STANDING IN THE SPACES

Essays on Clinical Process, Trauma, and Dissociation

PHILIP M. BROMBERG

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PSYCHOANALYSIS, DISSOCIATION, AND PERSONALITY ORGANIZATION[1] (1995)

If one wished to read the contemporary psychoanalytic literature as a serialized Gothic romance, it is not hard to envision the restless ghost of Pierre Janet, banished from the castle by Sigmund Freud a century ago, returning for an overdue haunting of Freud's current descendants. With uncanny commonality, most major schools of analytic thought have become appropriately more responsive to the phenomenon of dissociation, and each in its own way is attempting actively to accommodate it within its model of the mind and its approach to clinical process. A pivotal concept in the birth and development of interpersonal psychoanalysis (Sullivan, 1940, 1953) and "independent" British object relational theories (Fairbairn, 1944, 1952; Winnicott, 1945, 1949, 1960a, 1971d), dissociation continues to receive its most active clinical and theoretical attention from contemporary analysts whose sensibilities most directly represent one or both of these schools of thought (e.g., Bromberg, chapters 5, 8, 10, 12–19; D. B. Stern, 1983, 1996, 1997; Smith, 1989; Mitchell, 1991, 1993; Davies, 1992; Davies and Frawley, 1994; Harris, 1992, 1994; Reis 1993; Schwartz, 1994; Grand, 1997). It has also found its way into the work of analysts

1. This chapter revises and expands the original version of the essay published in *Psychoanalytic Dialogues*, 1995, 5:511–528.

writing from a self-psychological orientation, particularly those interested in the phenomenology of self-states (e.g., Stolorow, Brandchaft, and Atwood, 1987; Ferguson, 1990) and has gained stature among Freudian analysts, both classical (e.g., I. Brenner, 1994, 1996; Kernberg, 1991; Shengold, 1989, 1992) and postclassical (e.g., Marmer, 1980, 1991; Goldberg, 1987, 1995; Gabbard, 1992; Lyon, 1992; Roth, 1992; Gottlieb, 1997). Cutting across the range of analytic persuasions, what is probably the most broadly accepted current understanding of dissociation has been well stated by Schwartz (1994, p. 191), who proposed that it "can be most simply understood as a self-hypnotic process that attempts to anaesthetize and isolate pain." "The mind," he wrote, "is essentially . . . fleeing its own subjectivity to evacuate pain."

Peter Goldberg (1995) has recently enriched the literature in this area with a challenging paper that in particular draws attention to the impact of dissociative processes upon the experience of psychosomatic unity. Goldberg maintains that where dissociative processes are in the ascendency the patient's experience of his body and of the immediate sensory world come to be inauthentic in specific ways, and that these inauthentic uses of the body and of the sensory experience in turn become part of the patient's overall personality integration. One can almost see adhering to his depiction the presence of a classical libido-theory remnant, in that ultimately he sees the body, or rather the experience of the body, as providing vitality to the self. This leads to his discussing personality organization when it is dominated by dissociative mechanisms in terms of what he calls "pseudovitality" resulting from the disturbance in psychosomatic unity. In connection with this last point, further, it interests Goldberg to point out that the phenomena he describes are not characterized by repression, in which bodily experiences might simply drop out, but by a kind of "de-repression," in which bodily and sensory experiences enter consciousness, but in an "inauthentic" way.

Notwithstanding this libidinized emphasis on the body, Goldberg's view of dissociation as a fundamental organizer of personality structure is a view that is relational in every real sense of the term: between individuals, between the individual and society, and within the individual's representational world. He presents the process of dissociation as a distancing of the mind from the sensory apparatus that manifests itself both symptomatically and as a defensive organization of mental structure; what he calls a "pseudointegration" of personality that embodies, when it is "successful," an absence of dialectic between thinking and perception that prevents symbolization of experience and robs selfhood of authenticity. Fundamentally, it is a model of how

dissociation leads people to use the field of mind-body relations (I/it relations) to enact conflicts that might otherwise be expressed as symbolized wishes and object relations. In the absence of symbolization, he argues, dissociated experience forces one's body and one's feelings to become "things" that "commoditize" the mind and damage its capacity for perception rather than, as Winnicott (1949) has expressed it, allowing "the psyche and the soma aspects of the growing person [to] become involved in a process of mutual interrelation" (p. 244) whereby the psyche-soma, rather than the head, comes to be the residence of the self.

Goldberg (1995) speaks of the phenomenon he labels "de-repression," as stemming from the "exploitative relation of mind to sensory experience" (p. 503) through which dissociation frees the libido without "censorship" from internalized social restraint. De-repression has relation to the libido opposite to that of repression and turns the libido into an instrument of "pseudovitality" whereby the psyche-soma becomes its slave and uses its aliveness as an antidote to depersonalization and deadness. The libido now has "user value" in that we use it and manipulate it without resolving or diminishing the "universal anguish of psychical conflict" (p. 508); we simply find new forms of gratification to stay alive. Goldberg's contribution is particularly important in this regard because it accelerates our delayed recognition that within the psychoanalytic process the enhancement of perception is the gateway to structural personality growth, a fact also recognized by Enid Balint (1993), who, in describing artists losing their capacity for perception, commented that "if their ability to perceive gets cut-off then they are finished; they can only repeat themselves. But their perceiving is terribly painful; don't let us forget that" (p. 235).

As a case in point, Goldberg (1995) presents a vignette about a complex clinical enactment between a patient and therapist, evocatively capturing the impact of dissociative processes upon the perceptual field and states of mind of both partners within an abruptly shifting interactional field:

> A patient with a family background of cruelty and abuse begins a session with an unusual tone of relaxed spontaneity, reciprocated in the therapist's own relaxed state of mind. Then, quickly, the patient falls anxiously silent, and a deadening and withdrawal in her state of mind becomes palpable to the therapist. Presently, the patient begins to report the circumstances of a perceived slight she felt at the hands of a supervisor at work, a man she hardly knows but admires from a distance. This was a very slight slight, mind you—he reportedly failed to acknowledge her enthusiastically. She

goes on to describe what followed: she became instantly dejected, and swamped with feelings of self-loathing and worthlessness; she felt physically unwell. To the therapist she catalogues the blows to her self-esteem occasioned by this slight. The sensations preoccupy her. She says she is wrapped around with the feeling and sensation of rejection. All the while, she is wringing her hands, pulling at her fingers. The therapist finds himself asking many questions that convey interest and even concern, but he is at the same time vaguely distracted by street noise and glare and a tiny spider spinning its web against a window pane [p. 494].

In his comments Goldberg succinctly portrays how the patient's emotionality has become a kind of cocoon that, among other things, denies the therapist the kind of access to her that he felt at the outset of the session. This results, in turn, in a change in the therapist's state of consciousness and compromises his ability to retain his perceptual focus on what is taking place between them in the here-and-now. In his portrayal of the event, Goldberg's relational sensibility asserts itself. He clearly recognizes that the therapist's response is contributing to an ongoing interaction that both recapitulates the patient's past experience and establishes a new form of experience at the same time.

Speaking as an interpersonal/relational analyst, I feel that this perspective describes accurately the basic interpersonal model of the psychoanalytic situation as a process of participant observation (Sullivan, 1954) in which the analyst's role is negotiated through a real relationship between two people. Because, however, the "self" is an interpersonal entity relationally structured as a multiplicity of self/other configurations that are developmentally "integrated" by an illusion of unity, the "real relationship" in any given analysis is, inevitably, an ever-shifting configuration of *multiple real relationships* in which dissociation plays a role in both the normality and pathology of the patient's original self-configuration and in the process of its therapeutic repatterning between patient and analyst. My own current thinking about the specific nature of these "multiple real relationships" in analysis has led me toward a detailed examination of the process of dissociation, an effort that has been fueled by my belief that its powerful clinical presence must be more directly engaged in a consciously consistent way for any given analysis to be far reaching and enduring. It is my perception that, within the clinical stance of participant observation, an analyst is in fact always relating to a diverse range of discrete and discontinuous self-states, regardless of whether he is aware of it, and that the next natural step in the evolution of our therapeutic efficacy entails thinking in these terms consciously and systematically

(see chapter 12). By so doing, an analyst will more easily recognize the moments of opportunity for access to direct relationships with otherwise dissociated self-states, thus building into the analytic process a fuller use of the transitional space through which connections may be intersubjectively negotiated between unlinked domains of self. Goodman (1992) has vividly captured this relational aesthetic in his statement that "what seems most effective is the ability to move freely between different complementary positions in response to a fast-moving interpersonal field" (p. 645). Once the concept of dissociation becomes entrenched within a therapist's clinical imagery, the hermeneutic process of analysis is shaped neither by interpretation nor by interaction per se, but by the analyst's effort to maintain dual citizenship in two domains of reality, with passports to multiple self-states of the patient (see chapter 10).

Consider again Goldberg's (1995) clinical illustration. He writes that immediately following the unusual tone of friendly spontaneity with which the patient began the session, the therapist perceived a subtle deadening of affect, a "ghostly" withdrawal, and an abrupt switch in her demeanor, her state of mind, and the content of her thought processes, as if she were suddenly "wrapped around with the feeling and sensation of rejection" (p. 494). Typically, this sequence of events is more "felt" than observed by a therapist because the therapist's own immediate self-state almost invariably switches when the patient's does. Inasmuch as they are sharing an event that belongs equally to both of them—the intersubjective field that shapes their immediate reality and the way they are experiencing themselves and each other—any unsignaled withdrawal from that field by either person will disrupt the other's state of mind. Goldberg in fact addresses this point when he speculates as to whether "the therapist's distracted mild preoccupation with sensory experiences of his own, reflects the countertransference analogue of the patient's withdrawal" (p. 495). (See also Ogden, 1994.)

Goldberg (1995) conceptualizes this sequence of events as the patient's retreat into an "invisible sensory cocoon" that functions smoothly in creating a "narcissistic world . . . that makes intercourse with other people both redundant and impossible" (p. 495). The cocoon, regardless of what personality style it embodies, is, I feel, an inevitability as soon as dissociation becomes necessary, because *consciousness will become inherently a cocoon unless it has access to a sufficient range of self-states to allow authentic interchange with the subjectivity of others. Without this flexibility, other people are simply actors in whichever mental representation of reality defines the self-state that exists at the moment.*

Whatever the patient's state of dissociated reality may be, the person to whom the patient is relating will be interpersonally "tailored" to fit the image of the necessary internal object. As a patient recently put it, "If all you have is a hammer, everything else has to become a nail."

In my view, the essential paradox in what Goldberg calls the seemingly "smooth functioning" of the "cocoon" is that the very nature of this form of "smoothness" is in the success of its disruptiveness. No matter how walled-off from intimate contact with others, the cocoon is a *dynamic* configuration. It is geared not only to deal with actual danger but also to disrupt any perception of life as a "safe harbor" by disrupting the potential growth of attachment, thus preserving the patient's vigilant readiness for disaster. This is why the experience of hope is felt as an enemy to such patients; hope compromises the vigilance a patient relies on to maintain control over the dissociative system.

The apparent smoothness of the cocoon as seen externally can, in some patients, be accompanied internally by a cacophony of accusatory voices, alarums, and the like. Or it can also be accompanied by an eruption of obsessive rumination, by a retreat or flight into confusion, by an outbreak of contentiousness, by the discovery of perceptual distractions, or whatever. But regardless of whether the appearance of a somato-sensory cocoon is accompanied by an array of internal voices or other phenomena usually associated with character pathology, the primary reason behind a patient's sudden shift in self-state (such as took place in Goldberg's clinical vignette) is to prevent the potential growth of hope that the possibility of a good relationship is actually an attainable reality (cf. Schecter, 1978a, b, 1980). If such a patient forgets, even briefly, that feeling secure and connected to her analyst can lead to unforeseen betrayal and the terror of self-dissolution, she betrays her own hard-won coterie of protective inner voices. Thus, an abrupt shift in the interactional field at the very moment she starts to feel close, announces a switch to a state of consciousness in which she will find or evoke something she can use as a danger signal associated with the potential for hope of continued closeness. Put another way, a patient's greatest vulnerability is not to the analyst's "interpretive" efforts, but to the hope of sustained and satisfying intersubjective contact.

