Commentary on Paper by Lauren Levine

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Shame isn’t always the enemy, sometimes it’s the informant.

Having spent the last decade exploring creative processes in psychoanalytic treatment, it is a pleasure to have the opportunity to expand upon some of Dr. Lauren Levine’s ideas in her paper “Into Thin Air: The Co-Construction of Shame, Recognition, and Creativity in an Analytic Process.” I was immediately drawn to the multiple elements of her thesis, including (a) that contemporary psychoanalysis measures movement in treatment principally by tracking how its process is either opening up or closing down vitality; (b) that the degree to which a patient has access to his creative and imaginative process correlates to the therapist’s variable and shifting receptivity to her own imagination and creativity; as such, (c) that creativity embodies experiences that are both solitary and co-constructed; and finally, (d) that a key focal point of psychoanalytic process is to take up conditions that tend to close down creativity in one or both participants, of which shame can be an especially noxious culprit. Shame, as Levine notes, is implicated in the blocking of an individual’s memory, in constraining one’s creativity via a chorus of critical “inner voices” and finally, in becoming the proverbial “hot potato” that both analyst and analysand toss back and forth (while trying not to be burnt too badly), the result of which is to potentially shut down the creative and vitalizing potential of both. And, on a separate note, as the epigraph to this article argues, sometimes it is useful for us to consider that shame is not always the enemy, but rather, on many occasions, the informant; at least that is, when properly analyzed.

I believe that Levine’s paper provides an opportunity to examine how two traditions of contemporary psychoanalysis have addressed the role of vitalization of psychoanalytic process, while also being suggestive of how these traditions converge and diverge. The two of which I am speaking are, first, Kohut’s self psychological theory, along with its relationalized version captured in intersubjective systems theory, and second, relational psychoanalysis. While the relational tradition informs the focus of Levine’s arguments, I am introducing the self psychological/intersubjective systems theory tradition to highlight similarities and differences in the two traditions that enable us to better navigate the intricacies of a case like that of Levine’s work with her patient Julia. Of particular interest is to examine how that which Levine describes as the “intricate dance” (Seligman, 2009) of her work with Julia can best be understood. But first, it is necessary to briefly capture something of their work together.

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Levine describes her patient Julia in a manner that strongly suggests she is someone of whom Levine is quite fond. She is immediately taken by Julia’s artistic creativity and as a consequence is captivated by the tragedy of Julia’s truncated capacity to actualize her artistic abilities. In taking Julia’s tragedy to heart Levine clearly becomes deeply invested in helping Julia overcome her constrictions. I think that we can all relate. There is something of a nascent pull to becoming especially invested in helping patients with their truncated creativity. Perhaps, a pull more powerful than we might imagine concerning the balance sheet obsessions of a certified public accountant, or a middle-management-level patient tormented by the managerial squeeze of negotiating life between his superiors and his inferiors. Not that these patients should matter less to us, but there is something in the abortion of the spontaneous gesture and artistic endeavors of the creative patient that echoes a collective heartbreak, perhaps because it reflects some agonizingly familiar moment in childhood when the precious tendrils of creativity within any of us were trammeled beyond recognition. That certainly was the case for Julia, as evidenced by how Levine describes her:

As the youngest child in her large, San Francisco family, she felt invisible and unheard, as if she didn’t have a voice. Her parents divorced when she was quite young, and Julia felt lost in a sea of separation, re-marriage and the creation of new families. In her dynamic, intellectual family, she tended to withdraw, to opt out rather than try to compete with her siblings for their parents’ and step-parents’ attention. Her earliest memory is lying in her crib next to a window with the wind blowing the curtains, straining to decipher whispering voices she could not comprehend. Julia experienced her mother as mysterious and inaccessible. She did not feel mirrored or recognized [emphasis added] by her mother, leaving Julia unsure about her own feelings or desires and how to translate those desires into action. (p. 457)

The operative developmental construct that captures the profundity of neglect in Julia’s upbringing is “mirroring.” “Mirroring” was of course one of Kohut’s three developmentally requisite selfobject functions (including “idealization” and “twinship”) essential to the development to an integrated experiential sense of self. Wolf (1988) described “Mirroring needs” as “a need to feel affirmed, confirmed, recognized; to be feeling accepted and appreciated, especially when able to show oneself” (p. 55).

