

The Return to the Self: A Self Oriented Theory of Development and Psychotherapy Will Davis

Received 04 September 2014; accepted 27 May 2015

Abstract

In order to address an overemphasis on the role of the object, I discuss eight principles of a self relations theory: (1) There is an innate, self organizing endo self, (2) The self is the aim of the drive not the object, (3) The self, not the other, is the organizing agent of experience, (4) The self to self relationship is the earliest relationship, (5) The self creates the object, (6) The self creates the object to satisfy its desires, not its needs, (7) The object does not gratify, (8) Detachment is as important as attachment.

Keywords: Self relations theory, self, Reich, instroke, self referential, default mode network, brainstem consciousness

International Body Psychotherapy Journal *The Art and Science of Somatic Praxis*
Volume 14, Number 2 fall 2015 pp 28 - 46. ISSN 2169-4745 Printing, ISSN 2168-1279 Online
© Author and USABP/EABP. Reprints and permissions secretariat@eabp.org

Introduction

To overcome an over emphasis on the formative role of the other in development and psychotherapy I argue for an early state of subjectivity that is a coherent, sense of self-existence, prior to relation with others (Davis, 2014). Arising autopoietically, this self is brought to initial relationships, leading in turn to its own further development. The importance of the other is not denied, but redefined. There is increasing evidence of the self-initiating and self-regulating resources of the infant: the self as the organizing agent of its own experience (Beebe, in Mitchell, 2000; Kouider, 2013; deCasper and Fifer, in Mitchell, 2000; Heppner, 2002; Laeng et al., 2012; Stern, 1998; Laeng et al., 2013). I have called this self-agency the endo self in order to accentuate the inner origins of this interoceptive state (Davis, 2014). Based on the endo self is the self-relations theory – the return to the self.

Psychotherapy and object relations in particular, stress the environment as if the object is the creative force in development. Mahler described the baby moving towards the object and away from the object (Mahler, 1972). Is the role of the infant in this formulation non-existent, only receptive, or simply passive? The theme of the overemphasis on the other runs through the history of psychology. In the 1930s the behaviorist John Watson (1998) took the extreme position that you could “create” a person:

Give me a dozen healthy infants, well-formed, and my own specified world to bring them up in and I'll guarantee to take any one at random and train him to become any type of specialist I might select – doctor, lawyer, artist, merchant-chief and yes, even beggar man and thief regardless of his talents, penchants, tendencies, abilities, vocations and race of his ancestors (p. 82).

In 1955 Gordon Allport, the president of the American Psychological Association, had to defend the existence of a self and its relevance to psychology (Strauss & Goethals, 1991, p.5). Despite the later works of self-oriented theorists like Maslow, (1968) Rogers and Kohut (2001) the self's role in its own development was minimized. This overemphasis on the other encouraged an exaggerated importance of the role of the therapist. Fairbairn went so far as to say the object is the ultimate aim of libidinal strivings (Fairbairn, 1941).

A self-relations theory is the obverse of an object-oriented theory. It is not a matter of exclusion, but of emphasis; one does not invalidate the other. Subject and object are both necessary in a creative, pulsatory dynamic towards development and healing. The object is critical to development but not causative. Even chimpanzees raised in isolation do not develop a sense of self. Self development is not an individualistic affair but is dependent on specific qualities in a relationship. "There is a tendency to look at the self as an individual, separate from others. But the true self can only emerge in relatedness: intersubjectivity" (Ryan, 1991, p.221).

The self's participation in its own developmental/healing processes is critical. Neither development nor therapy is about what the other *does*; it is about what *happens* to the self. An additional reason to develop a self relation's theory is to move away from the pathologically oriented medical model and continue to develop what Maslow called a positive psychology (Maslow, 1968).

Eight Principles of a Self-Relation Theory

1. The Endo Self

The endo self describes an early, self organizing, embodied, coherent sense of self whose unique quality is that it exists *a priori* to relationship; an autonomous self, grounded in relationship (Davis, 2014). There are suggestions for an endo self-concept from a variety of disciplines. Maslow's (1968) "being states", Guntrip's "inner core of selfhood", Winnicott's (In Buckley, 1986) "incommunicado core", Loewald's (In Mitchell, 2001) "primary experience is best described as being" all suggest a deeper sense of consciousness/being/self. Jantsch (1979) comes directly to the point: "...with existence comes consciousness" (p.10) and Maturana and Varela (1972) define cognition as a biological phenomenon; "if you are living, you have consciousness" (1972, p.5).

Indeed, the Cambridge Conference on Consciousness (2012) emphasized that affect systems are concentrated in subcortical regions. There is subjectivity in the fetus before the development of cortical activity; before cognition and language. Mark Solms and Jaak Panksepp have elaborated the importance of "subcortical energies". They call for a reorganization of consciousness and unconsciousness. They argue there is an affective core consciousness in the brain stem that is universal in all mammals and that higher cortical brain functions - cognition, language and representation - are built on this lower, "basement" affect consciousness. For a counter argument, see Gallese, 2013.

Freud "...assumed that the ego enlightened the id. It now appears more likely that the opposite happens" (Solms & Panksepp, 2012, p. 168). The "seat of consciousness" - the declarative, abstracted, corticocentric, represented self - is in fact "unconscious in itself". This reverses Freud's image of the tip of the iceberg as consciousness and the underwater section as the unconscious. I suggest that the underwater part of the iceberg is consciousness and the tip of the iceberg is motor/sensory based perception and awareness that is dependent on the brainstem's "core" consciousness. "The neocortex, the supposed repository of consciousness,

is intrinsically unconscious” (Solms and Panksepp, p. 166).

Of particular interest is Solms and Panksepp’s differentiation of *two* internal bodies. The classical model is in the insula cortex represented by the Homunculus which was considered the internal, subjective body; the “self”. They argue that this is an *external* body representation, an “object” located in the same brain functions as all objects. The true *internal* subjective body is represented in the affect consciousness of the brainstem, not as an object, but as the “subject” of perception. On this level of functioning, “...perception happens to a unitary, embodied subject” (Solms & Panksepp, p. 156) that I refer to as the endo self.

The interoceptive brainstem...generates internal “states” rather than external ‘objects’ of perception. It gives rise to a background state of ‘being’; this aspect of the body is the *subject* of perception (Solms & Panksepp, 2012, p. 156).

As body oriented psychotherapists, we ask which “body” do we work with: the external oriented “body” engaged in external relationships, or the interoceptive, internal “unitary, embodied subject” in relation to itself? Or both?

Consciousness is “endogenous, subjective, and fundamentally interoceptive” (Solms & Panksepp; 2012, p. 164). There is a “vast variety of selves” on the cognitive level, but on the functional level there is but one endo self. This is the root of my argument for an endo self and a self-relations theory.

2. The Self, not the Object, is the Aim of the Drive

Fairbairn quotes a patient who demanded: “What I want is a father!” (Fairbairn, 1941). He emphasized the word “father” to support his theory about the importance of the object in determining development and by extension, the therapist. He concluded that the object and not gratification is most important. The diagram below represents the unidirectional, object-oriented movement as the goal of the drive.

