Our goal in this series of four papers is a further refinement of a theory of interaction for psychoanalysis, with a specific focus on the concept of intersubjectivity. Psychoanalysis has addressed the concept of intersubjectivity primarily in the verbal/explicit mode. In contrast, infant research has addressed the concept of intersubjectivity in the nonverbal/implicit mode of action sequences, or procedural knowledge. We propose that an integration of explicit/linguistic with implicit/nonverbal theories of intersubjectivity is essential to a deeper understanding of therapeutic action in psychoanalysis today. To shed light on an implicit/nonverbal dimension of intersubjectivity in psychoanalysis, we include concepts from adult psychoanalysis, infant research, developmental systems theories, and nonverbal communication, particularly the distinction between implicit processing out of awareness and explicit processing at the declarative/verbal level. We conclude with an adult psychoanalytic case illustrating the integration of implicit/nonverbal forms of intersubjectivity into adult treatment.

ONE OF THE MOST PRESSING QUESTIONS IN PSYCHOANALYSIS TODAY IS the nature of interaction in the therapeutic encounter. Interest in interaction derives in part from a shift from positivist to perspectivist approaches and systems views in late 20th century psychoanalysis (Reese and Overton, 1970; Silverman, 1994, 1999; Orange, Atwood, and Stolorow, 1997; Hoffman, 1998). Although interactive models and a shift toward systems thinking have been operative in various ways in psychoanalysis throughout the century, what is new is the increasing centrality of the interactive process itself. “Intersubjectivity” has emerged as the leading concept among psychoanalytic approaches to interaction.

Our goal in these papers is a further refinement of a theory of interaction for psychoanalysis, with specific focus on the concept of intersubjectivity. Psychoanalysis has addressed the concept of intersubjectivity primarily in the verbal, explicit mode (for important exceptions see Jacobs, 1991a, b; McLaughlin, 1991; Ogden, 1994; Knoblauch, 1997, 2000; Pally, 2000). In contrast, infant research has addressed the concept of intersubjectivity in the nonverbal/implicit mode of action sequences, or procedural knowledge. We propose that an integration of explicit/linguistic and implicit/nonverbal theories of intersubjectivity is essential to a deeper understanding of therapeutic action in psychoanalysis today. To shed light on an implicit/nonverbal dimension of intersubjectivity in psychoanalysis, we include concepts from adult psychoanalysis, infant research, developmental systems theories, and nonverbal communication, particularly the distinction between implicit processing out of awareness vs. explicit processing at the declarative, verbal level.

Psychoanalytic concepts of interaction include, for example, transference-countertransference (Freud, 1911, 1914; Gill, 1982), the holding environment (Winnicott, 1965; Modell, 1984), a two-person view (Modell, 1984), the interactive matrix (Loewald, 1980), the selfobject transference (Kohut, 1984), empathic immersion (Ornstein and Ornstein, 1984),

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optimal responsiveness (Bacal, 1985), projective identification (Ogden, 1982), role responsiveness (Sandler, 1987), social construction (Hoffman, 1998), enactment (Jacobs, 1991a, b), procedural knowledge (Clyman, 1991), surrender (Ghent, 1989), the clinical exchange (Lichtenberg, Lachmann, and Fosshage, 1992; Fosshage, 2000), reflective function (Fonagy, 1991), the intimate edge (Ehrenberg, 1992), a dyadic systems view (Beebe, Jaffe, and Lachmann, 1992), affect regulation (Shore, 1994), mutual regulation (Beebe and Lachmann, 1988, 1998; Lachmann and Beebe, 1996; Tronick et al., 1998), mutuality (Aron, 1996), implicit relational

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knowing (Lyons-Ruth et al., 1998; Stern et al., 1998), the relational matrix (Mitchell, 1997, 2000), intimate attachment (Shane, Shane and Gales, 1998), an emotional nonverbal exchange (Pally, 2000), resonance (Knoblauch, 2000), and moving and being moved (LaBarre, 2001). Especially in the past decade, the concept of intersubjectivity has become increasingly central in discussions of interaction in psychoanalysis. Despite the importance of the concept of intersubjectivity, we are nevertheless impressed by the multiple uses of the term in current discourse and a striking lack of consensus on its meaning.

Empirical infant research on mother-infant face-to-face “play” has been preoccupied for three decades with defining the nature of interaction. Concepts of interaction in infant research have included, for example, mutual regulation or mutual influence (Jaffe, Stern, and Peery, 1973; Beebe and Stern, 1977; Sander, 1977; Tronick, Als, and Brazelton, 1980; Stern, 1985; Tronick, 1989), synchronization (Stern, 1977), reciprocity (Brazelton et al., 1975), behavioral dialogues (Bakeman and Brown, 1977), reciprocal and compensatory mutual influence (Capella, 1981), accommodation (Jasnow and Feldstein, 1986, Crown, 1991), coordination (Sander, 1977), rhythms of dialogue (Jaffe et al., 2001), attunement (Stern et al., 1985), protoconversation (Beebe, Stern, and Jaffe, 1979), the moment of meeting (Sander, 1995; Stern et al., 1998), and intersubjectivity (Trevathan, 1980; Tronick et al., 1980; Melzoff, 1985; Stern, 1985; Melzoff and Moore, 1998; Tronick et al., 1998).

We are intrigued by parallel developments of theories of inter-subjectivity in the last decade of the 20th century by leading theorists in both infant research and psychoanalysis, yet with little dialogue among them. We are perplexed that the very same term is used by psychoanalytic theorists to describe a symbolic mind and by infant researchers to describe a presymbolic mind. We find it remarkable that the term is used with a wide range of meanings by psychoanalytic and infant theorists alike: neither the adult theorists nor the infancy theorists agree on the meaning of intersubjectivity. Given the widespread usage and appeal of the concept of intersubjectivity and the multiple uses of the term, the resulting difficulties of communication are currently an important problem in psychoanalysis.