Let me reiterate this last point. I see the "cocoon" as a *dynamic* state of consciousness designed to anticipate trauma, but sufficiently permeable to be a potential doorway to therapeutic growth (see also chapter 7). Its insularity reflects the necessity to remain ready for danger at all times so it can never—as with the original traumatic experiences—

arrive unanticipated; the cocoon's permeability reflects a capacity for authentic but highly regulated exchange with the outside world and similarly regulated spontaneity of self-experience. Its key quality is its ability to retain the adaptational protection afforded by the separateness of self-states, so that each can continue to play its own role. As an outcome of dissociation, it functions to induce life into a moribund psyche while attempting to disrupt any experience of extended human relatedness that could lead to a positive shift in perceived reality.

Integration, Authenticity, and Potential Space

The type of solution just described helps the individual to function more adaptively by providing relative stability in the face of chronic potential for severe dissociative symptomatology. Here I would resist the temptation to characterize such patients as exhibiting or suffering from what Goldberg (1995) terms "pseudointegration." I believe that personality integration as a human quality is too complex a concept to be adequately captured by the prefix "pseudo." It is, in essence, no different from any other personality attribute—an interpersonal construction jointly shaped by the individual and the eye of the beholder. The "beholder" is frequently another person but is always, simultaneously, a dissociated voice of the self. "Integration" is thus relative to the context of external reality as well as to the shifting of the multiplicity of self—other representations that define the experience of selfhood at a given time. I have argued in chapter 12 that there is no such thing as an integrated self—a "real you." Self-expression and human relatedness will inevitably collide, and emotional health is not integration. It is what I have called the ability to stand in the spaces between realities without losing any of them—the capacity to feel like one self while being many. I thus equally believe, as Mitchell (1993) has commented, that "the sense of authenticity is always a construction and as a construction, it is always relative to other possible self-constructions at any particular time" (p. 131).

When one's normal illusion of "integration" is disrupted by trauma, the basic dissociative structure of personality is adaptationally restored and psychodynamically maintained in its original developmental discontinuity (Wolff, 1987; Putnam, 1988; Barton, 1994). This preserves both sanity and the most socially developed areas of ego functioning but renders the latter into relatively mechanical instrumentalities of survival. Whichever self-state is experienced as "me"

has little simultaneous access to other domains of personal experience or memory, but the presence of other self-states holding incompatible experiences is felt experientially, and often concretely, as oppositional voices undermining the "me" that is existing in the here-and-now. (See also Fairbairn's [1944, pp. 102–111] description of what he calls the "internal saboteur.") The person's inner life is a guerilla war that Schwartz (1994) describes as "an internal paradigm of domination, disparagement and repudiation" (p. 208) in which he is the target of a variety of direct or subversive activities and accusations, including stupidity, cowardice, sadism, insanity, treachery, and, worst of all, naiveté. To combat these voices and the "noise" they produce in the sensorium, each individual will develop measures (within his own personality style) to continue functioning in spite of them and will try desperately both to silence and to "mask" their existence. As a result of these measures, a dissociative personality structure can become highly routinized and unrelentingly stable.

I have found this to be the case, for instance, in narcissistic personality disorders (see chapter 7) where living becomes a process of controlling the environment and other people from behind a mask in order to find and seek affirmation for a self robbed of life and meaning by its own dissociative protection system. But it is not only with narcissistic disorders in the formal use of the term that this phenomenon can be discerned clinically. Indeed in my work with a broad range of patients I am often aware of the powerful impact created by what Bion (1970, pp. 6–25) has called the "no-thing," the presence of an absence. The primitive, almost somatic state of mind through which it announces its existence, if it can be borne and processed, necessarily draws one's attention away from the content of communication to the medium itself. It is at those moments that the issue of authenticity can most readily force its way, uninvited, to the threshold of consciousness, bringing with it questions such as that asked by Boris (1986): "Is the analysis being done an analysis or is it *like* an analysis?" (p. 176).

As a supervisor, for example, I sometimes listen to audiotapes of an ongoing analytic treatment (see Bromberg, 1984, p. 41), and as I listen I may react to certain moments in the process during which I "sense" something that feels indefineably "off-key." I sense it not only by what I hear but also by what I *don't* hear—by the visceral experience of absence as much as the cognitive processing of presence. Sometimes it embodies for me the image of two solitary people in a large, empty ballroom, each trying to move as if dancing with the other, apparently oblivious to the absence of shared "music." At those moments I can

hear, loudly, the presence of the absent music—the palpable absence of the sound that Khan (1971) writes is "heard with the eyes," the recognizable melody of authentic self-experience that stems from the relational wholeness of what Winnicott (1949) calls psyche-soma. When this melody is missing, both the analytic "lyrics" and the interpersonal context in which they are spoken feel "off," because each partner in his own way has become more of a visitor than an inhabitant of his own psychosomatic existence. If and when the melody is restored, it becomes the music of intersubjectivity—"dance music"—and infuses the lyrics of a deadened analytic relationship with life.

To some degree, interruptions in the "dance music" are an expectable and indeed necessary part of any analytic process, and so too are fluctuations in the sense of personal authenticity felt by both patient and analyst. There are some patients, however, who will *chronically* feel as if the self that is being seen is a fraud—not real—and that his "real" self is some part of him that other people cannot see, do not want to see, or should not see and that is "inside" fearing discovery but clamoring to be found. When the pressure to be recognized is warded off for too long, the voice of a dissociated self-state is then often strong enough to take over. "'It's as if a voice rises up in me,' reported one patient described by Davies and Frawley, 1994, p. 69: 'I know it's my voice . . . I recognize the sound of it . . . but it's so odd. I have no idea what the voice is going to say. All I know is that usually it says something to get me in trouble.'"

The experience of inauthenticity is based in part on the fact that, as long as there is an aspect of the self that is being shut out, what is relationally accessible to others is felt by its author as inherently false and inauthentic simply because it lacks the modulation that would ordinarily be provided by other self-perspectives. In other words, one dimension of inauthenticity resides in the absence of a full range of interpersonally organized self-experience. What is visible to others is not thereby a lie, but is, from one perspective, inauthentic because it is tailored to exclude as much as it reveals—a partial truth. The nature of dissociative experience is that the self the world sees at any given time is doomed to be less than "true" in Winnicott's (1960a) sense and to feel subjectively inauthentic at any given moment. *The experientially authentic self is always felt to be the one knocking at the door*—the oppositional inner voice that is heard but not "thought" (Bollas, 1987). This voice is inevitably felt by the person as more subjectively true simply in that it holds a separate but unformulated "truth" of its own—an alternative vision of reality that is denied to whatever aspect of the self may be then dealing with the world, thus rendering the latter

relationally limited and inherently compromised in its felt authenticity. As Mitchell (1993) has put it, "what may seem authentic in the context of one version of self may be quite inauthentic with respect to other versions" (p. 131).

Worth mentioning in this context is a particular configuration of "successful" dissociation organized around a form of "pseudomaturity," a highly adaptive, dissociated caricature of adulthood that makes it very difficult for the therapist to engage other individual self-states directly. As a mode of relating, it holds a narcissistically invested history of interpersonal "success" with caretakers that is frequently so seductive it can easily lead to a collusive integration with the analyst and what Goldberg (1995, p. 500) has called "false knowing" in the psychoanalytic situation. It is this form of "successful dissociation" that led me to emphasize, in chapter 10, the importance of the analyst's recognizing when he may be unwittingly robbing his patient of authentic self-experience by requiring that other "less mature" self-states be prematurely surrendered and replaced by a dissociated exercise in adaptational pseudomaturity which can, in some patients, perpetuate what Sullivan (1953, p. 251) has called "the patient's remarkable capacity for deceiving and misleading," to the point that the result (Bromberg, 1993, p. 100) "is a genuine analysis of a pseudo-patient."

I do not, however, see the issue of inauthenticity as related to the "pseudoness" of personality integration itself. A person with a dissociative personality structure is fated to suffer from feelings of inauthenticity, but only as the result of an inevitable combination of certain relational factors: (a) a dissociated self-state is intrinsically self-serving—it functions in terms of its "user value" to the personality—and thereby "masks" its basic goal; (b) each self-state is forced to compensate for its incompleteness by exaggerating its own "truth"; (c) because the configuration of dissociated self-states is always shifting abruptly, the experience of authenticity is inherently unstable; and (d) each self-state excludes other voices that continue to make their presence felt.

To the degree that these other voices cannot fully participate in life, they remain alive as a private torment, in one way or another compromising the person's credibility in his own eyes regardless of whether or not he may be judged as "honest" by any immediate external criterion. Life is not authentically "lived." The present is at best a waiting period—a "masked" search for self-validation as a temporary escape from internal persecution and the moment when he will be ignored, disbelieved, challenged, criticized, disdained, or denounced by the world. He is waiting, in other words, for the always anticipated eventuality when another person he has been foolish enough to trust forms an alliance with one or another of his dissociated self-states and becomes an embodiment of his internal voices.

When an analyst finds himself swept into this enactment, he is encountering simultaneously the source of the greatest turmoil in therapy and the best single pathway to growth; finding and directly engaging the patient's dissociated voices as discontinuous but *individually authentic* expressions of selfhood. It is in this sense that I share with Bass (1993) his belief that "therapeutic experience is found by the patient—it is not provided. . . . Neither patient nor therapist can alone know what is best or what is needed. This is jointly discovered as the therapeutic process unfolds" (p. 165). The therapist's private experience becomes the channel through which the patient's full range of dissociated self-experiences can first achieve linguistic access, but optimal use of this channel depends on the analyst's ability to allow a transitional reality to be consensually constructed between himself and his patient. If this reality is successfully negotiated, an internal linking process will take place through an intersubjective field in which fantasy, perception, thought, and language all play a part, but the patient is not pressured to choose between which "reality" is more "objective" (Winnicott, 1951, 1971b). Within this area of potential space, the judgment of authenticity as an objective reality is moot because the analyst's own subjective experience is serving in part as a "container" (Bion, 1965) for a dissociated aspect of the patient's experience. It is through an analyst's ability to be aboveboard, and not hide behind "objective" interpretations of reality that mask their subjective origin, that a patient can risk gradually reclaiming what belongs to him and thus increase his range of access to linguistically symbolized self-experience (see Harris, 1992). As this process continues, feelings of personal authenticity inherently increase.

I thus see the patient's use of potential space as a dialectic between his ability to preserve the self as it is, while allowing symbolic communication, a little at a time, to be accommodated relationally into the repatterning of representational mental structure. Because this process *inherently* threatens a patient's ability to feel safe in the use of his dissociated organization of self, any patient will systematically oscillate between "restructuring" activity and restoration of dissociation; but I believe that to see this "resistance" as a defensive withdrawal in order to abort or foreclose the therapeutic process is, most of the time, an error. The patient's paramount need is to preserve the dissociative structure while surrendering it, and he hears many voices that are specifically designed to preserve the sense of safety in the old structure.

Distractive activity, for instance (see Goldberg, 1987), is one way of getting the therapist to "back off" at moments when the therapist's involvement in "change" is greater than his recognition or understanding of the patient's need to cope with a myriad of opposing internal voices, some advocating trust and others shouting "stupidity." The therapist becomes aware of the other "voices" at the point the patient is willing to let him participate in his internal world through enactment, but to the extent the therapist is not sufficiently able to enter into an *authentic* relationship with each voice, the patient's "resistance" is bolstered. If given the opportunity, most patients ordinarily can participate in the ambiguous reality co-created by the processing of enactment, but for the experience to be sustained in a safe way, it requires a relationship with an "other" who can exist there as an equal partner. Through the gradual restoration of hope, the revitalization of "collapsed" potential space can then take place (see Smith, 1989; Reis, 1993; Goldberg, 1995).

