

THE UNIVERSITY OF ALBERTA
A MODEL OF PSYCHOTHERAPEUTIC CHANGE

by



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ABSTRACT

The process of change which occurs in affective-relational psychotherapy was described from the perspective of the successful client's experience. This process was shown to have three sequential stages. (1) The block, or state of incongruity between one's description of his experience and certain of his other behaviors. (2) The descent, or process of differentiating the inconsistent elements of oneself by attending to, symbolizing, and expressing one's immediate experience within a relationship. (3) The ascent, or process of attending to and expressing the integrated elements of one's experience.

The model built upon these three stages was elaborated and compared with the models of personality change of K. Dabrowski, C.G. Jung, F. Perls, and J. Campbell. Examples of counselling interviews were described, and it was shown that the stage in which a client was, at a particular time in psychotherapy, could be inferred from his communications about his present experience.

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CHAPTER I

INTRODUCTION

The purpose of this paper is to present a model that describes psychotherapeutic growth as it may be experienced over the course of a long-term therapeutic involvement. Psychotherapeutic growth, according to this model, is characterized by directional change along a developmental continuum. Those aspects of the therapeutic process which are experienced as growthful will be shown to involve the differentiation and integration of a conflictual dichotomy between relatively acceptable and unacceptable modes of experiencing. According to the model, successful clients in affective-relational psychotherapies pass through a sequence of identifiable stages in the process of differentiating and integrating such a dichotomy.

After an elaboration of the model which specifies this sequence, taped as well as filmed sessions of counselling interviews will be described to further explicate the elements of the model. Ten sessions will be examined in this manner. The source of this material will be the interviews of six professional psychotherapists: C. Rogers, B.W. Newton, W. Evraiff, J. Seeman, Johnson, and Epstein. These therapists' approaches include Client Centered Therapy, Hypnotherapy, Family Therapy, and Play Therapy. This group of interviews constitutes the largest number of recorded interviews in the Counselling Tape Library, of the Department of Educational Psychology, of the University of Alberta, which met the criterion for inclusion. The criterion for inclusion was the rating of the writer as to the presence or absence of an affective relationship between client and therapist. Only those interviews where an affective relationship was judged to be present were included.

The particular type of psychotherapy wherein the model of psychotherapeutic change obtains, is characterized by an affective relationship between client and therapist. In such a therapeutic milieu the client's immediate experience, especially feelings in relation to particular contexts of events, is likely to be the major focus. Furthermore, in such a setting, the therapist is fully present as a subjective participant himself, i.e. the therapist is likely to share his own immediate experience, particularly with regard to how his experience reflects an understanding of the client's feelings. Where an affective relationship is present there is likely to be an interaction between the expressed feelings of the client and the expressed feelings of the therapist, each affecting the other.

That the particular theoretical orientation of a psychotherapist significantly affects the nature of the relationship he tends to establish with his clients, has been suggested by Patterson (1966). Patterson classified approaches to psychotherapy along a continuum from highly rational at one end to highly affective at the other. Those therapies, generally, which are rated more affective are most likely to eventuate in the pattern of experiences to be described. The rational approach of Albert Ellis (1962), the learning and conditional response theories of John Dollard and Neal Miller (1950), and Joseph Wolpe (1958), the psychoanalytic approaches as described by Harry Stack Sullivan (1954), or Franz Alexander (1963), and the perceptual (i.e. having the perceptions of the client as a major concern) approach of George Kelly (1955), all tend not to emphasize the immediate affective experience of the client, but rather to focus on some primarily non-affective

component of the client's functioning, e.g. his rational understanding or observable behavior. The role of therapist in such approaches tends to be one of objective authority about people in general rather than a subjective participant in an affective relationship with a particular client. On the other hand, the perceptual approaches of Carl Rogers (1961), and Perls, Hefferline and Goodman (1951), and the existential approaches of Victor Frankl (1962) and Rollo May (1958), typify those therapies which are most likely to facilitate a pattern of experiencing such as will be presented.