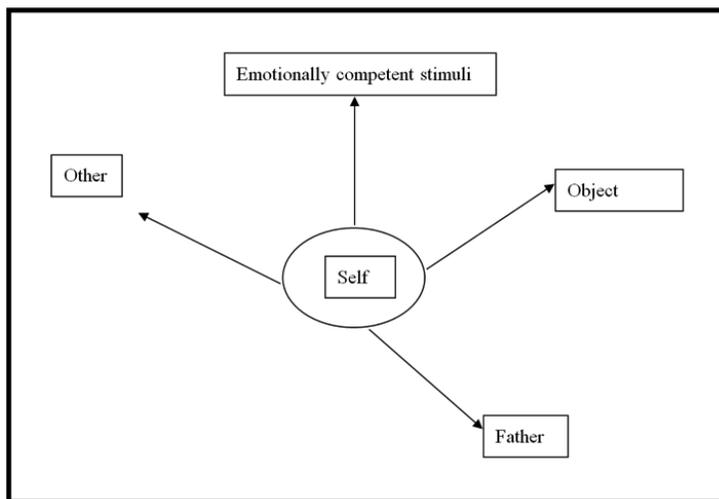


Figure 1. Diagram of the unidirectional view of developmental theory.

Self-relations theory emphasizes: “I” and “want”. Therefore, the aim of the drive is the self. Only when the self experiences itself in object contact can the drive be fulfilled. When a need state persists, the goal of the drive becomes the object, and thus the self is never satisfied.¹ The contact with the object must be incorporated into the self’s experience of itself or else no development/satisfaction has occurred. To use Damasio’s terminology, there must be “an experiencer of the experience” (In Kandel, 2013, p. 464). The creative developmental force is when the self experiences *itself* through the contact with the other. A self to other model is an endo psychic experience of an interpersonal event. A self to self model is an endo psychic experience of an intrapsychic event! This is in line with Solms and Panksepp’s (2012) interoceptive, phenomenological experiences arising endogenously in the brain stem.

The overemphasis on the other leads to well known problems of being other oriented, low self esteem, pathologically dependent, narcissism and orality. It also raises the important developmental themes of autonomy and heteronomy as well as attachment and detachment. In *The Nature of the Self in Autonomy and Relatedness* the cognitive psychologist Ryan (1991) points out that when the other is overemphasized one can be in different relationships with the object: i.e. to satisfy one’s own needs - other as object, being-for-others - self as object; or in contingency, conditional love. With an overemphasis on the other there is a risk of introjection; an external regulation and set of values that one mistakenly takes for one’s own which is “...re-enforced by guilt, anxiety or other self esteem dynamics”; heteronomy rather than autonomy (Ryan, 1991, p. 217).

The subject’s participation in her own healing process is essential. As a result, Ryan (1998) argues for a “[n]ascent core of self” (Ryan, 1998, p.214). “Agency is not just a post-behavioral construct but an aspect of experience from infancy onwards” (Ryan, 1998, p. 215). Agency is the psychic manifestation of the organizational properties of all living entities” (Ryan, 1998, p. 214). This leaves the infant with three possibilities: give up relatedness to preserve the self, enmesh to not lose the other, or maintain a bond because autonomy is respected and self is accepted (Ryan, 1991, p. 224-225).

A touching example of the self as “aim” is from a patient whose autonomy was not respected by her father, but she still managed to keep her sense of self *while maintaining a bond with him*. She was 48 years old, on disability with depression, passive aggressive, had a narcissistic wound that left her with little self-esteem, undifferentiated abdominal pain and migraine headaches. She had organized an art exhibition at a local center and she was proud of herself when it was extended. After this, she was dreading going home for Christmas expecting to have migraines the entire week. Later, she was surprised at how few migraines she had and when she told her father about her success he responded indifferently: “Oh that’s normal.” She then said: “I feel sorry for him that he could not enjoy his daughter’s success.” This is an example of satisfying the self not the object. She could stay in contact with him on an adult level and with herself at the same time. An attachment to the self, not the other, leads to further development.

3. The Self, Not the Other, is the Organizing Agent of Experience

A main characteristic of the endo self is its sense of agency: “...an entity that possesses both the power to bring about an event and the power to refrain from bringing it about. A person as agent is considered to be partly, or wholly the originator of his own actions” (APA

¹ For elaboration, see the section 6 entitled: The self creates the object not to satisfy its needs, but its desires.

Dictionary of Psychology, 2007). Stern's (1998) work is a good example of the shifting paradigm from the role of the other as organizing experiences for the infant to an increased understanding of the infant's "sense of self as the primary organizing agent." (p. 26). This is self as subject, as knower as opposed to self as object or known (Davis, 2014). The self is not understood by its observed behavior but by a process lived. "Most problematic for neuroscientists is that any theory of consciousness must ultimately refer to introspective experience, a sense of self and of feeling, a phenomenon not readily accessible to objective scientific study" (Kandel, 2013, p. 463). A self as agent is teleorganic, able to serve the necessary life needs of the organism.

In studies measuring pupillary responses, Laeng, Sirois and Gredabäck (2012) suggest that pupil dilations and constrictions represent an access to the preconscious. Their results with infants led them:

...to start asking serious questions about consciousness early in ontology, and it may open an entire new frontier of research within developmental cognitive science and comparative psychology (Laeng et al., 2012, p. 25).

These findings should also renew the discussion of the self's participation in its development and healing. A patient brought up this theme. When he started therapy he was on medication for anxiety. At 26 he had just moved out of his mother's house, had no work or social life and he sat at home with ear phones plugged into an amplifier and played guitar to himself. He described social fears, always watching others to control everything and strong contractions in the extremities. He told me that when we started therapy he thought that the bodywork was like "magic" and I was some sort of shaman. But now "I participate in the therapy more and that is good". When asked how that was good, he reported there was a sense of satisfaction and security that he was involved with himself. Touching his abdomen, he spoke of a "rooting in myself."

A self-organizing process was formulated by Syngg (1941) and reflects the Gestaltist's figure/ground concept from the end of the 19th century. "Behavior is completely determined by and pertinent to the phenomenological field of the behaving organism (Syngg, 1941, p. 412). This phenomenological view is reformulated in biological terms by Maturana and Varela (1998): (I have, in turn, reformulated this quote into psychotherapeutic terms.)

If a cell [the self] interacts with a molecule [its environment i.e. object] and incorporates it [introjections, identifications, internalizations] in its processes, what takes place as a result of this interaction is determined not by the properties of the molecule [object] but by the way in which that molecule [object] is "seen" or taken in by the cell [self] as it incorporates the molecule [object] in its autopoietic dynamics. The changes that occur as a result of this interaction will be those changes caused by the cell's [self's] own structure and unity (1998, p. 51-52).

The phenomena of communication depend not on what is communicated, "...but what happens to the person who receives it" (Maturana & Varela, 1998, p. 52). The cell or the self is determining what is experienced. All systems are self referential in the first line (Jantsch, 1979).