In these papers, we do not attempt an extensive review of all current concepts of intersubjectivity, either in psychoanalysis or in infant research. Instead, Paper I sets the stage with definitions of our central concepts and illustrates different meanings of the term intersubjectivity in psychoanalysis with brief comparisons of various key theorists: Jacobs, Ehrenberg, Ogden, Benjamin, and Stolorow and colleagues.

Paper II compares the work of three infant theorists of intersubjectivity, Melzoff, Trevathan, and Stern. Although other infant theorists have used the term intersubjectivity, most notably Sander (1977) and Tronick et al. (1980), we chose these three because they have used this term to organize a large portion of their work. Despite important differences, they converge on the concept of nonverbal correspondences as the core definition of intersubjectivity in infancy. On the basis of these theories, we conclude that communicative competence is far more fundamental than language and prior to language, that, the origin of mind is dyadic and dialogic, and that, further, adult intersubjectivity is built on infant intersubjectivity. On the basis of our reviews of adult and infant theorists, we develop the argument that the term intersubjectivity has no single, coherent meaning either in psychoanalysis or in infant research. As a solution to this problem we recommend adoption of the concept of forms of intersubjectivity.

Paper III addresses ways in which infant research can contribute to forms of intersubjectivity in psychoanalysis. We first suggest that the work of Melzoff, Trevathan, and Stern can enrich the concept of intersubjectivity in psychoanalysis. The concept of nonverbal/implicit correspondences is a rich and complex organizing principle of interaction. It has the potential to make a powerful contribution to the understanding of intimacy and exuberance, as well as distress regulation, in psychoanalysis. But, as important as the concept of nonverbal correspondence is, we make the argument that it is not sufficient to help analysts conceptualize the full range of the nonverbal/ implicit interactive process in intersubjectivity. We propose a full dialectic between similarity and difference, as well as other concepts from infant research, and we offer an expanded view of forms of intersubjectivity in infancy and their application to psychoanalysis.

In Paper IV (presented in Part II of this symposium), a clinical case (treated by Beebe) illustrates the concepts from Paper III. In this treatment, the face became the central metaphor for the negotiation of relatedness. This treatment illustrates the clinical value of attention to the nonverbal/implicit mode of the interaction, as well as the verbal mode of exchange. It particularly addresses the issue of how implicit/ nonverbal forms of intersubjectivity can be transformed and the critical importance of the participatory role of the analyst as a new relational partner (see Lyons-Ruth, 1999).

Three orienting proposals guide our thinking:

1. We begin with the premise that all theories of intersubjectivity are theories of interaction. Any theory of intersubjectivity
can be evaluated in terms of the degree to which it articulates a systems view of interaction, a broader concept that can integrate the various forms of intersubjectivity described in both infant research and psychoanalysis.

(2) Insofar as psychoanalysis is interested in integrating concepts of intersubjectivity from infant research, it is necessary to consider how different levels of cognitive development affect the possible ranges of different forms of intersubjectivity. To this end, it is essential to draw distinctions between presymbolic and symbolic forms of intersubjectivity, as well as among different levels of “theory of mind.”

(3) For a theory of intersubjectivity to be most generally useful for psychoanalysis, it must address both verbal and nonverbal, more recently conceptualized as explicit and implicit, forms of intersubjectivity. As Pally (1998) notes, “Emotional and nonverbal exchange may play at least as much importance in analytic treatment as does verbal exchange” (p. 360).

To set the stage, we briefly review here the distinction between implicit and explicit processing and our use of a dyadic systems model of interaction. We then use a systems model to compare several different psychoanalytic theories of intersubjectivity: Jacobs, Ehrenberg, Ogden, Benjamin, and Stolorow and colleagues. Finally, to prepare for the review of infant theorists of intersubjectivity in Paper II, we describe the difference between presymbolic and symbolic forms of mind and distinctions in theories of mind in the young child's emerging symbolic development.

**Implicit versus Explicit Processing**

The most obvious difference between adult and infant forms of intersubjectivity might be described as verbal versus nonverbal forms of communication. The distinction between verbal and nonverbal communication has, however, been refined and made more complex by recent discriminations between implicit and explicit forms of information processing, subcortical and cortical, respectively. Although a review of this literature is beyond the scope of this work, we briefly clarify our terminology.

Implicit refers to things that we know or do automatically without the conscious experience of doing them or remembering them, such as ice skating, or the feel of cat fur on one's skin, or knowing how to joke around (Squire and Cohen, 1985; Clyman, 1991; Grigsby and Hartlaub, 1994; Lyons-Ruth et al., 1998; Lyons-Ruth, 1999; Rustin and Sekaer, 2001). Explicit processing, or memory, refers to things that we do or remember that can be brought to consciousness as symbolically organized recall for information and events, such as facts and concepts (semantic), or personal history (episodic) (Pally, 1997, 2000).

Three distinctions are made within implicit processing: cued/associative, procedural, and emotional (see Pally, 2000). Implicit processing that is cued or associative involves associations among words and verbalized images that are entirely out of awareness. The method of free association in psychoanalysis employs this form of processing. When we use the term implicit in these papers, we are not referring to this meaning. “Procedural” refers to skills or goal-directed action sequences that are encoded nonsymbolically, become automatic with repeated practice, and influence the organizational processes that guide behavior; this meaning of implicit is central to our use (Emde et al., 1991; Grigsby and Hartlaub, 1994). Our use of the concept of infant expectancies illustrates one definition of implicit/procedural knowledge (see Beebe and Lachmann, 2002). Although various controversies exist around the meaning of “procedural” (see Mandler, 1988; Mounoud, 1995; Muller and Overton, 1998), our use of the term includes both conscious and nonconscious processing and a view of the infant, as well as the adult, as an active agent in the construction of procedural knowledge.