Not all people who participate in a program of affective-relational psychotherapy experience equally successful therapeutic outcomes. It is important to note that the model presented herein is descriptive of the experience of relatively successful clients in affective relational therapy. That is, they have been able to participate with some degree of immediacy (Rogers, 1961) in the affective relationship, and they have been able to risk emotional expressions of uncharacteristic meaning and intensity.

Kirtner and Cartwright (1958) have isolated personality characteristics which tend to distinguish those clients who are likely to be rated successful in long-term (more than 21 interviews) client-centered therapy, from those who are likely to be rated failures. The successes tended to be anxious about, but able to express, their impulses and ideas, while the failures were seen to control, repress, or distort their impulses and ideas in therapy. The successes tended to have a strong need to relate to people while the failures were more likely to avoid or be immobilized by relationships. Successes tended to be intensely driven to seek internal causes for their discomfort and dis-

satisfaction, while failures typically looked outward for such causes and resolutions. Successes also tended to condemn and devalue themselves while failures typically anticipated punishment from external sources. The characteristics of Kirtner and Cartwright's success group, then, can be expected to distinguish those individuals who are likely to experience the pattern of events, to be described herein.

BASIC TERMS & PROPOSITIONS

Prior to the presentation and elaboration of the model of psychotherapeutic change, it will be instructive to define those most basic terms and propositions which are central to a clear understanding of that model. In this section the terms are defined and the propositions which describe the relationships among these concepts are introduced.

1. "PERCEPTION (or sensation is the immediate discriminatory response of the organism to energy - activating sense organs". (Bartley, 1969, p. 11).

As with Combs and Snygg (1959), Gendlin (1964), Kelly (1955), Perls, Hefferline, and Goodman (1951), and others, perceptions and their interrelations are regarded as the basic elements of experience.

Perceptions may be interoceptive, responsive to the internal environment; exterceptive, responsive to the external environment; or proprioceptive, responsive to movement of the body or its parts.

Perceptions vary in the extent of organization (differentiation and integration) required for a response. For example, to distinguish between, a painting by Raphael and another by Leonardo, requires greater perceptual organization than to distinguish a Renaissance painting from an abstract expressionist painting.

2. PHENOMENAL FIELD is the entire array of perceptions, for an individual at any given point in time. (Combs and Snygg, 1959)

3. ATTENTION is the psychological process of selecting perceptions.

To attend to a perceptual event is to differentiate it from the entire phenomenal field.

This is very similar to the process of gestalt-formation which Combs and Snygg discuss, but the attention-perception hypothesis suggests more variability in what is selected for attention than in the figure that emerges from the gestaltist's ground. Also, there is the implication of greater choice or self-determination in the attention-perception hypothesis. In the gestalt-formation hypothesis of Combs and Snygg there is assumed isomorphism between perception and the object perceived, i.e. the object largely determines the perception and, thus, the behavior. It may be noted that the language of the two hypothesis also implies this difference. "Selection" connotes an organism - determined response, whereas to say that a figure emerges from the phenomenal field suggests that the object determines the figure-ground relationship.

Proposition 1. "Behavior is always the product of the total phenomenal field". (Combs and Snygg, 1959, p. 28).

Proposition 2. Attention enables a person to symbolize, or explicitly communicate (as in language) the present state of organization of a portion of his phenomenal field.

To say that behavior is the product of the total phenomenal field is not, however, to assume with Combs and Snygg (1950, p. 20) the "complete determination of behavior by the (phenomenal) field." The preceding two propositions

suggest that there may be two ways in which behavior is the product of the phenomenal field. Combs and Snygg suggest that unconscious behavior is motivated by vague and indistinct perceptions. The present model is in agreement here except that where attention enables a person to symbolize or explicitly communicate his present perceptions, he also begins to experience choice in his consequent behavior. The behavior is still a product of the phenomenal field, but it is no longer driven, or determined, as it is with regard to perceptions which are unattended to. This is a more precise way of stating the common sense proposition that awareness, or consciousness, make choice possible.

