“… that which differs with itself is in agreement: harmony consists of opposing tension, like that of the bow and of the lyre” (Heraclitus, ca 500 BC)

Abstract

The human atom is the self; the human molecule, the relationship; the human substance, the group. I will try here to show how reflexive processes generate each of these levels of the human system and integrate them one to another, while dissociate processes tend throughout to pull them apart. Health and illness within the self, the relationship and the group can be understood as special states of the dynamic equilibria between these cohesive and dispersive trends. Both Janet’s model of dissociation and that of Freud have a place in understanding these states. The move from a biological to a relational psychoanalysis replaces sexuality with empathy as the link between the individual and the group, as well as the province of both pathogenic and therapeutic action. Such a perspective brings psychoanalytic explanation into line with key findings from neurophysiology, supporting the recently resurrected Freudian project of a unitary theory of physiologic and psychological functioning.

Key words: self, dissociation, reflexivity, empathy, psychoanalysis, neuropsychoanalysis
Dissociation Within the Self

As with so many stories of trauma, the headline at once fascinates and repels: “Girl, 8, Found Buried Alive.” Stunned but trapped, we read on:

The 8-year-old girl who was raped and buried alive said she remembers her attacker towering over her before she passed out and waited seven hours, beneath a pile of rocks and cement blocks in a trash bin, to hear the voices of rescuers.

[According to a family friend,]“She said the last thing she remembers is that he looked over her with these big eyes and then she said she went to sleep. She said she was waiting for us to find her...as soon as the police came she wiggled her fingers” (Barton, 2005)

Passed out and waited? How do these two actions coincide? One mind cannot do both at once. Instead, pressed to maintain two mutually incompatible states, the mind itself must subdivide, leaving a subject literally of two minds, simultaneously asleep to the violation of its own body, and patiently anticipating signs of rescue, preparing its response.

A division of consciousness this radical calls to mind many psychopathological states marked by severe degrees of dissociation-- fugue, amnesia, functional paralysis and multiple personality, to name a few-- yet here it manifests in a previously normal person subjected to extraordinary duress. On this point Sigmund Freud and his precursor, Pierre Janet, fundamentally parted ways. Janet believed that minds dissociated under trauma only if predisposed to do so through some form of mental weakness, innate or acquired. Freud, by contrast, felt that a “weakened mind” was not a necessary precondition for dissociation, but that consciousness could fragment whenever instinctual conflict resulted in the disruptive action of other mental forces working to banish such conflict from consciousness. For Freud, that is to say,
dissociation was not the mark of a failing mind, but of a mind at work on other matters—on preserving an equilibrium, in the moment, more vital than consciousness.

Now, Freud more than once acknowledged that “[t]he psychoanalytic theory does not by any means fail to point out that neuroses have an organic basis” (Freud, 1940), but he simultaneously favored what Sullivan would later call the One-Genus Hypothesis, the idea that, whatever their organic basis, psychopathologic states represent universal human traits taken to extremes. Keeping both these points of view in mind (whether or not doing so required active dissociation on his part) enabled Freud to extend psychoanalysis beyond clinical phenomenology toward the more general theory of human psychology that he sought to establish. To state the matter from this broader point of view: because our basic drives put us inevitably into conflict—with one another and within ourselves—we must find ways to live despite instinctual strife. Among these ways, one of the more primitive, and therefore more universal, is to expel the conflicting drives from consciousness, a process that Freud dubbed verdrängt, “repression.” Thus, for Freud, not a mind lacking in integrity, falling apart under stress, but the repression of antithetical drives left its mark in consciousness in the “psychical dissociations” and “splitting of the mind” that characterized neurosis (1913, p208). As we might say today, repression of feeling yielded dissociation of mind. Perhaps most significantly, this manner of avoiding Janet’s “defect hypothesis” also opened for Freud the therapeutic dimension of psychoanalysis: if repressing conflict creates dissociation, then retracing the conflict and finding a new and better way to resolve it, offers the prospect of a psychoanalytic cure.

