness requires the withdrawal of projections and the integration of their contents. The self cannot be whole if parts of it are unknown and projected outside itself, in particular its immoral and unethical parts.

It is integral to the notion of the self that it is at once separate and related, divided within itself and instinctively seeking integration and relationship. The contemporary moral philosopher Bauman (1993) has pointed out that the self's ethical capacity is derived not from shared ontological reality—the facts of shared existence—but rather from value and meaning that are different, higher, and unconditional. This is a philosophical position similar in kind to Kant's notion of the categorical imperative. It is the unique and non-reversible nature of my responsibility to another, regardless of whether the other sees their duties in the same way towards me, that makes me an ethical being.

Where does this value and meaning, this sense of unconditional responsibility, come from? How do we account for the self's willingness to tolerate the ethical burden, that real struggle involved in the withdrawal of projections and integrating the shadow?

Neuroscientific perspectives

The internalization of the experience of non-talionic relating nourishes psychically, mentally, and emotionally, as recent neuro-

psychological research has indicated (Schore, 1994). As I described in Chapter 11, the young self develops through a good-enough holding environment, which can be envisaged as a familial breast. This allows the infant the experience of being held without undue fear of retaliation or undue regard to placating another for its survival. Thus, the young self can securely experience the freedom to express him or her self as an authentic being. This total situation in turn becomes the basis for the potential eventually to develop an ethical capacity. When these conditions are not met, pathologies of the self arise, such as the false self, the “as if” personality, and the various pathologies relating to the defences of the self and the self-care systems.

In Chapter 5, I discussed how the findings of psychoneurobiology show that the development *post partum* of the neural circuitry and structures of the infant’s brain which regulate the development of the higher human capacities (i.e. cognitive and socioaffective) is dependent on the existence and quality of the early interactions between infant and mother or caregiver. The emphasis is on the role of mutuality, with the implication that the quality of the exchanges generated has a direct impact on the development of neural circuitry. As the infant instinctively seeks to participate in activating the type, number, and timing of these mutual exchanges, I inferred in Chapter 5 that the infant, a proactive partner, is thereby participating directly in the development of its own neural circuitry, in its own neural growth. It is this particular circuitry that determines the cognitive and socioaffective activity which must eventually have a bearing on and underpin the achievement of these higher psychological capacities, including the ethical capacity. This suggests that there are grounds for considering that the ethical capacity is, at least in part, innate, derived from the earliest, instinctually driven exchanges with its primary caregiver, including exchanges initiated by the baby, and, at least in part, influenced by environmental factors, by the impact of that very caregiver’s capacity to be responsive to and to initiate appropriate and meaningful interactions with the self.

Emergence of an ethical capacity

In considering these questions and perspectives, I wish to offer an image to highlight an archetypal potential for ethical capacity.

In thinking about the possible origins of the ethical attitude, a primordial image emerges of a combined parental—or perhaps a combined familial—picture. What I am combining is Winnicott's (1964) evocative notions of primary maternal preoccupation leading eventually to the ordinarily devoted mother with the notion of the discerning, discriminating thinking function which is often imaged symbolically in masculine, paternal terms. It is through the combination of these functions—of devotion and thinking—that the ethical attitude is maintained in the parental couple, eventually internalized in the psyche and activated as the self and ego in dynamic relation, eventual parents in the psyche. The idea of the ordinarily devoted mother represents a deeply ethical mode in its instinctual and unconditional devotedness to another, her infant, overcoming her narcissistic needs and frustrated rages, her shadow projections, and resisting by and large the impulse to skew her infant's development through undue acquiescence to her requirements. Of course, later she will leave this state of primary preoccupation and devotedness and will begin the processes of socialization which are so necessary a part of ethical development—the capacity to say, in different ways, “no”, thereby establishing boundaries and expectations of self-regulation, including those in relation to others. To this image of ordinary devotedness to a nascent self, I am combining the notion of the discriminating and thinking function of the masculine principle. The activation of an archetypal potential for eventual ethical behaviour will be thus reinforced in ordinary good-enough situations by caregivers capable of sharing acts of thoughtful devotedness and of empathic thinking about their infant.

I am conjecturing that the identification with and internalization of the agapaic function of the parental figures in their empathic holding as well as their thinking and discriminating aspects trigger or catalyse a nascent ethical capacity in a young mind, the first steps of which include those primitive acts of discriminating good and bad that constitute the foundations of splitting and projection. Early (as well as later) splitting and projecting may therefore be instances of primitive moral activity, what Samuels (1989) calls original morality—the expulsion from the self of what is unwanted and felt to be bad onto the other, where it is identified as bad and eschewed. Even in situations where the good is split and projected, it is in the

service of maintaining a discriminating, but highly defensive, psychic structure. So we come full circle: the primitive acts of discriminating the bad, and splitting it off from the psyche by projection into the caretakers, constitute the very preconditions for the creation of the shadow that eventually will require a further ethical action of reintegration—a first, primordial or prototypical moral discernment prior to the state where there is sufficient ego strength for anything resembling proper moral or ethical behaviour to arise.

As we posit, following Fordham (1969/1994), the self as a primary integrate, autonomous but very much in relation to another or others, so we are alone as moral beings while at the same time finding our moral nature in relation to others. To truly find another represents a transcendence of narcissistic ways of relating in which the other is appropriated for use in the internal world, denying the other's subjective reality. To live with the implications of this—a capacity to recognize and relate to the truth of the other—is a step in the development of—and perhaps eventually beyond—Klein's notion of the depressive position. The depressive position is usually considered to contain acts of reparation through guilt and fear that the object may have been damaged and therefore may be unable to go on caring for one's self (Hinshelwood, 1989). As such, acts of reparation remain contingent on preserving the other for the benefit of the self. The ethical attitude envisaged here goes beyond this contingency and suggests a non-contingent realm of ethical behaviour. This situation has direct implications for what transpires in the consulting room between the analytic couple, as I describe in Chapter 11.

Emergence of an ethical capacity in the consulting room

Much of the work between patient and analyst concerns the vicissitudes in the modes of and capacity for *coniunctio* between them. Jung emphasized the importance of mutuality in the relationship between patient and doctor. He was very aware of the psychological dangers and ethical pressures that arise from this, as aspects of what he called unconscious identity, or *participation mystique* (Jung, 1964, para. 852). These are now usually conceptualized as projective identification, in which primitive levels of communication can lead to states of greatly reduced psychological differentiation between the

two individuals within the relating pair. This is now thought of as the countertransference. However helpful such states may be in providing immediate conduits for unconscious communication, thus enhancing countertransference information, the very real dangers are clear. Unconscious identification without the discriminating function of thinking and reflection can lead to the perversion of the ethical attitude. Boundaries may then be crossed, unhelpful enactments occur, acting out may become possible, and the safety of the container lost, thereby curtailing the psychological freedom necessary to carry out the analytic work. Examples of this are set out in detail by Gabbard and Lester (1995).

The "special act of ethical reflection", as Jung called it (1964, para. 852), as it appears in the consulting room, itself requires special conditions. In particular, the maintenance and protection of bounded space, the *vas bene clausum*, or in Langs' (1974) terms, the analytic frame. In the unequal analytic relationship, maintaining a bounded space ensures that the analytic work may proceed safely and with the necessary analytical freedom, so that regression and states of powerful deintegration and sometimes dramatic disintegration can occur. Inevitably, the analytic frame may be called into question. Wiener (2001) has discussed some of the issues that may be involved, requiring the maintenance of what she has called "ethical space". This indicates the importance of ongoing supervision or consultation in analytic practice post-qualification. One implication of this for training is the need to revise a former primary training aim, which had been to prepare and assess that candidates are ready to work "independently". Chapter 13 gives a fuller discussion of the ethical issues in relation to ongoing supervision post-qualification.

The unbalanced nature of the analytic dyad resembles the situation that I described earlier, philosophically and developmentally, in which one person takes on unconditional ethical responsibilities towards another who is not obliged to reciprocate in an equal way. In the consulting room, the analyst undertakes the maintenance of an ethical attitude which the patient is not called upon to adhere to in the same way. Of course, the patient abides by other rules, such as payment of fees and regular attendance (within certain parameters). In the urgency of the analytic situation, unconscionable pressure may be brought to bear on the analytic relationship, putting both participants at risk. The situation can be experienced in such a drastic way that neither patient nor analyst feels that a solution is

possible. Lambert (1981) has discussed how important it is for the ongoing treatment that the analyst maintain an agapaic function in the face of the patient's and the analyst's impulses to behave according to the talion law. If such pressure can be contained in the holding environment of the analyst's capacity for agape, it is then that, as Jung stated, the transcendent function may be activated and a solution found.

For example, a patient in multiple sessions per week analysis that had been established over some time disclosed that he was paying the analyst with money that was gained by fraudulent means. In his work the patient was responsible for uncovering the fraudulent activities of others, a responsibility for which he took great pride and satisfaction. His marital home had also been acquired substantially through ill-gotten gains. Accepting the fraudulent money brought into question whether the analyst was drawn into the patient's perverse system, and the implications of this touched on supervision that was being paid for in part by the patient's fees. Should the analyst accept the money in the hope that through the analytic work the patient would be able to reach an understanding about his need to behave in a near-criminal way, so to increase the possibility of leading a more ethical life? Should the analyst confront the patient and refuse to accept the money? Does the analyst have responsibilities for reporting the situation to the referring agency, or even to the patient's employers? What were the role and responsibilities of the supervisor?

In this case, the action of the transcendent function as it arose in the patient was provisional and complex, involving both concrete enactments and symbolic representations. Eventually the patient left work in order to study, and entered into a relationship that, not without ambivalence and difficulty, allowed some positive internal psychic changes to occur. The supervisory couple considered that it was in part through actively and empathically discussing together the ethical dimension of the patient's situation, without relaying this overtly to the patient, that made it possible for him to move on psychically. This seemed to be confirmed by a numinous experience involving the patient unconsciously placing an item of identity in a circle in the supervisee's consulting room, the perception of which conveyed to each a shared sense of meaningfulness and transport beyond the present situation.

The ethical attitude as a developmental position

If the attainment of an ethical attitude is a developmental achievement, then we could venture a view that the ethical attitude is a developmental position. In Hinshelwood's (1989) definition, "position" is "the characteristic posture that the ego takes up with respect to its objects." The emphasis I would make is on the quality of the relationship between self and other and the meaning of the relationship for each, an interior and exterior situation.

An ethically mature attitude is not predicated on the ethical behaviour of the other towards the self, but rather is founded on the earliest experience of the unconditional devotedness of another in relation to the self, regardless of the self's relation to the other. In Klein's view, on the other hand, the capacity for guilt, concern, and the wish for reparation seen in the infant results from the self's capacity to imagine the damage it has caused the other and thus how the other's wish or capacity to go on loving and caring for the self may be diminished or disappear. It also represents the concern for and fear of the loss of the self's own internal good objects which are necessary in supporting the ongoing viability of the self and without which psychic dissolution may occur (Klein, 1935; 1940). Here is an internal accounting system at work that remains related in this way to the anxieties evoked by the talion law of the paranoid-schizoid position.

In the teleological perspective in which the self is always becoming more itself, the self is supported in its development through the symbolic capacity of the transcendent function and the creative resources of the unconscious. In speaking about the struggle with an ethical conflict which can leave the person feeling locked in a dilemma from which there seems to be no possible development or recourse, Jung states:

The deciding factor appears to be something else [than an accepted rule or custom]: it proceeds not from the traditional moral code but from the unconscious foundation of the personality. The decision is drawn from dark and deep waters. . . . If one is sufficiently conscientious the conflict is endured to the end . . . The nature of the solution is in accord with the deepest foundations of the personality as well as with its wholeness; it embraces conscious and unconscious and therefore

transcends the ego . . . a conflict of duty [finds] its solution through the creation of a third standpoint.

(Jung, 1964, paras. 856–7)

We have seen that it is not always possible to achieve a positive outcome to the struggle to find another in such a way as to relate in an ethical manner. This is as true in the consulting room as outside it, and involves an ethical struggle on the part of patient as well as analyst. Freedom from appropriation for narcissistic use in another's intimate, internal world, may precede the ability to relate ethically to an intimate other. This is the result of the rule of abstinence, whether familial between the generations, or professional between patient and analyst, who are also of two different (analytic) generations. In conditions where such freedom was not available, the self may have had to devise ways of protecting itself from such incursions, erecting defences of the self, and a loss of ethical capacity may have ensued. Much analytic work is then devoted to reinstating this freedom, through facing up to the inevitable forces of sabotage which seek to undermine the ethical, analytical work.

