

Psychoanalytic Controversies

Response

Jessica Benjamin

Psychoanalytic Institute of Northern California
228 West 22nd Street, New York, NY 10011, USA – jessbenja@aol.com

I believe that Vic Sedlak is correct in asserting that there is a distinction between intersubjectivity as it is understood in some psychoanalytic literature (usual in his cultural context) and the idea as it appears in relational analysis (which may indeed be radical but is common in North America). The idea that the data and the relationship between analyst and patient are co-created means something different in each context, and we define this difference differently. In order to address the clinical manifestations it seems wise to clarify the very different assumptions at work.

I should start with Sedlak's statement that (1) what defines the intersubjective approach is the necessity of using our own personality subjectivity to understand the patient, and (2) that it is an unfortunate fact that we have no other means, or measuring instrument to judge meaning and emotional quality, so we must make the best of a bad job. My view, by contrast (see Benjamin, 2005) is developmental and postulates that (1) intersubjectivity is constituted by the fact that from the beginning of life we depend on creating patterns of mutual regulation and recognition with the other in order to develop. Experiencing and understanding together these patterns and failures associated with them form the heart of our work. (2) Since recognition of intentions and feelings of one by another are the crucial building blocks of attachment and all subsequent personal engagement, it is not a "bad job" that we use ourselves in analysis. Rather it is the essence of psychic life and determining for psychoanalysis that one subject needs to be known by another like subject.

Neither fortunate nor unfortunate this condition of psychic life is (as we used to joke about gravity) 'not just a good idea, it's the law'. The idea of the moral third relates not to morality as commonly understood but the idea that patterns of engagement are necessary to human interaction, and when things go well create the sense of a lawful world in which intentions are recognized and ruptures in expectation are acknowledged. Acknowledgment means that even when individuals fail somewhat in satisfying or recognizing the other, the lawful quality of experience is upheld. This makes attachment positive rather than a source of terrible pain and anxiety.

Since this dependency of one subject on another can readily have such painful outcomes, and has often been a very bad job for those who seek our help, the felt need to be held and reflected in the other's mind of another subject (rather than an objective presence) can be scary or painful. Still,

being a subject *for them* is the only way to meet this need and not simply the only way to measure or understand. The reparative opportunity of analysis is not merely acquiring insight but doing so within an experience of being *held in mind* by another equivalent center of subjective feeling. This intersubjective experience is essential to secure attachment and frees up a person's development of reflection as well as providing a basis for overcoming traumatic or painful injuries that block engagement (Bucci, 2008). The psychoanalytic process requires a safe but enlivening encounter with the other's subjectivity in which both sides can have impact and be recognized, albeit in very different ways.

This view of intersubjective relatedness as a goal does also affect our view of enactments. We relational analysts do of course recognize unconscious mutual influence, and the "thing" (what I call the third or pattern of engagement) that results from "the outcome of two personalities meeting" but we do not restrict our sense of the engagement or the meaning of enactments to this notion. We have sought a way to transform the psychoanalytic thinking regarding enactments not only because we recognize the unconscious role of the analyst but because we believe that dissociated traumatic material and painful affect can usually be activated only within such relational enactments (Bucci, 2008). We accept them, as I tried to illustrate in my case presentation, as an opportunity to engage experiences that have been and continue to be dissociated, though not necessarily unconscious, that can only be recognized through dramatization and interaction of parts of our self. Rather than seeing such enactments as inevitable but destructive or dangerous in the way Steiner (2006) suggests, or regretting that they often begin outside our conscious control or objectivity, we accept that analysts dissociate along with the patient and so should look for the best way to make the most of dissociative lapses and resulting enactments (Bromberg, 2006). In this view the discipline is to inquire how they can be effectively acknowledged to the patient, so that the dyad develops a way of working with all the parts played in the enactment by analyst and patient.

My argument is that in many cases we need to openly create consensual validation of moments of injury that we cause by playing our part, because this allows the dissociated painful affect into the room. It may also serve, as in the vignette I shared, to elicit the patient's collaboration in analyzing both her and the analyst's part of the relationship. It is my sense, precisely from reading accounts like those by Steiner (1993, 2006), that the analyst is not so much unconscious as dissociated, that is, aware but hindered by shame in acknowledging fully the role one is playing. The question is what leads to a sense of doer and done to, of inability to use the observing third, even when we 'know' we feel blamed or made helpless (e.g. Steiner, 1993, who describes feeling that: "I was being made responsible for her problems as well as my own", p. 144).