The crippling absence of “mirroring” clearly defines an essential aspect of the case of Julia. Just as compelling in this case is the evidence that Levine, though not a self psychologist, went to great lengths to provide this requisite selfobject function to her patient. What makes this case all the more fascinating, then, is how her provision of “mirroring” so often egregiously backfired, and how, in its rejection, Levine experienced her own sense of “palpable loss” along with missing the “shared, mutual pleasure of vitality and creativity” that her provision of “mirroring” ostensibly might have provided. The potentially last straw of palpable rejection came with Levine feeling “dropped in the face of the threat of the loss of (their) relationship” (p. 457).

According to the self psychological and intersubjective systems theoretical tradition, the attuned, empathic provision of missing selfobject functions leads to the fostering of cohesion, continuity, and worth ameliorative of an archaically defective sense of selfhood. Furthermore, when the analyst fails in this provision, the repetitive, resistive pole of transference is triggered (Stolorow, Brandchaft, & Atwood, 1987) until, that is, the analyst correctly, empathically attunes to the meaning and impact of her failing. When successful, this secondary, empathically attuned selfobject provision repairs their rupture and restores the patient’s experience of
feeling understood. Accordingly, this lends to a process of *transmuting internalization*, which cultivates a process whereby the *self-selfobject transaction* [is] “internalized under the pressure generated by optimal frustration” (Wolf, 1988, p. 187). The historical body of self psychological and intersubjective systems theory case illustrations provides convincing evidence that in many cases of archaic narcissistic disturbance, this process works. Levine’s work with Julia, however, evinces circumstances in which this formulation appears to be contradicted.

For many years, being an advocate, practitioner, and adherent of both the self psychological/intersubjective systems theory and relational psychoanalytic traditions, I have wondered how cases like Levine’s can be understood. I have found Slavin’s formulations regarding evolutionary psychology, most informative in that understanding. Slavin (2007) wrote,

> The process of using the otherness of the analyst is inherently more conflictual in certain respects than, as I read it, any version of the notion of the selfobject, as it has been developed within the self-pyschological and intersubjective systems paradigms. This is because the probing for otherness that I am describing entails a bit more active *taking apart, or breaking down of aspects of the analyst’s subjectivity*—a process that entails more of some type of adaptive aggression than anything that is encompassed by the ways we usually conceptualize the signaling and provision of selfobject needs.

(p. 26)

To understand Slavin’s argument, one must understand something of his theory about the place of evolutionary psychology in contemporary psychoanalysis. Slavin (2007) noted that approximately 150,000 years ago, when our predecessors started to develop language and the capacity to communicate via symbols, an extraordinary divide arose between human beings raw experience and their capacity to reflect upon and linguistically communicate their experience. As these cognitive processes evolved, there became a greater capacity of individuals to reflect upon their experience, hence the emergence of a newer complex sense of self than had been heretofore known in the animal kingdom. In so doing, human beings encountered the beginnings of psychosocial conflict. That is, that self defining needs and desires frequently did not correspond with those dictated and prescribed by the group, family, tribe, community, society, culture—whatever variant of affiliation comes to mind. Managing this conflict thereafter often involved the denial of selfhood strivings in the form of “self deception,” notably managed by such key ego defense mechanisms as repression and dissociation. And yet, notwithstanding these unconscious mechanisms, there remained an implicit sense of conflict between the emerging human subjects felt sense of self and the dictates of whatever tribe of which they were a part. In many respects this echoes Freud’s essay on “Civilization and Its Discontents.”