Implicit/emotional processing refers to primitive emotional perceptions and memories that use the amygdala and limbic systems (Pally, 1997, 2000). For an example of implicit emotional knowledge, Dimberg, Thunberg, and Elmehed (2000) showed that adults can process a facial expression, and match it, within 30 milliseconds, entirely out of awareness. These results show that both positive and negative emotional reactions can be evoked out of awareness, so that important aspects of face-to-face communication occur on a nonconscious level. This meaning is included in our use of the term implicit.

Heller and Haynal (1997) illustrate both procedural and emotional implicit knowledge in a paper entitled, “The Doctor's Face: A Mirror of His Patient's Suicidal Projects.” Fifty-nine patients who had attempted suicide in the previous three days were given an initial interview by the same psychiatrist. Two videotape cameras recorded the faces of both doctor and patient. One year later, 10 of these 59 patients, the “reattempter” group, had made another suicide attempt. Whereas the psychiatrist's own written predictions were random, fine-grained microanalyses of the videotapes of the psychiatrist's face identified 81% of the reattempters. With her patients who would later make another suicide attempt, the psychiatrist frowned more, showed more head and eye orientation, and showed
more overall facial activation and increased speech. This greater activation and negative expressiveness of the psychiatrist can be seen as both regulating her own inner state and communicating with her patient, both processes out of her awareness (see Beebe and Lachmann, 1998, 2002). Thus the psychiatrist “knew” something, as indicated by nonverbal behavior (by implicit procedural action sequences of head, eye, face, and voice, and implicit emotional reactions), that she did not “know” at an explicit linguistic level. The reatempter group was also discriminated by patient behaviors: self-regulatory movements (excluding smiles) with no apparent communicative intent, such as pinched or pursed lips, opening and closing the jaw while lips remain closed, and elongating a mouth corner.

Various terminologies, such as verbal-nonverbal, explicit-implicit, and continuous process-discrete state (see Fogel, 1993; Knoblauch, 2000), do not have identical meanings, and they do not map onto each other in any neat fashion. For example, words can be used in an explicit fashion, that is, consciously and intentionally, or in an implicit fashion, for example, cued through associations out of awareness. Likewise, words can, and usually do, have discrete meanings, but they also have a process dimension, conveyed through rhythm and intonation, for example, which is implicit or “affective.” The nonverbal dimension of communication, conveyed through facial expression, gesture, vocal tone, and rhythm, is usually implicit, out of awareness, not consciously “intentional” (although it is goal-oriented action); it conveys a moving process rather than a discrete moment.

But certain nonverbal gestures, such as putting out one's hand to indicate stop, or waving goodbye, have a discrete explicit meaning. Compared with words, which are slower and have distinctly turn-taking format due to the impossibility of speaking and listening at the same time (see Jaffe and Feldstein, 1970), nonverbal communication tends to be extremely rapid and frequently simultaneous between partners, without an alternating turn-taking constraint. Furthermore, the language of the body can be entirely out of awareness, or it can in some instances be readily brought into awareness. Lyons-Ruth (personal communication, 2002) suggests that we distinguish how words are used—the enactive action potential of words that directly engages the partner, which is an implicit use of language—as against the symbolic interpretive, reflection potential of words, which is explicit. While acknowledging these complexities, we nevertheless retain the term nonverbal because of its importance in the history of ideas. We roughly equate implicit with nonverbal, or the affective dimension of relating, but note that words can also be used in enactive, affective fashion; and following Lyons-Ruth, we equate explicit with verbal processes used in a symbolic, reflective fashion.

Bucci (1997) suggests three levels of organization in the adult: (1) organization within the nonverbal realm, such as procedural action

sequences and somatic sensations; (2) organization within the verbal realm; and (3) a referential process between the verbal and nonverbal (similar to Loewald's, 1980, concept of “linking” between verbal and nonverbal; see also Mitchell, 2000), which makes connections between words and visceral bodily experience, through metaphor and imagery, for example. On the basis of a study of adult attachment interviews, Appelman (2000) found that Bucci's measure of referential activity was higher in secure as compared with insecure mothers.

Lyons-Ruth (1999; Lyons-Ruth et al., 1998) argues that much of our relational experience is represented in an implicit format, which she terms “implicit relational knowing,” such as knowing how to participate in greetings and partings or how to joke around. The meaning is implicit in the organization of the action sequences of the relational dialogue and does not require reflective thought or verbalization. The various procedural action patterns of mother-infant interaction constitute the first form of implicit relational knowing. Procedural forms of knowing are intrinsic to many forms of skilled action, including intimate relating. Echoing Bucci (1985), Lyons-Ruth (personal communication, 1999) suggests that we conceptualize the implicit and the explicit (roughly the verbal and the nonverbal) as organized in parallel, as separate organizing principles that can nevertheless influence each other.

Consistent with such other authors as Schore (1994), Pally (2000), and Grigsby and Hartlaub (1994), Lyons-Ruth (1999) declares that “development does not proceed only or primarily by moving from procedural coding to symbolic coding” (p. 579). Instead, Lyons-Ruth conceptualizes development, and developmental change in psychoanalysis, as an increasing differentiation and integration of
implicit relational procedures for being with others, in a wide range of emotionally charged contexts. A parallel development takes place in the explicit mode. Lyons-Ruth notes that the nature of the organization of implicit relational knowing is extremely sensitive to the quality of participation by the relational partner. Yet there is very little in the literature on how implicit relational procedures become reworked or increasingly articulated and complex in adult treatment (but, for exceptions, see Grigsby and Hartlaub, 1994; Sorter, 1994). Our goal in the illustration of an adult treatment in Paper IV is just such a description.