4. PHENOMENAL SELF is that portion of the phenomenal field to which a person applies the labels, "I" or "me". (Combs and Snygg, 1959)

The phenomenal self is symbolized and, therefore, a part of the phenomenal field presently attended to. The emphasis upon present experiencing distinguishes the phenomenal self from Combs and Snygg's related term, "self-concept". "Self-concept", as used by Combs and Snygg, is abstracted from the phenomenal field of present experience to include "those particular concepts of self which are such fundamental aspects of his phenomenal self that they seem to the individual to be "he" in all times and at all places" (p. 127). Rogers (1959).also uses the terms "self" and "self-concept" to designate an abstraction from the phenomenal field as it has been experienced over time.

5. INCONGRUITY is a condition of inconsistency between behavior in response to that portion of the phenomenal field attended to (and perhaps symbolized), and behavior in response to the remainder of the phenomenal field (or a part thereof).

The statement, "I feel calm and relaxed", is likely to appear incongruous if made by a person whose face is flushed and whose fingers are tapping. This is an example of incongruity between the phenomenal self and behavior which is not attended to. An example of inconsistency between an "external" (not self) part of the phenomenal field and behavior which is not attended to, would be the husband who describes his wife as unable to do anything for herself whenever she asks that he drive her somewhere, yet who refuses to teach her to drive.

6. CONFLICT is a condition of inconsistency between two aspects of the phenomenal self.

In the example of the person whose face was flushed and whose fingers were tapping when he described himself as relaxed, it is necessary to draw his attention to the inconsistent behaviors in order for him to experience conflict between his description of himself and his behavior. However, in the case of the husband who was critical of his wife's dependence upon him in spite of his preventing the possibility of her becoming more independent, it would be necessary for him, not only to attend to his description and his behavior simultaneously in order to experience the implicit conflict, but also to take responsibility for the way in which he perceives his wife, i.e. to "own" his attribution of external qualities to the wife as reflective of his own phenomenal self. This may relate to the fact noted by Kirtner and Cartwright, and referred to in the earlier discussion about successful clients, that failures in psychotherapy tend to look outward for the causes and resolutions to their problems. It is less likely that an individual will experi-

ence apparent inconsistency as conflict if one element of the inconsistency is first regarded as not self, than if both elements initially are regarded as part of the phenomenal self.

7. INTEGRATION is a condition of consistency between elements of the phenomenal self.

Proposition 3. Therapeutic change is a process involving the following sequence of events: 1) Incongruity, 2) Fully differentiating the inconsistent elements of the phenomenal self by attending to and representing incongruity as conflict, 3) Integration.

SUMMARY

The stages in the model of psychotherapeutic change are identified in more metaphorical language, not to mystify the process, but rather to suggest the essential quality of the experience of growth at what are regarded as crucial periods. Described from the perspective of the experiencing individual client, then, there is proposed a sequence of three stages in the process of psychotherapeutic change. The stages are, 1) the block, or state of incongruity; 2) the descent, or process of attending to and differentiating conflict; 3) the ascent, or process of attending to and expressing integrated elements of the phenomenal self. A summary of the model which is built upon the framework of these three stages may help the reader to better understand the elaboration which is to follow in subsequent chapters. The summary is intended to be a minimum statement of the essential aspects of the complete model.

1. The BLOCK is the state of an individual who systematically does not attend directly to, nor fully experience the impact of, an incongruity between his description of events in his phenomenal field and certain of his behaviors.

In the initial stage of psychotherapy the client is characterized by inattention to behavioral expressions of feelings which are inconsistent with feelings he regards as relatively more acceptable. Acceptable feelings constitute the dominant mode of emotional experience for the phenomenal field. Feelings in the sub-dominant mode go relatively unattended to, but as a signi-

ficant aspect of the phenomenal field, they tend to be expressed nonetheless, but in behavior which is incongruous with the dominant mode of experience of the phenomenal self.