Possibly because of such therapeutic promises, as well as because of its satisfying intellectual breadth and endlessly intriguing literary presentation, Freud’s perspective eclipsed that of Janet for much of the century that followed their original disagreement. Thus, until fairly recently, talk of repression obscured talk of dissociation in all but a few specialized areas of psychological discourse. Over the past several decades, though, mainstream psychology and psychiatry have forsaken the psychodynamic nosology of Freud in favor of DSM-style descriptive diagnostics—based on symptom-pictures rather than on putative psychodynamic cause. At the same time, both popular and professional opinions have come to favor a version of Janet’s “weakened mind” hypothesis. Genetic diatheses, chemical imbalances and the like have
come once again to prevail over psychodynamic explanations of psychic disorder and distress.

Accordingly, the reigning model of cure places less emphasis on analysis and new resolution of conflict, than on the search for biochemical agents that might bolster the presumably defective brain. I do not wish to imply that this approach is always wrong; only that, even when correct, it is incomplete. It overlooks the more universal principles of mental function that link psychopathologic states with normality. With syndromic, rather than etiologic, diagnosis, and the implicit assumption of specific and inborn defects predisposing us to specific mental diseases, we have lost sight of Freud’s broader-reaching purpose—

to understand the mechanisms, irrespective of the causes.

Contemporary psychoanalysts find themselves working the breach between Janet’s view and that of Freud. Their patients, and often they themselves, believe that something organic is amiss in the brain that sustains the symptoms that they face. Yet the organic patch-and-go approach yields only so much relief. Medication may lessen symptoms of anxiety and depression, but the patterns of living that bring conflict and suffering are much more difficult to dispel. Indeed, without suffering, patients may lose their incentive to change. Let me illustrate. A patient came for consultation after 13 years on fluoxetine. Before taking the medicine he had been “suicidally depressed.” On the medicine he had felt fine, he said, but his wife had found him insufferable and eventually left. He blamed the medicine. “It’s like a pain reliever,” he told me, “you don’t know where you’re hurt, so you keep injuring and never heal.” This man’s treatment has taken exceptionally long—we have been meeting steadily now for nearly 20 years—but in the course of it, not just his manner of living, but the whole story of his life, have transformed. Just as Freud suggested, we have learned why he felt and behaved as he did for so long, and how it can be otherwise. “To write prescriptions is easy,” wrote Kafka, “but to come to an understanding with people is hard” (1919, p140).

Contemporary psychoanalysts also find new utility in the concept of dissociation. As a descriptive term, not an etiologic one, it aptly depicts many states of mind, regardless of whether we conceive them as marks of cerebral frailty, byproducts of repression, scars of trauma, or of any other origin. Dissociation describes a state, not a cause, and thus marks a return to the spirit of Freud’s theorizing—only with the emphasis reversed, from the presumed cause (repression) to the observable result, “a disruption in the
usually integrated functions of consciousness, memory, identity, or perception of the environment” (DSMIV, 1994). In psychoanalytic circles nowadays one seldom hears of repression (or, for that matter, even of the unconscious), but very often of “dissociated self-states.” And the therapeutic breakthroughs we hear of arrive, no longer with the return of the repressed, but with the integration of the dissociated. Is this anything but a terminological fad? Is dissociation just the new repression? In one respect, yes. When we employ one and the same term to refer to a mental state, to the process that instantiates it, and to a welter of stray phenomena that seem little more than thematically related, we are using it as imprecisely as we used the old jargon. If we use the term intentionally, though, to envelop a formerly disparate set of psychic states and processes that we now recognize as manifestations of a far more general principle of mental metabolism, then our syntax just might open the way to a more accurate conception of our subject matter.