Implicit forms of knowing begin in infancy through the development of expectations of action sequences. A considerable literature describes

the infant's capacity to construct expectations of action sequences, which are then represented in a presymbolic, procedural format (Fagen et al., 1984; Stern, 1985, 1995; Haith, Hazan, and Goodman, 1988; Emde et al., 1991; Shields and Rovee-Collier, 1992). This view of representation uses a constructivist and transformational model (see Reese and Overton, 1970; Lewis and Brooks, 1975; Sameroff, 1983). In previous work we used the concept of patterns of expectation—the anticipation of the partner's pattern in relation to one's own—to define presymbolic representation in the first year (Beebe and Stern, 1977; Stern, 1977, 1985, 1995; Beebe and Lachmann, 1988, 1994, 2002; Beebe, Lachmann, and Jaffe, 1997). Infant and adult partners each generate patterns of expectation, constructed through the sequence of their own actions in relation to that of the partner (patterns of coordination), and an associated self-regulatory range and style. For example, learning the regulation of dialogic timing patterns (see Jaffe et al., 2001) involves learning when to vocalize, when to pause and for how long, whose turn it is, when to join in simultaneously (coactive speech), and how to take turns. It also involves coming to expect how the dyad coordinates these rhythmic patterns. Variations in the coordination of these timing patterns between mother and infant at four months are predictive of infant attachment and cognition at one year. These are lifelong forms of procedural knowing that begin in infancy but eventually operate parallel to, and intersect with, linguistic forms of knowing.

**Dyadic Systems Model of Interaction**

We use a systems approach most generally to refer to a view that construes the dyadic system to be the basic unit of interest, within which both interactive regulation and self-regulation can be defined, each affecting the other (see Sander, 1977, 1995; Tronick, 1989; Beebe et al., 1992; Beebe et al., 2000; Jaffe et al., 2001; Beebe and Lachmann, 2002). This view links the individual to the dyad, emphasizing what Beebe and Lachmann (1998) have called the co-construction of inner and relational processes. In a dyadic systems view of communication, each person's behavior is created in the process of joint coordination.

To address the central issue of documenting that each person does indeed “affect” the other, or “communicate” with the other, we use

the concept of bidirectional (or “mutual”) regulation. Bidirectional regulation refers to a two-way, reciprocal process in which each person's behavior can be statistically predicted from (and in this sense is “influenced” by) the behavior of the partner. We use the term coordination as a synonym for regulation. We prefer the term bidirectional to mutual to avoid any implication of positive mutuality, since bidirectional regulation occurs equally in aversive as well as positive interactions. The concept of bidirectional regulation carries no causal implication. Such regulation can, and usually does, occur entirely out of awareness. At the nonverbal level of action sequences, at every instant, any action in a dyadic relationship is jointly defined by the behavior of both partners (Jaffe et al., 2001). Thus, psychologically, “individuals” do not exist apart from the totality of their interpersonal relationships (see also Sullivan, 1940; Winnicott, 1965).

Winnicott's (1965) famous remark, “There is no such thing as an infant” (p. 39), is analogous to Sullivan's similarly famous phrase, “the myth of personal identity.” Winnicott and Sullivan, among many authors both within and outside of psychoanalysis, participated in building a relational systems approach to the understanding of the person, in which “individuals” do not exist apart from the totality of their interpersonal relationships (for example, Lewin, 1935; Fairbairn, 1952; Piaget, 1954; Spitz, 1963; Werner and Kaplan, 1963; Bowlby, 1969; Kohlberg, 1969; Sander, 1977 and more recently Reese and Overton, 1970; Ghent, 1989; Harris, 1992; Stolorow and Atwood, 1992; Aron, 1996; Mitchell, 1997, 2000; Stolorow, 1997; Bromberg, 1998). This relational systems approach contrasts sharply with an alternative view, also very influential in the 20th century, that the individual is fundamentally alone and is drawn into interactions and relationships, a position that Stolorow and Atwood (1992) term the “myth of the isolated mind.” Overton (1994) suggests that the latter view splits the relational matrix into separate, independent individuals and then searches for the glue that puts them together; the former begins with the relational matrix as a system, in which each component affects and is affected by the other.
Figure 1 illustrates the core of our theory of interaction. Moment by moment, each person “influences” or coordinates with the other. And, moment by moment, each partner regulates arousal and inner state: threshold, intensity, activation, dampening, self-soothing. In the adult, self-regulation also refers to defenses, fantasies and unconscious fantasies. The arrows refer to “predictability” or “regulation,” indicating recurrent nonrandom patterns within the individual and between the partners (see Tronick, 1989; Beebe and Lachmann, 1994, 1998, 2002). The dotted lines represent the history of the interactive, or self-regulation, patterns. How each person self-regulates affects the process of how the interaction goes, and vice-versa. Each process is “emergent” from the other: inner and relational processes are co-created in tandem. In Fogel's (1993) description of a systems model, all behavior simultaneously unfolds in the individual, while at the same time each individual modifies and is modified by the changing behavior of the partner.