The feelings in these two modes of emotional experience which emerge in significant relationships are contact emotions. Contact emotions indicate either a dependence upon (contact-dependent emotions) or a moving away from (contact-independent emotions) a significant other person. Contact-dependent emotions, such as affection, fear, and helplessness, characterize the stereotypically female cultural role. Contact-independent emotions, such as aggression, hostility, and competitiveness, characterize the stereotypically masculine role. Persons who might benefit from affective-relational psychotherapies can be expected to attend primarily to one type of contact emotion, either contact-dependent or contact-independent emotions. For example, contact-independent emotions may be unattended to while only contact-dependent emotions are attended to. Contact emotions which are attended to reflect the dominant mode of emotional experience, while contact emotions which are unattended to, reflect a sub-dominant mode. The dominant mode of contact-emotional experience tends to be regarded as the relatively more acceptable aspect of the phenomenal self, while the sub-dominant mode may be clearly regarded as not self. For example, a person whose dominant mode of emotional experience is contact-dependence may readily express affection, but be very unlikely to ever express anger, even though anger might be reflected in behavior such as caustic criticism which appears incongruous with his description of himself. The goal of psychotherapy is to transcend such incongruity in a dialectical mode characterized by increasing intimacy and autonomy, in which all contact emotions are attended to.

Inattention to contact-emotional experience in the sub-dominant mode blocks the developmental process through which feelings become differentiated and change in the direction of increasing intimacy and autonomy. The varieties of inattention fall into three categories. 1) Denial, or the failure to label a feeling. 2) Distortion of the relation of the feeling to its context, e.g. the defense mechanisms of projection, rationalization, and reaction formulation. And 3) secondary emotions, which are equivalent to "sheer emotions" as described by Gendlin (1964, p. 123): "The emotions of guilt, shame, embarrassment, or feeling that I am "bad" are about me or this aspect of my experience...(but) are not a direct reference to the felt experiencing."

These modes of inattention maintain incongruity. To make clear why such incongruity is frequently maintained, the concept of arousal is necessary.¹ Attention to behavior which is incongruent, i.e. the transformation of incongruity into conflict, constitutes a condition of complexity which increases the level of arousal. However, the repeated failure to satisfactorily reduce arousal in analogous past situations, may lead to some

1. Arousal refers to the level of an organism's autonomic activity as indicated by reticular activation, muscle tension, skin conductance, and heart rate (Hare, 1970, p. 58). When an individual's arousal is too great, then he will probably seek to reduce arousal to some more satisfactory level (Fiske and Maddi, in Maddi, 1968, p. 134). Ordinarily attention is directed by arousal (Hare, 1970, p. 58) which is a positive function of change or complexity in perceived stimulation (Forgus, 1966, p. 181). Attention may exercise a reciprocal effect upon arousal (Hare, 1970, p. 62), leading to a further increase in arousal.

form of inattention to the sub-dominant contact mode as a means of preventing a further increase in arousal. By so doing an individual maintains arousal within relatively narrow limits compared to persons whose attention is not blocked.

When the process of attending directly to arousal (with the concomitant additional increase in arousal resulting from attention, a function of the complexity introduced by inconsistency) and reducing arousal through intentional action which differentiates and integrates the inconsistent elements, is interrupted by some form of inattention (denial, distortion, or secondary emotions), then this developmental process is blocked. Behavior which is in response to perceptual events not attended to will be likely to continue to be incongruent with one's statements about his experience. Psychotherapy attempts to reconstitute the process by, first, directing attention to the inconsistent behaviors.

2. The DESCENT is the process of attending to incongruity, and fully differentiating the conflicted elements of experience.