This self referential "individuality" of experience is highlighted by problems in studies whereby it is getting harder for scientists to reproduce one another's experiments (Kiermer, 2014).

Biological processes do not work in linear ways independent of one another but in tightly

interconnected networks. [M]ice bred with identical DNA behave differently. Two cells growing side by side in a petri dish cannot be considered identical (p. 7).

This is true for cloned subjects as well.

Research in perception supports the individual nature of experience. The neurobiologist Eric Kandel (2013) describes the self-referential nature of perception; how we create our own “reality”. Throughout his discussion of visual perception, he is pointing out that “the eye is not a camera” (Kandel, 2013, p. 234) and “...every image is subjective” (Kandel, 2013, p. 200). This is also true for all perception as well as emotions. “We do not have direct access to the physical world ...this is an illusion created by our brain” (Kandel, 2013, p. 203). Gombrich and Kris took up the Gestaltists use of this phenomenon and declared that there is no “innocent eye” (Kandel, 2013, p. 203). All visual perception is based on classifying concepts and interpreting visual information. “Biological findings confirm that vision is not a window onto the world, but truly a creation of the brain” (Kandel, 2013, p. 216). Even color is constructed by the brain and this may be the reason why different people respond differently to a painting and even the same viewer differently at different times. This can also be said about one’s varying response to the same object/other. In addition, since we are creating all these objects, it also explains why we can continually misinterpret and see the same object “incorrectly” again and again; for example in projection and transference.

The fact that one cannot “see” what one cannot classify has meaning in development and psychotherapy. Therapists know this in the form of how a patient will deflect compliments, positive affirmations, progress in the therapy or in the form of the “bottomless bucket” of oral neediness. No matter how much they “get”, they don’t “get” it. You cannot tell someone something that they do not already know! How the object is “seen”, not the properties of the object is what contributes to development. The subject is deciding what happens to it, not the actions of the object. To illustrate, Kandel (2013) uses the well-known figure/ground illusion drawing of a rabbit or a duck depending on how one looks at it. There are two points he makes. One, the visual data on the page don’t change. What changes is the interpretation of the data. We “decide” what it is and there is no ambiguity. These decisions are based on “hypothesis testing” grounded in our innate neural pattern recognition abilities and past experiences. The principle of no ambiguity underlies all of our external perceptions. The conscious act of seeing is fundamentally interpretative. Rather than seeing the image and consciously interpreting it as a duck or a rabbit, we unconsciously interpret the image as we view it; “thus interpretation is inherent in visual perception itself” (Kandel, 2013, p.208).

The second point is that we are seeing something that isn’t there, (Kandel, 2013, p.210) There is only a single two dimensional image on the page. This is the principle I argued previously; all selves are self-referential (Davis, 2014). Meaning, value, belief, thought and decisions are based on the self-referential quality of testing out the experience, hypothesizing through our innate sense of self and our past and present experiences. Not only is the eye not a camera analogous to a TV or a computer recording pixel by pixel to create an image, the eye chooses and discards information, something neither a TV nor a camera can do. The eye is selective. It is a self referential agent self-organizing its perception. “Our perception of the world is a fantasy that coincides with reality” (Kandel, 2013, p.261). As therapists, we know “coinciding” can be tenuous. Involuntary perceptions “...have a fixed repetitive structure and thus ensure the continuity of self experience but thereby determine a limited perception of present reality” (Gottwald, 2014, p.68).

Kandel (2013) also reports that every conscious perception arrives half a second after visual processing is finished. Because sensory information must first undergo preliminary processing, (which I am calling self referential and self organization) all events that emerge in our consciousness must first have begun in our unconscious (Kandel, 2013, p. 466). There is a delay between the appearance of “premotor activation” and the decision to move. Usually interpreted as we have no free will, Solms and Panksepp (2012) say it shows only that the cortex based, abstracted represented self’s movement occurs later than the brainstem’s “core consciousness” initiating the movement. In fact, “...unconscious thought is superior for decisions that require comparing many alternatives” (Kandel, 2013, p. 468). Unconscious processing underlies every aspect of our conscious lives including all sensory perception. All experience is self-organized and filtered through our unconscious experience before it is decided what will be our *conscious* experience.

Unconscious processing is supported by and elaborated in recent studies on the vegetative level in pupil dilation and constriction. “Researchers have firmly established that the pupil changes in size not only in response to changes in the ambient light but also to significant nonvisual stimuli as well as thoughts and emotions” (Laeng et al., 2012, p. 18).

The idea that infants understand and organize experiences unconsciously is revealed in studies in which they are exposed to strange visual stimuli and their responses are documented by pupil constriction and dilation. When 8-month-old babies viewed a film of a train both entering and coming out of the same tunnel at the same time they were startled. As well, 6-8 month olds viewing a “socially unacceptable feeding situation” (Laeng et al., 2012, p. 24-25) recognized it as such. This is why these authors suggest that it might be time to re-evaluate the cognitive capabilities of infants.

4. The Relationship to the Self is the Earliest Relationship

In light of current infant research (Beebe, in Mitchell, 2000; Kandel, 2014; Kouider, 2013; deCasper and Fifer, in Mitchell, 2000; Heppner, 2002; Laeng et al., 2012; Stern, 1998) it is clear that the first nine months in utero are a time of formative experiences including cognitive activity. After birth, the “logical” left-brain does not come “on line” until 18 months later, and it does not dominate until 5 years old. Therefore, the infant is learning self regulation for 27 months with non-linear, associative learning based only on right brain functioning with an “implicit” self that is body-based, non-verbal and emotional (Schore, 1999). Pagis, (2009) has argued for a “somatic self consciousness” before and below language that is not “dependent on direct social interaction” (p. 277). One becomes the object of one’s own subjectivity. For Solms and Panksepp, the interoceptive brainstem generates internal “states” rather than “objects”. The internal body is not an object of perception. Instead there is a background state of “being”. “It is the *subject* of perception” (Solms & Panksepp, 2012, p. 10).

In classical theory of the narcissistic phase the infant is undifferentiated from its environment so all experiences must be hers. In other words, the infant has already developed subjectivity. If the narcissistic self is “threatened” by external reality, as Kohut (2001) suggests, it must have enough coherence, enough sense of itself and its existence to *feel* threatened and take action against the perceived threat. Just as there is no “innocent eye”, there is no tabula rasa, or fragmented self. There is merely an undeveloped self with great potential. This primary relationship with that self is the template for all other relationships. I think that it is an example of Totton’s “engram”, a neurological term meaning “something inscribed within” (Totton, 2014, p. 5).

5. The Self Creates the Object

I take the position that there is an early, coherent, self regulating sense of subjectivity responding to the initial interpersonal relationships and as we have seen from the perceptual point of view, the self not only chooses the object, but creates the object.