Perhaps more effectively than anyone else, Philip Bromberg (1998) has advanced the view that dissociation plays a more fundamental role in mental life than formerly recognized. “The ability of the human mind to adaptationally limit its self-reflective capacity,” he writes, “is the hallmark of dissociation” (p7). In other words, our self-reflexive capacity gives way to dissociation under the influence of adaptive pressures. This is nothing other than Freud’s formulation, replacing the specific mechanism of repression with “adaptation” in general. I agree, and would extend this formulation in two ways. First, I propose that all self-experience, normal and pathological alike, emerges from the dynamic tension between reflection, which constitutes the self, and dissociation, which delimits it. Second, I suggest that a similar situation obtains between individual selves in relation to each other and between selves and the groups to which they belong. In what follows I will try to illustrate these notions. Along the way I will point to certain neuroscientific findings that suggest a possible physiology of these processes, catching sight again of Freud’s original project of a unitary theory of physiologic and psychological functioning.
Reflexivity and the Self

Ideas germinate in their seasons. At about the same time that Bromberg began his pioneering studies of dissociation, I began to explore the clinical and theoretical dimensions of self-reflection. I was looking for a general theory of the self, one adequate to philosophers as well as clinicians. I wanted a theory that could account for everyday experiences as well as anomalies of selfhood, and one that, following Occam’s principal, possessed the simplest possible structure. That structure turned out to consist of three essential elements: reflexivity, bodiness & time. Time because each of us clocks our own experience, and our timing is anything but linear and consensual—it is, literally, idiosyncratic. Bodiness because our physical characteristics—size, shape, heft, agility, sensorial privilege and the like—give shape and sensory quality to our engagement with the world, make ours a human self and not a bat-self, a whale-self, a tree frog—or a spider-self (Nagel, 1974). Reflexivity because (as defines the term) subject and object are one and the same. The conscious subject takes itself as object. The object is aware of itself. The Freudian Ich, or I, names only the subject, the perceiver. But I do not see I in a mirror. I see me. You do not relate to I, but to me. And I do not feel me, but myself. All self-experience has in common this quality of embodying simultaneously subject and object, an inner and an outer presence of the same entity. Of course, these presences famously do not match, and in their disparities we find, along with much else of interest and utility, the raw data of dissociation. Where reflexivity succeeds, a feeling of ownership prevails. Where reflexivity falters, the fabric of the self unravels. What parts of the self this involves, and to what degree, varies, but along the qualitative and quantitative spectra of failed reflection one can locate the full gamut of psychopathological situations. I have detailed this theory at some length elsewhere (Mann, 1991, 1994). For present purposes let me simply stress that, in my view, dissociation is nothing other than incomplete reflection. Either because of intrinsic frailty (Janet’s model), because of interference (Freud’s), or, perhaps more commonly, because of both, in every way that self-reflection can falter, it sometimes does. When this happens the subject’s feeling of self-possession disintegrates, and observers
register the myriad discontinuities of identity, bodily integrity and temporal coherence that we know clinically as dissociative phenomena. Note that the domains of clinical dissociation - reflection, bodiness and time - coincide exactly with those of the theoretical self that I have described. Bromberg’s conception, too, matches this one in equating dissociation with the breakdown of self-reflection.

Bromberg’s term was not “failure” but “adaptation.” I have focussed so far on pathologic extremes because they illustrate my theory well, but also because the ways in which a system falls apart offer clues to how it normally works. Far from strictly pathological, dissociation plays an indispensably adaptive role in everyday consciousness. To attend to the business of living we must be able, at least momentarily, not to know most of what we might. Normal self-awareness happens, one could say, on a need-to-know basis. Who needs to know everything happening within themselves at every moment? Indeed, who could stand to? “Human kind cannot bear very much reality,” as Eliot remarked (1943, p4). Even the pillar of wisdom reading “Know thyself” balanced its load on another that read “Nothing in excess.” Optimally functioning minds at every moment hover in a dynamic equilibrium between what is interesting and useful to consciousness on the one side, and what is irrelevant and disruptive on the other. The ever-shifting bounds of normal awareness mark the state of this equilibrium: at the penumbra of consciousness, a dissociative fringe.