Figure 2 illustrates the application of our systems view of interaction to adult psychoanalysis. The top half of the figure, at the level of “explicit” processing, illustrates the usual verbalizable symbolic narrative, from which both conscious and dynamically
unconscious processes are inferred. On a parallel track, the bottom half illustrates the level of “implicit” processing, which is nonconscious or out of awareness. These are the interactions of looking, facial mirroring, vocal rhythm, spatial orientation, touching, self-touching, and so on. Although both explicit and implicit processing affect the psychoanalytic encounter at every instant, psychoanalysis has primarily conceptualized the former but not the latter. An integration of the two kinds of processing within psychoanalysis requires an integration of two very different theories. The explicit level refers most generally to the idea that conscious and unconscious symbolic representations of self and object organize experience. The implicit level refers to the idea that the control or regulation of behavior is in the moment-to-moment interaction itself, through self-and interactive regulation (see Beebe and Lachmann, 1998, 2002; Lyons-Ruth et al., 1998; Lyons-Ruth, 1999).

This systems model of interaction can be used as a lens for a comparative analysis of recent theories of adult intersubjectivity. This way of viewing a particular theory facilitates a comparative examination of the key routes of influence and central moments of regulation that are emphasized as mutative. Our schematic approach articulates only the bold strokes of a theory, and of necessity loses the finer grained distinctions. Nevertheless, it is useful in clarifying where each of the theorists may differ. Although all the theorists reviewed here appreciate the contribution of both partners to the psychoanalytic exchange, as well as the contribution of each partner's self-regulation, which aspects of the process are relatively more emphasized by each as central to therapeutic action? We pull out these relative emphases as points of distinction for purposes of comparison only, without any implication that other dimensions of the theories are not also important or even central. The points of difference among these adult theorists, when taken together, can expand and enrich the meaning of intersubjectivity in psychoanalysis. We endorse Ogden's (1994) suggestion, “Our goal is … to escape the pitfalls of ideology and to learn from our … efforts at thinking within the context of different systems of ideas that together, constitute psychoanalysis” (p. 103).

Figure 2. Interaction in Adult Treatment Illustrating Explicit and Implicit Processing. Arrows indicate predictability (“coordination” or “influence”) between partners. Dotted arrows represent the history of the pattern of predictability. Arrows connecting dotted lines with continuous line indicate the influence of history on the present. The arrow between the explicit and implicit realms indicates that, when necessary, the implicit and explicit systems can be translated back and forth; the broken arrow between the two realms indicates that, in some difficulties of communication, this translation is disrupted.
Illustrations of Interaction and Forms of Intersubjectivity in the Psychoanalytic Theories of Jacobs, Ehrenberg, and Ogden

To illustrate different theories of interaction underlying varying current views of intersubjectivity in psychoanalysis, we draw on Mitchell's (1997) comparative analysis of varieties of theories of interaction, in which he emphasized that there are many authentic modes. He described “prototypical features” of the “clinical tales” (p. 145) of Theodore Jacobs, Darlene Ehrenberg, and Thomas Ogden to characterize the different kinds of interaction and self-experience that each brings to the analytic process. We use Mitchell's descriptions here without attempting to evaluate or comment on their relative accuracy.

Jacobs. Mitchell suggests that Jacobs (1991a, b), working primarily within the Freudian perspective, uses enactments as the point of entry and “illustrates the ways in which the analyst comes to know and understand the patient's childhood conflicts through the evocation of parallel childhood conflicts in the analyst” (p. 147). Features of the patient's dynamics are mirrored in the analyst's dynamics, a parallel process captured in Jacob's image of interaction as two swimmers. The analyst thus enters the patient's experience most powerfully through the affects, conflicts, and self-states from the analyst's past. He uses his own experience to reach the patient,
but for the most part he does not share his countertransference. Jacobs (personal communication, May 5, 2002) notes that, although Mitchell's description is accurate for the material Mitchell had available, in his current approach Jacobs does at times reveal and discuss countertransference.

Figure 3 illustrates Jacobs's view of interaction. The line representing the patient's impact on the analyst is darkened far more than the reciprocal route of the analyst's impact on the patient. Thus the greater relative emphasis in Jacobs's model is on the patient's impact on the analyst. The dotted line depicts the history of the patient's impact on the analyst. The line representing the analyst's own self-regulation process, and particularly the dotted line representing the history of his the analyst's own past modes of inner regulation, are darkened far more than the patient's own self-regulation process.

Ehrenberg. Mitchell (1997) suggests that Ehrenberg (1992), working from the interpersonal perspective, “seems very much grounded in the present…. In reading Ehrenberg, we learn nothing about her

Figure 3. Models of Interaction in Psychoanalysis: Jacobs, Ehrenberg, and Ogden.

- Regulation is present
- Regulation is emphasized
- History of the regulation process is emphasized
- History of the regulation process is emphasized to a greater degree
childhood and family, but a great deal about her personal reactions to her patients, what it feels like to be her in their presence” (pp. 145-149). Mitchell describes Ehrenberg as seeking intense engagement—a heat or intensity—in the here-and-now. Her image of interaction is one of boundaries and edges, particularly her metaphor “intimate edge.” She is concerned with what the partners expect of each other and with the awakening of desire, longing, and threat. She uses, and at times discloses, her own reactions of feeling ignored, burdened, punished, deadened, humored, or distracted to reach and to understand the patient. Figure 3 depicts equally darkened lines representing the patient's impact on the analyst, and the analyst's on the patient, in Ehrenberg's model. In addition, the line representing the analyst's self-regulation process is darkened, but the patient's is not. The history of these patterns is not depicted.²

Ogden. Mitchell (1997) suggests that Ogden (1994, 1995), working from an object relations perspective, describes

- a form of analytic participation entailing an exquisite emotional presence and reactivity that, for extended periods of time, is largely silent.… The patient … has (dissociated, presymbolic) thoughts but no voice with which to speak them: his experiences, but no subjectivity to know them in. The analyst … surrenders subjectivity to the process, emptying it to some extent, so that it … can receive process, and bring to life the voiceless experience of the author [pp. 152-153].