Psychoanalysis has suggested that it is the infant's fantasies of the object not the object's actions that are crucial in object choices. The object need not do anything, the subject will spontaneously move towards it. Damasio (2000) describes this as "emotionally competent stimuli". Jacobson spoke of "affect matching" whereby there is no "good" mother but a mother that "feels good" to the child (Jacobson, 1996). In fact, the fertilized egg does not merely attach to the uterus. It spends time moving along the uterine wall and selects an appropriate place to attach itself.

A theme in object creation is "investment"; giving significance to the object: a specific quality, a charge of energy, desire or need. Most theorists argue that it is not the object qua object that is important but the investment made in the object by the subjective self. Mitchell (2000) comments that in the language of infant research, the mother and baby co-create each other and refers to the earlier writings of Loewald. Taking the obverse position of Winnicott, Loewald suggests that objects: "...do not exist independently of the subject. Objects are created by being invested with significance ...out of the primal density or primary process" (Mitchell, 2000, p.38). Kohut (2001) takes a similar view: "Narcissism is defined not by the target of the investment, but of the quality of the investment" (Kohut, 2001, p.26). And, according to Ryan (1991), "Research shows that it is the quality that determines functional significance rather than the particular event or object" (Ryan, 1991, p. 220). The same is true in a phenomenological approach. As we have seen from the perceptual view, of all the incoming information, it is the subject that chooses what to focus on. The result is: "...the focus of the behavior's field is most directly potent in determining behavior" (Syngg, 1941, p. 414).

Investment moves endopsychically outward creating an object and then a relationship. That is why it is difficult to agree with Fairbairn (1941) that the aim of the drive is the object. Why would the self go to all that trouble to get nothing back? According to Solms and Panksepp (2012) the internal body functions automatically, but it also arouses the external body to serve its vital needs. Indeed, Ryan (2003) argues that an over emphasis on the other causes a "psychological vulnerability", a dysfunctional state rather than natural self-organization.

There is no objective object. *Campbell's Psychiatric Dictionary* (2004) describes introjection as: "The incorporation into the ego system of the picture of an object as *he conceives the object*" [emphasis added] (p. 348). Idealization is an example of the self-created object. I had a patient who had schizoid tendencies. Middle-aged, professionally successful, she could not form long-term love relationships and came to me in a relational crisis. Even though she had friends, basically her life was her work and that was not enough to sustain her. Any time she talked about her family it was always in glowing terms yet she reported: "It is strange that every time I visit my family I have to leave after three days." During the course of therapy it became clear that there were deep-rooted problems in that family: a distant and dominating father, drug additions, alcoholism etc. As she became more secure, she could risk recognizing she had "created" a reality to fit her needs. She had to "create" a wonderful family who loved and supported her because she had no alternative. To use Jantsch's (1979) terminology, she is engaging in "temporal, optimal structuralization."

The psychoanalyst Andre Green (1999) criticizes object relations theorists as being too focused on the object to see “the objectalizing function of the life drive.” They overemphasize the role of the object and do not appreciate the endopsychic strivings, the investments of the self in creating objects and then relationships to satisfy *itself*. For Green, (1999) the object does not create the drive, it only reveals the drive toward the object; an emotionally competent stimulus. The object is a necessary precondition for the drive to be activated, but the drive is already there (Green, 1999, p. 85).

Green’s (1999) comment on investment is of interest in object creation. The role of the drive is not merely:

...to form a relation with the object but it is capable of transforming structures into an object even when the object is no longer directly involved. To put it another way, the objectalizing function is not limited to transformations of the object but can promote to the rank of object that which has none of the qualities, characteristics and attributes of the object, provided that just one characteristic is maintained in the psychic work achieved, i.e., meaningful investment (p.85).

He even suggests that the self creates objects in their absence. An example of this is poignantly described in a memoir by J. R. Moehringer (2005). His parents were separated and he rarely saw his father. But because his father had a radio program, in the warm summer evenings he sat on the front steps of his grandparent’s house and listened to his father’s voice. He created a whole persona of the father that was later to be shattered once the father finally showed up. He was “seeing” something that wasn’t there.

To make matters more difficult, it has been suggested that it has never been proven that humans even make mental representations (Anderson, 2003). Kandel (2013) raises this issue when referring to the cognitive psychologist Richard Gregory:

Is the visual brain a picture book? When we see a tree is there a tree-like picture in the brain? ...the answer is a clear: no! Rather than having a picture, the brain has a hypothesis about a tree ...that reflects as a conscious experience of seeing (p. 232) ...we do not yet understand the detailed neural mechanisms of this symbolic representation” (Kandel, 2013, p.233).

For Green, (1999) hypothesis testing is the subject investing in the hypothetical, self created object promoting “...to the rank of object that which has none of the qualities, characteristics and attributes of the object” (Green, 1999, p. 85). For example, my patient had a hypothesis about her family until it was possible to “recreate” a more reality-oriented family. The external data remains the same. Her family didn’t change; she reorganized her data and her experience of the family changed.

In addition to Kandel’s work, this is supported by research in pupillometry. “During changes in perception, nothing changes in the world of environmental input, so any change in perception must be attributed to internal change of the state of the brain that results in interpreting the same world state as a different event” (Laeng, Sirois & Gredebäck, 2012, p. 22).

Mitchell (2000) asks why are early object relations so persistent and resistant to change considering how much we suffer from them. Loewald (Mitchell, 2000, p. 44) responds. On the conscious, adult level, there are boundaries between the self and other. But on a primary process level, I *am* my objects. They cannot be expelled but can be transformed; they can be re-hypothesized. The objects don’t change, the self’s experience of them does. The self creates objects and therefore it is able to also recreate them if circumstances change; temporal, optimal structuralization.

For example, I had never discussed with a patient his relationship with his father. Yet, after a series of sessions he was reading one evening and he spontaneously thought of his father and began to cry deeply. He explained that he cried because he realized that his father loved him. He realized that his father was a troubled man and the negative things the father “did” to him were not actually done against him. He understood that his father did stupid things and he, as a boy, suffered from that. But it was clear that the father loved him and then all his anger towards his father simply disappeared. He could then love his father. The aim of the drive was not his father but his *loving* of his father. In addition, he redefined his sense of self and he became a “lovable” boy. How could such a transformation take place? Simply by re-hypothesizing the same object differently his experience changed. First it was a duck, and then it was a rabbit. First he was unlovable, then he was lovable. The external data does not change. As one patient said, “Now that my sadness is clear, I don’t have to cry about it anymore.”

At the same time, the role of the other is critical to development. A rephrasing of Green’s (1999) “the other reveals the drive” is Ryan’s (1998) position that the true self can only emerge in relationship. Individualization happens *with* others not *from* others. With this model, the role of the object is being redefined, not dismissed.

6. The Self Creates the Object not to Satisfy its Needs, but its Desires.

It is common to talk in terms of “needs”. Maslow’s (1968) hierarchy of needs is a model for development and human nature. It is generally understood that the psychic and physical needs of the infant are what initiate the interaction between mother and child, and they must be satisfied well enough in order for healthy development to continue.