**Neural Substrata?**

At about the same time that Bromberg’s ideas and mine were taking form, a group of neurophysiologists scattered around the globe began reporting some remarkable goings-on in the brains of monkeys. In this animal’s ventral premotor cortex, where neural activity was known to control gestures of the hand and mouth, they had found groups of neurons that fired not only when the monkey grasped or manipulated objects, but also when it observed the experimenter making similar actions (Rizzolatti & Arbib, 1998). Dubbed “mirror neurons,” these cells appeared to supply a functional link between the observer and the actor. When the animal grasped an object in a particular way, and when it observed the experimenter grasping something in the same way, the same specific neurons would fire. In this grasping we can see metaphorical “grasping” as well. A subjective state of the brain is the same whether performing
or observing a specific action. The neural state of subject and that of object converge. The observer is literally in a position to feel as the observed must feel. Here we may be glimpsing the neurophysiologic rudiments of such outward processes as identification, empathy and gestural communication. Broca’s area in the human brain, subserving the comprehension and motor production of speech, lies in a region homologous to that where the mirror neurons were found in monkeys. This region in humans appears to include a similar “mirror system for gesture recognition (p188),” adding suggestive support to the hypothesis that language as we know it may emerge from just such mechanisms as these. Furthermore, merely listening to action-related sentences activates fronto-parietal motor neurons in human subjects (Tettamanti, 2005)—yet more neurophysiologic evidence for the means by which observation, language, action and thought all commingle in our minds. (Where transitional space was, there mirror neurons shall be?) In these and similar data neuropsychoanalysts have found elegant and plausible models for such clinically vital processes as projective identification, implicit procedural memory, enactment and therapeutic change (Wolf et al, 2000; Greatrex, 2002).

Emerson Pugh famously quipped, “If the human brain were so simple that we could understand it, we would be so simple that we couldn’t.” We could do worse than to take this brutal aperçu to heart when contemplating relations between brain and mind. The behavior of mirror neurons is fascinating and suggestive, but their role in mental functioning remains the subject of conjecture. The “reflection” that they provide, at least in the experimental model that I have cited, is that of one subject mirroring another object’s action. We need more physiologic detail to suggest how the subject in the midst of this empathic process is able to distinguish its own experience from that of the other. It is exactly here, though, in the process of self-attribution, that reflexivity might arise. From this process, when comprehensive and successful, a healthy self emerges. When for whatever reason the process disrupts, dissociation results. A welter of “adaptational” forces, to borrow Bromberg’s term, routinely interfere with the perfection of this task, and the variety of familiar neurotic styles and transiently dissociated states result. These situations correspond with Freud’s idea of dissociation secondary to repressive action. To model Janet’s version, the weakened mind, we need only invoke Murphy’s law: the very mechanisms that normally constitute the self in this way surely must at times malfunction. We are all familiar with clinical situations when the
distinction between self and other breaks down: in projection and paranoia; in symptoms of thought reading and insertion; in psychosis, where the breakdown may be localized or quite global; in projective identification, where it occurs in both parties at once. Could these and similar psychopathologic states represent a neuropathology of cortical mirroring?

**Reflexivity and Dissociation Beyond the Self**

Subject and object are one and the same when the self reflects itself—but also, to a considerable extent, when it embodies what it senses in the other, as we saw in the experimental model of mirror neurons. Some such conflation of identities appears to me to lie at the root of all relatedness, of empathy with other beings, of our understanding of the physical world, of transitional space in general and ultimately of spiritual experience. Likewise, the limits of reflexivity in these spheres establish our relations within them, and failures of reflexivity leave us dissociated from one another and from the world in painfully familiar ways.

To the extent that we share genetic material, we are said to be biologically related. To the extent that we are able to share mental material, we can call ourselves psychologically related.

Thinking as a biologist, Freud placed the sexual function at the center of his theory, because it is sex that mediates the biological relation between the individual and the group. “[T]he weak point of the ego’s organization,” he wrote, “seems to lie in its attitude to the sexual function, as though the biological antithesis between self-preservation and the preservation of the species had found a psychological expression at that point” (1940, p186). Without sex there could be no group, but without its modulation there could be no civil order. Where the pleasure of the individual and the survival of the group depend upon the same precarious procedure, antagonism inevitably will arise. Driven by sexual desire but pushed back (literally, repressed) by the exigencies of civilization, individuals find themselves entangled in
conflict. Conflict begets repression, begets neurotic symptom, etc., all according to the now-familiar formula.