Coupled with adaptive “self deception,” however, is also an implicit sense that others of one’s tribe also may be disposed to their own self-deception, hence, the evolving psychosocial conflict also created a sense of “adaptive skepticism” about the authenticity of the other. As a consequence, Slavin argued, there can be an expectable degree of aggression involved in self-assertion, including the need to challenge the authenticity of the others’ assertions. When seen in light of the analytic dyad, a potential field of confrontation evolves, one involving the competition of needs and desires of both analytic participants, especially in terms of recognition of their authenticity. I believe that Slavin’s ideas are especially useful in the case of Levine and Julia.

Given her clear investment in helping her patient, it is not a great leap to imagine that Levine was vulnerable to Julia’s rejections of her “mirroring,” which repeatedly culminated in what she describes as a “dyadic engagement/disengagement and an opening or closing down of aliveness
and access to her own creative process,” and clearly Levine describes her own comparable experience of closing down, one that heightened her own understandable self-doubts as Julia’s analyst. Levine writes,

There was a sense of feeling momentarily held and then dropped, leading to a sense of shame and a “crushing” of self, and despair. Immediately following those moments of connection, perhaps unconsciously I became her preoccupied, unavailable mother who could not be relied upon for affective recognition, and she reacted, understandably, with mistrust and anger. I too felt a sense of shame for experiencing and trusting in the mutual connection and then having it denied by her. It felt as if she was pulling the rug out from under me, or perhaps, out from under both of us! This too would be repeated over time in the treatment, before we could understand and deconstruct it in a meaningful way, and before we could recognize and name the critical role of shame in the dynamic. (p. 458)

It is under these circumstances that Levine, ascribing to a relational tradition, spoke of their ensuing enactment (Bass, 2003), which elsewhere I have described as conditions formulaic of states of “mutual inductive identification” (Ringstrom, 2008b, 2011, in press). Quoting Aron (2003), Levine writes, “Enactments may well be a central means by which patients and analysts enter into each other’s inner world and discover themselves as participants within each other’s psychic life, mutually constructing the relational matrix that constitutes the medium of psychoanalysis” (p. 463).

On this latter note, we see a divide between the self psychology/intersubjective systems theory tradition and that of relational psychoanalysis. The former tradition involving the critiques of Stolorow, Orange, and Atwood (2002) and Jacobs (2010) generally criticizes what the latter one sees as an essential and inevitable role that enactments (“mutual inductive identifications”) play in an analysis.1,2 It is in her description of their enactment that Levine unveils a powerful “now moment” (Stern, 2004) that seems pivotal to their analysis. Levine writes that a couple of years into their therapy,

as she was feeling closer to me and beginning to gain more confidence in her creative self, Julia decided to show me some of her drawings. I felt quite moved that she wanted to show me her artwork after all the time we’ve spent talking about her struggles in this area. She seemed genuinely engaged too, taking pleasure in my responses and appreciation of her work. I looked forward to processing this intimate, shared experience in our next meeting. (p. 463)