Conclusion

It seems to me that the concept of the ethical attitude can function as a bridging concept between psychoanalysis and analytical psychology for two reasons. It causes us to stretch deeply into the bases of the developing psyche and includes commonly held, collective core values, thus providing an opportunity for the joint study of the sources and conditions for maintaining one of the deepest expressions of our humanness. How we deal with pragmatic ethical issues in the consulting room, in our analytic organizations, and with our colleagues is a common concern for psychoanalysts or analytic psychologists alike.

The ethical attitude is an essential part of the analytical relationship, and is not just an addendum to the practitioner's work. If it is experienced by the analyst, in projection, simply as the patient's problem, then analytic work may become no more than an intellectual exercise, and the Code of Ethics a mere checklist that may be forgotten as long as it is not transgressed. Analytic practice and the ethical attitude are intimately bound together; each permeates

the other and defines and gives value to the other. This reflects the analytic relationship itself in which, as Jung stressed, both partners make themselves available to, and are liable to be changed by, the encounter with the other. This is the essence both of the analytic work and of the ethical attitude. Thus, we may say that, whether psychoanalyst or analytic psychologist, and whatever the diversity of our concepts and our terminology, our shared analytic attitude is in essence an ethical attitude, and therefore that our shared analytic and ethical attitude is embedded deeply within our humanness.

Notes

- 1 Some of the existing analytic literature is reviewed in Chapter 2. A recent volume of papers by London-based psychoanalysts, psychotherapists and Jungian analysts was co-edited by the author (Solomon and Twyman, 2003).

The ethics of supervision: developmental and archetypal perspectives

This chapter argues that the provision of ongoing supervision, peer supervision, or consultation helps to ensure, among other important functions, reliable access to ethical thinking in analytic practice. This does not preclude the importance of, or suggest the lack of, an ongoing, active internal capacity for ethical thinking or an internal supervisory function that comes through the processes of internalization of the analytic attitude during the course of training and post-qualification professional development. I am, however, advocating that fostering the expectation of ongoing supervision post qualification as a present factor in clinical practice has ethical value and weight and supports clinical “hygiene”.

The struggle to keep ethical thinking integral to clinical work and the theory building that develops out of clinical experience requires sustained diligence and is particularly needed in those areas of our analytic and therapeutic practice where we are likely to be the most tested as clinicians. The function of the ethical attitude in clinical practice is not simply a matter of a set of rules that can be forgotten as long as they are not contravened in the clinical setting. The ethical attitude is integral to all our activities and relationships as human beings as well as clinicians, and especially to that most intimate, intense, and demanding of relationships, the analytic relationship, as has been argued in Chapters 11 and 12. Since the time of the Hippocratic oath, professional Codes of Ethics and Codes of Practice state the practitioner’s commitment to ethical practice and the principles that underpin it.

In this chapter I will explore the role of supervision in helping to maintain ethical thinking and practice in clinical work. I refer to the terms supervision (in which a younger practitioner, often a trainee, seeks regular, often weekly, supervision on one patient seen intensively, and where a fee is paid to the supervisor by the trainee), consultation (which usually refers to two colleagues, one senior and one junior, who discuss, regularly but not necessarily weekly, patients or clinical issues, and where the senior colleague receives payment from the junior one), or peer supervision (often in a small group of colleagues who are more or less at the same level of clinical experience and where payment is not involved, who meet regularly but not necessarily weekly). Unless there is a specific point of differentiation to be made between these modalities, for the purposes of this chapter I will use the term “supervision” to cover all three.

Crucial to my argument is the view that the analytic attitude is in essence an ethical attitude, and that the achievement of the ethical attitude is tantamount to the achievement of a developmental position. Here, “developmental position” is meant in much the same way that Klein or Bion had in mind when they referred to the paranoid–schizoid or the depressive positions as stages in the developmental process. Much of the argument of this chapter will revolve around the notion that the ethical attitude, like the paranoid–schizoid and depressive positions, is not a once-and-for-all achievement, but rather is part of an internal human dynamic that is experienced alongside and in relation to more primitive and sometimes more dangerous states of mind. Hence, just like the depressive position, the achievement of an ethical attitude can be considered in developmental terms, which requires mental effort, in particular, conscious effort, to sustain. This perspective has much to offer when we think of the importance of an ongoing supervisory function in the practitioner’s clinical work as offering a place where that conscious effort is shared and reinforced.

The view that I set out in this chapter incorporates the role of both developmental and archetypal perspectives in the understanding of the achievement of ethical thinking through the supervisory function. Underpinning the achievement of the mental capacity for ethical thinking lies the archetypal nature of the triangular relationship.

Achieving an ethical attitude: a developmental model

It is not possible to be ethical in a vacuum. The ethical function is a relational function involving the assessment of subjective and intersubjective states. Jung pointed out (1964, paras. 371–99) that it is ubiquitous and hence has a collective dimension, while at the same time being experienced most vividly at the personal level. In thinking about the development of the young mind and how an ethical attitude might come into being, the Kleinian model shows that, because of the massive onslaught of internal and external stimuli on its limited mental capacities, the infant is at first suffused with psychotic states of mind that may cause profound anxieties, particularly if the holding environment is deficient and unable to process such states. These anxieties are primarily managed defensively through splitting and projection. Communicating, relating, and using the other psychodynamically often take place through projective identification (Klein, 1946). Hence, self and other are mixed up, and parts of each are allocated to different and separate psychic locations, either internally or externally, in the self or in the other. Klein called this the paranoid–schizoid position, where the perception and experience of the bad and good parts of the self and the other are not psychically found together, and where relating is at the level of part objects, because the young mind is not as yet capable of holding together opposite affective states. In a later development, called the depressive position (Klein, 1935), the infant or child is more able to experience the other as a whole object, separate from the self, and containing both good and bad aspects. Thus, the child's feelings of love and hatred for the object, which had previously been split off and experienced as separate, are now capable, at times, of being held together in the infant's mind, giving rise to feelings of ambivalence towards the object, as well as feelings of guilt and the wish to repair the damage that the self might have wrecked on the object in the previous, part object mode of relating. In elaborating how this dynamic occurs, Britton (1998) has made a helpful contribution in offering a model that involves the circularity of the dynamic movement between the paranoid–schizoid and the depressive positions, such that each new cycle builds on the experience of the previous ones. Schematically, this has similarities with Fordham's model of deintegration and reintegration (Fordham, 1957).

In thinking in developmental terms about the conditions that foster an ethical capacity, as discussed in the previous two Chapters, I have suggested that it is through the combination of the infant or child's earliest experiences of devotion and reflection by the parental couple, who maintain the ethical attitude in relation to their infant or child, and that it is this combination that is eventually internalized by the child and is activated as the self and ego develop in dynamic relation, eventual internal parents in the psyche. The first stirrings of a nascent ethical capacity occur as the infant experiences being the recipient of the non-talionic responses of the parental couple in face of his or her various states of distress, including rage and dread. Under the right conditions, the infant's experience of the parent's non-talionic responses is eventually internalized and identified with, and becomes the basis for gratitude and the capacity to relate ethically towards others. The idea of the ordinarily devoted parent, mother or father, represents a deeply ethical mode in their instinctual and unconditional devotedness to another, their infant, overcoming their narcissistic needs and frustrated rages, their shadow projections, and resisting by and large the impulse to skew their infant's development through requiring undue acquiescence.

Later, they will leave this state of primary preoccupation and devotedness and will begin the processes of socialization which are so necessary a part of ethical development—the capacity to say, in different ways, “no”, thereby establishing boundaries and expectations of self-regulation, including those in relation to others. Thus, to the image of ordinary devotedness to a nascent self I am combining the notion of the discriminating and thinking function of the masculine principle, thus evoking a notion that appears in various guises in psychoanalytic and Jungian analytic literature, that of the creative potential of the third, whether a third person, a third position, or a third dimension. The activation of an archetypal potential for eventual ethical behaviour will be thus reinforced in ordinary good-enough situations by caregivers capable of sharing acts of thoughtful devotedness and of empathic and devoted thinking about their infant and child. This has a clear parallel with what happens in the consulting room, where the analyst's willingness to go on sacrificing their own narcissistic needs through the sustained activity of thoughtful devotedness to the patient that we call the analytic attitude protects the patient so that they may develop and grow according to the needs of their self.

From dyad to triad: the eventual achievement of triangulation

I am conjecturing that the internalization of and identification with the agapaic function of the parental figures in their empathic holding as well as their thinking and discriminating aspects can trigger or catalyse a nascent ethical capacity in a young mind. The first steps of this include those primitive acts of discriminating good and bad that constitute the foundations of splitting and projection. Early (as well as later) splitting and projecting may therefore be instances of primitive moral activity, what Samuels (1989) calls original morality; the expulsion from the self of what is unwanted and felt to be bad into the other, where it is identified as bad and eschewed. Even in situations where the good is split and projected, it is in the service of maintaining a discriminating, but highly defensive, psychic structure. This is a two-dimensional internal world, in which primitive psychic acts discriminate good from bad experience, and split the bad from the psyche by projection into the caregivers; a first, primordial, or prototypical moral discernment prior to the state where there is sufficient ego strength for anything resembling mature moral or ethical behaviour to arise. This constitutes the very preconditions for the creation of the personal shadow, which eventually will require a further ethical action of reintegration when the person has achieved an internal position of moral and ethical capacity.

If we consider, following Fordham (1969/1994), the self as a primary integrate, autonomous but very much in relation to another or others, so we are alone as moral beings while at the same time finding our moral nature in relation to others. To truly find another represents a transcendence of narcissistic ways of relating in which the other is appropriated for use in the internal world, denying the other's subjective reality. To live with the implications of this capacity to recognize and relate to the truth of the other is a step in the development of the depressive position. The depressive position is usually considered to contain acts of reparation through guilt and fear that the object may have been damaged and therefore may be unable to go on caring for one's self (Hinshelwood, 1989). As such, acts of reparation remain contingent on preserving the other for the benefit of the self. The ethical attitude envisaged here goes beyond this contingency and suggests a non-contingent realm of ethical

behaviour. As I discussed in Chapter 12, this situation has direct implications for what transpires in the consulting room between the analytic couple.

This represents a two-stage, dyad-to-triad process that reflects the two-stage developmental process in the infant (the neurophysiological implications of this are discussed in Chapter 5). In this process the neural development of the infant's brain *post partum* must be matched by a parallel nurturing provision such that at first infant and mother are highly attuned (a "me/me" relationship) and later there follows complementary and compensatory discriminations (a "self/other" relationship). The differentiation would then be between when to be "caring" and flexible and when to be "tough" and resilient, both of which have implications for the interactions in the consulting room. Just as the analyst can have a two-stage developmental relationship with their patient, so the intensive dyadic work would have a counterbalancing relationship created by the triangular space of supervision.

In this developmental framework, it is evident that there evolves a gradual demarcation between self and other, including an enquiry about how the self individuates from out of a projective and identificatory mix-up between self and other through to a fuller experience of the reality of the self's subjectivity in relation to the reality of the subjectivity of another. This is the beginning of the capacity for triangulation, that "theory of mind" (Fonagy, 1989) that the child has achieved when he or she is aware that their thoughts and those of the other are separate and not available directly to each other (as assumed in states of fusion or identification), but only through reference to a third perspective. As Cavell has described:

... the child needs not just one but two other persons, one of whom, at least in theory, might be only the child's idea of a third ... the child must move from interacting with his mother to grasping the idea that both his perspective on the world and hers are *perspectives*; that there is a possible third point of view, more inclusive than theirs, from which both his mother's and his own can be seen and from which the interaction between them can be understood.