The analyst surrenders himself to the patient's deepest pathology: rage, isolation, and especially deadness. Ogden's image of
interaction is one of interpenetrating permeability. In Ogden's (1994) words, “You must allow me to occupy your thoughts; I must allow myself to become your thoughts” (p. 1). In this process, the two partners jointly create something new, emergent: “the intersubjective third.” The analyst's own ability to evoke, contain, and transform the patient's non-symbolized and dissociated states into symbolized communications is a central form of therapeutic action relatively more emphasized by Ogden than by others. In this way Ogden emphasizes the analyst's

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2 Ehrenberg (personal communication, April 14, 1999) notes that she uses the history of her own experience, as well as that of the patient, more than Mitchell (1997) suggests in his description of her theory.

self-regulation process: his inner states, associations, somatic sensations, and reveries.

We note that Aron (1996) also describes Ogden (1982, 1994) as emphasizing the dialectical nature of intersubjectivity, but he criticizes Ogden for not holding a view of analytic participation as mutually influenced from the beginning. Aron notes that Ogden gives the impression that his own subjectivity is reactive to the patient.

Figure 3 depicts Ogden's model of interaction with a darkened line representing the patient's impact on the analyst, but the reciprocal line of influence from analyst to patient is not darkened. It is present but does not carry as much emphasis. The history of the patient's influence on the analyst is represented by the dotted line. As in the drawing for Jacobs, the line representing the analyst's self-regulation process is darkened far more than the patient's self-regulation process. However, for Ogden, the analyst's current self-regulation process is more darkened than the dotted line representing the history of the analyst's past modes of inner regulation; whereas, for Jacobs, the history of the analyst's self-regulation carries just as much weight as the current process of self-regulation.

**Illustrations of Interaction and Forms of Intersubjectivity in the Psychoanalytic Theories of Benjamin and Stolorow and Colleagues**

**Models of Interaction in Psychoanalysis: Benjamin and Stolorow et al.**

To continue our illustration of different theories of interaction underlying varying current views of intersubjectivity in psychoanalysis, in Mitchell's (1997) spirit of arguing that there are many authentic modes, we draw on comparative analyses of Jessica Benjamin (1988, 1992, 1995, personal communication, July 20, 1998) and Robert Stolorow and his colleagues (Stolorow, Brandchaft, and Atwood, 1987; Stolorow and Atwood, 1992; Stolorow, 1997; personal communication, April 10, 2001) by Knoblauch et al. (1999). Although both Benjamin and Stolorow and his colleagues work with a theory of interaction, they differ in their use of a systems approach and in their definitions of interaction. Viewing each theorist within the lens of our systems model of interaction, we have indicated in Figure 4, by the darkened

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lines, those routes of influence which are relatively more emphasized by each theorist. These relative emphases are points of distinction for purposes of comparison only and do not imply that other dimensions of their theories are not also important or even central.

Aron (1996) has also compared Benjamin and Stolorow et al. in their use of the concept of intersubjectivity. Aron sees Benjamin as using the term to describe a developmental achievement in which analyst and analysand mutually recognize the other's subjectivity. In Aron's view, Stolorow and colleagues use the term as synonymous with the principle of mutual regulation and unconscious influence. Although both Aron and Mitchell have made important comparative analyses (see also, for example, Teichholz, 1999; Gerhardt, Sweetnam, and Horton, 2000; Frie and Reiss, 2001), here we focus on the different uses of a systems approach and the different aspects of interactive experience emphasized by these theorists of intersubjectivity, Benjamin and Stolorow and his colleagues.

Benjamin. Influenced by Winnicott, Hegel, Mahler, and Stern, Benjamin (1995) defines for psychoanalysis the task of mutual recognition: “both analyst and patient make known their own subjectivity and recognize the other’s” (p. xii). The developmental process of mutual recognition of self by other and other by self defines Benjamin’s interactive focus. Analyst and analysand construct a sense of being a subject through the dialectical process of identifying with and differentiating from the other, the result being an expanded sense of self for both. When the patient recognizes the analyst's identification with her, that is an important step in differentiating the analyst from internal objects, the “new” from the “old” self-other experience. Working with develop-mental levels in the recognition process Benjamin holds that in the earlier stages of the treatment, the analyst's recognition of the patient's
subjectivity is essential. But in the key mutative moment of therapeutic action, Benjamin places a greater relative emphasis on the patient's recognition of the analyst as an outside other with her own separate center of emotion and subjectivity, not under the patient's control, although both analyst and patient must struggle to do this. The recognition and acceptance of the other as a subject with his or her own independent center, goals, and desires, is quite different from simply accepting that other disappoints, or wins. The goal is the restoration of recognition after its breakdown, which includes re-establishing the tension between differences and sameness, negation and recognition. Such restoration increases the patient's sense of agency and ability to contain pain and loss. Although theoretically both the patient and the analyst participate in a recognition of the other in Benjamin's model, the patient's reorganization of recognition is relatively more emphasized more than is the reciprocal reorganization of the analyst's recognition.

In Figure 4, Benjamin's model of interaction is depicted by a darkened line representing the analyst's impact on the patient in the therapeutic action. The reciprocal line of influence from patient to analyst is present but not darkened: it does not carry as much emphasis (although in the developmental process of the treatment, this line of influence was initially central). The recognition process can be conceptualized as a self-regulation process, as well as an interactive one, and the patient's reorganization of subjectivity in the recognition process is represented by a darkened line representing the patient's self-regulation. The dotted line, representing the history of the patient's self-regulation, is also depicted to represent Benjamin's work with the history of the patient's difficulties in recognition. The line representing the analyst's self-regulation is not darkened. Benjamin's model stands in contrast to the emphasis on the analyst's experience of his or her own subjectivity, and the emphasis on the patient's influence on the analyst, as described earlier for Jacobs, Ehrenberg, and Ogden.