Dissociation, Symptoms, and Personality Type

I have speculated in chapter 12 that the concept of personality "disorder" might usefully be defined as the characterological outcome of the inordinate use of dissociation and that independent of type (narcissistic, schizoid, borderline, paranoid, etc.), it constitutes a personality structure organized as a proactive, defensive response to the potential repetition of childhood trauma. If, early in life, the developmentally normal illusion of self-unity cannot safely be maintained when the psyche-soma is flooded by input that the child is unable to process symbolically, a configuration of "on-call" self-states is gradually constructed in which the centrally defining hallmark of dissociation is the presence of a concrete state of mind. By "concrete" I mean to indicate that there is thought without a thinker, or rather, without the thinker being aware of the "other" as a thinker in his or her own right with whom it might be possible to share or reciprocate ideas. Thus, each self-state insofar as it exists in dissociation from other self-states is necessarily an island of concreteness. Concreteness has the great virtue of being simple; the threat that the "other" presents is evaded before it can get started and the road is thus opened for obsessional thinking: What we call compulsivity and obsessional thinking may often serve primarily to bolster the dissociative process by filling in the "spaces" and denying that they even exist. There is then a return to the simplicity of concreteness (see chapter 12). Successful use of the external world is preempted by a drivenness to fill in the spaces of existential deadness with "compulsive regimes" (Goldberg, 1995, p. 499). One form this can take has been described by Guntrip (1969) as a schizoid phenomenon he called "compulsive stop-gap fantasying" (p. 230). Guntrip's formulation is virtually identical with my own; he saw this kind of fantasying as derived from a "state of primary ego-unrelatedness which makes it impossible for people to be alone without panic. Then 'compulsive fantasying and thinking,' whether by day or night, whether bizarre or realistic and rational, is part of the struggle to keep oneself mentally alive" (p. 229).

Davies and Frawley (1994) have asserted that "dissociation exists along a broad continuum with coexistent, alternative ego states moving in ever-shifting patterns of mutual self-recognition and alienation" (p. 68). In dissociative disorders, it is not as much a "pseudointegrated" psyche-soma that is perceived by the mind, as a shifting experience of reality that changes in configuration depending on the needs of discontinuous self-states, each holding its own narrative truth. As an extreme example, paranoid schizophrenia may not be so different from less dramatic forms of psychopathology despite the foreclosure of potential space. That is, it might reasonably be seen as a mental state organized by the same processes as in other personality disorders. In fact, as I have suggested in chapter 12, I would hypothesize that the immovably fixed self-narrative found in paranoia is labeled "delusional" because the extreme dissociative isolation of the self-state that holds paranoid "truth" makes it virtually immune to modification through relational negotiation.

I am suggesting, in other words, that "personality disorder" represents ego-syntonic dissociation no matter what personality style it embodies. Each type of personality disorder is a dynamically "on-alert" configuration of dissociated states of consciousness that regulates psychological survival in terms of its own concretized blend of characteristics. In each type, certain self-states hold the traumatic experiences and the multiplicity of raw affective responses to them, and others hold whichever ego resources (pathological and nonpathological) have proven effective in dealing with the original trauma and making sure the pain would never again be repeated (e.g., vigilance, acquiescence, paranoid suspiciousness, manipulativeness, deceptiveness, seductiveness, psychopathy, intimidation, guilt-induction, self-sufficiency, insularity, withdrawal into fantasy, pseudomaturity, conformity, amnesia, depersonalization, out-of-body experiences, trance states, compulsivity, substance abuse).

Most broadly, each personality configuration is shaped by the degree to which pathology of cognition, impulse control, affectivity, or interpersonal functioning is a central feature, but the specific configuration defining each type of disorder might be said to result from a dissociative solution to trauma that was preserved and perfected because it had achieved a balance between safety and need satisfaction that "worked" for that person. As a proactive way of living, however, the subsequent cost of this solution to each individual is always identical—to one degree or another, an unlived life.

A dissociative disorder proper (Dissociative Identity Disorder, Dissociative Amnesia, Dissociative Fugue, or Depersonalization Disorder) is from this vantage point a touchstone for understanding all other personality disorders even though, paradoxically, it is defined by symptomatology rather than by personality style. A dissociative disorder is clinically recognized by the *direct* manifestation of discontinuity between states of consciousness that other types of personality disorders are designed to mask and to express only indirectly and "characterologically"—as a relationally impaired but relatively "enduring pattern of inner experience and behavior that . . . is inflexible and pervasive across a broad range of social situations" (American Psychiatric Association, 1994, p. 275).

There are different likelihoods that a dissociative personality structure will "fail," and I would say that the likelihood is determined largely by the type of personality style in which it is embedded. Sometimes the failure is seen in the return of symptoms; sometimes in a flooding of affect as in hysteria; sometimes in a loosening of the schizoid's hold on reality. A too "successful" dissociative structure can be observed in what I have described as the schizoid's "psychopathology of stability" (Bromberg, 1979), while its failure within the same structure is found in the schizoid's potential for schizophreniform collapse. Fairbairn's (1944, 1952) concept of schizoid withdrawal and Guntrip's (1969) formulation of the "schizoid compromise" each in its own way addresses this same clinical observation. Guntrip (1969), for example, says that some patients' "external object relations have become so weakened by early schizoid withdrawal inside" (p. 129) that such a person faces "the danger of the depersonalization of his ego-of-everyday-life along with the derealization of his environment, and he faces the appalling risk of the loss of definite selfhood" (p. 56). Here Goldberg's (1995) contention that dissociative processes can take bodily and sensory experiences—and emotionality generally—and render them inauthentic as a kind of protective cocoon is, despite its anchorage in the traditionally safe harbor of libido theory, a valuable addition to our understanding of the phenomenology seen in some patients. It adds a somato-sensory dimension to Guntrip's (1969) metaphors of a "halfway-house" and an "in-and-out policy" to describe how a patient tends to negotiate the twin dangers of depersonalization and of feeling that he is "missing the bus and life is passing him by" (p. 62).

Afterward

I began by invoking the ghost of Pierre Janet, banished from the castle by Sigmund Freud a century ago, returning for an overdue haunting of Freud's current descendants. I hope I have made it clear why I feel it is worth talking to this ghost, and indeed finally embracing the value of his legacy—the concept of dissociation and its clinical implications. But it would be wrong if I left the reader with the impression that I believe we can dispense with the memory of Freud or even with his preferred concept, repression. As Kerr (1993) has pointed out, Freudian theory represented a crucial advance in a certain respect over what Janet had to offer. For in truth, Janet, though he well understood the passions and the exigencies of trauma and dissociation, was at a loss to explain why there should be splits in the personality other than by enlisting the now totally antiquated notions of "hereditary weakness" and "hereditary degeneration." It fell to Freud to indicate that the alternation of states of consciousness could best be understood *dynamically*, that is, as reflecting an interplay of motives and countermotives. But Freud's vision in turn was too simple. Though he lent a new coherence to our understanding of disparate mental states, he did so at the cost of bequeathing us the therapeutic fiction that for practical purposes, or at least where psychic conflict was involved, the structure of the self could be assumed to be unitary. Despite Josef Breuer's contrary position and his comprehension of the role of hypnoid states (Breuer and Freud, 1893–1895), Freud's "one-sided anti-Janet stand" (Berman, 1981, p. 285) carried the day for close to 100 years.

So where does this leave us? An increasing number of clinicians representing most schools of psychoanalytic thinking have been persuaded by several decades of renewed theorizing and fresh clinical investigations that the dynamic conceptions of Freud must be understood to be in an ongoing dialectic with a complex latticework of psychic structure, one central organizing principle of which is dissociation. As we seek to find within the patient a self we can talk

with and a self who simultaneously can talk to us about the experience of talking, we find ourselves traversing states kept apart from one another by dissociation. That is, the seemingly "unitary self" we meet in our patients is in important ways incapable of true dialogic engagement, and is incapable in other important ways of the experience of intrapsychic conflict. In this context our understanding of character pathology in particular needs to be revamped to take into account the dissociative structure of the mind, or so I would argue.

In summary, I offer the view that psychoanalysis must continue to study the nature of dissociation by examining it as both a process and a mental organization (see also Kirmayer, 1994). First it must be more fully explored as a normal phenomenon of the human mind that is not inherently tied to trauma. Second and concurrently, we must grapple with its multitude of defensive manifestations: (a) as a here-and-now process of unlinking aspects of the self from the sensory apparatus as a protection against potential or actual trauma; (b) as a psychodynamic organization, a configuration of discontinuous self-states—ever-shifting and always "on-alert"—that attempt to mask the dissociative "gaps," compensate for existential deadness by a compulsive search for self-validation, and preserve readiness for the return of past trauma by maintaining an ongoing reality in which potentially unbearable psychic pain is always around the next corner. Third and finally, we must acknowledge the relevance of dissociation as a challenge to the traditional ways of understanding character structure and character pathology that different schools of thought, each in its own metaphor, have relied upon as cornerstones of their theories.

Translated into the traditional metapsychology of "pathological narcissism (see chapter 7), a patient's investment in protecting the insularity of a so-called "grandiose self" diminishes as the need for dissociation is surrendered and replaced by the increased capacity to tolerate the existence of *conflictual* self-states, vitalizing a broadening experience of "me-ness" as simultaneously adaptational and self-expressive—an outcome that, I believe, most contemporary analysts would accept as the foremost criterion of a successful treatment process.

14

Resistance, Object Usage, and Human Relatedness[1] (1995)

"Resistance" is not a word I ordinarily use, either conceptually or clinically, and when I might hear it inadvertently pop out of my mouth it is usually when I am feeling grouchy with a patient and unaware that I wish to conceal it. Notwithstanding its illusory advantage in a countertransferential emergency, it is a term that I feel has become largely incompatible with the natural evolution in postclassical analytic thought. In effect, it traps us into preserving intact Freud's (1925) formulation of the function of negation, in which the negativity of resistance is viewed as a barrier between depth and surface designed to prevent repressed images or ideas from entering consciousness. In this sense, it is a remnant of our past that I think can be usefully reframed as part of an enacted dialectical process of meaning construction, rather than an archeological

1. Portions of this essay in earlier versions were presented in February 1993 as a discussion of Christopher Bollas's paper "Preoccupation Unto Death" at a meeting of the William Alanson White Psychoanalytic Society and as part of a November 1993 panel, "Resistance: Obstacle or Steppingstone?" at the William Alanson White Institute's Fiftieth Anniversary Clinical Conference. The chapter was originally published in its present form in *Contemporary Psychoanalysis*, 1995, 31:163–192.

barrier preventing the surfacing of disavowed reality. Freud (1925) observed that

> the content of a repressed image or idea can make its way into consciousness, on condition that it is *negated*. Negation is a way of taking cognizance of what is repressed; indeed it is already a lifting of the repression, though not, of course, an acceptance of what is repressed. . . . With the help of the symbol of negation, thinking frees itself from the restrictions of repression and enriches itself with material that is indispensable for its proper functioning [pp. 235–236].

This, of course, bears centrally on the concept of "resistance," which in my view, as I shall discuss, is anchored more fundamentally to dissociation than to repression. My conceptualization of resistance, like that of Schafer (1983, pp. 230–231), addresses the *structure* of resistance as an account of transference itself, but as a dyadic experience rather than an individual one—an account of the transference and countertransference matrix, rather than of transference alone. It also addresses the *motivation* of resistance as not simply an avoidance of insight or a fear of change, but as a dialectic between preservation and change—a basic need to preserve the continuity of self-experience in the process of growth by minimizing the threat of potential traumatization. It is a "marker" that structures the patient's effort to arrive at new meaning without disruption of self-continuity during the transition, and gives voice to opposing realities within the patient's inner world that are being enacted in the intersubjective and interpersonal field between analyst and patient. The negativity of resistance thus represents a dialectic tension between realities that are not yet amenable to a self-reflective experience of intrapsychic conflict and are, at that moment, in a discontinuous, adversarial relationship to each other. Optimally, and most simply, it is a dimension of the ongoing process of negotiation between incompatible domains of self-experience.