To differentiate between desire and need changes the theoretical landscape. Need arises when the desire is not met. Need is a state of difficulty, a sense of deprivation with a goal implied – usually at a distance. Desire suggests mutuality, a give and take dialogue by placing a “request” to respond upon the other to whom the desire is expressed. It has an impervious quality, a request that must be responded to (Crabb, 1917). *Need is frustrated desire*. A desire to be in contact is a different state than a need to be in contact; It has a different origin, intention and outcome.

When a child feels alone, she “desires” contact; a “positive” drive. When she is lonely, she needs contact. From a humanistic view, we must be in contact to be fully human. In a desire state, there is no tension that has to be discharged to use drive theory or Reichian energetics. The “tension” that does exist within a desire is an excitement that acts as a mobilizing force towards the object and is well within the tolerance levels of the organism. It is pleasurable. If the desire is not met, then it transforms and turns into need – a lack state. The “pushy”, “gluey” shrill quality of the need state is a symptom of the unmet desire. A need state is symptomatic of a lack. When desire is met satisfactorily, development continues as desire evolves and transforms into the next stages of development. An unmet desire turns into need that in turn is also usually unmet resulting in an arresting of development with all its frustration, anger and loneliness: the pathological orientation.

Additionally, it should be noted that satisfying needs only creates the *possibility* that the desires will be met, which brings up the theme of immutability. I have argued for the humanistic model of an inexorable “push” towards development, differentiation, growth and satisfaction (Davis, 2014). As Reich’s (1950) energy concepts formulate, you can interfere with development, but you can never stop it from trying to move forward towards completion and satisfaction. For example, sublimation, transference and projective identification have

the same root. Kohut (2001) called it the “narcissistic stream” which remains unaltered throughout life and is the basis of creativity, love, and all future relationships. Even when met, this innate, immutable push towards development and satisfaction will spontaneously continue to transform into the next phase of development. It is embedded in health and dysfunction. The patient cited earlier is an example. Despite his history, he continued to desire a loved and loving father, and once this was achieved, he could move past his resentment and enter into an adult relationship with his father and not a bad father/resentful child relationship.

Immutability is shown in the fascinating film from the 1970’s, *Three Approaches to Psychotherapy*. The same woman, Gloria, is the patient in three separate therapy sessions with Fritz Perls, Carl Rogers and Albert Ellis. In the middle of the session with Rogers, in what seems to be a classical transference, she says: “I wish I had a father like you.” Rogers demurs, commenting that surely she would make a fine daughter, but pointed out that the theme was about her relationship with her real father (Shlein, 1984). Besides Rogers gently deflecting the focus back on the patient, what is interesting is she did not say, “I wish *you* were my father.” Fairbairn’s (1941) patient also did not say she wanted him to be her father or in fact wanted her *own* father probably because that didn’t work out so well. Gloria was simply calling out to be “fathered”. With Rogers’ interaction Gloria’s *need* to have a father was recognized and accepted by his caring presence. She felt seen and respected. She could then focus on her desire for a father and not have to continue to distract herself by acting out a lack. When the father figure changes from a love object (need state) to a loved subject, (desire state) she will be satisfied.

In discussing transference, Shlein (1984) refers to what I call the immutable desire for contact.

One of the errors in transference theory is the illogical assumption that any response duplicating a prior similar response is necessarily replicating it. Similar responses are not always repetitions. They appear to us to be repetitions because, in our effort to comprehend quickly, we look for patterns, try to generalize. There is breathing as a general respiratory pattern, but my most recent breath is not taken because of the previous one: rather, for the same reason the previous breath was taken, and the first breath was taken. It is not habit. It is normal function, repeated but not repetition (p. 21).

Schore, (1999) like Kohut, (1999) emphasizes this continuing search. “Embedded within the patient’s often vociferous communication of the deregulated state (need in terms of this discussion) is also a definite, seemingly inaudible, urgent appeal for interactive regulation (desire in terms of this discussion). This is a lifelong phenomenon” (Schore, 1999 p. 14). Guntrip (1975) referred to the dual nature of all relationships; the seeking of the “good object” within the transference. Disguised behind the denial and projection, the sadness and disappointment of the lack state, the “normal function” of the original immutable desire is still there.

Reich (1976) emphasized that the analysis could not proceed without reaching a level of “genuine transference” with the patient; “...the glimmerings of rudimentary genuine love” (p. 143). The original desire for the object is still intact but obfuscated by false positive transference. Genuine transference is desire, rooted in the endo self. False positive transference is need and lack rooted in dysfunction and sought in the object.

Shlein’s (1984) argues that original love for a parent is not transferred because there is no earlier instance. This love emerges because the “conditions” are right; an emotional competent stimulus is present. Repeat these conditions and the same response will be produced and not *reproduced*. Each instance is new; repeating but not repetition.

...consider that every second instance might as well been the first. Warmth feels good to the body, not only because it felt good when one was an infant, but because it always feels good.

It is “wired in” as an innate physiological requirement. When one tastes a lemon at age 30, does it taste sour because it tasted that way at age three? It always tastes sour the first time at any age. This logic is functional (Shlein, 1984, p. 14).

My position is that desire is wired into the endo self.

Similar to Kohut (2001) and Schore (1999), Green (1999) points out that there can be more than one object (Green, 1999, p. 9). Continual searching for an object is usually indicative of the need state. It is not to satisfy the need or to satisfy the object for that matter, but to fill in the spaces, *what did not happen*. Because of immutability, a need state will automatically seek to detach from an object, re-organize and search for a more satisfying object.

7. The Object Does Not Gratify

The object does not satisfy the desire. The object can only satisfy needs. Needs are object oriented and are dependent on the object itself. The psychoanalyst Hanna Segal (Buckley, 1986) mirrors Maturana and Varela’s (1998) communication model. She emphasizes that the object can only be correctly evaluated in relation to what it means in terms of the infant’s own instincts and fantasies. It is what is “invested” by the self that determines the outcome.

The infant is not seeking the object per se. It is seeking the experience of itself within the object relationship; the experience of the experiencer. In energetic terms, gratification is the completion of the instroke of the pulsation, the return to the self. This results in the incorporation of relational content; what has been received, not what has been transmitted determines the infant’s experience. “A man does not live on what he eats, but on what he digests” (Pollan). The diagram below represents the movement outward to the other, then the return to the self for metabolizing of the relational content. It is at this point that experience occurs.

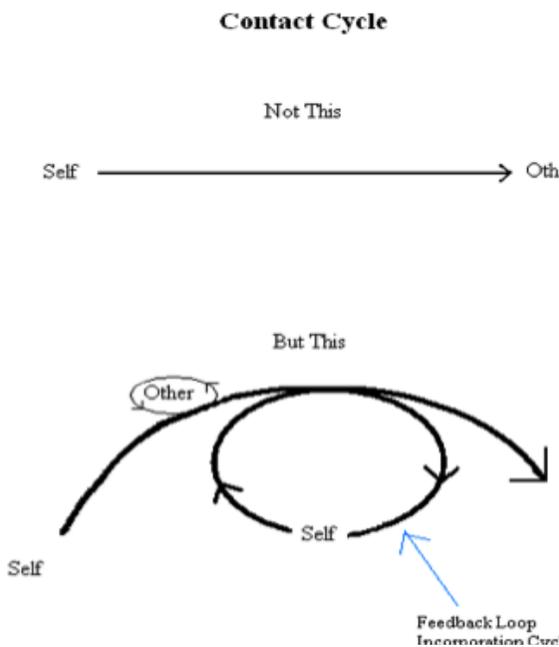


Figure 2. Diagram of the contact cycle.