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1There are exceptions within this tradition including Lachmann (2008) and Lichtenberg, Lachmann, and Fosshage (1996).
2Lachmann (2008) wrote, “Usually in discussion of enactments one can discern a patina of criticism attached to the use of the concept. There is a sense that an enactment should not have occurred but that, once it has, perhaps we can learn something about the patient (and ourselves). So maybe it was useful after all. In addition, too often ‘enactment’ is how one therapist describes the work of another therapist to explain why that therapist’s patient got worse or got ‘spuriously’ better. Enactments are often used to describe some ‘unanalytic’ behavior by the therapist and patient that reeks of transference-countertransference. In usual discourse, enactments are constituted by verbal, symbolic elements, representative of a dynamic unconscious, and as requiring verbal exploration and interpretation and negotiation for their resolution. However, Karlen Lyons-Ruth’s proposition that certain kinds of procedural knowledge can only be expressed through their being enacted leads to a broader view of enactments in the clinical setting. In this view the potential for enactments is ever present. Enactments may constitute communications on a procedural nonverbal level and serve as a legitimate (perhaps only) way in which the patient can reveal non-conscious, implicit relational themes” (p. 220).
It isn’t hard to imagine Levine’s enthusiasm in being invited to see her patient’s work or to fathom that she might imagine that her affirming “mirroring” of it would begin to foster some of the developmental growth sorely missing in Julia’s development and that the self/object provision of “mirroring” would seemingly predict. It is equally not difficult to imagine how crestfallen Levine would feel in their ensuing session when Julia responded in what could be seen as an iteration of Groucho Marx admonition, “I don’t want to belong to a club that would accept me as a member.” Instead of relishing her analyst’s praise, Julia responded angrily. Indeed, she became distrustful of Levine’s reaction becoming “devaluing [of Levine’s] artistic aesthetic, once again distrustful of [Levine’s] genuine interest and appreciation of her art” (p. 463). Further disavowing their mutual connection in a manner that Levine had felt “so palpably" Julia proclaimed “that [Levine] only told her what [Levine] believed she needed to hear, just doing [her] therapeutic duty.” Levine’s reaction was equally palpable, writing: “I felt shocked, abandoned, confused . . . and affectively destabilized by having an experience seemingly shared with her, so flatly denied by her” (p. 463).

Such disruptive clinical moments are definitive of how the two traditions address their relationship to the construct of “mutual recognition” versus its dialectical opposite, “mutual negation” (Benjamin, 2004). Arguing against the fundamental place enactments hold in the relational canon, Jacobs (2010), describing the intersubjective systems theoretical canon, asserted that “where a relationalist might want to use the concept enactment to guide them in working with disruptive experiences that analyst and patient are having, the Intersubjectivists are likely to redouble their efforts to refine their understanding of the patient’s experiential world” (p. 227).

Here is where I see a divide in the two aforementioned traditions. In contrast to the Self Psychological and Intersubjective Systems Theory tradition, relational psychoanalysts would more likely see a rupture of the kind in evidence in Levine’s vignette as a necessary part of the process, especially when that which cannot be gotten to through empathic attunement must be enacted. In their enactment, I believe that both Levine and Julia felt misrecognized and negated—the patient for what it is she is saying about her experience and for Levine in terms of what understanding she is attempting to bring to bear about their engagement. An enactment of this sort sets the stage for examining their misunderstanding, as well as how their mutual misinterpretations are plunging them—at least for the moment—into a state of mutual negation, wherein neither one’s subjective experience is recognizable. Indeed, each can end up feeling objectified by the other, thereby constituting a state of nonintersubjectivity (mutual negation or mutual misrecognition), until that is, elucidation of each one’s subjective position is grasped (mutual recognition). The question becomes, does the analyst “redouble” her efforts to refine their understanding of her experiential world, or does she, as Reis (2010) noted of Mitchell (1997), feel that

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3The idea of relational states that are nonintersubjective is clearly a relational psychoanalytic one, which speaks of intersubjectivity as a matter of developmental attainment (Benjamin, 1988; Stern, 1985), that is subsequently lost and found over and over as expectable episodes of self-assertion by either party may disrupt their sense of subject-to-subject relating versus subject-object. By contrast, intersubjectivity as defined by the intersubjective systems theorists (Stolorow et al., 2002) represents a universal constant in human experience. Intersubjectivity is for them defined as follows: “For us, intersubjectivity has a meaning that is much more general and inclusive, referring to the relational contexts of all experience, at whatever developmental level, linguistic or prelinguistic, shared or solitary, it takes form (Stolorow and Atwood, 1992). An intersubjective field is neither a mode of experiencing nor a sharing of experience. It is the contextual precondition for having any experience at all. (Orange, Atwood, and Stolorow, 1997)” (p. 85).
it is “crucial both that the analyst not pull rank and that he also hold his ground when necessary” (p. 228).