The process which is reconstituted by attending to incongruity and experiencing incongruity as conflict is accompanied by fear of the seldom explored elements of the phenomenal field, i.e. contact emotions of the sub-dominant mode. For this reason, it is referred to as the descent in spite of its positive implications for development. Fear is greatest where, in order to experience a conflict between elements of the phenomenal self, it is necessary to attend to, as a part of the phenomenal self, some aspect of experience in the sub-dominant contact mode which has been regarded as clearly

not self in the past. Recall, for instance, the two examples cited previously. First, the man whose description of himself as calm and relaxed was incongruent with his flushed face and tapping fingers, and, second, the husband whose criticism of his wife's dependence upon him was incongruous with his behavior which prevented her independence. The man in the first example could be expected to experience less fear than the man in the second example in coming to experience his incongruity as conflict. In the former instance, only one fearful step is necessary, while the latter requires two such fearful steps. The first man needs only to attend to the two elements of self simultaneously and see their incongruous relationship. The second man, however, must come to regard his attribution of dependence to his wife as reflective of an aspect of his phenomenal self before he can experience a conflict between parts of that phenomenal self. This first step involves owning, as a part of phenomenal self, an unacceptable experience in the subdominant mode, in this case dependence. The experience of dependence has been distorted by attending to it in another. Accepting dependence would mean taking responsibility for this feeling in himself which may be very inconsistent with his dominant mode of experience. The second step involves experiencing the impact of this inconsistency, i.e. experiencing the incongruity as conflict. Fear is likely to be greatest, then, when an element of incongruity is first regarded as not self.

Arousal is likely to increase as feared elements in conflict with aspects of the phenomenal self become increasingly clearly differentiated, i.e. as attention is focused upon them so that they emerge from the ground of the phenomenal field. But also, as conflicting elements are represented in a

significant relationship, i.e. as they are precisely symbolized and expressed with an intensity of behavior proportional to their concomitant arousal (if their feared consequences do not occur), then arousal is reduced to a satisfactory level, and the feared element can be integrated into an expanded and more flexible phenomenal self. In this way arousal serves as the physical indicator of differentiation and integration throughout the descent and ascent. Fiske and Maddi (Maddi, 1968, p. 141) also suggest that differentiation increases arousal while integration decreases arousal.

The culmination of the descent occurs in the nadir. As with other conflicts of the descent the nadir reflects an alignment of the contact-independent mode against the contact-dependence mode, with the sub-dominant one of these modes being the most difficult to attend to and fully represent. Accepting as a part of the phenomenal self, and fully representing, such a highly inconsistent element constitutes a major change in the phenomenal self, the consequences of which can only be fully experienced after one has made the change. The nadir is the experience of attending to and representing as a part of oneself, the most feared and dreadful element of experience, i.e. that element of conflict which is felt to be most inconsistent with the phenomenal self.

The ASCENT is the process of attending to and expressing the integrated elements of the phenomenal self as they occur in significant relationships.

The outcome of the nadir experience tends not to be the dreaded consequence but rather a rebirth, or integration of the sub-dominant mode of experience with

the dominant mode. Having fully accepted into awareness and having fully symbolized and expressed one's most feared affective potential, one now experiences himself as whole; the rebirth initiates the process of the ascent. Dependence and independence are now experienced as complementary rather than antagonistic aspects of oneself. This is not merely a compromise between opposing forces, but rather a transcendent integration; a dialectical synthesis.

Integration is manifest in one's relationships during the period of the ascent. During the ascent the self-aware and self-responsible person is likely to choose to share his awareness and understanding of feelings in himself which reflect both autonomy and intimacy. The ascent is characterized by; 1) The continuing differentiation of experience. This obviates systematic inattention to any contact-emotion. 2) The increasing ability to precisely symbolize one's experience and the relations of that experience to the context in which it occurs and to other relevant organizations of the phenomenal field. Such communications tend to be nonmanipulative of others and fully descriptive of oneself. And, 3) An expanding and increasingly flexible range of emotionally expressive behaviors with which to represent precisely to others, in ways which are appropriate to the situation and, non-destructive, the full intensity of one's feeling. Such behaviors tend to eventuate in reduction of arousal and integration of the elements of the associated conflict.