The patient with the “stupid” father re-created a primary object with exactly the same data: his life history. His immutable desire to be “fathered” had been met. His experience of the father was what was important in both the first and the second instance *not what the father had done*. Perception is based on the “eye of the beholder” and not on some absolute external reality. This is why we cannot only re-experience the object as a need based repetition, but can recreate the object to be self-satisfied. There is no objective object, no “innocent eye”.

Piaget’s position is that intrinsic motivation is merely for itself. “The pleasure in mastery, in effectance, in experiencing action merely for its own sake is, as Piaget once called it, a basic fact of psychic life” (Ryan, 1991, p. 209). There is self-oriented satisfaction in “mastering” the task. Vilayanur Ramachandran (Kandel, 2013) writes that the wiring in our brain ensures that the very act of searching for the solution is pleasurable. This is why Green (1999) referred to the “objectalizing process” itself as that which satisfies. If it is the object that satisfies, why is it that even when the object wants to satisfy it cannot? Any parent knows this feeling. Any left lover knows this experience.

8. In Both Development and Therapy, Detachment is as Important as Attachment

Attachment theory was an important step forward but more attention needs to be paid to defining *detachment’s* role in development: what it is, how it works and why it is necessary as the pulsatory obverse of the all important attachment process.

Developmental theories describe a series of phases the child passes through i.e.: from a fused mother/child dyad, to separation and on to autonomy. But how does a child develop into the next phase if he is attached to the present one? How can he redefine the role of the mother if he is still experiencing the “same mother?” He must let go to get a hold of something new or else there is fixation. Everything stays the same; she is still my “mommy”. In healthy development, we see the data, the mother, being recreated into another representation. But in order for that to happen, we have to let go of the previous representation and trust what comes next. What is this letting go process in order to evolve? How does it happen and how does it not happen?

Ryan (1991) addresses the paradox of separation while being in a relationship. Autonomy is dependent on strong familial bonds: an autonomous self, grounded within relationship. “...a facilitating interpersonal environment. Clinical evidence suggests that extreme detachment leads to self pathology” (Ryan, 1991, p. 223) leading to less individuality, self-cohesiveness, and diminished feelings of safety, trust and self esteem.

A sense of security, an anchoring, must be in place in the primary relationships in order to face the risk of letting go so that the next developmental phase can emerge. “Autonomy does not entail severing emotional ties. Continued emotional attachment during adolescence facilitates individualization” (Ryan, 1991, p. 222). A major source of this anchoring is in the familial bonds, but I would also argue that the felt sense of security needed is in the well developed being state of the endo self. Security is present because previous desires have been met by familial bonding. A patient reported: “Now I know my mother loves me and I understand that has given me security in my life.” I asked “Did the mother ‘give’ security to you or were you allowed to develop it yourself?” She responded, “I developed it in myself.”

Changes in development or therapy are not done in “stages” or even phases. They are done in the sense that Freud first used the word “*schübe*”; rhythmic, pulsatory movements

back and forth. A child does not suddenly become autonomous and leave the house or see its mother as an adult woman with a separate life. It goes through pulsatory movements away from the mother and then back again in an ever widening and deepening pulsatory loop; back and forth with the emphasis of the pulsation towards development with a return to the relationship to recharge as Winnicott (Buckley, 1986) noted or Mahler's (1972) refueling. It's a pendulum movement using its own momentum to "throw" itself into the next development theme. The diagram below shows the rhythmic, pulsatory movement as the child moves away from the mother (detaches) in exploratory/evolutionary movements and then back again (reattachment). If all goes well, each movement back towards the mother to recharge will diminish progressively and simultaneously support the next exploratory movement outward. If all goes well, all experiences of the mother in the return movements will be slightly altered from the previous one.

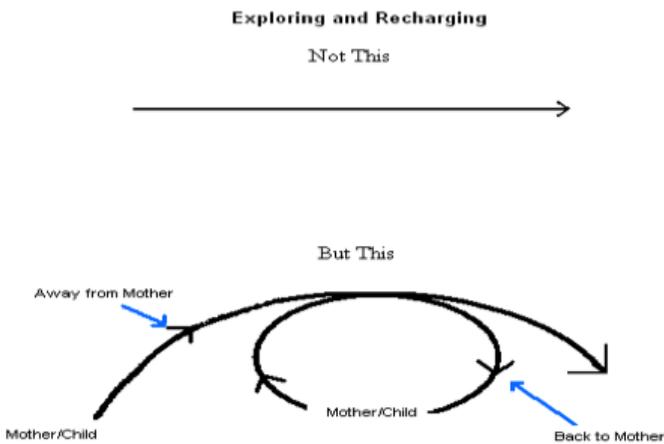


Figure 3. Diagram of Exploring and Recharging.

The exploring/recharging dynamic is also represented in an attachment/detachment/re-attachment schema. "Object-cathexis is not the investment of an object with some charge, but an organizing mental act [t]hat structures available material as an object. Such a cathexis creates – and re-creates and re-organizes – the object qua object. It is an objectifying cathexis" (Mitchell, 2000, p.38). The re-creating process can only happen through detachment so that re-attachment is possible to a newly perceived, "re-created" object. De-objectalizing, detachment, is a function of the instroke process whereby the person returns to a deep sense of self and re-creates his experience of the very same external object. "...all events that emerge in our consciousness must first have begun in our unconscious" (Kandel, 2013, p.466). Unconscious processes underlie all perception and all experiences are "filtered" through our personal history/structure/engrams.

The function of the instroke, unconscious processing, detaching and re-creating reality, is creativity. Kandel (2013) reports that the unconscious can deal with several items simultaneously in an orderly fashion, while our conscious attention can only focus on a limited amount of information to avoid ambiguity (Kandel, 2013, p.467). In tandem, the Default Mode Network of the brain when it is "idle" is seen as an "organizing

center” and this function of the brain is always “online” (Raichle, 2010):

While conscious thought processes integrate information rapidly to form an occasional conflicting summary, unconscious thought processes integrate information more slowly to form a clearer, perhaps *more conflict free feeling* [emphasis added] (Kandel, 2013, p. 469).

Solms and Panksepp (2012) call for starting in the “basement” of the brain; from the brainstem up to the cortex. There is the same bottom/up movement in robotics and computer design (Anderson, 2003).

Kandel (2013) describes subjects in a study that were presented with different mental tasks and then divided into three groups. The first group was to respond to the task immediately, the second group had some time to think about it, and the third group was immediately distracted with another task. The distracted group consistently performed the best (Kandel, 2013, p. 468)!