Consider the following clinical vignette. It is based on a consultation and a dream—a first dream in analysis—which contained an image that configured both the analytic process and my subsequent ability to comprehend this patient, whom I will call Mr. M.

It was a Friday afternoon. The last of Mr. M's three "preanalytic" consultations with me had just ended with an agreement that we would begin an analysis and start work the following Monday. Alone, I found myself in an odd reverie state, complacently daydreaming: "As consultations go," I thought to myself, "these went pretty well, and I think he felt similarly." But I then heard another voice in me saying: "What do *you* know? You're not even sure what you mean by 'pretty well,' much less what *he* thought!" It was obvious that Mr. M's analysis had already begun. Nevertheless, he arrived promptly at 8:00 A.M. on Monday for what was technically his first session, and began by enthusiastically reporting the "brief" dream he had just two hours earlier. It was brief because the alarm clock that had awakened him marked, as he put it, "the end of my dream and the beginning of my treatment." Even though it wasn't until later that we could start to comprehend together his subtle portrayal of reality implied in this seemingly casual remark, the dream he then presented, like my own "daydream," powerfully foreshadowed what was to come:

> "I was leaning out of a window on the top floor of a tall building that was in flames. A fireman was climbing up a ladder to rescue me, and I was throwing rocks at him. Then my alarm went off."

How to look at Mr. M's dream! There are as many potential ways to explore the issue of resistance, and as many ways to talk about the meaning of the concept in the treatment process, as there are schools of psychoanalytic thought. The subject becomes even more complex when comparisons are made across theories of treatment. Like "resistance," the term "treatment" is commonplace in the contemporary analytic literature, but we rarely find analysts talking about what it is they believe they are treating, and even more rarely what they think they are "curing." In other words, how a given school of thought looks paradigmatically at a dream such as Mr. M's, addresses not only its formulation of resistance but also its implicit theory of cure.

I've thus chosen to begin with the above vignette because it gets to the theme of resistance by its most direct and perhaps most informative route: the unique quality of psychoanalytic cure that distinguishes it from any other form of cure, the fact that it is "resisted" as an intrinsic part of its nature. How this quality is understood by a given body of analytic theory is going to inform not only what an analyst does, but what an analyst hears. Obviously, without associations Mr. M's individuality is hidden. Nevertheless, any analyst, regardless of theoretical persuasion, will inevitably, without associations, hear the dream at a metaphorical level that addresses the issue of resistance in whatever way that particular analyst conceives of resistance, and this will to some degree inform the way the treatment gets shaped. As an interpersonal-relational analyst, I frame the metaphor as if the patient were saying "I'm here because I'm in trouble, but the trouble I'm in is not something I need rescuing from, even though it may look that way.

trying to escape, her head was at immediate risk of being trapped under the car. Nevertheless she didn't feel panic. "My head isn't caught yet," she said to herself, "and maybe it won't be." In fact it didn't get caught, she was able to swim out, and the dream ended.

Her associations led her to say to me both with pleasure and some fear, "I guess not everyone who is scared is scarred. They're not the same." Christina was now able to experience anxiety for the first time and distinguish it from the traumatic dread that had been her constant companion, telling her she was always on the edge of the "black hole." She could now recognize anxiety as something unpleasant but bearable—something she *felt* rather than a way of addressing the world. The dream spoke to the fact she no longer felt herself living "on hold" in a world that required perpetual readiness for trauma, and she allowed herself to be aware that she had begun to surrender the armor of her dissociative defense against the potential return of unexpected trauma the moment she feels she is safe. That is to say, she came to understand that hurt is not equivalent to traumatic destruction of selfhood. She recognized that she was now taking the risk of pursuing a life that included self-interest, and that in choosing to live life rather than wait for it, she had accepted the inevitability of loss, hurt, and ultimately death as part of the deal.

My story of Christina ends here, and so does the book, but Christina's analysis did not. It continued for several more years and, as you might expect, involved intense mourning, not only for the loss of early objects, but also for the self whose life had for too long been unexamined and, in a true sense, unlived. Her dread of "going out of my mind" was replaced by a conviction that she had a secure place *within* it, as I did within hers. As the work evolved she became increasingly stronger, less dissociated, more spontaneous, more playful, and more loving. At the point we ended, as far as I could tell she had most of her selves pretty well in hand and she was using them robustly and creatively in a full life, even, as she put it, "at my age."

References

Adams, H. (1904), *Mont Saint-Michel and Chartres.* New York: Penguin Classics, 1986.

American Psychiatric Association (1994), *Diagnostic Criteria from DSM-IV.* Washington, DC: American Psychiatric Press.

Anderson, F. S. (1998), Psychic elaboration of musculoskeletal back pain. In: *Relational Perspectives on the Body: Psychoanalytic Theory and Practice,* eds. L. Aron & F. S. Anderson. Hillsdale, NJ: The Analytic Press, pp. 287–322.

——— Balamuth, R., Looker, T. & Schachtel, Z. (1996), Panel presented at annual spring meeting of the Division of Psychoanalysis (39) of the American Psychological Association, New York City.

Appignanesi, L. & Forrester, J. (1992), *Freud's Women.* New York: Basic Books.

Aron, L. (1991), The patient's experience of the analyst's subjectivity. *Psychoanal. Dial.,* 1:29–51.

——— (1992), Interpretation as expression of the analyst's subjectivity. *Psychoanal. Dial.,* 2:475–507.

——— (1996), *A Meeting of Minds: Mutuality in Psychoanalysis.* Hillsdale, NJ: The Analytic Press.

——— & Anderson, F. S., eds. (1998), *Relational Perspectives on the Body: Psychoanalytic Theory and Practice.* Hillsdale, NJ: The Analytic Press.

Baars, B. J. (1992), Divided consciousness or divided self. *Consciousness and Cognition,* 1:59–60.

Bacal, H. (1987), British object-relations theorists and self psychology: Some critical reflections. *Internat. J. Psycho-Anal.,* 68:81–98.

Bach, S. (1977), On the narcissistic state of consciousness. *Internat. J. Psycho-Anal.,* 58:209–233.

——— (1985), *Narcissistic States and the Therapeutic Process.* New York: Aronson.

Balamuth, R. (1998), Re-membering the body: A psychoanalytic study of presence and absence of the lived body. In: *Relational Perspectives on the*

Body: Psychoanalytic Theory and Practice, ed. L. Aron & F. S. Anderson. Hillsdale, NJ: The Analytic Press, pp. 263–286.
Balint, E. (1968), Remarks on Freud's metaphors about the "mirror" and the "receiver." *Comp. Psychiat.*, 9:344–348.
——— (1987), Memory and consciousness. *Internat. J. Psycho-Anal.*, 68:475–483.
——— (1989), Creative life. In: *Before I Was I*. New York: Guilford, 1993, pp. 100–108.
——— (1991), Commentary on Philip Bromberg's "On knowing one's patient inside out." *Psychoanal. Dial.*, 1:423–430.
——— (1993), Enid Balint interviewed by Juliet Mitchell. In: *Before I Was I*. New York: Guilford, pp. 221–236.
Balint, M. (1935), Critical notes on the theory of the pregenital organizations of the libido. In: *Primary Love and Psychoanalytic Technique*. New York: Liveright, 1965, pp. 37–58.
——— (1937), Early developmental stages of the ego: Primary object love. In: *Primary Love and Psychoanalytic Technique*. New York: Liveright, 1965, pp. 74–90.
——— (1952), New beginning and the paranoid and the depressive syndromes. In: *Primary Love and Psychoanalytic Technique*. New York: Liveright, 1965, pp. 230–249.
——— (1959), *Thrills and Regressions*. New York: International Universities Press.
——— (1965), *Primary Love and Psychoanalytic Technique*. New York: Liveright.
——— (1968), *The Basic Fault*. London: Tavistock.
Barrett-Lennard, G. T. (1981), The empathy cycle: Refinement of a nuclear concept. *J. Counsel. Psychol.*, 28:91–100.
Bartlett, F. C. (1932), *Remembering*. Cambridge, England: Cambridge University Press.
Barton, S. (1994), Chaos, self-organization, and psychology. *Amer. Psychol.*, 49:5–14.
Bass, A. (1992), Review essay: M. Little's *Psychotic Anxieties and Containment*. *Psychoanal. Dial.*, 2:117–131.
——— (1993), Review essay: P. Casement's *Learning from the Patient*. *Psychoanal. Dial.*, 3:151–167.
Becker, E. (1964), *Revolution in Psychiatry*. New York: Free Press.
——— (1973), *The Denial of Death*. New York: Free Press.
Beebe, B. & Lachmann, F. M. (1992), The contribution of mother-infant mutual influence to the origins of self- and object representations. In: *Relational Perspectives in Psychoanalysis*, ed. N. J. Skolnick & S. C. Warshaw. Hillsdale, NJ: The Analytic Press, pp. 83–117.
——— Jaffe, J. & Lachmann, F. M. (1992), A dyadic systems view of communication. In: *Relational Perspectives in Psychoanalysis*, ed. N. J. Skolnick & S. C. Warshaw. Hillsdale, NJ: The Analytic Press, pp. 61–81.
Benjamin, J. (1995), *Like Subjects, Love Objects: Essays on Recognition and Sexual Difference*. New Haven, CT: Yale University Press.

Berman, E. (1981), Multiple personality: Psychoanalytic perspectives. *Internat. J. Psycho-Anal.*, 62:283–300.
Bion, W. R. (1955), Language and the schizophrenic patient. In: *New Directions in Psycho-Analysis*, ed. M. Klein, P. Heimann & E. Money-Kyrle. London: Tavistock, pp. 220–329.
——— (1957), Differentiation of the psychotic from the non-psychotic personalities. In: *Second Thoughts*. London: Maresfield Library, 1967, pp. 43–64.
——— (1963), *Elements of Psychoanalysis*. London: Heinemann.
——— (1965), *Transformations*. London: Heinemann.
——— (1967), The imaginary twin. In: *Second Thoughts*. London: Maresfield Library, pp. 3–22.
——— (1970), *Attention and Interpretation*. London: Tavistock (reprinted, London: Maresfield, 1984).
——— (1978), *Four Discussions with W. R. Bion*. Strathclyde: Clunie.
Bird, B. (1972), Notes on transference: Universal phenomenon and hardest part of analysis. *J. Amer. Psychoanal. Assn.*, 20:267–301.
Blatt, S. J. (1974), Levels of object representation in anaclitic and introjective depression. *The Psychoanalytic Study of the Child*, 29:107–157. New Haven, CT: Yale University Press.
Blaustein, A. B. (1975), A dream resembling the Isakower phenomenon: A brief clinical contribution. *Internat. J. Psycho-Anal.*, 56:207–208.
Bliss, E. L. (1988), A reexamination of Freud's basic concepts from studies of multiple personality disorder. *Dissociation*, 1:36–40.
Bollas, C. (1987), *The Shadow of the Object*. London: Free Association Books.
——— (1989), *Forces of Destiny*. London: Free Association Books.
——— (1992), *Being a Character*. New York: Hill & Wang.
Bonanno, G. A. (1990), Remembering and psychotherapy. *Psychotherapy*, 27:175–186.
Boris, H. N. (1986), Bion re-visited. *Contemp. Psychoanal.*, 22:159–184.
Bosnak, R. (1996), *Tracks in the Wilderness of Dreaming*. New York: Delacorte Press.
Brenner, I. (1994), The dissociative character: A reconsideration of "multiple personality." *J. Amer. Psychoanal. Assn.*, 42:819–846.
——— (1996), On trauma, perversion, and multiple personality. *J. Amer. Psychoanal. Assn.*, 44:785–814.
Breuer, J. & Freud, S. (1893–1895), Studies on hysteria. *Standard Edition*, 2. London: Hogarth Press, 1955.
Bromberg, P. M. (1979), The schizoid personality: The psychopathology of stability. In: *Integrating Ego Psychology and Object Relations Theory*, ed. L. Saretsky, G. D. Goldman & D. S. Milman. Dubuque, IA: Kendall/Hunt, pp. 226–242.
——— (1980), Sullivan's concept of consensual validation and the therapeutic action of psychoanalysis. *Contemp. Psychoanal.*, 16:237–248.
——— (1982), The supervisory process and parallel process in psychoanalysis. *Contemp. Psychoanal.*, 18:92–111.