Successful affective relational psychotherapy terminates some time after the process of the ascent has begun. The successful client has learned two processes with which to affect the quality and direction of his emotional experience. First, differentiation which characterized the descent affects the quality of experience by increasing arousal, i.e. the physical intensity of feeling. Differentiation also leads in the direction of greater autonomy and greater intimacy. By attending directly to one's feelings as one's own, without denying their presence, or distorting their relationship to the self, for example by blaming one's feelings on others, one assumes increasing responsibility for his feelings and thus achieves increasing autonomy. Also, by fully symbolizing and expressing as precisely as possible, one's emotional experience within a relationship, he makes himself more fully known to the other and thereby achieves increasing intimacy.

The second process with which the successful client learns to affect the quality of his emotional experience is integration. Integration characterizes the ascent which continues after therapy. By not excluding any mode of experience from one's attention, all contact-emotional arousal is attended to, and can, thus, be expressed and eventually reduced. Systematic inattention to the sub-dominant contact mode kept arousal from becoming too great, but also prevented the initial arousal response in that mode from being optimally reduced by keeping it not only from attention, but also from the possibility of satisfactory expression. Successful clients, then, can be expected to feel adequate within a greater range of emotional arousal after therapy than before. This is because after therapy successful clients are able to increase arousal

to a higher level by attending to feelings and risking their expression, as well as to allow for the possibility of further decrease in arousal by not excluding any emotional experience from attention.

Integration, as well as differentiation leads in the direction of greater autonomy and greater intimacy. Systematic inattention to either mode of contact experience severely restricts the choice options for behavior in that mode, and thus reduces autonomy. However, attending to and expressing contact emotions in both modes leads to greater autonomy, i.e. to greater freedom to choose to express, or not, either feelings of independence or dependence. If one only attends to and expresses feelings reflecting independence, then he is not free to feel fully dependent when that is a possibility, and vice versa. However, attending to and expressing contact emotions in both modes leads to greater autonomy, i.e. to greater freedom to choose to express, or not, either feelings of independence or dependence. Also, by not limiting emotional expression to a single dominant mode, one can be more fully known within his relationships, i.e. he can be known to be sometimes independent from, and sometimes dependent upon others. The successful client in psychotherapy is free to be, and to share, himself at this moment in the manner and to the extent that he chooses.

CHAPTER II

A MODEL OF PSYCHOTHERAPEUTIC CHANGE

The process of psychotherapy may be experienced as a journey of self-discovery. Persons having taken this journey often report that as a result they have changed, or grown, in some essential way. The preceding sections presented a model of the stages that successful clients in affective-relational psychotherapies pass thru on this journey. Such a model may make more apparent what seems to happen in therapy from the perspective of the client's experience. Such a model also may make more explicit the nature of the changes which occur in therapy. It is intended in the present chapter to elaborate that model in order to reach a fuller understanding of the experience of psychotherapy.

The self which is "discovered" in psychotherapy, is clearly not the phenomenal self, i.e. that portion of the phenomenal field which a person regards as "I" or "me". On the contrary, the behaviors which are incongruous with one's description of oneself, are a reflection of an element of the phenomenal field which has been unattended to; a portion of the phenomenal field which may not have been regarded as anything. As one attends to these incongruities and their implied meanings for him, one begins to experience the possibility that there is more to himself than he had been aware of. It is as if a part of himself had been separated from the main body of "him" and had led its own, separate, dis-integrated existence in spite of his inattention. As therapy proceeds, more and

more of this dis-integrated element of one's experience is attended to and regarded as one's own. The whole self, then, is more akin to the whole of one's phenomenal field, i.e. the whole array of his perceptions: all of one's experience, attended to or not.

Dis-integration of the self exists when an individual can be described as being divided between expression of an awareness and inhibition of that awareness. Dis-integration is characterized by a conflict which may be more or less clearly apparent to an individual, between tendencies which may be experienced as irreconcilable, such as the seeming incompatibility of a feeling of hostility toward a loved person. Hostility and affection are contact emotions, i.e. they tend to precipitate a change in a relationship with one other person, by reflecting a dependence upon, or moving away from, that person, and their expression, the expression of contact emotions, may risk an unwanted or feared development in a relationship. Such a conflict is not necessarily pathological; as Dabrowski (1972) and Laing (1960) have pointed out, disintegration may be an essential part of the process of personality development.