(Cavell, 1998, pp. 459–60)

Jungians would amplify this view by addressing the difficult but necessary work on the withdrawal of the projections of those negative aspects of the self, called shadow projections, through to a gradual capacity to view the self along with the other as separate but interrelated subjectivities with multivariate motivations, including shadow motivations that project the bad outside one's self. The withdrawal of shadow projections, predicated on the realization that the other is truly other and not assumed to be a function or aspect of the self, which otherwise might sully the gradual more mature experiences of intersubjectivity, underpins the ethical attitude. As such it is a developmental achievement that derives from an innate potential, activated at birth, and fostered by the continuous "good-enough" experience of living in an ethical environment. It represents a constant struggle through acts and attitudes that are against the natural selfish inclinations of the self, acts that are *contra naturam*, foregoing insistence on the self's limited perspectives in order to encompass a wider view, including the recognition of that which is not ethical within the self. In Jungian terms, that recognition represents the integration of the shadow back into the self, steps towards incremental advances in the self's movement towards greater states of integration and wholeness. This is the individuation process, and it is predicated on a teleological view of the self in which the self's capacity for change, growth, and development are understood and experienced as being suffused with a sense of purpose and meaning.

Triangulation: the archetypal third

In 1916, a short time after the split between Freud and Jung, when Jung was suffering profound disturbances in the face of his "confrontation with the unconscious" (Jung, 1961) following the loss of his personal and professional relationship with Freud, who represented the centrally organizing psychic function of the esteemed father figure he had never had before, Jung wrote two landmark papers that can appear to be diametrically opposite in content and form: *Seven Sermons to the Dead* and *The Transcendent Function*. The former was published at the time, but not in a separate English edition until 1982, whereas the latter was not published until 1958, only a few years before Jung's death in 1961. Both reflect, in different

ways, the immediacy of Jung's distressing and threatening psychic experiences that arose from his self analysis. At the same time, Jung continued to function as Clinical Director of the Burghölzli Hospital in Zürich and also fathered a growing family. If the tone of the *Seven Sermons to the Dead* was that of a chilling account of the horrifyingly vivid psychic experiences he endured at the time of his "confrontation with the unconscious", that of the *The Transcendent Function* was of a measured, scientific contribution to analytic theory building. Jung compared the latter to a "mathematical formula" (Jung, CW 8, 1958, para. 131), and it could be interpreted as a dispassionate exteriorization of his highly emotive internal state at the time, a kind of self supervision. In *The Transcendent Function*, Jung set out an archetypal, deep structural schema of triangulation in which he demonstrated that psychic change occurs through the emergence of a third position out of an original conflictual internal or external situation, the characteristics of which cannot be predicted alone by those of the original dyad. In relation to this idea, it is interesting to note that the philosopher and psychoanalyst, Marcia Cavell, who has recently put forward the idea of triangulation in a psychoanalytic context, refers to Polanyi's notion of "emergent properties" in much the same manner as that pertaining to the dialectical nature of the transcendent function, that is, as "properties that in a developmental process arise spontaneously from elements at the preceding levels and are not specifiable or predictable in terms of them" (Cavell, 1998, p. 461). Chapter 14 considers the theory of emergent properties in relation to some of the basic principles of Jung's theories.

Whether or not he consciously drew on its philosophical origins, Jung's notion of the transcendent function is based on the idea of the dialectical and deep structural nature of all change in the living world as expounded by Hegel in his great work, *The Phenomenology of the Spirit* (Hegel, 1807/1977). Hegel posited a tripartite schema as fundamental to all change, including psychic change, a situation in which an original oppositional pair, a dyad, which he called thesis and antithesis, struggle together until, under the right conditions, a third position, a synthesis, is achieved. This third position heralds the transformation of the oppositional elements of the dyad into a position with new properties which could not have been known

about before their encounter, the *tertium quid non datur* in Jung's terms. Hegel called this ubiquitous struggle dialectical, because it demonstrated how transformations in the natural world happen through the resolution of an oppositional struggle and can be understood to have meaning and purposefulness. This was a deep structural patterning of dynamic change that was archetypal by nature and developmental as a dynamic movement in time.

This archetypal schema can also be thought of as the basis of the tripartite Oedipal situation, where transformation from out of a primordial pair, mother and child, can be achieved through the third position afforded by the paternal function, whether this be a real father, or a capacity of mind in the mother or in the child, or both, as Fonagy illustrates (Fonagy, 1989). It is in this sense that we might speak of the emergence of the mind of the child, the child's identity, as separate from his or her mother, through the provision of a third perspective. For Jung, this would be thought of as the emergence of the self, through successive states of transformation and individuation via the transcendent function. In the context of the function of supervision with which we are concerned in this chapter, we could say that it is through the provision of the supervisory third that both patient and analyst are helped to emerge from out of the *massa confusa* of the analytic dyad. Both change as a result as individuation progresses.

In psychoanalytic theory, the importance of the negotiation of the Oedipal threesome, that archetypal triad *par excellence*, constitutes much of the psychoanalytic understanding of developmental achievement. Freud first used the term "Oedipus complex" in 1910, following Jung's scientific researches on the complexes using the Word Association Test (WAT). At that time, the Oedipus complex was considered to be one of many organizing complexes of the psyche, but soon became the core psychoanalytic concept. Britton sums up concisely the Oedipal situation:

... we notice in the two different sexes the same elements: a parental couple . . . ; a death wish towards the parent of the same sex; and a wish-fulfilling dream or myth of taking the place of one parent and marrying the other.

(Britton, 1998, p. 30)

Britton stresses the necessity of working through the Oedipus complex in order to resolve the depressive position and of working through the depressive position in order to resolve the Oedipus complex (Britton, 1998, p. 29). He evokes the notion of internal triangulation, which requires the toleration of an internal version of the Oedipal situation in order to do this. He describes "triangular psychic space" as "a *third* position in mental space . . . from which the *subjective self* can be observed having a relationship with an idea" (Britton, 1998, p. 13). He concludes that "in all analyses the basic Oedipus situation exists whenever the analyst exercises his or her mind independently of the inter-subjective relationship of patient and analyst" (Britton, 1998, p. 44).

In developing Britton's idea of the Oedipal triangle as present through the internal events and relationships that occur in the analyst's mind, as links to an internal object or to psychoanalytic theory, I wish to reiterate that the external manifestation and facilitation of this internal triangular state is quintessentially present in the supervisory or consultative relationship. Here, two people, the analyst and the supervisor, are linked in relation to a third, the patient.

Within psychoanalysis, the current debate about the implications of intersubjectivity—that the analyst and patient are acting together within a treatment relationship, in which the analyst's countertransference to the patient's transference offer essential information (for example Atwood & Stolorow, 1993, p. 47)—has been enhanced by Cavell's (1998) notion of "progressive triangulation". Rose summarizes her notion succinctly: ". . . in order to know our own minds, we require an interaction with another mind in relation to what would be termed objective reality" (Rose, 2000, p. 454). I hold that the provision of supervision, including the internal supervision that happens when the analyst thinks about aspects of the patient and the analytic relationship, is an important instance of "progressive triangulation", in that it allows for ongoing interaction with another mind in relation to a third, the patient, who can be thought about because differentiated from the dyadic relating of the patient-analyst couple.

Triangular space and supervision in analytic practice

The provision and function of supervision of analytic and psychotherapeutic work with individuals, children, couples, or families, creates a needed triangular space essential to the care and maintenance, the ongoing hygiene, of the dyadic relationships. I use the term "hygiene" in the sense that, through its provision, supervision keeps constantly activated the awareness of the analytic attitude, including its ethical component, in and through the presence of a third person (the supervisor), or a third position (the supervisory space), and that it acts as an aid in the restoration of the analytic and ethical attitudes when at times they might be lost in the maelstrom of clinical practice. Supervision is itself the representation of that attitude through the provision of a third area of reflection. The treatment, at profound levels, of the psyche in distress always involves a regressive and/or narcissistic pull back into part object relating, those primitive either/or, dichotomous states of mind that Jung and others have shown are dominated by the internal experience of the archetypal warring opposites at the basis of the defences of the self (Kalshed, 1996). Ensuring the provision of the sustained triangular space of the supervisory situation creates the necessary opportunity for analytic reflection, where two people work together to think about a third, whether the third is an individual, a couple, or a family, or an idea or aspect within the therapist or analyst, that is relevant to their clinical work. The provision of triangular space through internal or external supervision, or both, is essential to the maintenance of the analytic attitude in the face of the multitudinous forces and pressures at work within the analytic and therapeutic situation, arising from the conscious and unconscious dynamics within and between patient and analyst alike, and the consequently inevitable, often unconscious, intersubjective exchanges between them as a pair, that would seek, for defensive reasons, to undermine analytic achievements.

To the extent that this triangular space created by supervision is necessary to the hygiene of the analytic couple (just as the paternal, reflective principle is essential to the hygiene of the mother-infant dyad, providing the space for psychological growth and separation to occur), then supervision has an ethical as well as a clinical

and didactic role to play in all analytic and therapeutic work, notwithstanding the years of experience of the practitioner. Whether supervision is provided in the same way as during training, with weekly meetings in a one-to-one situation with a senior practitioner, or in consultations with a senior practitioner at agreed intervals, or whether peer supervision in small groups is selected as the means of providing the triangular space, depends on the needs and inclination of the clinician.

In the case of the analysis and supervision of training candidates there are particular ongoing boundary issues and other pressures inherent in the training situation that do not usually pertain in work with non-training patients, such as the need to see a patient under regular supervision at a certain minimum intensity (three, four, or five times per week), over a certain minimum amount of time (often for a minimum of either eighteen months or two years), supervision will help to identify and work under these constraints without foregoing the analytic attitude. This will in turn foster in the candidate their own ethical attitude, as they internalize the expectation that all analytic work, including the work of their own analysts and supervisors, is in turn supervised. The trainee will then know from the very outset of his or her training that there is always a third space created in which he or she as a patient or as a supervisee will be thought about by another supervisor-practitioner pair.

Fostering the ethical-supervisory expectation is more likely to engender a generationally based commitment to the analytic attitude within a training institution, as the tradition of good clinical practice is passed down across the analytic and therapeutic training generations. Currently, there is an assumption that the aim and goals of training can often be summed up in almost the opposite way: that is, that the success of the candidate's progress through his or her training is assessed according to whether he or she is judged to be ready to "work independently". Of course, the assessment of the trainee's capacity for independent judgment and a sense of their own viable autonomy is an important, indeed crucial, factor in the process of assessing whether someone is ready to qualify to practise as an analyst or therapist. I am arguing here that, included in this assessment should be a judgment about the candidate's awareness of the need for and usefulness of the provision of a triangular space in which to discuss their clinical practice, in order best to ensure against

the risks inherent in working in such intimate and depth psychological ways, including the dangers of mutual identificatory states or the abuse of power.

My contention is that, as well as its obvious advantages, the expectation that the practitioner will ensure that they have ongoing supervision or consultation on their clinical practice is a sign of maturation, both on the part of the practitioner as well as that of the training institution, as they assess their own and others' clinical competence. This is part of the assessment process that results in the authorization to practise as members of the training institution. There is the added dimension that some members go on to become eventual trainers, that is, training analysts, supervisors, and clinical and theoretical seminar leaders, entrusted with the responsibility for training future generations of analysts and therapists. The expectation in the trainee of ongoing supervisory and consultative provision is modelled by the trainers, fostering the candidate's respect for and understanding of the conditions that create and sustain the analytic and ethical attitude. This includes attention to boundary issues that can arise within and through the intensity of the intersubjective dynamics within the analytic and therapeutic relationship. Gabbard and Lester (1995) provide a detailed discussion of the boundary issues in analytic practice. These intersubjective dynamics are inevitably released by the interpenetrative, projective, introjective, and projective identificatory exchanges within the transference and countertransference.

The recommendation that members of analytic training institutions seek to establish an ongoing supervisory ethos to discuss their work, even if the provision is not systematically maintained, and that all training analysts and supervisors of the institutions have regular consultations regarding their training cases (including patients, supervisees, or training patients) represents a further development of those ubiquitous triads created by the training situation (the trainee–training analyst–supervisor; the trainee–training patient–supervisor; and the trainee–supervisor–Training Committee). The expectation of providing a space for reflection with another would benefit all parties concerned and at the same time increase clinical awareness. Without this benefit, we run the risk of identifying with those narcissistic and other pathological processes and pressures, inevitable in analytic practice, as we are liable to treat those aspects

in our patients that correspond and resonate with our own internal issues and personal histories. Hence the importance of clinical “hygiene”, of creating the third space of supervision, that can help us to maintain our connection to genuine object relating and to staying alert to the pitfalls of intense dyadic relating.