——— (1983), Discussion of "Refusal to Identify: Developmental Impasse" by A. J. Horner. *Dynam. Psychother.*, 1:122–128.
——— (1984), The third ear. In: *Clinical Perspectives on the Supervision of Psychoanalysis and Psychotherapy*, ed. L. Caligor, P. M. Bromberg & J. D. Meltzer. New York: Plenum Press, pp. 29–44.
——— (1986a), Discussion of "The wishy-washy personality" by A. Goldberg. *Contemp. Psychoanal.*, 22:374–387.
——— (1986b), Discussion of "Dialogue on love and hate in psychoanalysis" by L. Epstein & M. Schwartz. *Contemp. Psychother. Rev.*, 3:54–68.
——— (1989), Discussion of "Keeping the analysis alive and creative over the long haul" by G. Friedman. *Contemp. Psychoanal.*, 25:337–345.
——— (1991a), Reply to discussion by Enid Balint. *Psychoanal. Dial.*, 1:431–437.
——— (1991b), Introduction to "Reality and the Analytic Relationship: A Symposium." *Psychoanal. Dial.*, 1:8–12.
——— (1993), Discussion of "Obsession and/or obsessionality: Perspectives on a psychoanalytic treatment" by W. E. Spear. *Contemp. Psychoanal.*, 29:90–101.
——— (1995), Introduction to "Attachment, detachment, and psychoanalytic therapy" by D. E. Schecter. In: *Pioneers of Interpersonal Psychoanalysis*, ed. D. B. Stern, C. Mann, S. Kantor & G. Schlesinger. Hillsdale, NJ: The Analytic Press, pp. 169–174.
——— (1996), Discussion of "The Psychoanalytic Situation" by Leo Stone. *J. Clin. Psychoanal.*, 5:267–282.
——— (1997), Commentary on L. Friedman's "Ferrum, ignis, and medicina: Return to the crucible." *J. Amer. Psychoanal. Assn.*, 45:36–40.
Broughton, R. J. (1968), Sleep disorders: Disorders of arousal? *Science*, 159:1070–1078.
Brown, R. (1965), The principle of consistency. *Social Psychology*. New York: Free Press, pp. 549–609.
Bruner, J. (1990), *Acts of Meaning*. Cambridge, MA: Harvard University Press.
Buie, D. H., Jr. & Adler, G. (1973), The uses of confrontation in the psychotherapy of borderline cases. In: *Confrontation in Psychotherapy*, ed. G. Adler & P. G. Myerson. New York: Science House.
Caligor, L. (1996), The clinical use of the dream in interpersonal psychoanalysis. *Psychoanal. Dial.*, 6:793–811.
Carroll, L. (1871), Through the looking-glass, and what Alice found there. In: *The Annotated Alice*, ed. M. Gardner. New York: Bramhall House, 1960, pp. 171–345.
Carroll, P. V. (1937), Shadow and substance. In: *Five Great Modern Irish Plays*. New York: Modern Library, 1941, pp. 217–232.
Castaneda, C. (1968), *The Teachings of Don Juan: A Yaqui Way of Knowledge*. New York: Ballantine Books.
——— (1971), *A Separate Reality: Further Conversations with Don Juan*. New York: Simon & Schuster.
——— (1972), *Journey to Ixtlan*. New York: Simon & Schuster.
——— (1974), *Tales of Power*. New York: Pocket Books.

——— (1977), *The Second Ring of Power*. New York: Pocket Books.
——— (1981), *The Eagle's Gift*. New York: Simon & Schuster.
Chrzanowski, G. (1977), *The Interpersonal Approach to Psychoanalysis*. New York: Gardner Press.
——— Schecter, D. E. & Kovar, L. (1978), Sullivan's concept of the malevolent transformation. *Contemp. Psychoanal.*, 14:405–423.
Chu, J. A. (1991), The repetition compulsion revisited: Reliving dissociated trauma. *Psychotherapy*, 28:327–332.
Coates, S. W. & Moore, M. S. (1997), The complexity of early trauma: Representation and transformation. *Psychoanal. Inq.*, 17:286–311.
Crowley, R. M. (1973), Sullivan's concept of unique individuality. *Contemp. Psychoanal.*, 9:130–133.
——— (1975), Bone and Sullivan. *Contemp. Psychoanal.*, 11:66–74.
——— (1978), Are being simply human and uniqueness opposed? *Contemp. Psychoanal.*, 14:135–139.
D'Aulaire, I. & D'Aulaire, E. P. (1962), *D'Aulaire's Book of Greek Myths*. New York: Doubleday.
Davies, J. M. (1992), Dissociation processes and transference-countertransference paradigms in the psychoanalytically oriented treatment of adult survivors of sexual abuse. *Psychoanal. Dial.*, 2:5–36.
——— & Frawley, M. G. (1994), *Treating the Adult Survivor of Childhood Sexual Abuse*. New York: Basic Books.
de Monchaux, C. (1978), Dreaming and the organizing function of the ego. *Internat. J. Psycho-Anal.*, 59:443–453.
Dennett, D. (1991), *Consciousness Explained*. London: Allen Lane.
Dickes, R. (1965), The defensive function of an altered state of consciousness: A hypnoid state. *J. Amer. Psychoanal. Assn.*, 13:356–403.
Duncan, D. (1989), The flow of interpretation. *Internat. J. Psycho-Anal.*, 70:693–700.
Duncker, P. (1996), *Hallucinating Foucault*. Hopewell, NJ: Ecco Press.
Dupont, J., ed. (1988), *The Clinical Diary of Sándor Ferenczi*. Cambridge, MA: Harvard University Press.
——— (1993), Michael Balint: Analysand, pupil, friend, and successor to Sándor Ferenczi. In: *The Legacy of Sándor Ferenczi*, ed. L. Aron & A. Harris. Hillsdale, NJ: The Analytic Press.
Easson, W. M. (1973), The earliest ego development, primitive memory traces, and the Isakower phenomenon. *Psychoanal. Quart.*, 42:60–72.
Edel, L. (1980), *Bloomsbury: A House of Lions*. New York: Avon Books.
Ellenberger, H. F. (1977), L'histoire de 'Emmy von N.' *L'Évolution Psychiatrique*, 42:519–540.
Emde, R. N., Gaensbaure, T. J. & Harmon, R. J. (1976), Emotional expression in infancy: A biobehavioral study. *Psychological Issues, 10*, Monogr. 37. New York: International Universities Press.
Emerson, R. W. (1851), Borrowing. In: *What Cheer*, ed. D. McCord. New York: Coward-McCann, 1945, p. 321.
Epstein, L. & Feiner, A. H. (1979), *Countertransference*. New York: Aronson.

Fairbairn, W. R. D. (1940), Schizoid factors in the personality. In: *Psychoanalytic Studies of the Personality*. London: Routledge & Kegan Paul, 1952, pp. 3–27.
——— (1941), A revised psychopathology of the psychoses and psychoneuroses. In: *Psychoanalytic Studies of the Personality*. London: Routledge & Kegan Paul, 1952, pp. 28–58.
——— (1944), Endopsychic structure considered in terms of object-relationships. In *Psychoanalytic Studies of the Personality*. London: Routledge & Kegan Paul, 1952, pp. 82–132.
——— (1952), *Psychoanalytic Studies of the Personality*. London: Routledge & Kegan Paul.
Feiner, A. H. (1979), Countertransference and the anxiety of influence. In: *Countertransference*, ed. L. Epstein & A. H. Feiner. New York: Aronson, pp. 105–128.
——— (1982), Comments on the difficult patient: Some transference-countertransference issues. *Contemp. Psychoanal.*, 18:397–411.
Fenichel, O. (1945), *The Psychoanalytic Theory of Neurosis*. New York: Norton.
Ferenczi, S. (1909), Introjection and transference. *First Contributions to Psycho-Analysis*, New York: Brunner/Mazel, 1980, pp. 35–93.
——— (1913), Stages in the development of the sense of reality. In: *First Contributions to Psycho-Analysis*. New York: Brunner/Mazel, 1980, pp. 213–239.
——— (1928), The elasticity of psychoanalytic technique. In: *Final Contributions to the Problems and Methods of Psychoanalysis*, ed. M. Balint. New York: Brunner/Mazel, 1980, pp. 87–101.
——— (1930a), Notes and fragments II. In: *Final Contributions to the Problems and Methods of Psycho-Analysis*, ed. M. Balint. New York: Brunner/Mazel, 1980, pp. 219–231.
——— (1930b), The principle of relaxation and neo-catharsis. In: *Final Contributions to the Problems and Methods of Psychoanalysis*, ed. M. Balint. New York: Brunner/Mazel, 1980, pp. 108–125.
——— (1931), Child analysis in the analysis of adults. In: *Final Contributions to the Problems and Methods of Psychoanalysis*, ed. M. Balint. New York: Brunner/Mazel, 1980, pp. 126–142.
——— (1933), Confusion of tongues between adults and the child: The language of tenderness and passion. In: *Final Contributions to the Problems and Methods of Psychoanalysis*, ed. M. Balint. New York: Brunner/Mazel, 1980, pp. 156–167.
Ferguson, M. (1990), Mirroring processes, hypnotic processes, and multiple personality. *Psychoanal. & Contemp. Thought*, 13:417–450.
Festinger, L. (1957), *A Theory of Cognitive Dissonance*. New York: Row, Peterson.
Field, E. (1883), Wynken, Blynken, and Nod. In: *The Oxford Book of Children's Verse in America*, ed. D. Hall. New York: Oxford University Press, 1985, pp. 160–161.
Fink, G. (1967), Analysis of the Isakower phenomenon. *J. Amer. Psychoanal. Assn.*, 15:231–293.

Fisher, C., Byrne, J. V., Edwards, A. & Kahn, E. (1970), A psychophysiological study of nightmares. *J. Amer. Psychoanal. Assn.*, 18:747–782.
Fisher, C., Kahn, E., Edwards, A. & Davis, D. (1974), A psychophysiological study of nightmares and night terrors. In: *Psychoanalysis and Contemporary Science, Vol. 3*, ed. L. Goldberger & V. Rosen. New York: International Universities Press, pp. 317–398.
Fonagy, P. (1991), Thinking about thinking: Some clinical and theoretical considerations in the treatment of a borderline patient. *Internat. J. Psycho-Anal.*, 72:639–656.
——— & Moran, G. S. (1991), Understanding psychic change in child psychoanalysis. *Internat. J. Psycho-Anal.*, 72:15–22.
——— & Target, M. (1995a), Understanding the violent patient: The use of the body and the role of the father. *Internat. J. Psycho-Anal.*, 76:487–501.
——— & ——— (1995b), Dissociation and trauma. *Current Opinion in Psychiat.*, 8:161–166.
——— & ——— (1996), Playing with reality: I. Theory of mind and the normal development of psychic reality. *Internat. J. Psycho-Anal.*, 77:217–233.
Foster, R. P. (1996), The bilingual self: Duet in two voices. *Psychoanal. Dial.*, 6:99–122.
Fraiberg, S. (1969), Libidinal object constancy and mental representation. *The Psychoanalytic Study of the Child*, 24:9–47. New York: International Universities Press.
Frankel, J. B. (1998), The play's the thing: How the essential processes of therapy are seen most clearly in child therapy. *Psychoanal. Dial.*, 8:149–182.
Franklin, G. (1990), The multiple meanings of neutrality. *J. Amer. Psychoanal. Assn.*, 38:195–220.
Freud, A. (1946), *The Ego and the Mechanisms of Defense*. New York: International Universities Press.
——— (1969), Discussion of John Bowlby's work. In: *The Writings of Anna Freud, Vol. 5*. New York: International Universities Press.
Freud, S. (1895), Project for a scientific psychology. *Standard Edition*, 1:295–397. London: Hogarth Press, 1966.
——— (1900), The interpretation of dreams. *Standard Edition*, 4 & 5. London: Hogarth Press, 1953.
——— (1910), Five lectures on psycho-analysis. *Standard Edition*, 11:9–55. London: Hogarth Press, 1957.
——— (1911), Formulations on the two principles of mental functioning. *Standard Edition*, 12:213–226. London: Hogarth Press, 1958.
——— (1912), Recommendations to physicians practicing psychoanalysis. *Standard Edition*, 12:109–120. London: Hogarth Press, 1961.
——— (1913a), Totem and taboo. *Standard Edition*, 13:1–161. London: Hogarth Press, 1955.
——— (1913b), On beginning the treatment (Further recommendations on the technique of psycho-analysis, I). *Standard Edition*, 12:121–144. London: Hogarth Press, 1958.

