The Contextuality of Emotional Experience

Robert D. Stolorow, Ph.D.

This article seeks philosophical and theoretical grounding for a clinical generalization, held by the author for more than 20 years, about the contextuality of emotional experience. Three characteristics of emotional experience are said to make its contextuality possible: (a) A developed emotional experience consists in a somatic-symbolic integration, (b) such integrations develop from early states in which emotional experience is exclusively bodily, and (c) this developmental process occurs within an intersubjective context characterized by varying degrees of attunement in a linguistic mode. It is claimed that it is the symbolic or linguistic component of emotional experience that is particularly context sensitive.

Some 20 years ago, my late wife, Daphne, and I wrote an article (Socarides & Stolorow, 1984-1985) whose central thesis was that emotional experience is inseparable from the intersubjective contexts of attunement and malattunement in which it is felt. In the present article, I attempt to find more systematic grounding for this clinical generalization in philosophical and psychological theory. Although I certainly cannot “prove” any claim about the contextuality of emotional experience, I will try to spell out, in Kantian fashion, some of the characteristics of emotional experience that would make its contextuality possible. First, I offer a brief clinical vignette (actually, a fictionalized composite) to illustrate what I mean to address.

A young woman who had been repeatedly sexually abused by her father when she was a child began an analysis with a female analyst-in-training whom I was supervising. Early in the treatment, whenever the patient began to remember and describe the sexual abuse or to recount analogously invasive experiences in her current life, she would display emotional reactions that consisted of two distinctive parts, both of which seemed entirely bodily. One was a trembling in her arms and upper torso, which sometimes escalated into violent shaking. The other was an intense flushing of her face. On these occasions, my supervisee was quite alarmed by her patient's shaking and was concerned to find some way to calm her.

I had a hunch that the shaking was a bodily manifestation of a traumatized state and that the flushing was a somatic form of the patient's shame about exposing this state to her analyst, and I suggested to my supervisee that she focus her inquiries on the flushing rather than the shaking. As a result of this shift in focus, the patient began to speak about how she believed her analyst viewed her when she was trembling or shaking: Surely the analyst must be regarding her with disdain, seeing her as a damaged mess of a human being. As this belief was...
repeatedly disconfirmed by the analyst's responding with attunement and understanding rather than contempt, both the flushing and the shaking diminished in intensity. The traumatized states actually underwent a process of transformation from being exclusively bodily states into being ones in which the bodily sensations came to be united with words. Instead of only shaking, the patient began to speak about her terror of annihilating intrusion.

On what philosophical and psychological theories of emotional experience can we draw to help explain a transformational process such as this? William James (1890/1981), carrying forth the tradition of Locke, Berkeley, and Hume of picturing experience as being built from atomic sensations, proposed a theory of emotional experience that has been quite influential. According to this theory, usually termed the James-Lange theory of emotion, emotional experience just is the sensation or feeling of “the bodily changes [that] follow directly the perception of [an] exciting fact” (William James, 1890/1981, p. 1065). Regarding my vignette, this claim would seem compatible only with the patient's initial experience of her traumatized states, in which her emotional experience just was the sensations or feelings of shaking and flushing. James argues,

If we fancy some strong emotion, and then try to abstract from our consciousness of it all the feelings [sensations] of its bodily symptoms, we find we have nothing left behind, no “mind-stuff” out of which the emotion can be constituted, and that a cold and neutral state of intellectual perception is all that remains. (p. 1067)

Note that the foregoing passage is not really an argument for the claim that emotional experience is nothing but the sensation of bodily changes; rather, it seems compatible with the observation that complex emotional experiences arise from the coupling of intellectual cognitions with such bodily sensations. Yet James (1890/1981) asserts repeatedly that emotions are “made up of” (p. 1068) bodily changes and sensations, which thus constitute “the entire fund and capital” and the “sum and substance” (p. 1073) of emotional phenomenology. A reductive theory such as this cannot provide an explanation for the sort of emotional transformation described in my vignette.

Edward Titchener's (1915) conception of emotion, by contrast, holds more promise. According to him, emotion “is an insistently organic consciousness, although the proportion of organic to ideational constituents varies greatly from emotion to emotion and from individual to individual [I would add, from intersubjective context to intersubjective context]” (Titchener, 1915, p. 472). He severely criticizes James's notion that all emotional experience is completely reducible to organic sensations. Although Titchener recognizes somatic sensations as “an integral part of the typical emotive consciousness” (p. 483), he argues for the existence of complex emotional experiences in which these sensations are amalgamated with affective qualities (pleasant-unpleasant), perceptions, and ideas. This more integrative or holistic view of emotion would seem to be better able to accommodate the transformation described in my vignette, and so I will review some further formulations and refinements of it that I have encountered.