Conclusion

I have explored some aspects of the supervisory function in analytic practice in relation to developmental and archetypal perspectives. The provision through supervision of a triangular space in which clinical work with patients can be thought about creates the necessary dimensionality for psychological transformation to occur and has resonance with developmental reality and archetypal truth. The ethical aspect of supervisory provision is predicated on the notion that genuine object relating arises out of such dimensionality, in which one mind is aware of the subjective reality of another and chooses to take ethical responsibility towards the other, as the parent in relation to the child, and the analyst or therapist in relation to the patient. This is fostered in the supervisory setting, where the triangular relationship of supervisor–analyst/therapist–patient makes manifest in concrete form a universal triangular and deep structural situation which is necessary if psychological development is to occur.

It may be that the emergence of an ethical capacity represents a development on from the depressive position, in that it seeks to provide for and protect a non-contingent space or place for reflection about another, be it a person, a relationship or an idea. Such reflection may result in decisions taken with respect to another, and may be followed by actions, which include the content, form, timing, and other characteristics of interpretations, as well as other, more subtle, modes of being in the presence of another, that will have a direct impact on the quality of their internal world. It is for this reason (the possibility of doing harm to the vulnerable interior reality of another) that the Hippocratic oath was first established 2500 years ago with its main premise, *nolo nocere*, and why we, as practitioners, continue to seek to hone its ethos.

PART V

THE HUMAN PSYCHE IN
A CHANGING WORLD

The human psyche in a changing world

“Two things fill the mind with ever increasing wonder
and awe, the more often and the more intensely the mind
of thought is drawn to them: the starry heavens above me
and the moral law within me.”

(Immanuel Kant, *Critique of Practical Reason*, 1788)

This Part consists of a newly written, extended essay for this book, Chapter 14, “The potential for transformation: synchronicity, emergence theory, and psychic change”. It explores how new findings from such diverse fields as emergence theory, the new physics, evolutionary anthropology, neuropsychology, the arts, and humankind’s ubiquitous religious and spiritual quest, resonate with Jungian concepts, such as the self, the psychoid archetype, synchronicity, and the transcendent function.

Recent findings from emergence theory suggest that self organization across the biological and non-biological world—from living systems to physical systems to societies—emerges spontaneously in dynamic adaptive systems at the edge of chaos. The relevance of these findings to the human system we call the psyche–soma has not been lost to a number of Jungian analysts and theoreticians in recent years, as if attesting to the very theoretical model of emergence which they address.

These writers have linked in a number of ways certain of Jung’s theories, particularly that of the psychic energy which is necessary for all moments of psychic transformation, with this paradigm shift

in scientific thinking. What seems to unite the explorations of these writers is their interest in the nature of psychic organization and its potential for change and transformation. Chapter 14 considers a number of these correspondences in which the underlying principle suggests a “synergetic” process whereby energy, when pumped into a system near to chaos causes a new structure to emerge from the disorder and chaos of that system. This is suggestive of Jung’s teleological view of the processes of the mind in which, under certain conditions which may include conflict and psychic disorder at the edge of chaos, the availability of generalized libidinal energy allows the emergence of symbolic activity that releases a hitherto restricted or pathological condition to emerge into a more ordered one, resulting in increased creativity and adaptability. This is a view of the processes of being and becoming that could apply to all dynamic systems in nature, including the mind. It suggests a unified field theory in which the psyche partakes in the processes inherent in all nature. If this is so, Jung’s concepts of *unus mundus* and the psychoid archetype fit in well with a view of the emergent processes of all self-organizing systems in the universe, living and non-living.

The potential for transformation: emergence theory and psychic change

In studying Jung's concept of synchronicity and the teleological vision underlying his opus, I have been struck by a number of links to recent research in the theory of emergent properties and complexity theory, and current neurophysiological studies on the so-called "mirror neuron" effect in human and higher mammalian interactions. I have gathered cross-references between the theory of emergent properties and Jung's theories in order to better understand aspects of his abiding interest in humankind's ubiquitous spiritual quest, across all cultures and across human history itself. The last three centuries have seen a decline in the importance of the established religions in the West, caused largely by the impact of materialistic and mechanistic approaches to the world and our place in it—the cause and effect scientific approach to empirical reality where the observer is notionally absent from, and merely an unintrusive observer of, the field of his or her enquiry. Another reason for this decline is the impact of the theory of evolution that some have interpreted as the death knell of religious and spiritual hermeneutics to explain the existence, let alone the evolution, of all species, including of course our own. Nevertheless, the search for greater spiritual meaning remains as true as ever for most ordinary men and women. Perhaps this is felt increasingly in recent times because of the external social pressures that we face, and the conflicts between cultures that we bear witness to so painfully. This may explain the recent recurrence of some of the more ecstatic and fundamental religious expressions. But also, more quietly perhaps, it is shown

through the search at the individual level for greater meaning, for more spiritual and less materialistic ways of being, thinking, and feeling. It certainly underlay Jung's lifelong engagement with spiritual matters, absorbing him in deep study, seminal writing, and personal preoccupation.

Throughout his work, Jung stressed that modern man disengages from access to spiritual life at great peril. He considered that much symptomatology and psychic suffering at both the individual and collective levels were the consequences of this dislocation from the sources of spiritual life, individually and collectively. For Jung, the Western world was in a spiritual crisis. He considered that many of humankind's ills, especially in the West, were due to having lost a meaningful relationship to religious and spiritual life. The question of finding greater meaning, value, and the spiritual dimension in our complex modern world had become increasingly pressing to modern consciousness. Clinicians and theoreticians of depth psychology are particularly well placed to address the origins of this felt psychic need through our particular perspective and understanding and as compassionate analysts of the human psyche.

The general movement of depth psychology itself, now a little more than one hundred years old, could be thought of as an emergent property of the human psyche. Emergence theory, to which I will return in greater detail later in this chapter, shows that the elements of a system may form a new pattern or order based on, but more structured than, the previous pattern from which it arose. Systems are emergent when an activity or behaviour that lies on one scale produce patterns of behaviour that lie on a more complex scale. Steven Johnson describes it as "the movement from low-level rules to higher level sophistication" (Johnson, 2001, cited in Cambray, 2002). The more complex order emerges from a less complex one at the edge of chaos. It is neither caused by the less complex one, nor is it equivalent or reducible to it, but contains and sublates it, rather like the dialectical processes explained in Chapter 2. This is a process seen throughout the living and non-living world. I am proposing that this ubiquitous process throughout the physical world is similar to the emergence of psychic change, as we observe and facilitate in analytic and therapeutic work. I will now to expand this idea by elucidating some of the building blocks of this theory.

In order to do this, I will seek to bring together a series of concepts from a range of disciplines, and from those theoreticians contributing to the unfolding of them, which seem to converge around a pivotal question—how does change, or transformation, occur organically as observed in any field of enquiry, including, that of depth psychology. This chapter will first discuss Jung's theory of psychic energy as acausal and emergent; I will next consider the theory of emergent properties; then the theory of emergent properties will be compared to several recent and remarkable contributions from Jungian clinicians and theoreticians regarding core concepts of Jung's *opus*, such as the origin of archetypes, synchronicity, the transcendent function, and the psychoid. I will end with a look at ideas emerging from the human sciences, including neurophysiology, evolutionary anthropology and theology, and the arts, that are analogous to the theories of emergence in relation to psychic change, and will conclude with a clinical example from my analytic practice.

The transcendent function, synchronicity, and the psychoid: Jung's theory of psychic energy as acausal, universal, and emergent

At the time that Freud and Jung were steeped in their psychological enquiries leading to a new understanding of the complexities of the conscious and unconscious mind, it was broadly accepted that the "foundation of modern psychology was held to be nothing less than the final and most decisive act in the completion of the scientific revolution" (Shamdasani, p. 4). The goal was to "establish a scientific psychology that would be independent of philosophy, theology, biology, anthropology, literature, medicine, and neurology, whilst taking over their traditional subject matters" (*ibid.*). The aim was to "emulate the form and formation of established prestigious sciences, such as physics and chemistry" (*ibid.*, p. 5). The physics that fitted this scientific approach is deemed "classical", in that it deals with the laws of space, time, and causality that fit the day-to-day world in which we live. They are the laws that govern reality on a human scale—at least most of the time.

Over and over again in the *Collected Works*, Jung referred to himself as a scientist and empiricist, and thus that his scientific orientation fitted into the prevalent scientific paradigm. At the same time, his method-

ology was encyclopaedic and scholarly, as attested to his numerous relationships with high level scholars, philosophers, theologians and scientists of his day, and to which his participation in the annual Eranos Conferences, which attracted such innovative scholars and scientists, bears witness. He was receptive to, and substantively contributed to, erudite scholarship and scientific research that sought to extend the boundaries of the generally accepted scientific paradigms of his time. This included his interest in a newly dawning physics that was on the brink of constructing a new paradigm that reached beyond the laws of classical physics that govern space, time, causality, and the energetics of closed systems. It was not that the new paradigm superceded that of classical physics; rather, it could be seen as complementary to it, addressing fields of enquiry beyond that which the laws of classical physics could reveal or account for.

Very early in his writing, Jung developed a theory of generalized libido as pure and superabundant psychic energy, that would eventually form the basis for phenomena that were acausal (not subject to the laws of ordinary cause and effect), non-linear (time as spontaneous and capable of non-localized action at a distance), and emergent (that increasingly complex and synthesizing patterns arise spontaneously from less complex ones and may be embedded with meaning). His was a radical departure from Freud's reductive notion of libido as pure sexual energy. This is exemplified in Jung's deeply held view, repeated in many contexts but cited here in the phrase, "the workings of Nature in her unrestricted Wholeness" (Jung, CW 8, para. 864) from his notable work, *Synchronicity: An Acausal Principle*, in which he argues against the limitations of scientific causality which restricts Nature to answering specific questions in the form of experimental hypotheses requiring an unequivocal answer (*ibid.*). Jung was seeking evidence for a view of psychic energy as an open system that at least stood alongside, if not heuristically beyond, a closed system energetic model.

The energetic permeability of the whole universe, which underpins his notion of the psychoid, led him to a view of humankind as "always having an excess of libido" (Jung, CW 8, para. 94). This excess of libido accounted for all the manifestations of generativity and creativity of which humankind was capable. These appear under certain conditions (including, but not restricted to, the psychosexual aspects of human behaviour that Freud placed at the core of his

psychoanalytic theory) to create moments of new order, pattern, meaning, and value. For Jung these included developments in spiritual, moral, cultural, symbolic, and frontline scientific investigations. In particular, in his view, this superabundant energy inevitably led to the “religious question”. It was the study of the expressions of these disciplines that constituted his life study and passion, and to which he directed his considerable genius.

We should not forget that around the time of their painful break-up, Freud and Jung were in a dead heat to publish their respective views on the sources of mankind’s religious and spiritual experience. Freud, who struggled painfully with this question, as attested in his correspondence with Jung (McGuire, 1974), and in his *Autobiographical Statement* (Freud, 1925), proffered a reductive explanation of religious experience based on his theory of the Oedipus complex (see Chapter 9 for a fuller discussion of this). Jung arrived at a teleological explanation—that of the superabundance of libidinal energy and its purposefulness, the ubiquitous nature of religious and spiritual energy and its manifestations in universal, archetypal symbols throughout the history of mankind. This resulted in *Symbols of Transformation* (Jung, 1912), heralding his break with Freud. Once this break had occurred, Jung approached his own descent into and confrontation with the unconscious, his own self analysis, consisting in large part of a succession of very heightened emotional experiences with intense and profound psychological consequences. In a pivotal year, 1916, at the same time that he was living at the edge of psychic chaos, he wrote one of his most far-reaching texts, *The Transcendent Function*, a reasoned account of psychic transformation (which interestingly was not published until 1957), while also committing to paper a dramatic account of what he discovered during his “confrontation with the unconscious” (Jung, 1967), his self analysis, essentially a sustained series of self-induced active imaginations.

