

3P TERM TWO; KOHUT AND THE DEVELOPMENT OF THE SELF

Kohut speaks of the Self, the Selfobject, and the Selfobject Relationship. In exploring these concepts I'll be drawing not only on his work but on that of his associates. I will make occasional references to Winnicott, Rogers and Stern, to help locate Kohut's views among those we have principally considered. My account will lean gratefully on Chapter 11 of Bacal and Newman's "Theories of Object Relations: Bridges to Self Psychology" (1990).

A selfobject supports the sense of self, by evoking, maintaining, or enhancing it. Bacal and Newman list the functions of the selfobject in a relationship which affect the sense of self:

1. Attunement to affective states
2. Validation of subjective experience
3. Affect containment
4. Tension regulation
5. Soothing, sustaining & organising a sense of self weakened by selfobject failure
6. Recognition of uniqueness and creative potential

Of these, the first two perhaps relate to Rogers' "empathy" and the last one to his "prizing". The middle three seem to echo Winnicott's view of the good enough mother as providing her infant with holding and containment together with an absence of retaliation. (The second also connects with Alice Miller's "advocate" role).

Several definitions of "self" appear in the self-psychology literature:

1. "a unit, cohesive in space and enduring in time, which is a centre of initiative and a recipient of impressions" (Kohut 1977;99)
2. "A self ...is established..when the selfobjects and their functions have been transformed into psychological structures" (Goldberg)
3. "the functionally or operationally separate focus of various relations"(Goldberg)
4. "a psychological structure, an enduring configuration associated with the experience of selfhood, consisting of a cluster of potentialities evoked and maintained by selfobject relations... it has acquired self-maintenance capacities that can be regarded as comprising representations, or amalgams, of healthy self-selfobject linkages" (Wolf)

This can be boiled down to the idea of a person who experiences a sense of continuing, coherent identity, involving the ability to be in touch with the world through his perceptions and able to act creatively. And

the capacity to experience all this arises, out of good enough environmental provision which has become internalised. This view again seems to combine the Rogerian sense of a person as authentic and autonomous with Winnicott's view that existence as a separate being requires that the good features of good real relationships be taken in and made the person's own.

In real life, selfobject functions may be performed in the same action as other functions. Providing sexual pleasure perhaps meets an instinctual need, but at the same time gives an experience of being valued, cared for, responded to in a way that affects self-esteem, it involves a selfobject function.

Notice that we are no longer talking of an infant here, and being a self with selfobject structures internalised does not preclude or make unnecessary selfobject responses in relationships with real others. For Kohut, we don't achieve a state in which real relationships are no longer needed to sustain us and help us feel good about ourselves; what supports the self is in his view something that is both inside and outside us.

In Kohut's story of the development of the self, we begin with the fact that before a self has become established, the infant is held within a set of caring selfobjects who relate to him as if he already were a self: there is a primal, virtual self which, with good enough mothering becomes a cohesive self structure.

Good enough mothering is above all reliable. The mother is reliably there for the infant, and provides two basic forms of selfobject relationship. First of all, mirroring, which entails recognition of uniqueness, talent, capacities and personal attractiveness. It is this kind of provision that Rogers calls "prizing". Secondly, there is the idealizing function, which allows the infant to feel a sense of proudly belonging with the one he admires.

Unlike Winnicott, Kohut does not see the relationship between infant and mother as a merger, nevertheless, selfobjects function at the beginning to supply parts of the self, and may be undifferentiated from the self. The implication seems to be that what Winnicott describes may be far from normal. For Kohut and Wolf, a normal healthy self does not confuse itself and its selfobjects, but sees them as relatively differentiated, positing the kind of control over them a grown up expects to have, say, over his own body and mind, rather than the kind of control one experiences over others. So that the infant and its selfobject, while not fully differentiated, may be related as perhaps you experience yourself now to your right hand. This version of the story is consistent with the recent work of the developmental psychologist, Daniel Stern, of whom much has been made.

Someone whose sense of self is strong is less likely to experience severe anxiety, depersonalization, fragmentation, in the face of separation, though he may feel sadness and loneliness if a selfobject is lost. An adult whose selfobject experience has been particularly

deficient may need to experience itself as part of another in order to stay intact.

I think of a client who has organised his life around caring for severely deprived others, and who has lived apart from his partner for two years, except at weekends. During the week he experiences endless disintegrative attacks from colleagues who seem exasperated and disapproving and clients whose lives remain chaotic despite his increasingly desperate efforts to help them. At weekends, as he openly admits, he ruthlessly uses his partner as a receptacle for his distress, becomes terrified and enraged if she makes any demand on him; if she fails him, he fears he will kill her and himself, and lies awake at nights afraid that his bed will burst into flames. His need for her humiliates him, but he despairingly insists that he would die if she were not there. What selfobject functions he can manage to obtain, seem almost entirely outside himself: what structure there is seems demonstrably precarious - he can get what he wants, but the relation to his selfobjects is most certainly not that of an adult to his body, rather it seems it is to other people whom he must both keep separate from himself, because they threaten to take him over, or become bored with him and abandon him, or become so unsatisfactory that he will destroy them and himself.