Sylvan Tomkins (1962, 1963), probably the most influential affect theorist in contemporary academic psychology, conceptualized emotional phenomenology in terms of ideoaffective structures or ideoaffective systems, hybrid terms that convey the unity of psyche and soma, of ideas and somatic sensations, in complex emotional experiences. Tomkins's holistic terminology is compatible with Richard Wollheim's (1999) philosophical account of emotions as “mental dispositions,” each of which evolves from a characteristic history (I would say intersubjective history) of satisfied or frustrated desire or, in the case of “moral emotions,” alterations in the sense of self, and each of which provides the person with an attitude or orientation to the world: “The essence of emotion lies in the attitude … [that] tints, or colors, the world…. [I]Its identity lies, not in a simple quality, but in a narrative, in the story of its life” (Wollheim, 1999, p. 223).

In glaring contrast with James's atomism, Wollheim affirms not only the holistic nature of emotional experience
but its embeddedness in constitutive context as well. Emotion is “essentially interactive … [and, as is vividly shown in my clinical vignette] anticipates a reaction from the world” (Wollheim, 1999, pp. 223-224). In these interactive narratives “lie the identities of the emotions” (p. 224).

This embeddedness of emotional experience is captured nicely by Heidegger's (1927/1962) term for affectivity, Befindlichkeit. Literally, the word might be translated as “how-one-finds-oneself-ness.” As Eugene Gendlin (1988) has pointed out, Heidegger's term denotes both how one feels and the situation within which one is feeling, a felt sense of oneself in a situation.

The holistic quality and contextual embeddedness of emotional experience are richly elaborated in Peter Goldie's (2000) philosophical account:

An emotion … is typically complex, episodic, dynamic, and structured. An emotion is complex in that it will typically involve many different elements: it involves episodes of emotional experience, including perceptions, thoughts, and feelings of various kinds, and bodily changes of various kinds; and it involves dispositions, including dispositions to experience further emotional episodes, to have further thoughts and feelings, and to behave in certain ways. Emotions are episodic and dynamic, in that, over time, the elements can come and go, and wax and wane, depending on all sorts of factors, including the way in which the episodes and dispositions interweave and interact with each other and with other aspects of the person's life. And an emotion is structured in that it constitutes part of a narrative … in which the emotion itself is embedded. (pp. 12-13)

Goldie (2000) makes the extremely important point that emotions are intentional: “the thoughts and feelings involved in an emotion have a directedness toward an object” (p. 16). When we have an emotional experience, “we are engaged with the world” (p. 48). Goldie emphasizes an aspect of this engagement that is “both intentional and involves feelings” (p. 19)—feeling toward, as he calls it. Emotions are not brute bodily feelings, as James would have it. Rather, they entail “thinking of with feeling” (p. 19). Bodily sensations that are part of an emotional experience become “thoroughly infused with the intentionality of the emotion” (p. 57) and are thereby directed toward its object:

Our entire mind and body is engaged in the emotional experience, and all the feelings are “united in consciousness” in being directed toward its object…. [S]exual desire is felt with the whole being—body and soul—for the one we desire. And … our whole being aches in grief for the one we have lost. (Goldie, 2000, p. 55)

In my clinical vignette, the patient's emotional experience of traumatized states may be said to have evolved from brute somatic sensation (or at least sensation whose only

intentionality was a directedness toward the body itself) into feeling toward—that is, into a thinking of annihilating violation with a feeling of terror. It evolved from something nameless and unspeakable into something that could be named and spoken. To begin to comprehend the contextuality of this transformation, we must add a further ingredient—namely, a developmental dimension.

One of the first psychoanalytic authors to examine systematically the development of emotional experience was Henry Krystal (1974/1988), who delineated two developmental lines for affect: (a) affect differentiation, the development of an array of distinctive emotions from the diffuse early ur-affect states of pleasure and unpleasure, and (b) desomatization and verbalization of affect, the evolution of affect states from their earliest form as exclusively somatic states into emotional experiences that can be verbally articulated. It was a microcosm of this second line of development that was witnessed in my clinical vignette.

Joseph Jones (1995) refined our comprehension of this second developmental line by emphasizing the
importance of symbolic processes in its unfolding. The capacity for symbolic thought comes on line
maturationally at the age of 10-12 months, making language possible for the child. At that point, the earlier,
exclusively bodily forms of emotional experience can begin to become articulated in symbols—for example, in
words. Consequently, the child's emotional experiences increasingly can be characterized as somatic-symbolic
integrations. In this light, we can recognize the “ideoaffective structures” conceptualized by Tomkins (1962,
1963) and the “thinking of with feeling” postulated by Goldie (2000) as developmental achievements in the
ontogeny of emotional experience.

Does this developmental formulation help us begin to grasp the contextuality of emotional experience? Most
certainly it does, because, as Krystal (1974/1988) and then, more extensively, Daphne and I (Socarides &
Stolorow, 1984-1985) pointed out, this developmental progression takes place within a relational medium, an
intersubjective context. It is the caregiver's attuned responsiveness, we claimed, phase-appropriately conveyed
through words, that facilitates the gradual integration of the child's bodily emotional experience with symbolic
thought, leading to the crystallization of distinctive emotions that can be named. In the absence of such verbally
expressed attunement, or in the face of grossly malattuned responses, derailments of this developmental process
can occur, whereby emotional experience remains largely bodily. The persistence of psychosomatic states and
disorders in adults may be understood as remnants of this developmental derailment. As seen in my vignette,
when there is an expectation that symbolically integrated emotions will be met with rejection and scorn, the
person may revert to exclusively somatic forms of emotional experience. When this expectation is repeatedly
disconfirmed by the other's acceptance and understanding, the psychosomatic states tend to recede and to be
supplanted by verbally articulated emotions.