This dramatic account, *Seven Sermons to the Dead* (Jung, 1916) revealed deeply unsettling psychic experiences. Throughout this time he wrote two intimate diaries, *The Red Book* (soon to be published under the editorship of Sonu Shamdasani), and *The Black Book*. *The Black Book* recorded his immediate experiences of his fantasies encountered in his “confrontation with the unconscious”. These he transferred to *The Red Book* which he elaborated in a literary form

and in calligraphic Gothic script, embellishing them with drawings and a remarkable series of mandalas. I conjecture that both *The Red Book* and the *Seven Sermons* may be considered first and second order working through of Jung's powerful experiences, and that the *Transcendent Function* may be considered an account of a further reworking of his personal drama at a theoretical level. This series may represent a process of emergence of Jung's own state of mind from a chaotic to a more ordered state.

Thus, at the same time that Jung himself was living at the edge of psychic chaos, he found the resources to reflect on the dramatic events he was undergoing in a worked-out form through his dialectical vision of the theory of the transcendent function, which he derived from the mathematics of complex numbers. This is a theory of how psychic transformation can occur when the psyche is in the throes of the experience of the "warring opposites" at the edge of chaos, a polarized state that is experienced with great psychic suffering and as if irresolvable. Only when a solution in the form of a symbolic image arises organically and spontaneously from the unconscious into consciousness, creating new meaning in face of dire conflict, can a way forward be found (see Chapter 2 for an elaboration of Jung's dialectical approach). Such a solution could not have been predicted by simply taking into account the components and the attributes of the constituent conflictual elements; rather, it arises organically from them, subsuming them, and creating a new pattern or meaning not reducible to them. It is this characteristic that resembles the dynamic of emergent properties.

Emergence theory

The theory of emergent properties, also known as emergence theory, closely related to complexity theory and chaos theory, has recently developed as a tool in understanding how, across all matter, a deep structural dynamic at the edge of chaos, is at work in which order, pattern, and, psychologically speaking, systems of meaning threaten to break down into chaos. Under the right conditions, a structural transformation into a more complex pattern or meaning may occur. If a high level of relatedness pertains amongst the components of a system (for example, when a relatively simple system of roads in a number of neighbourhoods emerge into a highly com-

plex and regulated system of interconnecting highways in an urban conurbation, or when an analysis reveals a system of complexes, the recognition of which leads to a shift in psychic functioning through the integration and working through of their conflictual aspects), then genuinely novel properties and processes may emerge that could not have been predicted or explained simply by adding up the properties of the original components. In psychological terms, this is a field theory view of the processes of individuation as powered dynamically by the energies and processes of the transcendent function, when a solution to a conflict or a problem is achieved that is of a higher order than the sum of its constituent parts—when, for example, after a difficult period of analysis, a patient begins to perceive the subjective reality of the analyst and a more compassionate regard for their own humanness and that of the analyst emerges in the patient. This view of psychological transformation as an *emergent* process relies on a basic apprehension (trying to think all the way back to first causes) that there is an underlying superabundance of energy in the universe, available to all its subsystems including humankind, which constantly generates new pattern and meaning. This model would underpin Jung's view of the psyche as having self-transforming and self-healing properties within a matrix of *unus mundus*.

Physics has not yet generated a unified theory of everything (although the string theory of acclaimed physicist Brian Greene, 2005, does make claim to this). Nevertheless, it is still generally accepted that a synthesis between the physics of the infinitely large (relativity theory) and the infinitely small (quantum theory) has yet to be universally proved. Some scientists consider that it is possible that the theory of emergence, which essentially studies how order can emerge at the edge of chaos in dynamic systems, may offer a way through. This has to do with how energy, which is constant in the universe, is understood as either dissipative or expanding. The laws of thermodynamics articulated in the nineteenth century, which were at the basis of Jung's, and Freud's, scientific thinking, applied to the energetics of closed systems. For both, their scientific formation regarding energetics would have included the pivotal second law of thermodynamics, which states that energy is dissipated at each moment that it is made manifest, according to the law of entropy. This would have suited the reductive theories of Freud, and he

called upon these as scientific verification of his theories (for example, the death instinct and primary process). But for Jung, whose view of the psyche was teleological—an open system—a very different theory of energetics was necessary, but not as yet available to him through Western scientific approaches. Only later, when he encountered Wolfgang Pauli, the Nobel laureate physicist, would he find, in Western scientific terms, resonance with his psychological theories, particularly of his theory of the nature of psychic energy, in the principles of quantum physics.

I suggest that this inability of the closed system of the nineteenth-century energetics to explain his revolutionary ideas regarding psychic energy, which he understood as generalized, superabundant libido, is why Jung was taken up with studying alternative views of universal energy from the alchemists and the Eastern philosophies through to modern physics. This included his abiding interest in the scholarly study of alchemical and gnostic texts; his study of Eastern views of Tao and *I Ching* (as evinced in his close collaboration with the reputed sinologist, Richard Wilhelm whose translation in the 1920s of the ancient book of Chinese wisdom, the *I Ching*, brought Chinese philosophy to Western attention, Wilhelm, 1950); the contemporary philosopher Henri Bergson's theory of *élan vital*; and his sustained correspondence with the pre-eminent theologian and English Dominican priest, Victor White (Lammers et al., 2007). Jung also referred on many occasions in his writing to the theories of the physicist Wolfgang Pauli, with whom he carried on a long and engrossing scientific and metaphysical correspondence (see Meier, 2001), and whose dreams he also studied. Jung was searching for orientations that would be concordant with his psychological theory of the ubiquitous nature of psychic energy. Modern theories of emergence are accruing evidence from the sciences, both biological and non-biological, which verify this position. I will attempt to give some instances from these.

In order to better appreciate the underlying scientific background to this new Western scientific approach, it is necessary to turn first to the revolution in scientific thinking about universal energy, which remains an elusive concept. On one of the two extreme ends of physics, that of cosmology or the study of the "infinitely large," lies Einstein's general theory of relativity. Einstein added a "cosmological constant" to his general theory of relativity because he believed that

the universe was in a steady state, neither expanding nor contracting. This “cosmological constant” was conceived as a “repulsive force” exerted by empty space, to balance the attraction of gravity, in order to make such a universe possible. However, astronomical observations have since shown that the universe is indeed expanding but not dissipating. In this expansion, it is not that the galaxies themselves are dispersing under the law of entropy, but rather that space itself is expanding between the clusters of galaxies. Space is now considered a “field”, and not “empty”. And this is because, as some scientists believe, energy is expanding (for an explanation of this as a function of so-called “dark energy”, see Davies, 2006). Of course, the laws of entropy and Newton’s laws of mechanics do work in the physical world, particularly on the human scale, and it is possible to measure areas in the world, and amongst living creatures, that systematically conform to these laws.

However, at the same time, at the other extreme of physics, with the laws of quantum physics that study atomic and subatomic systems, we enter a world of probabilities where genuinely spontaneous events occur—for example, Schrodinger’s famous cat, or the simultaneous particle/wave phenomena of subatomic physics, the determination of which depends on the act of observation, known as the Copenhagen interpretation under the influence of Niels Bohr. Here again this may imply the creation of energy. But the conceptual problems are huge, and suggestive of many problems encountered in the analytic enquiry, where things are often not as they seem and where the possible influences and interactions from multiple sources, including the pivotal factor of the observer effect, must be factored into the picture.

At both extremes of the scale—cosmology or the quantum level—a symbolic language, mathematics, is needed to contain and express all the known, and as yet unknown, possibilities. Not unlike depth psychologists who work in the vast realms of the mind, physicists work creatively within the vastness of the “primordial soup” imagined to have followed the Big Bang, and sometimes a new “symbol” emerges as the basis of a new formulation or understanding. It is in this context that Jung’s fascination in the inner world and dreams of the reknowned physicist, Wolfgang Pauli, becomes self-evident and self-explanatory.

It is now generally accepted that in its primordial phase just after the Big Bang, the universe was in a very simple, almost featureless state, a uniform soup of subatomic particles. Paul Davies, a physicist and cosmologist, Professor of Mathematical Physics and winner of the prestigious Templeton Prize in 1995, writes that "all the richness and diversity of matter and energy we observe today has emerged since the beginning in a long and complicated sequence of self-organizing physical processes" (Davies, 1995, p. 31). Out of the primordial soup of uniform subatomic particles eventually emerged increasing organization and complexity, to the point where conscious beings capable of reflection on the universe and themselves in it, where life, intelligence, and cultural and scientific activities emerge in a continuous process of evolution. This "spontaneous emergence of novelty and complexity, and organization of physical systems, is permitted through or guided by, the underlying mathematical laws that scientists are so busy discovering" (*ibid.*, p. 33). Davies goes on to explain that "these laws have the status of timeless eternal truths, in contrast to their physical manifestations that change with time and emerge into new forms at moments of incarnation. At the roots of this lawfulness of the cosmos, complex order emerges from chaos, just as consciousness emerges from life, in a potent mix of freedom and discipline" (*ibid.*, p. 35).

In a recent publication (Davies, 2006), Davies explains that scientists have shown a ubiquitous phenomenon in the universe in which order develops at the edge of chaos, where minute changes may bring either breakdown from order or develop new emergent patterns. He conjectures that the universe as we know it is finely set to laws of mathematics and physics that have purpose and design, such that a form of life developed in the physical and psychological world that is capable of discerning the very laws that govern its own emergence. The question then arises whether these laws of mathematics that govern the physical world from which biological entities have emerged are discovered or invented. Do such laws and principles have some kind of *a priori* Platonic existence which await their discovery by scientists in the here-and-now of the world which we inhabit, or do they emerge from the chaos of the Big Bang, unfolding along with the universe?

A further pivotal question arises from the latter one. What is the role of evolution in the unfolding of the universe such that it is

capable of supporting life that, in its human version, seeks to understand itself and the universe from and through which it emerges. Could there exist a small set of simple mechanisms to explain the emergence of the multiple patterns that order the whole of the universe—a vision of *unus mundus* in Jung's terms. Some scientists think so. Professor Paul Benioff, a pioneer of quantum computation, asserts: "Since intelligent beings are necessary to create such a theory [that is capable of uniting mathematics and physics to explain the bases of the physical universe], it follows that the basic properties of the physical universe must be such as to make it possible for intelligent beings to exist . . . None of this implies that intelligent beings must exist, only that it must be possible for them to exist" (Benioff, 2002, cited in Davies, 2006, p. 273). I will return to these important questions later in the chapter.

John Gribbin (2002), in his lucid account of complexity theory, cites the cryptographer and originator of computational systems, John Turing, who sought to apply his theory of the symmetry of mechanical systems, such as particle physics, to living, biological systems. When the original symmetry is broken, for example, when water changes from its liquid to its frozen form at zero degrees centigrade, the Curie point, this change is called a phase transition. Such phase transitions, the self-organization and spontaneous appearance of patterns out of uniform systems, occurring at the edge of chaos when such systems threaten to break down, can be explained in terms of a few simple interactions. As Gribbin points out, having one simple mechanism that explains how and why patterns of different kinds appear is much more parsimonious than having a blueprint to describe each different kind of pattern (the scientist's friend, Ockham's Razor) (Gribbin, 2002, p. 127). He cites the work of the biologist James Murray (1988) who found that variations in the markings of animals of the same species, or the absence of markings, such as spots, stripes or blotches (as in leopards, zebras, giraffes), can all be explained by the same simple process, involving diffusion of actuator and inhibitor chemicals across the surface of the developing embryo at a key stage in its growth, rather than necessitating a complex rationale for each and every variation in the markings. The development of complex structures through the iterative application of a relatively simple set of rules, as in the case of fractals (repeated iterations of the same shape are added to each other, replicating the

simple order as it becomes more and more complex) has been shown, for example, in the emergent complexities of the natural coastline of England and Denmark, the shape of snowflakes, the leaves of plants, fungal filaments, the systems of veins and arteries in the body, or many other structures of the physical and living world. The patterns of mandala construction, a pivotal interest and activity for Jung, particularly during the time of his "confrontation with the unconscious", can be added to such a list.