Emblematic of Levine’s implicit embrace of Slavin’s argument (though she evinces no knowledge of it) is that such moments, as Slavin intones, “entail a bit more active taking apart, or breaking down of aspects of the analyst’s subjectivity—a process that entails more of some type of adaptive aggression than anything that is encompassed by the ways we usually conceptualize the signaling and provision of selfobject needs (Slavin, 2007, p. 26).” Levine tells us that she believed that

there was something important in how we both held our ground, maintaining our different versions of what had happened, as we tried to build a tenuous bridge between us. While I did not submit to her disavowal of the intimacy and mutual connection, I tried to stay open and curious about her response to sharing her artwork with me. I wondered aloud about the ways in which she may have felt exposed or intruded upon by my appreciative responses to her artwork. Most importantly, I survived her aggression and devaluation of me and our work together (Ghent, 1992; Winnicott, 1969). But, all the while, I struggled to process my own feelings of abandonment and disappointment; feeling once again, unrecognized and dropped by Julia. (p. 463)

In her efforts to restore a sense of “mutual recognition,” Levine decided to introduce her subjective reaction to Julia’s rejection.4 Instead of attempting to restore her place in the selfobject transference Levine decided to risk engaging Julia in a subject-to-subject encounter. She writes,

I take a risk; decide to share my feelings with her. I tell her that, as she was describing feeling unrecognized and shamed by her father, I realized that shame is exactly what I had felt when she disavowed the shared intimacy and connection between us as she showed me her drawings. Julia is taken aback, and begins to cry, so rare for her. . . . At first, she feels concerned about hurting me, about evoking in me, an affect that is deeply familiar to her over a lifetime, the shame that she dreads. Then, as we explore her responses, she speaks of feeling grateful that I would share my own vulnerability with her, moved that she could have such an impact on me, and that I trusted her enough to tell her. For Julia, who had grown up feeling invisible and unheard, feeling like she could have an impact on me, that I could survive her aggression and not retaliate, and even more than that, be changed by her, was a revelation. (p. 465)

What I find so powerful in Levine’s clinical choice is her willingness to risk shaming her patient by pointing out that her patient is shaming her. Now it is crucially important to grasp, especially because “mutual recognition” can be easily misread and therefore misrepresented5 is that this is not in the service of restoring the therapist’s narcissistic equilibrium but about distinguishing the therapist’s subjective reality from the patient’s omnipotent fantasy version of who the therapist is.

4Levine’s actions underscore that in the relational psychoanalytic tradition, relationalists adhere to taking up both “truth as possible meaning” and “truth as correspondence to facts.” The intersubjective systems theorists (Slazarow et al., 2002) maintain that psychoanalytic practice must only embody the former investigation of truth (“as possible meaning”) and adamantly argue against the latter ever being an analytic consideration. Levine is clearly willing to confront, that is, to “argue,” the discrepancy between Julia’s assertion about Levine’s state of mind (and intentions) versus what Levine factually experiences of themself, that is, her own experience.

5Evidence of such misreading can be found in Orange (2008) and Stolarow et al. (2002). The implications of this misreading have been taken up by Benjamin (2010), Ringstrom (2010a), and Slavin (2010) and replied to by Orange (2010).
But what I find equally if not even more compelling is what happens when a therapist acts as Levine did; she systematically spreads the impact of shame over the shoulders of the dyad, without locating in one or the other (Ringstrom, 2011). Elsewhere, I have written that it is precisely this mode of engagement that restores the dyad’s capacity to play with their ideas, not to mention adheres to Benjamin’s (2004) idea of the “moral third” in which the analyst both takes responsibility for the impact of her subjectivity on the patients and enables the patient to grasp her impact on the analyst. In this manner, much as I posit in the epigraph, shame, as taken up by the analytic pair, moves from being the enemy of creativity to an informant of how it truncates that process in both, without either one ending up “holding the bag.”