Stolorow and Colleagues. Influenced by Gadamer (1979), Murray's (1938) personology, and Tomkins's (1962, 1963) work on affect, Stolorow and his colleagues, George Atwood, Bernard Brandchaft, and Donna Orange argue that the organization of experience is always embedded in, or contextualized by, a larger system, the “field.” Their approach to interaction is the field, created by a continuous process of mutual influence between analyst and patient. Intersubjectivity is defined as the psychological field formed by an infinite variety of forms of interaction as two differently organized subjectivities collide with, interface with, and affect the other (Stolorow, 1997). Describing the key mutative process, Stolorow and colleagues (Stolorow and Atwood, 1992; Stolorow, Atwood, and Brandchaft, 1994) place greater relative emphasis on the analyst's experience of the patient's subjectivity, rather than on the analyst's experience of his or her own subjectivity or the patient's experiences of the analyst's subjectivity. As the analyst conveys his experience of the patient's subjectivity, the patient comes to feel deeply understood. The analyst is influenced by the patient in grasping the patient's experience. The analyst then attunes or resonates with the patient's experience, which we characterize as both a self-regulation

Figure 4. Models of Interaction in Psychoanalysis: Benjamin and Stolorow et al.
Mutual recognition is a dialectical process of negation and recognition of the other, expanding the sense of self for both. The patient’s recognition of the analyst’s subjectivity as separate and different is relatively more emphasized in the therapeutic action.

Comparison of the theorists. As Atwood and Stolorow (1974) argue in their book, Faces in a Cloud, each theorist brings a different history and lens to a conceptualization of the central dynamic of therapeutic action. Through mutual recognition, to be separate and recognized as different (Benjamin); through a mutual-influence process and affect attunement, to be deeply understood (Stolorow et al.); to be understood through the parallel conflicts of analyst and patient (Jacobs); to be more fully alive through a new, mutually generated experience (Ogden); or to be able to be engaged intensely and reciprocally in the present moment (Ehrenberg)—all are different themes of these theories of intersubjectivity. We suggest that they describe different forms of intersubjectivity. In addition, all emphasize different aspects of a theory of interaction. The advantage of working with a systems view of interaction is that all routes
to self-and interactive regulation can be seen and held in mind. The broadest view is one in which all routes are potential pathways to therapeutic action, at different times, with different patient-therapist dyads.

While all the theorists we have described conceptualize the significance of two subjectivities in interaction and the key importance of the dyad in relation to the individual, each emphasizes a different focus as central to therapeutic action. Stolorow and Jacobs emphasize the analyst's experience of the patient's subjectivity. Ogden emphasizes the analyst's experience of her or his subjectivity. Benjamin emphasizes the patient's experience that there are two separate but similar subjectivities. Ehrenberg emphasizes the analyst's and the patient's experiences at the "intimate edge" of intense engagement. We need an integration of all these views for the broadest vision of the forms of intersubjectivity in psychoanalysis.

From this brief review of various theories of adult intersubjectivity in psychoanalysis, we conclude that from theorist to theorist, different relational themes are emphasized and different routes of the dyadic systems view of interaction are accentuated. Each theorist, however, works primarily with the analyst's and the patient's capacity to symbolize and verbalize experience. The one exception may be Ogden, who also accords a central role to the sensation-based "autistic-contiguos" mode (but who does not work with any of the data of)

empirical infant research on the face-to-face exchange). Thus adult theories of intersubjectivity in general assume a symbolic mind and the dominance of explicit processing.

In contrast, theories of intersubjectivity in infant research work with an implicit, procedural dimension of communication, including gaze, facial configurations, spatial orientations, touch, posture, and the prosodic and rhythmic dimensions of vocalization. Furthermore, infant theories of intersubjectivity work with a presymbolic mind and implicit processing. We turn to this topic in Paper II.

Returning to a central theme of these four papers—the complex, elusive, and potentially confusing meanings of the term intersubjectivity in psychoanalysis—we propose that there are three major sources of this confusion. First, the confusion stems from the varied definitions that each theorist (of infancy or adulthood) accords the term. Second, different theorists of adulthood and infancy use different aspects of the systems view of interaction. We have briefly illustrated varied definitions of the term intersubjectivity and different uses of the systems view of interaction in adult psychoanalytic theorists. Paper II reviews the same issues in the infant theorists. Third, this confusion has been confounded by the use of the identical term, intersubjectivity, to describe both the presymbolic and the symbolic mind, and different levels of symbolic development or "theory of mind" in the young child, to which we now turn.

Levels of Cognitive Development and Intersubjectivity

Presymbolic and Symbolic Forms of Mind

Forms of intersubjectivity are dependent on levels of cognitive development (see Lewis, 1995, 1999). One fundamental difference in the meaning of the term intersubjectivity as used by adult theorists as compared with infant theorists is the level of cognitive development assumed. A symbol has an arbitrary relation to its referent (Werner and Kaplan, 1963). Symbolic forms of cognition begin toward the end of the first year (Piaget, 1954; Mandler, 1988, 1991). However, the rudimentary achievement of a symbolic intelligence is not completed until approximately age three, and many other transformations occur prior to adult forms of symbolic intelligence. An infant's presymbolic intelligence is organized around action schemes and expectations of how action and "interaction" sequences unfold in time and space from moment to moment, with accompanying affect and arousal patterns (see Stern, 1985; Mandler, 1988; Beebe and Lachmann, 1994). Thus the perception of correspondences and behavioral matching described by the infant theorists in Paper II is made possible by the mind of an infant who detects temporal and spatial features of stimuli, creates expectancies of how action sequences proceed from moment to moment, and has a rudimentary memory of these sequences.