If we think more psychologically, what might we place at the center of our theory? Just as sex is the means of sharing genetic material, what is the means of sharing mental material? Empathy comes first to mind. Our capacity to feel the you in me and the me in you allows us to relate. Whether we see this as the effect of neural mirroring, or remain neuro-agnostics and simply take it as given on the level of experience, to empathize is to reflect. We understand each other to the extent that we can recognize ourselves in each other in this way. We learn to see ourselves through the eyes of those who mirror us. Through the more-or-less distorting lens wrought of these encounters, we struggle lifelong to keep sight of ourselves and to picture the experience of others. We are all mirrors to one another. Why else would dark glasses feel like such a disguise? A brilliant but slightly schizoid patient recently said to me, “Other people’s opinions are just other people’s opinions, I know, but they always seem to me like the world as it really is, as a mirror, knowing better than I… I always feel that something in me is not being seen. What? I’m not sure, but it includes sex, assertiveness, the male principle as I conceive it… Not seen, I feel it’s not there, so I obsessively seek it outside of me…” “I tend to become what I see, to merge with it.”

In an individual’s habits of reflecting others can be seen much that we call character. Consider the narcissist. He does not accurately register the states of those around him, so around him we feel unseen--used as mirrors, but like mirrors, not ourselves perceived. He sees himself inaccurately and acts accordingly, demonstrating a view of himself with which we most likely disagree. He flails and crows the wonders of his uniqueness, but inside he feels estranged. Feeling alone in the world, he is easily overwhelmed. He is racked by terror, rage and despair. To the extent that he fails reflectively to connect with others, the narcissist remains dissociated from us. The theories of self-psychology and relational psychoanalysis emerged from efforts to treat such patients psychoanalytically. In a roomful of such analysts just this week I heard a number of cases discussed. Over the course of the evening, the role of empathy in the patients’ illness and treatment occupied the center of discussion. Sex was not mentioned once. Is this because our “widening scope” confronts us with “pre-Oedipal” patients whose main concerns are less
sexual than early-relational? Maybe sometimes, but not always, because the same discussion tends to arise these days no matter who the patient. More generally, I believe, it is a shift in theory that has refocused our attention. Taking psychological, rather than biological elements as their central concerns, these newer psychoanalytic perspectives replace sexuality with empathy at the center of both pathogenic and therapeutic processes. The reflective process of empathy relates us to one another, while innumerable “adaptational” forces dissociate us.

Well-functioning empathy extends the feeling of selfhood beyond the individual to the pair, to the family, to the friendship, to the group, to the natural world and even beyond. It permits mutual understanding, cooperation, specialization, the growth and elaboration of human thought and action beyond the individual. It is thus the medium of all culture (Tomasello, 1999). Human history catalogs its triumphs and its failures.

Beyond the individual encounter, culture provides the means of psychological sharing. I find “culture” an apt term. It calls to mind the image of microbes in a petri dish. We all steep in this stew of shared imagery and desire. We make it. We propagate it. We find and lose ourselves in it. In the language, technology, religion and art that constitute a culture, each of us participates reflexively. To the extent that we find in it elements congruent with our own experience-- i.e., to the extent that we feel it mirrors us—in those ways we feel that we belong to it. It feels, in other words, like an extension of ourselves (James, 1890); or, more properly, like a giant Other with whom we maintain a generally harmonious relationship. In the ways that we cannot find ourselves in a culture, we feel alienated from it. This tension between sameness and difference, belonging and estrangement, then, represents yet another equilibrium between the reflexive and dissociative trends that underlie health and illness in human systems.