Play, or what I refer to as an improvisatory mode of engagement in psychoanalytic treatment (Ringstrom, 2001a, 2001b, 2004, 2005, 2007a, 2007b, 2008a, 2008b, 2010b, 2011, in press), involves the capacity for creatively playing-off-of-and-with ideas and feelings emergent both within and between the analytic partners. This form of play, which allows for the potential of spontaneity and authenticity in analytic engagement, also invites “adaptive skepticism.” This latter circumstance may well define why two such highly imaginative and creative participants can easily provoke conditions in which all this goodness must also be questioned. Indeed, much of what Levine describes of their clinical process is testimony to this angst.

In cases such as this one, where play or improvisation is challenged, clearly other avenues are needed for illuminating unconscious clinical material. That is, there needs to be some other means by which unconscious material can offer itself for play. For Levine and Julia, this involved the ineluctable role that the analysis of Julia’s dreams played in their work. An especially evocative dream that serves as a “central metaphor,” a kind of “model scene” (Lichtenberg, Lachmann, & Fosshage, 1992, 1996), is Julia’s dream of sitting on a porch, under which lush, beautiful plants grow, attempting to peek through the slats though “unable to grow and develop, to see the light of day” (p. 462). As I read the dream, the “slats” are symbolic of the critical “little voices” that inhibit her growth by squeezing out any ray of light, perhaps in this case “mirroring.” Levine and Julia seem to agree, seeing that this oppressive “porch” must be deconstructed for the lush growth of Julia’s creativity to burst forth. That is for Julia to finally “authorize herself as an artist” (p. 460).

Such deconstruction of course is easier said than done, for as Bromberg (1998) noted, “Each patient presents us with the illogical wish—the wish to stay the same while changing” (p. 170) and “The patient says, ‘I fully expect you to try to cure me and I am prepared to defeat you. I don’t have an illness; I am my illness and I won’t let you cure me of being who I am’” (p. 208). As a result, it is all the more courageous of Levine to hold her ground with Julia “taking an emotional risk, a leap of faith perhaps, by being open and vulnerable with Julia about her impact on [Levine] that allowed Julia to let her guard down as well (Ehrenberg, 1992, 1996)” (p. 464). I believe that it is in this manner that Levine is indicating that the shame that seems to encumber both of them actually can be turned into something important that informs both of them. This I believe is a result of softening the power of shame to such a degree that the dyad can begin to recognize that which their mutually constituted shame is keeping them from seeing. Levine’s clinical report appears to support this. She writes,

As we begin to access and deconstruct the degree of shame that she internalized at any early age, more specific memories of her mother and their time together become available to her. Julia and I begin to weave together a shared narrative history about her early life, especially with her mother: her mother’s cool detachment, her unpredictable anger, Julia’s anxious sense of never knowing which mom she would find. . . .
As Julia is able to gain access to memories, her perceptions of her mother are changing as well. Other narratives are emerging. Julia visits her mom, who, suffering from Alzheimer’s, literally does not recognize her. But to Julia’s surprise, there is a peacefulness as they listen to Ella Fitzgerald together, while her mother lies in bed. Julia tells me, it’s almost like they are mother and baby, but with the roles reversed. These benign, quiet moments of joining, the experience of being alone in the presence of another (Winnicott, 1958) are reminiscent of her most intimate childhood memory with her mother: reading silently together, each with her own book, in their living room, not talking or interacting, just being together.