The link between random processes at the edge of chaos and fractals that produce increasingly complex patterns and forms through the repeated application of a set of simple rules, and the strange attractors that govern their manifestations in phase transitions according to logarithmic power laws, have relevance to a number of Jungian concepts such as archetypes, the psychoid, the transcendent function, and synchronicity. In approaching Jung's concepts from this perspective, it is possible to see that Jung was searching for and struggling with a paradigm shift, a particular moment in scientific development in the 20th century, when the orientation of classical physics in terms of the norms of nature and our ordered day-to-day world of space, time, and causality, was about to be radically repositioned in the face of new discoveries from cosmology and the subatomic world of quantum physics.

Current Jungian contributions linking the clinic with the laboratory

As if demonstrating the very process of emergence theory, several Jungian analysts and theoreticians, working separately and physically in quite different areas of the Jungian analytic world, have contributed to an emerging Jungian vision regarding how psychic transformations can occur. This came about despite their different emphases and coming at the question of psychic structure and change from different approaches. Many have linked Jung's theories of psychic energy that underpin all moments of psychic transformation with a paradigm shift in scientific thinking regarding how transformations can occur materially, biologically or psychologically, individually, and collectively. These contributions in themselves are instances similar to the kind of repatterning of psychic function that we participate in and bear witness to in our consulting rooms.

Jungian analyst David Tresan began Jungian reflection on emergence theory in an important paper linking archetypal and neurobiological theory (Tresan, 1996). Commenting on the theory of emergence as the alternative to reductionism, the underlying principle of Freudian metapsychology, he places Jung's endeavours on a trajectory closely akin to what would be applicable to the insights of emergence theory only a few decades after Jung's death. He cites Jung's synthetic and constructive method of analysis, the collective unconscious, the transcendent function, synchronicity, and his study of the phenomenae of reported sightings of UFOs, stating that "Jung, in consonance with emergentist doctrine, envisioned an ontologically multilayered universe" (Tresan, 1996, p. 412).

In considering the work of memory in analysis, Tresan observes that memories and thoughts emerge within an analytic hour, "in the dark interims of not knowing" between two people rather like "associative fodder for chaotic processes whose emergent patterns, when they form, will alone bestow meaning in retrospect" (Tresan, 1996, p. 421). He considers that we organize our histories, for example through the analytic endeavour, functionally around values that are located in the complexes and which emanate from the archetypes themselves as emergent properties. Saunders and Skar (2001) also relate the emergent processes of self-organizing systems to the emergence of archetypes as an activity of the brain/mind. Discussing the archetype from another point of view in physics, Francois Martin-Vallas likens it to a "strange attractor", enabling the instinctual axis of the archetype to open up to the possibility of symbolization. In considering Jung's notion of the archetypes in the light of Fordham's theory of deintegration and reintegration of the self, and Laplanche's concept of primary seduction, he understands the archetype as phenomenon similar to a "strange attractor" in quantum physics, a creation at the edge of chaos, allowing the free metamorphosis of libido from one representation to another, thus enabling psychic transformation, an emergent property of the instincts (Martin-Vallas, 2005).

Joseph Cambray has contributed a remarkable series of papers linking synchronicity and emergence (Cambray, 2002; 2004; 2006). He points to Jung's abiding interest in synchronicity as the pertinent concept linking analytical psychology to the theory of emergent

properties. He cites the pioneering work of Ilya Prigogine, the 1977 Nobel laureate in chemistry, who studied how order can emerge at the edge of chaos in dynamic systems (whether biological or non-biological), which are highly sensitive to minute variations in their component variables. The influential Santa Fe Institute, a think-tank of scientists from a variety of disciplines, researches issues arising from complexity and chaos theories and, in particular, their implications in terms of complex adaptive systems, or CAS. The science writer, Steven Johnson, has described these as systems where “agents residing on one scale start producing behavior that lies on scale above them” and emergence as “[t]he movement from low-level rules to high-level sophistication” (Johnson, 2001, p. 18, cited in Cambray, 2002). Cambray describes these as “systems that have what is termed ‘emergent’ properties, that is, self-organizing features arising in response to environmental, competitive pressures. The quality of complexity in CAS is driven by these external forces in conjunction with the interactions between units, but is not inherent in the individual units themselves. CAS form *gestalts* in which the whole is truly greater than the sum of the parts” (Cambray, 2002, p. 415). Examples of in-depth scientific studies of this “organization from below upwards” include the evolution of ant colonies; slime mould cells aggregating into large clusters in times of bounty and reverting to single-cell life in times of drought; the emergence of cities from clusters of relatively independent or autonomous villages; or of superhighways from local road systems; to the very origins of life itself. He refers to the work of Stuart Kaufman, who shows that CAS play a role in the origins and development of life, where “natural selection achieves genetic regulatory networks that lie near the edge of chaos” (Kaufman, 1995, cited in Cambray, 2002, p. 26).

Cambray cites a letter from Jung to Erich Neumann (March 10, 1959) regarding mammalian evolution and synchronicity, in which Jung states:

In this chaos of chance, synchronistic phenomena were probably at work, operating both with and against the known laws of nature to produce, in archetypal moments, syntheses which appear to us miraculous . . . This presupposes not only an all-pervading, latent meaning which can be recognized by consciousness, but during that preconscious time, a psychoid process with which a

physical event meaningfully coincides. Here the meaning cannot be recognized because there is as yet no consciousness.

(Jung, 1976, pp. 494–5)

Cambray suggests that the self-organization manifested in such systems appears transcendent and is congruent with the *teleos* of individual and collective organizations, which can be thought of as a kind of generalized emergent intelligence with evolutionary adaptive survival value.

The importance of Cambray's argument is that synchronicities can be thought of as a form of emergent phenomena related to the self and to the teleological dynamic of the individuation process, which he convincingly relates to phenomena in the consulting room. In psychological experience they occur at the interface of psychic order and chaos. In my own clinical experience, these often occur at moments of dramatic psychic tension and transformation, and I will offer an example of this later in this chapter.

George Hogenson (2001) wrote on the Baldwin effect—an organism's ability to alter its environment and therefore influence the circumstances of its own adaptation and evolution in order to increase the chances of survival. Baldwin and Lloyd Morgan, upon whose theories Jung drew heavily in his own thinking about the evolution of the psyche, were prominent anti-Lamarckians. They opposed Lamarck's theory of the inheritance into the genome of acquired characteristics. Jung never mentions Lamarck but often refers to both Baldwin and Lloyd Morgan. In contrast, Freud consistently referred to the central role of Lamarck's theory in the development and elaboration of his own psychoanalytic theory. For Jung, evolution played an important role in the development of the psyche, an apperception of emergent processes. Hogenson argues against a neo-Platonic model of the archetypes as much as against a Chomskian approach—the former because it is about abstract structures derived from the analysis of form, the latter that a myriad of differences on the surface can never be explained by the evolution of a common structure. According to Hogenson, the archetypes do not exist in either “the genome or some transcendent realm of Platonic ideas” (Hogenson, 2001, p. 607). They are the “emergent properties of the dynamic developing system of brain, environment and narrative” (Hogenson, 2001, p. 607).

In a further far-reaching paper, Hogenson (2005) applies emergence theory to the symbolic world of the analytic encounter, the self, synchronicity, and the archetype, where dynamic self-organizing systems re-organize at the edge of chaos displaying characteristics of phase transitions in a scaling process governed by a logarithmic power law. He cites the work of Anderson (1998) who demonstrated that time patterns of REM (dreaming) sleep display fractal, i.e. scale invariant, organization governed by a power law. Hogenson states that these REM sleep brain patterns follow a power law distribution with precisely the same mathematical structure as “the flow of the Nile, light from quasars, ion channel currents, neuronal firing patterns, earthquake distribution, electrical current fluctuations in man-made devices, inter-car intervals in expressway traffic, and the variations in sound intensity in all melodic music” (Anderson, 1998, p. 10, cited in Hogenson, 2005, p. 281).

Hogenson seeks to contribute to a unified view of Jung’s systems of psychology, linking his early work on the Word Association Test and the theory of complexes through to his later theory of synchronicity as “an element in a continuum of symbolically structured moments in the psyche and the psyche’s relationship to the world at large, rather than as a radical departure from the norms of nature” (*ibid.*, p. 282).

In relation to Hogenson’s argument against a Platonic view of the theory of archetypes, a dimension of Jung’s theoretical approach discussed by a number of Jungian writers (for example, Nagy, 1991; Stevens, 1982), it is interesting to note that the anti-Platonic argument is also evoked by physicist and cosmologist, Paul Davies, cited earlier, who states that many orthodox physicists are Platonists in that they believe that mathematical laws have real existence but are not situated in the real physical universe (Davies, 2006, p. 19). Davies cites the quantum cosmologist John Wheeler who “maintained that the laws of physics did not exist *a priori* [i.e. in the nothingness before the Big Bang, but emerged from the chaos of the Big Bang] . . . congealing along with the universe that they govern in the aftermath of its shadowy birth . . . [emerging] in approximate form and sharpened up over time” (Davies, 2006, p. 267). In Wheeler’s view, the universe can be expressed in a loop: cosmos–life–mind–cosmos. In this way of conceiving the teleological unfolding of the universe, the role of observers as participants in shaping physical reality is

described by Wheeler as: "Physics gives rise to observer-participancy; observer-participancy gives rise to information; information gives rise to physics" (Wheeler, 1989, cited in Davies, 2006, p. 280). Davies concludes: "Thus the universe explains observers, and observers explain the universe" (Davies, 2006, p. 81).

The argument regarding the emergent properties of all dynamic systems in the universe, including biological systems, is resonant with Jung's theory of the psychoid archetype which underlies the concept of synchronicity and of which synchronistic moments are examples. In Jung's articulation, synchronicity "points to the 'psychoid' and essentially transcendental nature of the archetype as an 'arranger' of psychic forms inside and outside the psyche" (Jung, 1976, p. 22). Thus, the psychoid archetype may be encountered and incarnated at the interstices between psychic and physical phenomena. This can be thought of as a manifestation of *unus mundus*, the underlying unity of the entire fabric of the material, biological and psychological universe, a central postulate and orientation of Jung's thought.

In the same vein but from a different discipline, the argument against a Platonic view of innate mental structures is taken up by Terence Deacon, neuroscientist and evolutionary anthropologist, who also disagrees with Chomsky's (1968) view of universal and innate deep structures in the brain which define the rules of grammar that are common to all languages (Deacon, 1997). Some Jungians, such as Anthony Stevens (1982), linked Chomsky's theory of deciphering grammar to Jung's theory of archetypes as an *a priori* governing principle. In Deacon's view, grammatical universals such as the noun/verb distinction "have emerged spontaneously and independently in each evolving language, in response to universal biases in the selection processes affecting language transmission. They are convergent features of language transmission. They are convergent features of language evolution in the same way that the dorsal fins of sharks, ichthyosaurs, and dolphins are independent convergent adaptations of aquatic species" (Deacon, 1997, p. 115). Deacon offers a field theory of the co-evolution of language and brain function, arguing against innate *a priori* rules for grammar which "commits the fallacy of collapsing this irreducible *social evolutionary* process into a static formal structure" (*ibid.*, p. 121, author's italics). In a further work regarding the relationship of symbol formation and language,

he states that "there are indeed constraints that are implicit in symbol use . . . however . . . such semiotic constraints as involve symbol systems are located neither in brains nor in society, per se. They are a bit like the formal constraints that have shaped the development of mathematics (and yield such curious universal phenomena as prime numbers)" (Deacon, 2003, p. 98, cited in Hogenson, 2005, p. 280). Deacon's argument is resonant with the theory of archetypes in which specific archetypal representations are instances of the formal constraints of archetypes operating like prime numbers.

Returning to the contributions of specifically Jungian analysts and theoreticians, Jungian analyst George Bright, in another notable essay, points to Jung's idea of synchronicity as a "bridge between chaos and order" in a simultaneous creation and discovery of meaning with acausal foundations that, for him, is at the basis of the analytic attitude (Bright, 1997). He considers Jung's notions of synchronicity and the psychoid as a way of exploring and understanding the transcendent nature of meaning, which is *a priori* to human consciousness and pervades all reality, whether material, biological, or psychological. Bright evokes coincidental, or synchronistic, events in his own clinical experience, in which there is no apparent causal connection. Jung famously reported just such an incident with a female patient who was stuck in a rationalistic way of thinking, afraid of the irrational, thus thwarting her own creativity. One day she described a dream of a golden scarab. "Suddenly," reports Jung, "I heard a noise behind me, like a gentle tapping. I turned round and saw a flying insect knocking against the window-pane from outside. I opened the window and caught the creature in the air as it flew in. It was the nearest analogy to a golden scarab that one finds in our latitudes, a scarabaeid beetle . . . which contrary to its usual habits had evidently felt an urge to get into a dark room at this particular moment" (Jung, CW 8, p. 843). Jung goes on to say of this incident that he caught the beetle and handed it to his patient, saying, "Here is your scarab." He reports that this synchronistic experience paved the way for further psychic development.