Here is the point about the ideal of being a 'complete container'. I suspect that because of the prohibition on using the communicative system of mutual regulation, rather than practicing self-regulation by insight alone, both the patient's resilience and need for a truthful response have been underestimated. This is not to say, as Sedlak writes, that analysts "claim to

be” complete containers, but rather that they often imagine others to be and so fault themselves for not living up to the ideal, for not being able to self-regulate without shifting the interaction with the other person. This is likely to lead to much less disciplined enactment or impasse, as the analyst cannot acknowledge his part causing pain and thus provide holding for the painful affect. The patient, feeling expelled from the analyst’s mind and seen as bad, may then remain angry when he could have moved on into reflexive examination of self and other. This I believe is Sedlak’s concern about how the patient may feel judged. Impasses may thus arise. When analysts uphold the ideal of containing at the expense of validating lack of containment, they often (partly unconsciously) get caught in impasses around blame. They (not unlike my patient) are substituting a critical self-scrutiny or shame for surrender to *what is*.

That is the actual meaning of the third – what we surrender to. Accepting and taking responsibility for the reality in front of us, what is actually happening, is the essence of the moral third and is crucial to releasing oneself from all forms of defensiveness that generate doer–done to feelings of blame and accusation. What Sedlak describes, a co-created mutual unconscious collusion, resembles more Ogden’s idea of the subjugating third, whereas the responsibility for one’s impact I am advocating aims to generate the recognizing third. The adjective ‘moral’ relates to recognition of and taking responsibility for impact, for restoring the witnessing function that was usually absent during early experiences of trauma and pain. In acknowledging his part, the analyst demonstrates faith in the third, the principle of rupture and repair that says this attachment can survive the feelings that have been activated and the process of truthful examination and communication. He also thus shows openness to different views of reality, in which mine and yours may differ.

It is not that the analyst wishes to appear good and moral, but rather that the analyst allows the patient to experience the analyst’s ability to see his own failures to witness or understand or contain, thus providing a boundary of safety in which activation of painful scary feelings can be undergone. In addition, this repair of rupturer opens rather than closes the empathic exploration of the traumatic sense of a meaningless, lawless world that has resulted from the enactment. Lawful relating involves acknowledging and understanding both past and present aspects of such painful experiences. It means restoring the sense that the analyst can hold the patient’s pain and distress in mind, can bear to know both how he has contributed to it and what it means in the patient’s mental world. When Sedlak agrees that the task of the analyst is “to understand his part in the rupture” but rejects acting to repair and restore lawfulness, I feel he must think that creating secure attachment and mutual regulation have no place in analysis. If so, then we differ once again.

The enactment I describe in which Hannah gets in touch with her sense of her mother’s unlovability, the way she has played the part of the teenager who hates the mother and I the part of that mother, involves an uncovering of the pain behind the enactment as well as explicating the different self-parts involved in the drama. But it was also facilitated by my

acknowledgment of sharpness because this prevented her hiding behind an idealized version of an all-knowing analyst in order to protect me from self-examination. This would have led her to take on my disavowed badness, becoming a flawed patient–self having no agency or capacity for reflection.

Thus I most strongly disagree with Sedlak's contention "The analyst does not need to acknowledge his own work or his faulty and moral stance ... Indeed such acknowledgement, to my mind, is in itself dubious – *has the analyst lost faith in the patient's ability to observe him and draw his own conclusions?*" (my emphasis). I would contend that the patient comes to us precisely because they do not (yet?) have the ability to do this in the face of someone who seems indifferent to their pain, unwilling to acknowledge their part or their flaws, and unwilling to elicit and value their perceptions. When we fail to validate (Ouch! That was Draconian) we allow a disregulation we have triggered to persist, as if to say, "It's up to you alone to deal with my painful behaviour". From my perspective, this causes a much deeper rupture, a sense of emotional abandonment, and it is frequently followed by protest. Countless analysands in training have reported to me that such protests are disputed and labelled as resistance by their analysts, such that their ability to draw a conclusion has been actively countered resulting in long struggles and impasses.

It's an interesting question whether repairing ruptures as I suggest leads to scotomizing the sadomasochistic dynamic and missing the intractable area in the case.

Sedlak suggests my sharp response was "an unmediated (albeit understandable) response to having your work and achievements as analyst/mother yet again murdered?" Indeed so. The way in which this enactment gradually was unpacked is the issue. I believe that, as a result of acknowledging my retaliation and my sense of being attacked, Hannah could recognize her identification with the teenager who attacks her mother. This would seem to be the point Sedlak is making, that it is important for the patient to be able to own that sadistic identification. In my view, however, that identification is not primarily about a perverse enjoyment, rather it is about the guilt-ridden attempt, as Hannah herself was able to formulate subsequently, to put as much distance between herself and the abject mother as possible.

The aim of my therapeutic action is, as Sedlak says, to contain Hannah's self-hate and allow her to connect to her shameful self. Yes, but not "in a more humane and moral way". I am not aiming to have her be more moral in the usual sense. I am not moralizing about her sadistic attack on the mother – her switch into remorse is the result of my empathy with that stance after we parse out her identification with the teenager. Nor do I fail to address repeatedly the aggression she shows toward herself, the identification with the one doing the beating. But, crucially, I don't agree that my acknowledgment of sharpness scotomized the main dynamic, because I don't think the sadomasochism is the core, rather it is the manifestation of something deeper (see Benjamin, 1988).