[And it is in] coming to terms with the “lack” in parenting and the pain it caused, the difficulty in finding a true self, is allowing Julia to mourn the mother she didn’t have, the idealized mother. She is beginning to forgive her mother and make peace with her limitations, to recognize what is possible to share in their remaining time together (Harris, 2009; Loewald, 1979). As Harris (2009) suggested, “Return and repetition are always elements of change. . . . There is melancholy, a sense of loss and sadness that weaves through change” (p. 4). (p. 466)

Their ability to now tolerate their experience of shame enabled Julia to now see that it is connected to her own palpable sense of “not being ‘recognized’ as a child” (p. 21), which makes shame now something to which Levine can associate freely, without its normal inhibition. Levine reported that she began feeling “immersed in [Julia’s] sadness [and] resonate[d] with her grief” (p. 466). This creates noticeable shifts in Julia’s self-states, no longer so readily doubting herself and feeling “deflated and dispirited” but instead beginning to co-create a narrative of her childhood that also allows her to experience (to recognize) Levine differently than she heretofore had been able to. All of this sets in place a new playground in which new dreams emerge. Of course, trust in Levine continued to be repeatedly questioned; however, rather than in the devitalized way, Julia’s challenges readily led to opening up new memories, new grief, new awareness, and new creativity.

The pièce de résistance manifests in the actualization of play in their treatment (an improvisatory mode of engagement), which I believe can be taken as a strong measure of a profound shift in Julia’s sense of safety and trust in Levine. Levine cogently notes, “The edge of growth is always vulnerable” (p. 468). Beginning to overcome her penchant to defensively use cynicism to hold Levine in abeyance, Julia spontaneously engages in a moment of mischievous play, the kind far more persuasive of a genuine shift in trust and connection than any verbal commentary would convey. Noticing a small white price tag sticker on her lap on which there is no price, Julia removed it and, sitting up at their session’s end, walked over and gently stuck it on Levine’s forehead, commenting, “Priceless.” Levine understandably writes,

I am enormously touched by this gesture, which feels simultaneously intimate, playful, and mischievous. Julia takes a risk by spontaneously reaching out, physically and emotionally, irreverently crossing boundaries, trusting that I’ll receive this gift in the generous spirit in which it was offered. (p. 468)

Levine’s work with Julia is I believe testimony to those occasions in which the place of the analyst’s alterity is crucial if the patient is overcome a profound obstacle involved in being “adaptively skeptical” of the therapist’s goodness. I also believe that our grasp of the crucial importance of such occasions is critical in contemporary psychoanalysis. More contemporary modes of psychoanalytic theory and practice have come to recognize the efficacy of provisions of all sorts moving far beyond and even challenging the three pillars of psychoanalytic treatment, abstinence, anonymity, and neutrality. Cardinal among such provisions includes selfobject functions that can
restore derailed development and lend a hand to the creation of the patient’s greater sense of self cohesion, continuity, and worth. Clearly the extraordinary emphasis of empathic attunement in the self psychological and intersubjective systems theoretical persuasions are logical extensions of all of this goodness.

In a sense, there has been a grand shift at least in some parts of contemporary psychoanalysis wherein the Freudian tradition of the hermeneutics of suspicion (which would regard “self-deception” and “adaptive skepticism” as important considerations) have been replaced by the hermeneutics of trust, a seemingly far more Rousseauian tradition supportive of the conviction that by nature man is borne good and by nurture is ruined. Accordingly, it is by the nurture of psychoanalytic treatment that he is mended. Sometimes there are cases that unfold in this manner, but there are also cases, like that of Levine’s, that require the brokering of what Mitchell argued as a kind of both/and engagement. In this case, Levine conscientiously tries to supply the nurture, the “mirroring” that was so abysmally absent in Julia’s upbringing, but for it to really take on meaning, and to be useable by Julia, Levine’s best of intentions must be attacked. In short, the hermeneutics of trust must work hand in hand with the hermeneutics of suspicion if the former is to have any salient effect.6

REFERENCES


6 This polarity in hermeneutical positions is elaborated upon in Paul Ricoeur’s (1970) Freud and Philosophy: An Essay on Interpretation.


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