——— (1914), On narcissism: An introduction. *Standard Edition*, 14:67–102. London: Hogarth Press, 1957.
——— (1915), The unconscious. *Standard Edition*, 14:159–215. London: Hogarth Press, 1957.
——— (1923), The ego and the id. *Standard Edition*, 19:3–66. London: Hogarth Press, 1961.
——— (1925), Negation. *Standard Edition*, 19:235–239. London: Hogarth Press, 1961.
——— (1926), Inhibitions, symptoms and anxiety. *Standard Edition*, 20:87–172. London: Hogarth Press, 1959.
Friedman, L. (1973), How real is the realistic ego in psychotherapy? *Arch. Gen. Psychiat.*, 28:377–383.
——— (1978), Trends in the psychoanalytic theory of treatment. *Psychoanal. Quart.*, 47:524–567.
——— (1983), Discussion: Piaget and psychoanalysis, by A. Tenzer. *Contemp. Psychoanal.*, 19:339–348.
——— (1986), Kohut's testament. *Psychoanal. Inq.*, 6:321–347.
——— (1988), *The Anatomy of Psychotherapy*. Hillsdale, NJ: The Analytic Press.
——— (1994), The objective truth controversy: How does it affect tomorrow' s analysts? *Internat. Fed. Psychoanal. Educ. Newsltr.*, 3:7–14.
Friedman, L. J. (1975), Current psychoanalytic object relations theory and its clinical implications. *Internat. J. Psycho-Anal.*, 56:137–146.
Fromm, E. (1941), *Escape from Freedom*. New York: Rinehart.
——— (1947), *Man for Himself*. New York: Rinehart.
——— (1956), *The Sane Society*. London: Routledge & Kegan Paul.
——— (1964), *The Heart of Man: Its Genius for Good and Evil*. New York: Harper & Row.
Gabbard, G. O. (1992), Commentary on "Dissociative processes and transference-countertransference paradigms . . ." by J. Davies & M. G. Frawley. *Psychoanal. Dial.*, 2:37–47.
Garma, A. (1955), Vicissitudes of the dream screen and the Isakower phenomenon. *Psychoanal. Quart.*, 24:369–383.
Gedo, J. (1977), Notes on the psychoanalytic management of archaic transferences. *J. Amer. Psychoanal. Assn.*, 25:787–803.
Ghent, E. (1989), Credo: The dialectics of one-person and two-person psychologies. *Contemp. Psychoanal.*, 25:169–211.
——— (1990), Masochism, submission, surrender. *Contemp. Psychoanal.*, 26:108–136.
——— (1992), Paradox and process. *Psychoanal. Dial.*, 2:135–159.
——— ((1994), Empathy: Whence and whither? *Psychoanal. Dial.*, 4:473–486.
——— (1995), Interaction in the psychoanalytic situation. *Psychoanal. Dial.*, 5:479–491.
Gill, M. M. (1979), The analysis of the transference. *J. Amer. Psychoanal. Assn.*, 27 (supplement):263–288.
——— (1984), Psychoanalysis and psychotherapy: A revision. *Internat. Rev. Psycho-Anal.*, 11:161–179.

Ginot, E. (1997), The analyst's use of self, self-disclosure, and enhanced integration. *Psychoanal. Psychol.*, 14:365–381.
Giovacchini, P. (1985), The unreasonable patient: A borderline character disorder. *Psychoanal. Pract.*, 1:5–24.
Gitelson, M. (1962), On the curative factors in the first phase of analysis. In: *Psychoanalysis: Science and Profession*. New York: International Universities Press, 1973, pp. 311–341.
Glatzer, H. T. & Evans, W. N. (1977), On Guntrip's analysis with Fairbairn and Winnicott. *Internat. J. Psychoanal. Psychother.*, 6:81–98.
Gleick, J. (1987), *Chaos*. New York: Viking.
Goldberg, A. (1986), Reply to P. M. Bromberg's discussion of "The wishy-washy personality" by A. Goldberg. *Contemp. Psychoanal.*, 22:387–388.
Goldberg, P. (1987), The role of distractions in the maintenance of dissociative mental states. *Internat. J. Psycho-Anal.*, 68:511–524.
——— (1995), "Successful" dissociation, pseudovitality, and inauthentic use of the senses. *Psychoanal. Dial.*, 5:493–510.
Golding, W. (1955), *Lord of the Flies*. New York: Coward-McCann.
Goleman, D. (1985), Freud's mind: New details revealed in documents. *The New York Times*, November 12, pp. C1–C3.
Goodman, A. (1992), Empathy and inquiry: Integrating empathic mirroring in an interpersonal framework. *Contemp. Psychoanal.*, 28:631–646.
Gottlieb, R. (1997), Does the mind fall apart in multiple personality disorder? Some proposals based on a psychoanalytic case. *J. Amer. Psychoanal. Assn.*, 45:907–932.
Grand, S. (1997), The paradox of innocence: Dissociative "adhesive" states in perpetrators of incest. *Psychoanal. Dial.*, 7:465–490.
Gray, S. H. (1985), "China" as a symbol for vagina. *Psychoanal. Quart.*, 54:620–623.
Greenberg, J. R. (1981), Prescription or description: The therapeutic action of psychoanalysis. *Contemp. Psychoanal.*, 17:239–257.
——— (1986), Theoretical models and the analyst's neutrality. *Contemp. Psychoanal.*, 22:87–106.
——— (1991a), Countertransference and reality. *Psychoanal. Dial.*, 1:52–73.
——— (1991b), Psychoanalytic interaction. Presented at winter meeting of the American Psychoanalytic Association, New York City.
——— & Mitchell, S. A. (1983), *Object Relations in Psychoanalytic Theory*. Cambridge, MA: Harvard University Press.
Greenson, R. R. (1974), Loving, hating, and indifference toward the patient. *Internat. Rev. Psycho-Anal.*, 1:259–266.
Grotstein, J. S. (1979), Who is the dreamer who dreams the dream, and who is the dreamer who understands it? *Contemp. Psychoanal.*, 15:407–453.
——— (1995), Projective identification reappraised. *Contemp. Psychoanal.*, 31:479–511.
Guntrip, H. J. S. (1961a), *Personality Structure and Human Interaction: The Developing Synthesis of Psycho-dynamic Theory*. New York: International Universities Press.

——— (1961b), The schizoid problem, regression and the struggle to preserve an ego. In: *Schizoid Phenomena, Object Relations and the Self.* New York: International Universities Press, 1969, pp. 49–86.
——— (1969), *Schizoid Phenomena, Object Relations and the Self.* New York: International Universities Press.
——— (1971), *Psychoanalytic Theory, Therapy, and the Self.* New York: Basic Books.
Haley, J. (1969), The art of psychoanalysis. In: *The Power Tactics of Jesus Christ and Other Essays.* New York: Avon Books, pp. 9–26.
Harris, A. (1992), Dialogues as transitional space: A rapprochement of psychoanalysis and developmental psycholinguistics. In: *Relational Perspectives in Psychoanalysis,* ed. N. J. Skolnick & S. C. Warshaw. Hillsdale, NJ: The Analytic Press, pp. 119–145.
——— (1994), Gender practices and speech practices: Towards a model of dialogical and relational selves. Presented at spring meeting of Division of Psychoanalysis, American Psychological Association, Washington, DC.
——— (1995), Symposium on psychoanalysis and linguistics: Introduction. *Psychoanal. Dial.,* 5:615–618.
——— (1996), The conceptual power of multiplicity. *Contemp. Psychoanal.,* 32:537–552.
Havens, L. L. (1973), *Approaches to the Mind.* Boston: Little, Brown and Company.
——— (1976), *Participant Observation.* New York: Aronson.
Heilbrunn, G. (1953), Fusion of the Isakower phenomenon with the dream screen. *Psychoanal. Quart.,* 22:200–204.
Held-Weiss, R. (1984), The interpersonal tradition and its development: Some implications for training. *Contemp. Psychoanal.,* 20:344–362.
Hermans, H. J. M., Kempen, H. J. G. & van Loon, R. J. P. (1992), The dialogical self: Beyond individualism and rationalism. *Amer. Psychol.,* 47:23–33.
Hirschmuller, A. (1978), *The Life and Work of Josef Breuer.* New York: New York University Press.
Hoffmann, I. Z. (1983), The patient as interpreter of the analyst's experience. *Contemp. Psychoanal.,* 19:389–422.
——— (1991), Discussion: Toward a social-constructivist view of the psychoanalytic situation. *Psychoanal. Dial.,* 1:74–105.
——— (1994), Dialectical thinking and therapeutic action in the psychoanalytic process. *Psychoanal. Quart.,* 63:187–218.
Horner, A. (1979), *Object Relations and the Developing Ego in Therapy.* New York: Aronson.
Hughes, L. (1941), Evil. In: *The Collected Poems of Langston Hughes,* ed. A. Rampersad. New York: Knopf, p. 227.
Isakower, O. (1938), A contribution to the patho-psychology of phenomena associated with falling asleep. *Internat. J. Psycho-Anal.,* 19:331–345.
James, H. (1875), *Roderick Hudson.* New York: Penguin Books, 1969.

Johnson, B. (1977), The frame of reference: Poe, Lacan, Derrida. *Yale French Studies,* 55/56:457–505.
Kaiser, H. (1965), The universal symptom of the psychoneuroses: A search for the conditions of effective psychotherapy. In: *Effective Psychotherapy,* ed. L. B. Fierman. New York: Free Press, pp. 14–171.
Kamenetz, R. (1994), *The Jew in the Lotus.* San Francisco: HarperCollins.
Kennedy, R. (1996), Aspects of consciousness: One voice or many? *Psychoanal. Dial.,* 6:73–96.
Kernberg, O. F. (1966), Structural derivatives of object relationships. *Internat. J. Psycho-Anal.,* 47:236–253.
——— (1975), *Borderline Conditions and Pathological Narcissism.* New York: Aronson.
——— (1991), Transference regression and psychoanalytic technique with infantile personalities. *Internat. J. Psycho-Anal.,* 72:189–200.
Kerr, J. (1993), *A Most Dangerous Method.* New York: Knopf.
Khan, M. (1971), "To hear with the eyes": Clinical notes on body as subject and object. In: *The Privacy of the Self.* New York: International Universities Press, 1974, pp. 234–250.
Kirmayer, L. J. (1994), Pacing the void: Social and cultural dimensions of dissociation. In: *Dissociation: Culture, Mind, and Body,* ed. D. Spiegel. Washington, DC: American Psychiatric Press, pp. 91–122.
Kirstein, L. (1969), Afterward. In: *W. Eugene Smith: His Photographs and Notes.* New York: Aperture Press.
Klenbort, I. (1978), Another look at Sullivan's concept of individuality. *Contemp. Psychoanal.,* 14:125–135.
Kohut, H. (1966), Forms and transformations of narcissism. *J. Amer. Psychoanal. Assn.,* 14:243–272.
——— (1971), *The Analysis of the Self.* New York: International Universities Press.
——— (1972), Thoughts on narcissism and narcissistic rage. *The Psychoanalytic Study of the Child,* 27:360–400, New York: Quadrangle.
——— (1977), *The Restoration of the Self.* New York: International Universities Press.
Kramer, P. (1990), Così fan tutti. *The Psychiatric Times,* April, pp. 4–6.
Krystal, J. H., Bennett, A. L., Bremner, J. D., Southwick, S. M. & Charney, D. S. (1995), Toward a cognitive neuroscience of dissociation and altered memory functions in post-traumatic stress disorder. In: *Neurobiological and Clinical Consequences of Stress: From Normal Adaptation to PTSD,* ed. M. J. Friedman, D. S. Charney & A. Y. Deutch. Philadelphia: Lippincott-Raven, pp. 239–269.
Kvarnes, R. G. & Parloff, G. H., eds. (1976), *A Harry Stack Sullivan Case Seminar.* New York: Norton.
Lacan, J. (1966), *Ecrits.* Paris: Seuil.
Laing, R. D. (1960), *The Divided Self.* London: Tavistock.
——— (1962a), Confirmation and disconfirmation. In: *The Self and Others.* Chicago: Quadrangle, pp. 88–97.