In contrast, the adult theorists of intersubjectivity assume a symbolic mind capable of perceiving that the partner's mind is potentially organized differently from one's own. Whereas the infancy theorists focus on correspondences, as described in Paper II, for the adult theorists the perception and negotiation of the differently organized mind of the other is central, as we have seen, and the role of correspondences is to varying degrees in the background.

Theory of Mind in Early Childhood
Although the distinctions between presymbolic and symbolic forms of mind are critical to further differentiations in the way we use the term intersubjectivity, another set of distinctions in early childhood “theory of mind” is equally essential. Research on theory of mind provides further distinctions in children's developing symbolic capacity.

Research on children's developing theory of mind shows that the capacity to appreciate the differently organized mind of the other develops only gradually over the first four to five years of age. As early as age two, a child begins to have “inner state words,” which refer to emotions (Bretherton and Beeghly, 1982), indicating the initial capacity to reflect on the self. There is a growing consensus that children as young as three begin to develop a theory of mind, by which they distinguish between internal mental phenomena and external physical and behavioral phenomena and use theories to explore and predict people's actions and mental states (Flavell, 1988; Gopnik, 1990; Wellman, 1990; Flavell et al., 1991; Gopnik and Meltzoff, 1997). However, three-year-olds have difficulty understanding that beliefs can misrepresent reality. Wellman (1990; see also Flavell et al., 1991) describes the three-year-old's model of mind as a “copy-container model” that passively copies reality. In contrast, four-to-five-year-olds have a more “constructivist” model of mind; they see the mind as actively, and sometimes inaccurately, interpreting or constructing reality.

In a typical experiment, a child is presented with what looks like a box of candy. But inside there are crayons. The child is asked, what will the next child think? Whereas a five-year-old answers, “candy,” a three-year-old answers, “crayons.” Goldman (1989) suggests that three-year-olds have trouble imagining mental states that contradict their own and thus exhibit difficulty with the false-belief tests. By contrast, five-year-olds can imagine having the beliefs and desires of another person and can mentally simulate another person's feelings and behaviors. Five-year-olds understand that individuals may perceive an object in different ways, depending on their line of sight (Piaget, 1954). They also recognize that beliefs dictate a person's emotional reactions to particular situations, such as expressions of surprise at discovering crayons in a candy box (Gopnik, 1990). Different explanations of these evolving capacities have been proposed (see Baron-Cohen, 1991; Gopnik and Meltzoff, 1997). For example, one viewpoint is that four-and-five-year-olds change their theory of mind owing to the emergence of the ability to reason first from one perspective and then from another, incompatible perspective; thus they recognize the possibility of different organizations, or multiple perspectives, which do not easily resolve (Flavell, 1988; Flavell et al., 1991; Frye, Zelazo, and Palfai, 1995; Frye, Zelazo, and Burack, 1998). Despite differences in experimental design and views on exactly which capacities emerge at which age, there is extensive evidence and agreement that not until a period distinctly later than infancy do children develop the capacities necessary for grasping that minds are perspectival and subject to error.

If a child's theory of mind does not become sufficiently “constructivist” to be able to reason about incompatible perspectives on the same object until approximately age five, then the recognition of differently organized minds is not possible until this point. Thus forms of intersubjectivity that could be constructed in the mind of a neonate, as described by Meltzoff (1985) or Trevarthen (1980), or toward the end of the first year, as described by Stern, presented in Paper II, are profoundly different from the forms of intersubjectivity that might be possible for a five-year-old or an adult. Presumably many other transformations of the symbolic mind, most notably the logical operations of adolescence described by Piaget (1954), contribute to an adult's capacities to perceive and appreciate a differently organized mind. Lewis (1995, 1999; see also Ruesch and Bateson, 1951) suggests the following distinctions: in the first year, the infant is capable of “knowing”; in the second year, the toddler is capable of conceptualizing, “I know that I know”; by approximately age five, the child can conceptualize, “I know that you know” (or I know that you do not know); and the adult can conceptualize, “I know that you know that I know” (although perhaps this conceptualization is achieved in childhood; see Harrison et al., 1998).

Thus, it is essential to define forms of intersubjectivity in relation to levels of cognitive development. Forms of intersubjectivity in the first year cannot make a contribution to one central issue of adult forms of intersubjectivity, that is, the perception of a differently organized mind at the symbolic level. This is a fundamental difference in the meaning of forms of intersubjectivity in infant research and in adult psychoanalysis. However, as we see in Paper III, infant research certainly can address a range of other issues in forms of intersubjectivity relevant to psychoanalysis. In the treatment case described in Paper IV we revisit the distinction between a “copy-container” and “constructivist” theory of mind.

In conclusion, as we have seen among adult theorists of intersubjectivity, and as the next paper describes within infant theorists, there is no single meaning for this complex, yet central term. Owing to the vast differences between a symbolic and a presymbolic mind, we discourage the use of the same term across infancy and adulthood, and instead we recommend the term forms of intersubjectivity within each realm. Psychoanalysis needs to conceptualize forms of intersubjectivity that distinguish between a presymbolic and a symbolic mind, that distinguish between a “copy-container” and a “constructivist” theory of mind in the child's
emerging symbolic development, and that encompass both an explicit symbolized verbal mode of processing and an implicit, procedural, and emotional mode.

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