Kandel (2013) brings instroke/detachment into clearer focus. Creative solutions require association areas of the brain to integrate information unconsciously in a way that it could not do consciously. “Once focused, the brain needs to ‘relax’ in order to seek out other potential paths to a solution” (Kandel, 2013, p.483). This is why the distracted subjects in the experiments were able to come up with creative solutions to the tasks; the brain was given time to unconsciously process more information than could have been processed consciously. The conscious mind has to create a rabbit or a duck. The unconscious can tolerate ambiguity and paradoxes for a longer period of time giving it access to more information.

Raichle (2010) has shown that what was typically called background noise in the brain turned out to be the “default mode” of the brain: “a network of brain regions that are active when the individual is not focused on the outside world and the brain is at wakeful rest,” with the unconscious “organizing itself for future events” (Raichle, 2010, p. 28). This is Kandel’s brain relaxing, what I am calling the instroke process. Raichle’s observation of systematic patterns of ongoing brain activity when the subject is in a resting state has transformed the way the human brain is now being studied in health and disease.

The brain’s default network ...is a specific, anatomical defined brain system. [It is] active when individuals are engaged in internally focused tasks including autobiographical memory, envisioning the future, and *conceiving the perspectives of the other*. [Emphasis added] (Buckner, Andrews-Hanna, & Schacter, 2008, p. 1)

Raichle’s (2010) work is a modeling of the instroke process as the detachment process in therapy; the brain “relaxing” to re-experience and create or recreate an experience/object. At its deepest point, the patient goes into an endo self *state* reminiscent of Maslow’s being states (1968) and of Solms and Panksepp’s (2012) “background being state” of the brainstem’s “core consciousness”. The outside world, including the therapist, is not so important at that moment. Then the patient is able to re-organize pre-existent information within and come up with a new perception/experience of the same historical event. A good example is the patient who changed his experience of his father. Continuing to hate and be angry with his father was a fixation on one *facet* of the father that *defined the entire object* and therefore the relationship. Through the instroke process, detachment was possible, a contactful distance was achieved, and when he moved back towards the father he “saw what he did not see”; other facets that redefined

his history as well as redefining his current relationship with his father *and* himself.

The ability to draw on innate, unconscious abilities is also found in “acquired savant syndrome” showing us that this phenomenon is not limited to personal histories. It may be a universal function of the brain to draw on the unconscious’s heretofore-unacknowledged knowledge and redefine how we see the unconscious. (Some researchers suggest that this type of savant is similar to the well-known savant syndrome.)

In acquired savant syndrome, near genius levels of artistic or intellectual skills show up after dementia, a severe blow to the head or another insult to the brain. Discovery of this unusual phenomenon raises the possibility that dormant potential in some artistic or intellectual realm – an “inner savant” – resides in each of us (Treffert, 2014, p. 44)

Using the findings of Kandel, (2013) Raichle (2010) Treffert (2014) and Solms and Panksepp (2012) who postulate a neuroevolutionary “two tiered” consciousness, Freud’s original “iceberg” image of the conscious and unconscious might now have to be reformulated. Consciousness is not generated in the external, relational oriented cortex as previously thought. Consciousness arises in the brain stem, what was previously referred to as the chaotic, destructive, primitive id/unconscious. “Consciousness is endogenous, subjective and fundamentally interoceptive in an affective kind of way” (Solms & Panksepp, 2012, p.164). Maybe classical consciousness is merely having a limited awareness of a rich, deeper stratum of organized and organizing knowledge which has typically been referred to as the (negatively) formulated unconscious. Can we turn the image upside down? Similar to meditation models, can we rename the unconscious as true consciousness that we are unaware of? Raichle (2010) points out that to go from a idle brain – daydreaming for example – to paying attention to the outside world takes less than 1% percent increase in brain energy usage. “Being phenomenally conscious does not, by itself, require much cognitive sophistication at all” (Solms & Panksepp, 2012, p.1). This is the tip of the iceberg.

In addition, the life negative attributes of Freud’s unconscious are not what is being revealed in Kandel (2013), Raichle (2010), Treffert (2014) and Solms and Panksepp (2012): there is order and organizing, knowledge and safety. Will Maslow’s positive psychology finally be verified?

The creative instroke/detachment process allows the return to the self, a temporary self-attachment to a secure, brainstem located being state, the endo self, and then a reattaching to the newly experienced object. There is identification with the self that allows the detachment to be experienced safely so that then a re-creation can spontaneously arise. It allows the patient to participate in his or her own healing process.

Summary

I have taken the position that there is an overemphasis on the role of the other in development and psychotherapy models. Using a multidisciplinary approach I have argued for a greater emphasis on the role of the subject/self in its own development and offered eight basic principles to elaborate a self oriented theory of development and psychotherapy. The research of Kandel, Raichle, Treffert, Solms and Panksepp and Laeng all call for a reevaluation of a deeper sense of self and its importance in making creative solutions to life’s situations.

Through recent brain research as well as clinical cases working with the instroke, it seems that it is time to re-formulate Freud’s model of the unconscious and his descriptions

of its characteristics. I also suggest that the centripetal instroke movement of the pulsation back to the endo self is the creative and developmental process itself.

The result of this is a reformulation emphasizing the self's participation in its own creation; a self to self theory of development and healing.

BIOGRAPHY

Will Davis (1943) is an American with over 40 years of experience in psychotherapy. He conducts body psychotherapy training workshops in Europe. Will developed the body-oriented psychotherapy, Functional Analysis, and is considered one of the major researchers in the fields of the functioning of the instroke and of the plasmatic basis of early disturbances. He is on the International Advisory Boards of the *Journal of Energy and Character* and the *International Body Psychotherapy Journal*. He is a member of the Scientific Committee of the Italian Society of Psychologists and Psychiatrists and the European Association of Body Psychotherapy. He lives with his wife in the south of France. Email: willdaviswilldavis@gmail.com Website: www.functionalanalysis.de

REFERENCES

- APA Dictionary of Psychology*, (2007). G.R. VandenBos (Ed.). Washington, D.C. American Psychological Association.
- Anderson, M. (2003). Embodied cognition: A field guide. *Artificial Intelligence*, 149, 91-130.
- Buckley, P. (1986). (Ed.). *The essential papers on object relations*. N.Y.: New York University Press.
- Buckner, RL., Andrews-Hanna, JR., Schacter, DL. (2008). The brain's default network: anatomy, function, and relevance to disease. *Annals of the New York Academy of Science*. Doi: 10.1196/annals. 1440.011.
- Crabb, G. (1917). *Crabb's English Synonyms*. N.Y. Harper & Brothers Publishers.
- Davis, W. (2013). In support of body psychotherapy. *International Body Psychotherapy Journal*. 11(2) 59-73.
- Davis, W. (2014). The endo self: A self model for body-oriented psychotherapy. *International Body Psychotherapy Journal*. 13(1) 31-51.
- Damasio, A. (2000). *The feeling of what happens*. London: Vintage.
- Eagle, M. (1987). *Developmental deficits versus dynamic conflict. Recent developments in psychoanalysis: A critical evaluation*. New York: McGraw-Hill.
- Fairbairn, W.R. (1941) A revised psychopathology of psychosis and psychoneurosis. *International Journal of Psychoanalysis*. 22, 250-279.
- Gallese, V. (2013). Bodily self, affect, consciousness and the cortex. *Neuropsychoanalysis*. 15(1) 42-45.
- Green, A. (1999). *The Work of the Negative*. London: Free Association Books.
- Gottwald, C. (2014). Awareness and mindfulness. *International Body Psychotherapy Journal*. 13(1) 67-79.
- Guntrip, H. (1975). My experience of analysis Fairbairn and Winnicott. *International review of psychoanalysis*. 2, 145-156.
- Hepner, P. (2002). Understanding foetal behavior. Paper presented at the International Congress on Embryology, Therapy and Society, Nijmegen, Netherlands.