Language demarcates groups by limiting their ability to share symbolic material. In the Biblical story of Babel, the world housed one people who spoke one tongue. With their common language came an uncommonly unified sense of purpose and a formidable degree of cooperation. They began to build a city
that, in the course of its harmonious growth, rose in grandeur to the very heavens, until God Himself felt
the need to investigate. In Genesis 11 we read:

*And the Lord came down to see the city and the tower, which the children of men builded.*

*And the Lord said, Behold, the people is one, and they have all one language; and this they begin
to do: and now nothing will be restrained from them, which they have imagined to do.*

*Go to, let us go down, and there confound their language, that they may not understand one
another's speech.*

*So the Lord scattered them abroad from thence upon the face of all the earth: and they left off to
build the city.*

Differences of language, custom, religious belief, and other elements that separate cultures, dissociate us
from one another, creating alterity. They block the mirror. I cannot see me in you. I see only an object.
Otherness opens the door to hate. In less extreme forms, though, it also mediates normal relations, much as
normal dissociation mediates individual consciousness. An equilibrium between empathic mirroring and
respectful opacity obtains between us in everyday affairs. With the vagaries of the moment we emerge and
disappear. “Good fences make good neighbors.”

Media besides language offer us mirrors in which to find ourselves and feel conjoined. Images,
dance, even the invisible art of music, envelop us in consensual worlds, generally more emotional than
cognitive. *Cor ad cor loquitur.* Science and mathematics present the world of nature and of our own mental
processes in reliably sharable forms. The metaphors of science, like those of language in general, ultimately
derive from familiar bodily experience, like heat and cold, mass and spin. We understand the metaphor
*because we know the feeling.* And because we know the feeling, we find in these fields of culture mirrors
for our own experiences of the natural world. We feel at home together in this sketch of a world we
recognize. There are those for whom the world feels persistently alien. “Things conspire against me,” one
of Nabokov’s antiheroes complained. He lived in a state of dissociation from the world of mechanical
things.

I remember the starry night in adolescence when it first occurred to me that I am composed of the
same stuff that I behold that I am in a sense only *It* beholding *itself.* With this insight came an inkling of
oneness with the universe and a feeling at once of extraordinary expansiveness and complete insignificance that I found wonderfully peaceful. Such a feeling seems to characterize what many call spiritual experience. It is the essence of religious awe (James, 1902) and the aim of many meditative practices. It might well coincide with what Freud called “oceanic feeling” and dismissed as “father-longing” (Freud, 1930). In light of the model that I have been sketching in this essay, however, it would seem to mark the last in a series of self-reflexive states. We began with the reflection that constitutes the individual self. We proceeded to the reflection that, rendering us comprehensible to one another, creates relationships. We expanded from interpersonal relationships to the reflexive relation of the individual to the group. Here, at last, we see the universe reflecting itself through the lens of human consciousness. At each of these stages the failure of reflection left the individual dissociated—within himself, then from others, then from his culture as a whole. In this final stage we might see dissociation as the more usual state of affairs, the feeling of separate existence; and successful reflection, the feeling of oneness with everything, relatively rare and arduous to achieve. Freud and others might find in this a frivolous and childish sentiment, but it fits my experience well, and brings a sense of order to this discussion that invites me to end it here.

**Summary and Conclusions**

Reflexivity constitutes the self and joins it in relationships to others, to the natural world and to the universe as a whole. Disturbances in reflexivity may be primary (e.g., autism) or secondary (e.g., trauma, conflict), representing, respectively, Janet’s and Freud’s models of dissociation. Disturbances in reflexivity manifest as dissociation within the self, between the self and others, and between the self and the material world, in matters from the mundane to the spiritual. Thus the human system coheres on every level through the interplay of forces that either favor, or impede, reflection. Much like Freud’s symbolic struggle between Eros and Death, a dynamic equilibrium between reflection and dissociation maintains the integrity of the self in all of its connections. As the focus of psychoanalytic theory has shifted from raw biology to consciousness, sexuality has given way to empathy as the central factor in normal human relations, in pathogenesis and in therapeutics. Recent findings suggest a possible neural mechanism to the reflexive
process that underlies empathy and its pathological variants. If correct, this model could bring us a step closer to the initial Freudian project of a unitary theory of physiologic and psychological functioning.

REFERENCES