Self psychology sees a lifelong need for selfobject relationships, and therefore the appearance of such needs is not regarded as infantile or regressive. Good early experience does not mean one outgrows selfobject needs, but that there is a basic sense of a right to such responsiveness, and an ability to make appropriate choices of selfobjects in later life, together with a lessening of the intensity of such needs concomitant with successful internalization of selfobject functions.

With this understanding I think we can look critically at Rogers' view that regression and dependence have no proper place in therapy. Insofar as Rogers client-centred therapist is providing an empathic environment for the client, in which the client can reclaim his suppressed potentials, it seems the therapist is providing selfobject functions. Winnicott would see this as including regression in the interests of the True Self to the point at which development had to be halted, a second chance to grow from what may be the place the client got stuck in as a small infant. In any case, there is, again following Winnicott, a continuum of True/False Self organisation moving from very severe disturbance to normal living. An empathic environment may therefore quite appropriately lead to regression and dependence; the therapist is providing something that has been largely absent in the client's parenting for most of the client's life - it would seem entirely understandable and healthy if the client should become childlike even though not a child, and that dependency can be understood as needing the therapist to provide what has not yet been made the client's own: empathy, prizing, acceptance, without judgment or retaliation.

To the mirroring and idealizing selfobject configurations, Kohut and others have added further types. Here is a list of these configurations.

- 1) Mirroring - recognition of one's worth
- 2) Idealising- an accepting, admirable other in whose shadow one rightfully & proudly walks
- 3) Twinship - an alter ego, imaginary or actual companion who feels the *same*, and is important in the development of skills and competence. (At its peak in latency)
- 4) Adversarial - someone to kick against, do battle with, strengthening boundaries of self.
- 5) Ability to be able to evoke needed selfobject functions from others.

Self-psychologists reject the Freudian drives, and see destructiveness and perversity not as intrinsic qualities in need of taming, but as disintegration products of failures in the selfobject provision. To be sexual, assertive, angry at frustration, interference or rejection are expressions of a healthy self, vigorously pursuing its aims in life. Where there has been a weakening or failure to establish the sense of self, the person is extremely vulnerable, and prone to narcissistic rage in order to stave off further injury or to retaliate against the injurious selfobject.

As with Rogers and Winnicott, so the self-psychologist sees therapy as a fresh chance to become a self, a person. The selfobject transferences or relationships of clients to their therapists take the same form as those experienced with their caretakers in childhood. If there has been a traumatic disruption of the sense of entitlement to selfobject functions - or, we might say, love - the client will try to merge with the therapist, to try to get back beyond the trauma, or appear to avoid all relationship with the therapist. It is clearly most helpful if the therapist can be aware of this and allow for it. The therapist needs to empathise, to attend to the subjective truth of the client's experience, and this includes a willingness to consider countertransference as a possible contributor to the client's difficulties, in the interest of the client's self. Transference here is understood not as regression, projection, displacement only, but also as the influence of ways of understanding and perceiving derived from early experience. In establishing a selfobject relationship, not only transference, but also creative fantasies about the possibilities of finding someone trustworthy in the therapist, are involved. There is a real as well as a transference relationship with the therapist; not only old experiences of the possibility of a good enough environment are revived, new ones are created, or discovered. Imagination becomes important when we realise that the selfobject as an intrapsychic experience of a real person may or may not accurately reflect the actual character of the real person. Good experiences of real relating become elaborated in fantasy, and this contributes to the inner experience of

a good enough environment. Transitional objects like Teddy bears and imaginary companions belong in this activity, and show the person not only taking in what is good but taking over imaginatively the task of creating that sense of being loved.

So a corrective experience in therapy involves the combination of the therapist's empathy for the client, the reviving of early good experience, and the imaginative or creative work of the client. To empathy from the therapist can be added to providing of meaningful communication of his understanding, that helps the client achieve coherence in his inner world. But the sense of being understood here comes less from words than from quiet attentiveness, or musical interventions such as grunts and murmurs. Words may interrupt the client's own creativity. Here again, a point of similarity between self-psychology, Rogers and Winnicott, who both saw the need to trust the client's own creative capacity to find his own meanings. A further ingredient in the therapy will be opportunities for "optimum frustration", such as necessary separations and absences, followed by re-establishment of the relationship, resulting in transmuting internalizations: this is Winnicott's "failure" of the therapist, and survival of the client's narcissistic rage responses.

Cure is seen in terms quite comparable with Rogers: the strengthening of the self, and the ability to establish appropriate relationships with others.

(Based on an excerpt from "From Empathy to Imagination" a paper in progress by J.K.Wheway)

Further Reading:

Bacal and Newman	Theories of Object Relations: Bridges to Self-Psychology	Columbia University Press, 1990.
Greenberg and Mitchell	Object Realtions in Psychoanalytic Theory	Harvard 1983
M.Kahn	Between Therapist & Client	Freeman 1991
H. Kohut	The Restoration of the Self	International Universities Press 1988
P.Mollon	The Fragile Self	Whurr 1993
M.Pines	The Self in Psychotherapy	Severnside I.P. 1992
Stolorow Brandschaft & Atwood	Psychoanalytic Treatment: An Intersubjective Approach	Analytic Press 1987