- Jacobson, E. (1996). *The Self and the Object World*. New York: International Universities Press.
- Jantsch, E. (1979). *The Self-Organizing Universe*. New York: Pergamon Press.
- Kandel, E. (2013). *Age of Insight: The Quest to Understand the Unconscious in Art, Mind and Brain from Vienna 1900 to the Present*. New York: Random House.
- Kiermer, V. (2014) Eureka once, eureka twice. *Scientific American*. 310(5) 7.
- Kohut, H. (2001). *The Analysis of the Self*. Madison, Connecticut: International University Press.
- Kouider, S. (2013). A neural marker of perceptual consciousness in Infants. *Science*. 340 (4), 376-380.
- Laeng, B., Sirois, S. and Gredabäck, G. (2012). Pupillometry: A window to the preconscious? *Perspectives on Psychological Science* 7(1)18-27. doi:10.1177/1745691611427305.
- Laeng, Brune and Sulutvedt, Unni. (2013). The eye Pupil adjusts to imaginary light Published online before print November 27, 2013, doi: 10.1177/0956797613503556 *Psychological Science*, November 27, 2013 0956797613503556.
- Mahler, M. (1972) On the first three subphases of the separation-individualization process. *International Journal of Psycho-analysis*. 53
- Maslow, A. (1968). *Toward a Psychology of Being*. NY: Van Nostrand Reinhold Company.
- Maturana, H. & Varela, F. (1972). *Autopoiesis and Cognition*. Boston: D. Reidel Publishing Company.
- Maturana, H. & Varela, F. (1998). *The Tree of Knowledge*. Boston: Shambhala.
- Mitchell, S. (2000). *Relationality: From Attachment to Intersubjectivity*. Hillsdale, New Jersey: The Analytic Press.
- Moehringer, J.R. (2005). *The Tender Bar*. London: Sceptre.
- Pagis, M. (2009). Embodied self-reflexivity. *Social Psychology Quarterly*. 72(3), 265-283.
- Pollen, M. (2014). *Cooked*. New York: Penguin Books.
- Raichle, M. E. (2010). Dark energy of the brain. *Scientific American*. 302(3) 28-34.
- Reich, W. (1976). *Character Analysis*. NY: Paperback Books.
- Reich, W. (1950). Orgonomic functionalism, part II. *Orgonic Energy Bulletin*. 2(1-15).
- Ryan, R. (1991). The Nature of the self in autonomy and relatedness. In J. Strauss & G. Goethals. (Eds.), *The Self: Interdisciplinary Approaches* (pp. 208-238). Berlin: Springer-Verlag.
- Ryan, R. & Brown, K. (2003). Why we don't need self-esteem: On fundamental needs, contingent love, and mindfulness. *Psychological Inquiry*. 14(1), pp. 71-76.
- Schore, A. (1999). Clinical implications of a psychoneurobiological model of projective identification. In S. Alhanati (Ed), *Primitive mental states. h III*. Binghamton, NY: ESF.
- Shapiro, L.S., Carlson, L.E., Astin, J.A., Freedman, B., (2006). Mechanisms of mindfulness. *Journal of Clinical Psychology*. Published online in Wiley Interscience. DOI:10.1002/jclp.202372 *Journal of Clinical Psychology*.
- Shlein, J.M., (1984). *A counter theory of transference*. www.allanturner.co.uk/papers.
- Solms, Mark and Panksepp, Jaak (2012). The "Id" knows more than the "ego" admits: Neuropsychanalytic and primal consciousness perceptsives on the interface between

affective and cognitive neuroscience. *Brain Sciences* 2, 147-175; doi:10.3390/brainsci2020147. ISSN2076-3425.

Strauss, J. & Goethals, G. (1991) (Eds.), *The Self: Interdisciplinary Approaches* (pp. 1-17). Berlin: Springer-Verlag.

Stern, D. (1998). *The Interpersonal World of the Infant*. London: Karnac.

Syngg, D. (1941). The need for a phenomenological system of psychology. *Psychological Review*. 48, (pp. 404-424).

Treffert, D.A., 2014, Accidental genius. *Scientific American*. 311(2), pp.42-47.

VandenBos, G.R. (2007) (Ed.), *APA Dictionary of Psychology*. Ann Arbor, Michigan: Sheridan Books.

Watson, J.B. (1930). *Behaviorism*. <http://userwww.sfsu.edu/psych601/unit7/672.htm>.

INTERNATIONAL BODY PSYCHOTHERAPY JOURNAL

THE ART AND SCIENCE OF SOMATIC PRAXIS

INCORPORATING US ASSOCIATION FOR BODY PSYCHOTHERAPY JOURNAL

volume fourteen ● number two ● fall 2015

TABLE OF CONTENTS

4 Honoring Jacqueline A. Carleton, PhD

6 EDITORIAL
Jacqueline A. Carleton, PhD

POEMS

10 A World Apart
Marcel A. Duclos

11 Manuel de l'enfant trouvé—mémoire
The Foundling's Handbook—Memory
Salita S. Bryant

ARTICLES

12 Embodied Clinical Truths
Terry Marks-Tarlow

28 The Return to the Self: A Self Oriented Theory of Development and Psychotherapy
Will Davis

47 Research 101 for Somatic Psychotherapists: Cultivating a Research Mind
Christine Caldwell & Rae Johnson

55 Let's Face the Music and Dance: Working with Eroticism in Relational Body
Psychotherapy: The Male Client and Female Therapist Dyad
Danielle Tanner

80 Relational Body Psychotherapy (Or Relational Somatic Psychology)
Aline LaPierre

101 Held Experience: Using Mindfulness in Psychotherapy to Facilitate Deeper
Psychological Repair
Shai Lavie

109 Transcultural Case Study, First Interview with a Chinese Client
Ulrich Sollmann & Wentian Li
Translated by Elizabeth Marshall

128 Felt-Work: Interview with Hilde Hendriks
Jill van der Aa

The cover image is Earth by Hilde Hendriks



EUROPEAN
ASSOCIATION FOR
BODY -
PSYCHOTHERAPY



Connecting professionals, exchanging expertise, enabling collaboration

Journal (ISSN 2169-4745)