——— (1962b), *The Self and Others*. Chicago: Quadrangle.
——— (1967), *The Politics of Experience*. New York: Pantheon.
Lamb, C. (1822), A dissertation upon roast pig. In: *Anthology of Romanticism*, 3rd ed., ed. E. Bernbaum. New York: Ronald Press, 1948, pp. 385–388.
Lampl-de Groot, J. (1981), Notes on "multiple personality." *Psychoanal. Quart.*, 50:614–624.
Langan, R. (1997), On free-floating attention. *Psychoanal. Dial.*, 7:819–839.
Lasch, C. (1979), *The Culture of Narcissism*. New York: Norton.
Laub, D. & Auerhahn, N. C. (1989), Failed empathy—A central theme in the survivor's Holocaust experience. *Psychoanal. Psychol.*, 6:377–400.
——— (1993), Knowing and not knowing massive psychic trauma: Forms of traumatic memory. *Internat. J. Psycho-Anal.*, 74:287–302.
Lerner, M. (1990), *Wrestling with the Angel*. New York: Norton.
Levenson, E. A. (1972), *The Fallacy of Understanding*. New York: Basic Books.
——— (1976a), The aesthetics of termination. *Contemp. Psychoanal.*, 12:338–342.
——— (1976b), A holographic model of psychoanalytic change. *Contemp. Psychoanal.*, 12:1–20.
——— (1978), Two essays in psychoanalytical psychology—I. Psychoanalysis: Cure or persuasion. *Contemp. Psychoanal.*, 14:1–30.
——— (1982), Follow the fox. *Contemp. Psychoanal.*, 18:1–15.
——— (1983), *The Ambiguity of Change*. New York: Basic Books.
——— (1988), Real frogs in imaginary gardens: Fact and fantasy in psychoanalysis. *Psychoanal. Inq.*, 8:552–567.
——— (1992), Mistakes, errors, and oversights. *Contemp. Psychoanal.*, 28:555–571.
Levi, A. (1971), "We." *Contemp. Psychoanal.*, 7:181–188.
Lewin, B. D. (1946), Sleep, the mouth, and the dream screen. *Psychoanal. Quart.*, 15:419–434.
——— (1948), Inferences from the dream screen. *Internat. J. Psycho-Anal.*, 29:224–231.
——— (1950), *The Psychoanalysis of Elation*. New York: Norton.
——— (1952), Phobic symptoms and dream interpretation. *Psychoanal. Quart.*, 21:295–322.
——— (1953), Reconsideration of the dream screen. *Psychoanal. Quart.*, 22:174–199.
Lewis, C. S. (1956), *Till We Have Faces: A Myth Retold*. New York: Harcourt Brace Jovanovich.
Lightman, A. (1993), *Einstein's Dreams*. New York: Pantheon Books.
Lionells, M. (1986), A reevaluation of hysterical relatedness. *Contemp. Psychoanal.*, 22:570–597.
Loevinger, J. (1973), Ego development: Syllabus for a course. In: *Psychoanalysis and Contemporary Science, Vol. II*, ed. B. B. Rubinstein. New York: Macmillan, pp. 77–98.
——— & Wessler, R. (1970), *Measuring Ego Development, Vol. I*. San Francisco: Jossey-Bass.

Loewald, H. (1960), On the therapeutic action of psychoanalysis. *Internat. J. Psycho-Anal.*, 41:16–33.
——— (1972), The experience of time. *The Psychoanalytic Study of the Child*, 27:401–410. New York: Quadrangle.
——— (1979), The waning of the Oedipus complex. *J. Amer. Psychoanal. Assn.*, 27:751–775.
Loewenstein, R. J. & Ross, D. R. (1992), Multiple personality and psychoanalysis: An introduction. *Psychoanal. Inq.*, 12:3–48.
Looker, T. (1998), "Mama, why don't your feet touch the ground?" Staying with the body and the healing moment in psychoanalysis. In: *Relational Perspectives on the Body: Psychoanalytic Theory and Practice*, ed. L. Aron & F. S. Anderson. Hillsdale, NJ: The Analytic Press, pp. 237–262.
Lyon, K. A. (1992), Shattered mirror: A fragment of the treatment of a patient with multiple personality disorder. *Psychoanal. Inq.*, 12:71–94.
Mahler, M. (1968), *On Human Symbiosis and the Vicissitudes of Individuation*. New York: International Universities Press.
——— (1972), On the first three subphases of the separation-individuation process. *Internat. J. Psycho-Anal.*, 53:333–338.
——— Pine, F. & Bergman, A. (1975), *The Psychological Birth of the Human Infant: Symbiosis and Individuation*. New York: Basic Books.
Marcuse, J. J. (submitted), And what does this bring to mind? Reflections on techniques of dream interpretation.
Marin, P. (1975), The new narcissism. *Harper's Magazine*, October, pp. 5–26.
Marmer, S. S. (1980), Psychoanalysis of multiple personality. *Internat. J. Psycho-Anal.*, 61:439–459.
——— (1991), Multiple personality disorder: A psychoanalytic perspective. *Psychiat. Clin. N. Amer.*, 14:677–693.
McDougall, J. M. (1987), Who is saying what to whom? An eclectic perspective. *Psychoanal. Inq.*, 7:223–232.
Mead, G. H. (1934), *Mind, Self and Society*. Chicago: The University of Chicago Press.
Merleau-Ponty, M. (1942), *The Structure of Behavior*. Boston: Beacon Press, 1963.
Mitchell, S. A. (1988), *Relational Concepts in Psychoanalysis: An Integration*. New York: Harvard University Press.
——— (1991), Contemporary perspectives on self: Toward an integration. *Psychoanal. Dial.*, 1:121–147.
——— (1993), *Hope and Dread in Psychoanalysis*. New York: Basic Books.
——— (1997a), Psychoanalysis and the degradation of romance. *Psychoanal. Dial.*, 7:23–41.
——— (1997b), *Influence and Autonomy in Psychoanalysis*. Hillsdale, NJ: The Analytic Press.
Mitrani, J. L. (1994), On adhesive pseudo-object relations, Part I. *Contemp. Psychoanal.*, 30:348–366.
——— (1995), On adhesive pseudo-object relations, Part II. *Contemp. Psychoanal.*, 31:140–165.

Modell, A. (1976), The "holding environment" and the therapeutic action of psychoanalysis. *J. Amer. Psychoanal. Assn.*, 24:285–308.
——— (1978), The conceptualization of the therapeutic action of psychoanalysis: The action of the holding environment. *Bull. Menn. Clin.*, 42:493–504.
——— (1986), The missing elements in Kohut's cure. *Psychoanal. Inq.*, 6:367–385.
Moore, B. E. & Fine, B. D., eds. (1968), *A Glossary of Psychoanalytic Terms and Concepts*, 2nd ed., New York: American Psychoanalytic Association.
——— (1990), *Psychoanalytic Terms and Concepts*, 3rd ed. New Haven, CT: American Psychoanalytic Association & Yale University Press.
Nabokov, V. (1920), Sounds. *The New Yorker*, August 14, 1995.
Nesse, R. M. (1991), What good is feeling bad?: The evolutionary benefits of psychic pain. *The Sciences*, Nov./Dec.:30–37.
Ogden, T. H. (1985), On potential space. *Internat. J. Psycho-Anal.*, 66:129–141.
——— (1986), *The Matrix of the Mind*. Northvale, NJ: Aronson.
——— (1989), *The Primitive Edge of Experience*. Northvale, NJ: Aronson.
——— (1991), An interview with Thomas Ogden. *Psychoanal. Dial.*, 1:361–376.
——— (1994), The analytic third: Working with intersubjective clinical facts. *Internat. J. Psycho-Anal.*, 75:3–19.
Ornstein, P. H. & Ornstein, A. (1980), Formulating interpretations in clinical psychoanalysis. *Internat. J. Psycho-Anal.*, 61:203–211.
Osborne, J. W. & Baldwin, J. R. (1982), Psychotherapy: From one state of illusion to another. *Psychotherapy*, 19:266–275.
Parker, R. B. (1983), *The Widening Gyre: A Spencer Novel*. New York: Dell.
Peterson, J. (1993), Reply to Van der Hart/Brown article. *Dissociation*, 6:74–75.
Piaget, J. (1932), *The Language and Thought of the Child*. New York: Meridian, 1955.
——— (1936), *The Origins of Intelligence in Children*, trans. M. Cook. New York: International Universities Press, 1952.
——— (1969), *The Psychology of the Child*. New York: Basic Books.
Pine, F. (1979), On the expansion of the affect array: A developmental description. *Bull. Menn. Clin.*, 43:79–95.
Pizer, B. (in press), Negotiating analytic holding: Discussion of P. Casement's "Analytic holding under pressure." *Psychoanal. Inq.*, Vol. 20, No. 1.
Pizer, S. A. (1992), The negotiation of paradox in the analytic process. *Psychoanal. Dial.*, 2:215–240.
——— (1996a), The distributed self: Introduction to symposium on "The multiplicity of self and analytic technique." *Contemp. Psychoanal.*, 32:499–507.
——— (1996b), Negotiating potential space: Illusion, play, metaphor, and the subjunctive. *Psychoanal. Dial.*, 6:689–712.
Plato (4th cent. B. C.), Apology (tr. B. Jowett). In: *The Dialogues of Plato*. New York: Bantam Books, 1986.
Putnam, F. (1988), The switch process in multiple personality disorder and other state-change disorders. *Dissociation*, 1:24–32.