My elucidation of the contextuality of emotional experience so far is quite crude and global. I shall attempt to
refine it some by introducing a distinction provided by Charles Siewert (1998) in his philosophical examination
of the phenomenology of conscious thought. He distinguishes between iconic (imagistic) and noniconic
(nonimagistic) thought, and claims that “Only where there is noniconic thinking does it seem right to speak of
judgment and judging” (Siewert, 1998, p. 264). He then makes what, for my purposes, is the extremely
important observation that “one and the same occurrence of conscious thought can be both iconic and
noniconic” (p. 264): “I auralize an utterance … and this is an iconic thought, but I also thereby think what I
mean by that utterance … and so I have a noniconic thought as well” (p. 264). Accordingly, some thoughts may
be

- characterized as double-layered, with one layer consisting in sensory imagery and the other in the linguistic
meaning of that imagery, which, in turn, makes it possible to make a judgment about the imagery.

This dual structure of thought seems to me to be strikingly parallel to the description of evolved emotions as
somatic-symbolic integrations. It is the noniconic component of an emotional experience that supplies its bodily
component with linguistic meaning.

My clinical experience has taught me that it is the noniconic or linguistic component of emotional experience,
which includes the judgments that the person makes about it, that is particularly context sensitive. This context
sensitivity may account in part for ordinary, and even cultural, variations in emotional experience, but it can be
seen especially clearly in the impact on emotional experience of traumatic contexts of severe malattunement.
In consequence of early, recurring malattunement, the child's emotional experiences acquire enduring, crushing
meanings and judgments, such as a conviction that the emotions are manifestations of a loathsome defect or of
an inherent inner badness. In an adult, such meanings and judgments encode the whole intersubjective history of
how the emotional experiences had been responded to.

Typically, when a person with such a conviction undertakes a psychoanalysis, he or she fears that the analyst
will respond to emerging emotional experiences with disgust, disdain, disinterest, alarm, hostility, withdrawal,
rejection, exploitation, and the like, depending on the specific history that the patient expects will be repeated with the analyst. The one and only time the patient in my vignette attempted to speak to her mother about the sexual abuse, the mother shamed her severely, declaring her to be a wicked little girl for making up such lies about her father. Thereafter, the patient did not tell any other human being about her trauma until she revealed it to her analyst, and both the flushing of her face and the restriction of her experience of terror to its nameless bodily component were heir to her mother's shaming. Only with a shift in her perception of the analyst from one in which the analyst was potentially shaming to one in which she was accepting and understanding could the patient's emotional experience of her traumatized states shift from an exclusively bodily form to a somatic-symbolic integration whereby her terror could be felt as such and named.

It is noteworthy that, concomitantly with the somatic-symbolic integration just described, there was a specific alteration in the bodily component of the patient's emotional experience as well—the flushing and shaking diminished in intensity. Does this mean that the bodily component was in itself also context sensitive? Perhaps, but there is an alternative explanation, for which I cannot now present an argument but which intuitively seems to me to be more plausible.

If an emotional experience, as Goldie (2000) suggests, is to be understood as a complex dynamic system (see also Magai & Haviland-Jones, 2002), then change in any one of its elements (such as the noniconic component) will likely result in a change in the overall organization of the entire system. For example, changes in the figure-ground relationships among the several dimensions of the emotional system may be brought about, such that components that formerly occupied the experiential foreground recede more into the background. This is what I believe occurred in the case of the patient in my vignette: As her emotional experience of her traumatized states evolved, in the context of the therapeutic exchange, into a somatic-symbolic integration, this more integrated emotional experience increasingly occupied the foreground of her experience, whereas the bodily component receded into the background and appeared with much less intensity.

To summarize, I have identified three characteristics of emotional phenomenology that I believe make its contextuality possible: (a) A developed emotional experience consists in a somatic-symbolic, or iconic-noniconic, integration; (b) such integrations develop, with the advent of the capacity for symbolic thought, from early states in which emotional experience is exclusively bodily; and (c) this developmental progression occurs within an intersubjective context characterized by varying degrees of attunement in a linguistic mode. To this quasi-Kantian argument about the conditions that make the contextuality of emotional experience possible, I have added a fourth ingredient: the clinical generalization that it is the linguistic or noniconic component of emotional experience that is particularly context sensitive and the source of the meanings and judgments, often quite devastating, that emotional experience can acquire.

The rich contextuality of emotional experience, which I hope to have captured to a convincing degree, holds enormous implications for psychoanalytic theory and practice. Emotional experience, as opposed to the old Freudian instinctual drives, has come to occupy a position of motivational primacy in many contemporary psychoanalytic perspectives, including my own. In virtue of its context sensitivity, locating emotional experience at the motivational center automatically entails a radical contextualization of virtually all aspects of human psychological life and of the therapeutic process (Stolorow, Atwood, & Orange, 2002).

References


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