Indeed I would imagine that this why too much emphasis on the sadism could readily lead to impasse and seem moralizing, as Sedlak cautions,

because the needy abandoned self-parts would feel injured and unheard. Where Sedlak sees perverse pleasure I see the attempt to avoid fragmentation by identifying with the cohesive killer rather than suffering the dissociated terror and shame of the disintegrating abject victim. I don't think her idealization of Nicole is unconscious, but rather the motive is unconscious, i.e. the fear and shame surrounding the fragmented abject self as being the dissociated part. Whence comes this shame, or this cruel superego attack associated with it? Here I agree with Sedlak that this can be a problem that one does not know how to solve, that "a very malignant object comes into view". I suspect it has something to do with resourceless dependency in the face of a severely unrecognizing, perhaps deliberately shaming object. In any case it is true that with Hannah I was often left to identify with, and feel protective, toward the abject shameful part, which is the counterpart of her agonizing feelings of being destructive. It seemed to me that, in the latest episode I described around *To Die For*, Hannah, by dint of my containing identification, was able to allow this dissociated part into the room and own it in my presence. She was able to reclaim her identification with a figure (me, in the transference) who gave that shameful part a home (a place in my mind). Thus in this vignette we are together exploring her dissociated shameful self, I no longer play the part of attacked mother, and we are able to uncover a deep longing and need for her absent mother that underlay her rage.

I hope these examples of enactment show that we do not disagree about placing primary importance on the analysand's mind and needs. It is axiomatic in relational analysis, as Aron as described, that the relationship can be mutual while being asymmetrical. I agree as well that enactments exemplify the analysand's internal object relationships, but also their dissociated affective experiences regarding these objects. I would not understand my position as that of arguing as a feminist "that the asymmetrical feature we should be *more aware of* is the asymmetric power relation", as that is quite a different use of the idea of asymmetry. The asymmetrical feature I am emphasizing regarding acknowledgment pertains not to power but to the analyst's responsibility to maintain the focus on the patient's mind and needs, including for demystification and connection to a safe object. The part I am calling the moral third relating to the asymmetry is that, as Ferenczi says, in enactments we repeat old injuries, and if we do not acknowledge them we also become failed witnesses. Acknowledgment becomes the way in which we transform the repetition into a new experience in which the 'new object' communicates and receives communication about the 'old object'. Thus in the enactment I hold the part of the mother attacked by the teenager and the analyst trying to understand 'who' (which part of Hannah, which object) was attacking 'whom'. I am also there to survive destruction, to contain Hannah's feeling of being destructive, the one who has caused her mother to crumble and fail.

In general, I see the asymmetry being constituted by the analyst's concern with how the attachment relationship is developing, how the procedural level can be used to create a rhythm of accommodation, which I see as the affective basis of the symbolic third. Thus the analyst's change or

accommodation does not oppose the activity of putting into words what is happening between two minds, but rather is its foundation. Again, partly at the implicit level, we are conveying the expectation that as the analytic relationship matures the patient can become increasingly a collaborator in understanding herself and the relationship. The disagreement here is about whether asymmetry can coexist with mutuality, including mutual acknowledgment and confirmation of the other's observations.

This has to do with believing that we can be truthful with how we perceive ourselves and thus make good analytic use of the self-scrutiny and attention to how the patient perceives us as "really being" that Sedlak rightly proposes. But the point of this is not for us to substitute trying to be moral for trying to be analytical, rather it is to recognize our impact and take responsibility for it. We thereby maintain and develop the attachment, show its ability to survive truth and complexity in human beings, such that real pain and injuries can gradually be known, contained and shared intersubjectively.

References

- Benjamin J (1988). *The bonds of love: Psychoanalysis, feminism, and the problem of domination*. New York, NY: Pantheon.
- Benjamin J (2005). Creating an intersubjective reality. Commentary on paper by Arnold Rothstein. *Psychoanal Dialog* 15:447–58.
- Bromberg P (2006). *Awakening the dreamer: Clinical journeys*. Mahwah, NJ: Analytic Press.
- Bucci W (2008). The role of bodily experience in emotional organization: New perspectives on the multiple code theory. In: *Bodies in treatment: The unspoken dimension*, 28–39. Hove, New York, NY: Analytic Press.
- Steiner J (1993). Problems of psychoanalytic technique: Patient-centered and analyst-centered interpretations. In: *Psychic retreats*, 131–46. London, New York, NY: Routledge.
- Steiner J (2006). Interpretative enactments and the analytic setting. *Int J Psychoanal* 87:315–28.