——— (1992), Discussion: Are alter personalities fragments or figments? *Psychoanal. Inq.*, 12:95–111.
Rangell, L. (1979), Contemporary issues in the theory of therapy. *J. Amer. Psychoanal. Assn.*, 27(supplement):81–112.
Reik, T. (1936), *Surprise and the Psycho-Analyst*. London: Kegan Paul.
Reis, B. E. (1993), Toward a psychoanalytic understanding of multiple personality disorder. *Bull. Menn. Clin.*, 57:309–318.
——— (1995), Time as the missing dimension in traumatic memory and dissociative subjectivity. In: *Sexual Abuse Recalled*, ed. J. L. Alpert. Northvale, NJ: Aronson.
Ricoeur, P. (1986), The self in psychoanalysis and in phenomenological philosophy. *Psychoanal. Inq.*, 6:437–458.
Rivera, M. (1989), Linking the psychological and the social: Feminism, poststructuralism, and multiple personality. *Dissociation*, 2:24–31.
Roth, S. (1992), Discussion: A psychoanalyst's perspective on multiple personality disorder. *Psychoanal. Inq.*, 12:112–123.
Rothstein, A. (1980), *The Narcissistic Pursuit of Perfection*. New York: International Universities Press.
——— (1982), The implications of early psychopathology for the analyzability of narcissistic personality disorders. *Internat. J. Psycho-Anal.*, 63:177–188.
Russell, P. L. (1993), Discussion of Peter Shabad's "Resentment, indignation, entitlement: The transformation of unconscious wish into need." *Psychoanal. Dial.*, 3:515–522.
Rycroft, C. (1951), A contribution to the study of the dream screen. *Internat. J. Psycho-Anal.*, 32:178–184.
——— (1962), Beyond the reality principle. In: *Imagination and Reality*. London: Maresfield Library, 1968, pp. 102–113.
Sacks, O. (1992), The last hippie. *The New York Review*, March 26, pp. 53–62.
Sander, L. (1977), The regulation of exchange in the infant caretaker system and some aspects of the context-content relationship. In: *Interaction, Conservation, and the Development of Language*, ed. M. Lewis & L. Rosenblum. New York: Wiley, pp. 133–156.
Sandler, A-M. (1975), Comments on the significance of Piaget's work for psychoanalysis. *Internat. Rev. Psycho-Anal.*, 2:365–377.
——— (1977), Beyond eight month anxiety. *Internat. J. Psycho-Anal.*, 58:195–208.
Sandler, J. & Sandler, A-M. (1978), On the development of object relationships and affects. *Internat. J. Psycho-Anal.*, 59:285–296.
Schafer, R. (1968), *Aspects of Internalization*. New York: International Universities Press.
——— (1976), *A New Language for Psychoanalysis*. New Haven, CT: Yale University Press.
——— (1983), *The Analytic Attitude*. New York: Basic Books.
Schecter, D. E. (1978a), Attachment, detachment, and psychoanalytic

therapy. In: *Interpersonal Psychoanalysis: New Directions*, ed. E. G. Witenberg. New York: Gardner Press, pp. 81–104.
——— (1978b), Malevolent transformation: Some clinical and developmental notes. *Contemp. Psychoanal.*, 14:414–418.
——— (1980), Early developmental roots of anxiety. *J. Amer. Acad. Psychoanal.*, 8:539–554.
Schwaber, E. (1983), Psychoanalytic listening and psychic reality. *Internat. Rev. Psycho-Anal.*, 10:379–392.
Schwartz, H. L. (1994), From dissociation to negotiation: A relational psychoanalytic perspective on multiple personality disorder. *Psychoanal. Psychol.*, 11:189–231.
Searles, H. F. (1959), The effort to drive the other person crazy: An element in the aetiology and psychotherapy of schizophrenia. In: *Collected Papers on Schizophrenia and Related Subjects*. New York: International Universities Press, 1965, pp. 254–283.
——— (1977), Dual- and multiple-identity processes in borderline ego functioning. In: *Borderline Personality Disorders*, ed. P. Hartocollis. New York: International Universities Press, pp. 441–455.
Settlage, C. F. (1977), The psychoanalytic understanding of narcissistic and borderline personality disorders. *J. Amer. Psychoanal. Assn.*, 25:805–834.
Shakespeare, W. (1599–1601), Hamlet, Prince of Denmark. In: *The Complete Plays and Poems of William Shakespeare*, ed. W. A. Neilson & C. J. Hill. Cambridge, MA: Riverside, 1942, pp. 1043–1092.
Shapiro, D. (1965), *Neurotic Styles*. New York: Basic Books.
Shelley, M. (1818), *Frankenstein*. New York: Bantam, 1991.
Shengold, L. (1989), *Soul Murder*. New Haven, CT: Yale University Press.
——— (1992), Commentary on "Dissociative processes and transference-countertransference paradigms . . ." by J. Davies & M. G. Frawley. *Psychoanal. Dial.*, 2:49–59.
Silberer, H. (1909), A method of producing and observing symbolic hallucinations. In: *Organization and Pathology of Thought*, ed. D. Rapaport. New York: Columbia University Press, 1951, pp. 195–207.
Slavin, M. O. & Kriegman, D. (1992), *The Adaptive Design of the Human Psyche*. New York: Guilford.
Slochower, J. A. (1994), The evolution of object usage and the holding environment. *Contemp. Psychoanal.*, 30:135–151.
Smith, B. L. (1989), Of many minds: A contribution on the dynamics of multiple personality. In: *The Facilitating Environment*, ed. M. G. Fromm & B. L. Smith. Madison, CT: International Universities Press, pp. 424–458.
Smith, H. F. (1995), Analytic listening and the experience of surprise. *Internat. J. Psycho-Anal.*, 76:67–78.
Sorenson, R. L. (1994), Therapists' (and their therapists') God representations in clinical practice. *J. Psychol. & Theol.*, 22:325–344.
Sperling, O. E. (1957), A psychoanalytic study of hypnogogic hallucinations. *J. Amer. Psychoanal. Assn.*, 5:115–123.
——— (1961), Variety and analyzability of hypnogogic hallucinations and dreams. *Internat. J. Psycho-Anal.*, 42:216–223.

Spillius, E. B. & Feldman, M., eds. (1989), *Psychic Equilibrium and Psychic Change: Selected Papers of Betty Joseph*. London: Tavistock/Routledge.
Spruiell, V. (1983), The rules and frames of the psychoanalytic situation. *Psychoanal. Quart.*, 52:1–33.
Stanton, A. H. (1978), The significance of ego interpretive states in insight-directed psychotherapy. *Psychiatry*, 41:129–140.
Stein, G. (1937), *Everybody's Autobiography*. Cambridge, MA: Exact Change, 1993.
Steingart, I. (1969), On self, character, and the development of a psychic apparatus. *The Psychoanalytic Study of the Child*, 24:271–303. New York: International Universities Press.
Stern, D. B. (1983), Unformulated experience. *Contemp. Psychoanal.*, 19:71–99.
——— (1996), Dissociation and constructivism. *Psychoanal. Dial.*, 6:251–266.
——— (1997), *Unformulated Experience: From Dissociation to Imagination in Psychoanalysis*. Hillsdale, NJ: The Analytic Press.
Stern, D. N. (1985), *The Interpersonal World of the Infant: A View from Psychoanalysis and Developmental Psychology*. New York: Basic Books.
Stern, M. M. (1961), Blank hallucinations: Remarks about trauma and perceptual disturbances. *Internat. J. Psycho-Anal.*, 42:205–215.
Stolorow, R. D. (1975), Toward a functional definition of narcissism. *Internat. J. Psycho-Anal.*, 56:179–186.
——— Brandchaft, B. & Atwood, G. E. (1987), *Psychoanalytic Treatment*. Hillsdale, NJ: The Analytic Press.
Stone, L. (1961), *The Psychoanalytic Situation: An Examination of Its Development and Essential Nature*. New York: International Universities Press.
Strachey, J. (1934), The nature of the therapeutic action of psychoanalysis. *Internat. J. Psycho-Anal.*, 15:127–159.
Sturgeon, T. (1953), *More Than Human*. New York: Carroll & Graf.
Sullivan, H. S. (1937), A note on the implications of psychiatry, the study of interpersonal relations, for investigations in the social sciences. In: *The Fusion of Psychiatry and Social Science*. New York: Norton, 1964, pp. 15–29.
——— (1940), *Conceptions of Modern Psychiatry*, New York: Norton.
——— (1942), Leadership, mobilization, and postwar change. In: *The Fusion of Psychiatry and Social Science*. New York: Norton, 1964, pp. 149–176.
——— (1948), The meaning of anxiety in psychiatry and in life. In: *The Fusion of Psychiatry and Social Science*. New York: Norton, 1964, pp. 229–254.
——— (1950a), Tensions interpersonal and international: A psychiatrist's view. In: *The Fusion of Psychiatry and Social Science*. New York: Norton, 1964, pp. 293–331.
——— (1950b), The illusion of personal individuality. In: *The Fusion of Psychiatry and Social Science*. New York: Norton, 1964, pp. 198–226.
——— (1953), *The Interpersonal Theory of Psychiatry*. New York: Norton.
——— (1954), *The Psychiatric Interview*. New York: Norton.
——— (1956), *Clinical Studies in Psychiatry*. New York: Norton.
——— (1972), *Personal Psychopathology*. New York: Norton.

Symington, N. (1983), The analyst's act of freedom as agent of therapeutic change. *Internat. Rev. Psycho-Anal.*, 10:283–291.
Target, M. & Fonagy, P. (1996), Playing with reality: II. The development of psychic reality from a theoretical perspective. *Internat. J. Psycho-Anal.*, 77:459–479.
Tauber, E. S. & Green, M. R. (1959), *Prelogical Experience*. New York: Basic Books.
Taylor, G. J. (1987), *Psychosomatic Medicine and Contemporary Psychoanalysis*. Madison, CT: International Universities Press.
Terr, L. C. (1984), Time and trauma. *The Psychoanalytic Study of the Child*, 39:633–665. New Haven, CT: Yale University Press.
Thompson, C. (1953), Transference and character analysis. In: *Interpersonal Psychoanalysis*, ed. M. Green. New York: Basic Books, 1964, pp. 22–31.
——— (1956), The role of the analyst's personality in therapy. In: *Interpersonal Psychoanalysis*, ed. M. Green. New York: Basic Books, 1964, pp. 168–178.
Tolpin, M. (1971), On the beginnings of a cohesive self: An application of the concept of transmuting internalization to the study of the transitional object and signal anxiety. *The Psychoanalytic Study of the Child*, 26:316–352. New York: Quadrangle.
Turkle, S. (1978), *Psychoanalytic Politics: Jacques Lacan and Freud's French Revolution*, rev. ed. New York: Guilford, 1992.
Weiss, J. & Sampson, H. (1986), *The Psychoanalytic Process: Theory, Clinical Observation, and Empirical Research*. New York: Guilford.
Winnicott, D. W. (1945), Primitive emotional development. In: *Collected Papers*. London: Tavistock, 1958, pp. 145–156.
——— (1949), Mind and its relation to the psyche-soma. In: *Collected Papers*. London: Tavistock, 1958, pp. 243–254.
——— (1950), Aggression in relation to emotional development. In: *Collected Papers*. London: Tavistock, 1958, pp. 204–218.
——— (1951), Transitional objects and transitional phenomena. In: *Collected Papers*. London: Tavistock, 1958, pp. 229–242.
——— (1955–1956), Clinical varieties of transference. In: *Collected Papers*. London: Tavistock, 1958, pp. 295–299.
——— (1960a), Ego distortion in terms of true and false self. In: *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press, 1965, pp. 140–152.
——— (1960b), The theory of the parent–infant relationship. In: *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press, 1965, pp. 37–55.
——— (1962), The aims of psycho-analytical treatment. In: *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press, 1965, pp. 166–170.
——— (1963a), Communicating and not communicating leading to a study of certain opposites. In: *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press, 1965, pp. 179–192.

——— (1963b), The development of the capacity for concern. In: *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press, 1965, pp. 73–82.
——— (1965), *The Maturational Processes and the Facilitating Environment*. New York: International Universities Press.
——— (1967), The location of cultural experience. In: *Playing and Reality*. New York: Basic Books, 1971, pp. 95–103.
——— (1969), The use of an object and relating through identifications. In: *Playing and Reality*. New York: Basic Books, 1971, pp. 86–94.
——— (1971a), *Playing and Reality*. New York: Basic Books.
——— (1971b), The place where we live. In: *Playing and Reality*. New York: Basic Books, 1971, pp. 104–110.
——— (1971c), Playing: Creative activity and the search for the self. In: *Playing and Reality*. New York: Basic Books, 1971, pp. 53–64.
——— (1971d), Dreaming, fantasying, and living: A case-history describing a primary dissociation. In: *Playing and Reality*. New York: Basic Books, 1971, pp. 26–37.
——— (1974), Fear of breakdown. *Internat. Rev. Psycho-Anal.*, 1:103–107.
Witenberg, E. G. (1976), To believe or not to believe. *J. Amer. Acad. Psychoanal.*, 41:433–445.
——— (1987), Clinical innovations and theoretical controversy. *Contemp. Psychoanal.*, 23:183–197.
Wolff, P. H. (1987), *The Development of Behavioral States and the Expression of Emotion in Early Infancy*. Chicago: University of Chicago Press.
Wolstein, B. (1971), Interpersonal relations without individuality. *Contemp. Psychoanal.*, 8:75–80.
Young, W. C. (1988), Psychodynamics and dissociation. *Dissociation*, 1:33–38.