In Jung's teleological vision, the concept of the psychoid, where psychic processes and their physical correlates are bound together in a vision of an *unus mundus*, underlies the possibility of the occurrence of synchronistic events. In his view, only if we acknowledge that the underlying patterns are unconscious and therefore not fully knowable, are we able to allow the space for subjective under-

standing of meaning and pattern to emerge. For George Bright, to find and create meaning at one and the same time is a truly synchronistic activity, and is an apt description of analytic work, where the provision of unimpinged analytic space allows for the patient and analyst to work together to make meaning of their shared experience.

This approach is similar to what Francois Martin-Vallas has recently termed the “transferential chimera . . . in which, through the supple, complex and nuanced analytic encounter, energy is freed so that a real transferential self . . . a shared space . . . [allows for] the whole potential of the analytic experience [to] be played out” (Martin-Vallas, 2006, p. 639). In a subsequent theoretical expansion of his concept of the transference chimera, Martin-Vallas points out the important implication of Jung’s affirmation that “doctor and patient thus find themselves in a relationship founded on mutual unconsciousness” (CW 16, para. 364), in that it asserts “the counter-transference as being essential for the proper conduct of the transference; this would confirm the notion that the transference and the counter-transference unite to provide one of the containers for the transference . . . a genuine cross-projective container, where the process can assuredly unfold” (Martin-Vallas, 2007 in press). This can only occur if the analyst is able to maintain the exogenous nature of the conscious relationship with the patient, ensuring significant stability and permanence for the contents of the transference to emerge through the encounter of the unconscious cross-projections of patient and analyst alike, triggering individuation in the patient. For Martin-Vallas, “the transference chimera . . . [is] just such an emergence of order out of chaos, being the outcome of the coalescence of the de-integrates of the analyst and patient” (*ibid.*). For Martin-Vallas, the maintenance of the exogenous analytic container constitutes the co-terminus of the ethical and analytic attitudes. In this way, he explains that the analytic superego is not unduly called upon to make up for deficiencies in the analyst’s ethical self, thereby, I would add, unnecessarily robbing the analytic process of precious libidinal energy for the cross-projective processes within the safety of the analytic container. This view is concordant with Jung’s approach to the analytic relationship, in that, as he says:

For two personalities to meet is like two chemical substances: if there is any combination at all both are transformed. In any effective psychological treatment the doctor is bound to influence

the patient; but this influence can only take place if the patient has a reciprocal influence on the doctor. You can exert no influence if you are not susceptible to influence. It is futile for the doctor to shield himself from the influence of the patient and to surround himself with a smoke-screen of fatherly and professional authority. By so doing he only denies himself the use of a highly important organ of information. The patient influences him unconsciously none the less, and brings about changes in the doctor's unconscious . . . One of the best known symptoms of this kind is the counter-transference evoked by the transference.

(Jung, CW 16, para. 163)

In a comprehensive and scholarly study of Jung's concept of synchronicity, Jungian scholar Roderick Main has likened synchronicity to a form of transcendent function (Main, 2004, p. 22), insofar as Jung's theory of the transcendent function describes how seemingly intractable conflicts of opposites may be resolved spontaneously by the emergence of symbols arising from the unconscious psyche. Such symbols contain the elements of both sides of the opposition by subsuming them without giving precedence to either, much as described in Chapter 2 regarding the transcendent function and Hegel's dialectical vision. Thus they are carriers of meaning that emerge from a psychological impasse.

In a further far-reaching paper that seeks to model a unification of classical and quantum physics by using Jung's idea of *unus mundus*, Helen Morgan (2000) has adapted Jung's cross modal diagram (Figure 14.1), to link a classical physics/quantum physics schema with consciousness and the collective unconscious.

She refers to physicist David Bohm's (1980) ideas regarding quantum, or implicate, order in which everything is enfolded (a notion similar to Jung's *unus mundus*), and the observable, material world as an explicate order, which unfolds out of the implicate, where the laws of space, time, and causality of classical physics apply. What is especially pertinent in Helen Morgan's schema for the present discussion is that it provides a description of how meaningful occurrences may emerge into mind in an indeterminate world close to chaos. The importance of the horizontal line "c" allows for the intersection of the world of quantum physics and that of the archetypal structures of the collective unconscious, the implicate

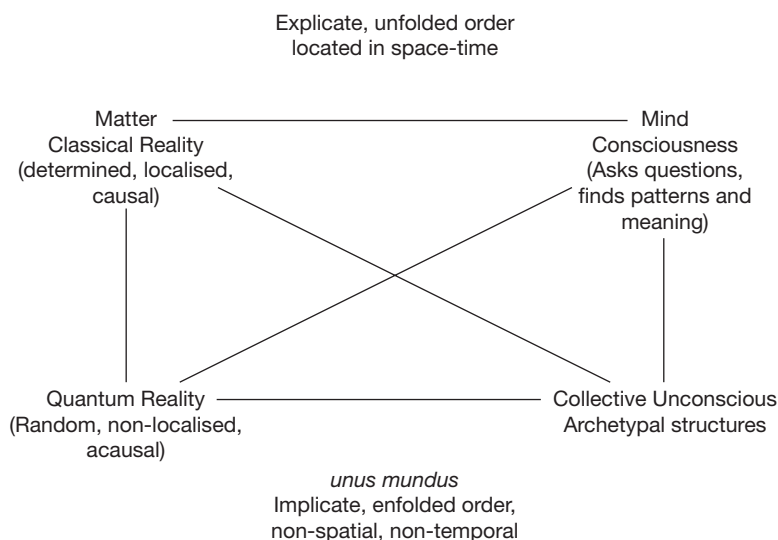


Figure 14.1: Jung's cross model diagram

order. At the same time, it does not create a dichotomy between that level and the level of the determinate world of classical physics and the conscious mind, the explicate order.

Attachment theory and neuropsychology

In attachment theory and the neuropsychology of traumatic experience, psychoanalytically oriented writers such as John Bowlby (1969) and Allan Schore (1994), and Jungian analysts Jean Knox (2003) and Margaret Wilkinson (2006) have explored in depth and from different perspectives current ideas about cognitive, emotional, and social functioning in the developmental sciences. Knox (2003) considers Jung's theory of archetypes as emergent properties resulting from the developmental interaction between genes and the environment as mediated by the attachment relationship from the earliest moments in the infant's life. Wilkinson (2006) describes advances in neurological understanding of how brain structures develop in the infant that have generated models of adaptive self-regulatory systems, along with an understanding of the origins of dysregulation, which can lead to the kinds of maladaptive

behavioural and socioaffective disorders often encountered in the consulting room. In this view, a system of “reciprocal mutual influences” (Schore, 1994), right brain to right brain communication between infant and caretaker is established, through which the development of the higher order cognitive and socioaffective capacities of the human brain/mind can occur. In Chapter 5, I have inferred how the infant, a proactive partner in the development of these higher order capacities through the early relationships with its caregivers, directly influences the development of its own brain/mind structures. This can be construed as a further example of emergent processes in the young brain/mind.

Further evidence of this is found in recent neurophysiological studies which have pointed to a group of visuo-motor neurons located in brain sites such as Broca’s area, which Rizzolatti et al. (2004) have termed “mirror neurons”. These mirror neurons have been identified as amongst the neurophysiological bases of subtle, often unconscious intersubjective communications, such as imitation, mimicry, and empathy. The findings have important implications for understanding the neural substrate of much human emotional interaction and exchange, whether conscious or unconscious, and, in particular, of such concepts central to analytic theory and practice as transference and countertransference, unconscious identity (Jung), projective identification (Klein), and more recently imaginative identification (Fisher, 1999), as well as psychic contagion evinced in group processes. We could speculate that they also perform a central function in the transmission of the profounder field of the unconscious that Jung called the collective unconscious and the psychoid archetype. In reflecting on this phenomenon, Cambray (2006) has suggested that Jung’s exploration of the deep background to transference phenomena in his great study of the *Psychology of the Transference* (CW 16) brings him to postulate a bi-personal interactive field model for the analytic relationship which is consistent with the implications of mirror neuron research (Cambray, 2006, p. 6). In this work, Jung’s (CW 16, para. 422) famous diagram of conscious and unconscious dynamics between adept and soror allows for this kind of unconscious communication in the bottom line “c” (Fig. 14.2).

However, in my view, mirror neuron activity may be a necessary but not a sufficient cause for emergent properties to appear at the edge of chaos. In this view, the processes of the transcendent

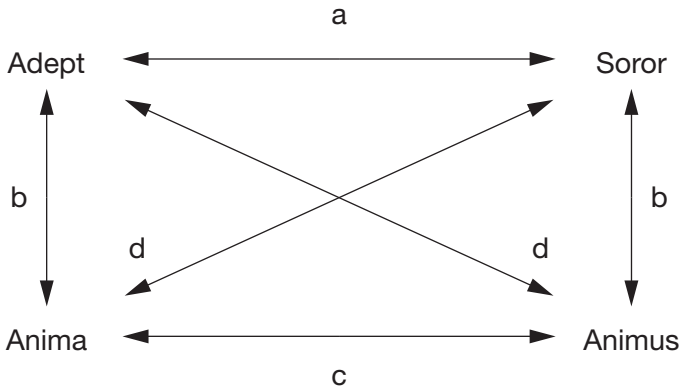


Figure 14.2: Diagram of conscious and unconscious dynamics

function, with its organizing potential for symbolic generation, would thus require not only the bottom line “c”, but the multiple cross identificatory processes, including that of conscious working through, to produce the higher order organization. This is similar to the necessity of a causal/acausal, or linear/cyclic system in which laws of classical physics and those of the new physics are required in order to form a whole field of understanding.

In Chapter 12, I discussed the emergence of an ethical attitude, both personally and in the analytic consulting room. Since the capacity for empathy and compassion, as well as for tolerating powerful conscious and unconscious emotional communication, is a crucial component of the personal and analytic ethical attitude, then it is possible to speculate that mirror neuron function is at the basis of this, predicated on the quality of right brain to right brain exchanges in the earliest caregiver relationship, and, conversely, that deficits in this function will lead to faulty ethical behaviour, a matter which I discussed in Chapter 5.

Anthropology and theology

In another remarkable theoretical convergence, this time from the discipline of anthropology, Jungian analyst and anthropologist Ann Casement has discussed Jung’s concept of *participation mystique* and the idea of the numinous in relation to the post-structural

anthropologist Pierre Bourdieu's concept of participant objectivation (Casement, 2006). Bourdieu expounded the concept of participant objectivation in order to overcome the false dichotomy between the scientific observer and the observed subject "by turning the most objectivist tools of social science not only onto the private person of the enquirer, but also, and more decisively, onto the anthropological field itself and onto the scholastic dispositives and biases it fosters and rewards in its members" (*ibid.*). Participant objectivation seeks to abolish the subject-object distance between the anthropologist and those he or she studies by "enabl[ing] the anthropologist to know her own primary experience of the world so that the 'primitive' is not put at a distance because she does not recognize the primitive, pre-logical thought within herself" (*ibid.*). Like Cambray and Morgan, Casement refers to the bottom line "c" from Jung's *The Psychology of the Transference* (CW 16) as the trajectory for this kind of unconscious communication, relating it to the scientific work on right brain to right brain communication mentioned previously in this chapter, and more fully discussed in Chapter 5.

This method of practising anthropology is resonant with the core component in analytic training, promoted in the earliest days of the psychoanalytic movement by Jung, that all analysts should undergo a personal analysis of their own as a requisite for analysing others. The personal analysis of the analyst contributes to the refinement and the quality of the subsequent shared analytic relationship between analyst and patient, contributing to the possibilities for authentic emergence from even the most trying of analytic experiences, as demonstrated in relation to the subject of this chapter by the clinical writing of Cambray (2002; 2006) and Martin-Vallas (2002; 2006).

Theologian and prolific scholar of the history of religions, Karen Armstrong has discussed an emergent pattern in the great religions in the period between 800 and 200 BC, when the spiritual movements of China, India, and the West emerged from a prehistoric identification with Nature. Referring to the German philosopher Karl Jaspers' (1949/1953) identification of the "axial" or "axis" age, when a profound transformation emerged in humanity's quest for spiritual meaning in these separate areas in China, India, and the West, Armstrong elaborates an emergent pattern in the axial religions at a particular time in the global girdle, which she identifies as

compassion. This remarkable global phenomenon is suggestive of another example of the emergence of complex adaptive systems (CAS) which form a new order based on, but more structured than, the previous pattern from which it arose. Jungian analyst David Tresan, reflecting on the emergence of the axial religions, characterizes humankind's spiritual quest as the "highest goals in face of its limits, absoluteness in the depths of selfhood, and [a vision of] the lucidity of transcendence in the face of consciousness of the mortal coil" (Tresan, 2004).

We know that, at the time of the axial age, there was a tradition of travelling scholars and holy men, which may have facilitated this synchronous emergence along the trade routes of Eurasia of a new order of religious vision.¹ It is possible to conjecture that the communication processes previously described could go some way to account for the emergence of these shared core values. This is similar to the emergence of psychic change overall which we facilitate in analytic and therapeutic work, and is inclusive of the ethical attitude that is at the core of such work, as discussed in Chapters 11, 12, and 13. In those chapters, I discussed the emergence of an ethical attitude, both personally and in the analytic consulting room. Since the capacity for empathy and compassion, as well as for tolerating powerful conscious and unconscious emotional communication, is a crucial component of the personal and analytic ethical attitude, then it is possible to speculate that mirror neuron function is at the basis of this, and, conversely, deficits in this function can lead to faulty ethical behaviour.

The arts

The contemporary writer Jeanette Winterson wrote of the connection between quantum energetics and the emergence of objects in the field of the arts when she reviewed the book by well-known English critic John Carey (*What Good Are the Arts?*, 2005), in which he posited that there is no intrinsic difference between what is good art or bad art or what is art at all (Winterson, 2005). His was an especially dispiriting postmodern approach to cultural achievement from one of our most gifted critics, who also gave us the rightfully acclaimed *Shakespeare's World*. Winterson, in her riposte, said: "... we live in a quantum world ... we go on turning energy into objects ... The

object itself is provisional, the energy, though changing, is permanent, and is a feature of the whole Universe. What art does is to release and focus energy in a particular way, and I would argue that what we call art 'objects' are places where energy is especially intense . . . it is a concentration of energy. This is why the arts occupy relatively timeless space" (*ibid.*). And, I would add, as for the art, so too for religion, spirituality, depth analytic work, and work at the edges of scientific enquiry.

Equally, in her book, *Fantastic Metamorphoses*, the cultural critic Marina Warner embarked on a historical search for the foundations of human metamorphoses, similar to that explored by Armstrong in her analysis of the axial religions (Warner, 2002). Warner cites Ovid's *Metamorphoses* as the source of the idea of "the successive transformations of the individual and the whole wheeling universe" as a vision of the dynamic cyclical rhythmic movement of generation, emergence, decay, and re-emergence in different forms. She refers to the poet Ted Hughes' view of Ovid as interested in "passion where it combusts, or levitates, or mutates into an experience of the supernatural" (*ibid.*). *Metamorphoses*, she says, "arise in spaces, crossroads, points of interchange, trade routes, transitional places, confluence points, places near the edge of chaos—shifting shape, shedding skins, daemonic possessions, the self constantly reshaping itself via a dynamic of the unconscious incarnate, through the pure virtuality of transformative energy" (*ibid.*). Think of the powerful transformations unleashed in Oedipus' experiences at the crossroads, or the trade routes that fostered and facilitated the qualities of religious, spiritual, and moral transformation that Armstrong describes, or the dramatic psychic experiences in the analytic encounter leading to transformations in the consulting room for both partners in the analytic task.

Synchronicities in the consulting room

I would like now to address two examples of synchronicities in my own clinical practice.

One of the stated reasons for a male patient to seek an analysis with me was in order to find within the analytic framework and container a place where he could express as freely as it was possible for him to do so, the depth, complexity, and poignancy of powerful

emotions that had never before found a safe outlet within a receptive, intimate relationship. This had been so throughout his life. After an initial period of finding out whether the analytic container was indeed constant and trustworthy enough, he complained one day that he wished to go to deeper levels psychically but felt impeded by a feeling of being denied access, as if behind a glass barrier. (In my consulting room, the configuration of the patient's position on the couch and my chair next to it allows us both to gaze at the garden through large glass patio doors that stretch from floor to ceiling.) During this time, I was vaguely aware of two very large and rather handsome brown and grey pigeons pecking on the grass in the garden. It was a time of heightened tension and psychic suffering in the analysis, as past losses and traumatic ruptures were being addressed, re-experienced, and reassessed. As we were musing on the reasons for his sense of being cut off by a glass barrier from access to deeper psychic levels, and the deep psychological discomfort of feeling hindered in this way, one of the pair of pigeons suddenly flew straight at the closed patio doors toward us, bouncing off the surface, and then flew away, causing us both to jump, startled and surprised. Just as we recovered, a minute or so later, the second pigeon did exactly the same, again causing us to react in a startled way. Had the pane of glass broken, or had the doors been open, the pigeon would have flown through the space between us. The subsequent discussion of this event included a sense of meaningful coincidence and a loosening up of the hampered feeling. Soon after, important changes in his sense of self, with accompanying dreams, were followed by changes in his working patterns that altered dramatically his way of thinking about himself professionally and personally. There was a distinct sense of progress and emergence of psychic material that continued to unfold. Unbeknownst to him, this happened at a time when I was considering important changes and significant new responsibilities in my own professional life, with subsequent resultant personal transformations.

On yet another occasion, several years after the first event, the same patient, continuing in multiple sessions per week analysis, was pondering further possible changes to his professional life that were of deep personal significance. He had for some time been caught in a state of ambivalence, which he experienced and described as "absolute doubt", unable to decide which path to follow and how

to integrate multiple aspects of his personal and vocational interests and experience with his undoubted creative capacities in several fields of endeavour. Suddenly a small bird, probably a starling, flew straight into the window, this time on the other side of the room. The “startling /starling effect” was again the same. On this occasion, the bird did not fly away immediately, but from our position it was not possible to tell whether it was stunned and recovering, or more seriously damaged, even dead. I decided to resist the impulse to get up from my chair to see what the bird’s fate had been, with the conscious reason of wishing not to disrupt the patient’s flow, but I remained uncomfortably aware of the possible scenarios of the bird’s plight. We remarked together on the second occurrence of the meaningful coincidence involving birds as harbingers of either good or bad news, life or death. Later, on reflection, I realised that by not checking on the bird’s state, or the possible emotional effects of not knowing its state on the patient, I had made a countertransference repetition of exactly what might have appeared like the unreceptive and uninterested responses to him of the important people in his past. There was a further aspect of this countertransferential enactment, as in the patient’s early history was a dead sibling who could never be spoken about in the family, as well as more recent losses that were hard to contemplate and integrate psychically, but which remained haunting presences in the patient’s inner world, just as the starling had throughout the remainder of the session. A subsequent dream revealed the image of a tomb-like shape thwarting the expression of libidinal energy and amorous *coniunctio*.

It is worth noting that throughout the many years I have spent gazing out of these and the large windows of a previous consulting room in the presence of patients and supervisees, there has been no other occurrence of birds flying headlong into them.

In fact, at the time of the second synchronistic occurrence, I was immersed in writing this chapter and very taken up with considerations about whether to include this clinical example, with conscious concerns about wishing to avoid the possible impact on the course of the patient’s unfolding process, which I did not wish to impinge upon. However, during a subsequent session in which he spoke about his reassessment of the reception of his own writing in a public arena, it became clear to me that not requesting his permission to use these examples would constitute a countertransferential cross-

projection in which I would be trapped in a tomb-like restriction that could hamper not only the unfolding of my own thoughts but also the free flow of libidinal exchange between us.

Conclusion

All human activities and explorations, be they in the arts, sciences, religions, and our own analytic discipline, are creations of the psyche or our brain/mind. But at the same time, these are discoveries, in the sense of scientific discoveries or the great and enduring examples of the highest forms of the arts and the sciences. Eros (which we might think of as acausal energy) and Logos (which we might think of as conscious reason, linear reductive logic, causal relationships) need each other in the evolution of those acts of creation and discovery that we call human culture and civilization. We are indeed in the region of Bion's "the thought waiting for a thinker to manifest and incarnate" (Bion, 1957)—truths that are emergent at particular moments of intensified energy that reveal new patterns of meaning and order that enrich our human comprehension of our reality, authenticity, and truth. This is the realm of the psychoid, Jung's term for the inherent meaning and unity in all creation.

Human evolution occurred through the provision of safety and protection by parental and kinship care throughout the many years of a dependent childhood, thus enabling the emergence of a complex array of flexible and integrating cognitive and socioaffective abilities. The evolutionary anthropologist Steven Mithen (1996) has shown how human cognitive abilities have evolved as flexible, general problem solving competencies that are generalized across many domains. He states that "[s]uch abilities suggest some fundamental organisational properties in the human brain that synergistically link processing systems into complex neurophysiological patterns and networks with emergent properties . . . that offer new levels of understanding" (Mithen, 1996). In a similar mode of conceptualization, Jungian analyst Jean Knox has stated, "[r]eflective function thus represents a higher order of the symbol to symbol mapping . . . in that it is the mind's very process of symbolization that is represented to itself" (Knox, 2004). This notion is echoed by Warren Colman when he suggests that (psycho)analytic theories are "symbolic or mythological narratives that occupy the original space they may also seek

to describe" and considers that "what is being represented symbolically is the symbolic capacity itself" (Colman, 2006). Murray Stein links Jungian ideas of individuation, the Self, and synchronicity to the philosophy of Confucius and the Eastern idea of Tao in which "the individual, society, and the cosmos are intimately connected parts of a single unified overarching reality" (Stein, 2006).

In this final chapter, I have attempted to speculate on the convergence of certain aspects of Jungian analytic theory and clinical practice and the findings from a number of cutting-edge scientific researchers who seek to understand the underlying order and pattern of the universe which we inhabit and of which we are an integral part. I have been struck by the possibility of weaving together mathematics, physics, biological life, and the mind in an emergent process derived "from a self-consistent, common axiomatic scheme" (Davies, *op. cit.*, p. 273). The Nobel prize-winning biologist Christian de Duve has stated that "[a]ll living organisms use the same genetic language; they obey the same base-pairing rules and . . . conform to the same genetic code. Behind the enormous diversity of the biosphere, there lies a single fundamental blueprint" (de Duve, 2006). And, as Benioff argues, the fundamental properties of the physical universe must be such as to make it possible (but not necessary) for intelligent beings to exist, since they would govern the principles by which living organisms arose, and with it mind, in the sense of its dependence both on life and the materiality of the universe. Thus are we involved in a vision of an *unus mundus* in Jung's terms.

Perhaps the ultimate source and goal of this freely emerging energy of the type I have been exploring in this chapter is the age old idea of God.

Acknowledgements

I would like to thank Joseph Cambray, Paul Dennison, and Francois Martin-Vallas for their helpful comments on earlier versions of this chapter.

Note

- 1 In a letter written at the end of his life, Jung wrote: “[God] is the name by which I designate all things which cross my wilful path violently and recklessly, all things which upset my subjective views, plans and intentions and change the course of my life for better or worse” (Jung to M. Leonard, 5 Dec. 1959, *Letters II*, P. 525, cited in Lammers et al., 2007, p. 218, note 26).
- 2 I am grateful to Ann Casement for pointing out that the German and American anthropological theories of “diffusionism” suggest that ideas and cultural artefacts are distributed around the world in the wake of migrations and along trade routes. One major contributor to this theory was Wilhelm Schmidt, whose work Jung studied.

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