Integration, on the other hand, constitutes some degree of resolution of the conflict and is preceded by differentiation of the feelings involved. In the course of psychotherapy feelings which have appeared incompatible can often find a manner of expression, when expression is felt to be necessary, which resolves the apparent incompatibility. For

example, feelings of hostility may come to be satisfactorily expressed in ways which are non-destructive and which do not attempt to control another's behavior; a statement such as, "I am angry at you", may come to satisfactorily express feelings which had previously been expressed as, "You make me angry". Dealing with feelings in the present, i.e. while they are actually being experienced rather than after the fact, facilitates the differentiation of emotion. It is in the realm of immediate experience that feelings emerge and where they can achieve the completion which is necessary if they are to change in the future. Successful therapy is likely to decrease the number of hurtful and destructive, actively manipulative behaviors and increase the number of creative, cooperative and autonomous behaviors; such a development reflects the differentiation of independence. Successful therapy is likely, also, to decrease the number of dependent and passively manipulative behaviors and increase the number of behaviors which reflect genuine affection and concern for, and intimacy with, others without a need to control others' behavior; this is the differentiation of dependence.

Resolving the conflict between polarized parts of oneself into an integrated system of complementary, differentiated processes involves choices which are intrapersonal and interpersonal, affective, i.e. involving feelings, and cognitive, i.e. ideational. The following matrix represents these choices graphically.

	INTRAPERSONAL	INTERPERSONAL
AFFECTIVE (risk)	Attention	Expression
	Inattention	Non-Expression
COGNITIVE (evaluation)	Continue	Continue
	Discontinue	Discontinue
	Change	Change

Choice Matrix

Figure 1

Most affective-relational psychotherapy tends to focus an individual's attention implicitly or explicitly on the experience of choosing modes of behavior which are central to his subjective identity, toward the end of experiencing himself as responsible for that identity as it is now, and as it is to emerge in the future. The ultimate truth or untruth of such a proposition of responsibility is moot; the experience, however, is attested to by many clients of many therapists. Each cell in the matrix represents a choice; the intrapersonal-affective cell represents the choice of whether or not to risk attending to a particular affect, as if it were a possibility for experiencing in the present moment. An interpretation which often follows on the heels of such an experience where a person does risk fully feeling an affect which he is not accustomed to experiencing (such as a slightly trembling chin as one diverts his eyes in a context suggesting the possibility of hurt), and yet finds it surprisingly compelling (possibly weeping) is that he had been making an implicit choice at times in the past, without being aware of the

the choice-making process, not to attend to such feelings. Such a choice rests on the paradoxical assumption that one can choose not to attend to a feeling. A goal of therapy, to different degrees, depending on the therapist's emphasis upon intrapersonal and/or interpersonal modes of conflict elaboration and resolution, is to increase one's consciousness of these implicit choices.

As with the affective-intrapersonal choice, psychotherapy seeks to increase one's conscious involvement in the evaluation of intrapersonal choices. The intrapersonal-cognitive cell involves a second choice which follows from the first and represents an evaluation of the consequence of the affective-intrapersonal choice to risk acting as if one were experiencing a particular affect or not. Implied is the question: is this experience of attention (inattention) satisfactory, and does one want to continue to so attend (inattend) in the future? Answering this question requires an evaluation of the "fit" of the affective experience for the individual; does it "make sense" in light of his memory of past experiences to feel 'X' (e.g. anger toward a parent) now? Finally, and this is the essence of the evaluation, is accepting such feelings and identifying with them satisfactory or not? If this experience, in some subjectively believable sense, actually constitutes what he "is" in this moment, then, should similar or related affects continue to be attended to in the future, would such a state of affairs be satisfactory to him? If so, he accepts what he is (what he is experiencing in the present) and what he

is becoming (what he expects to emerge as "himself" in the future) and therapy terminates unless the therapist attempts to influence the client's values so that he comes to regard his prospects as unsatisfactory. If not, his implicit or explicit decision may be to not risk attending to such affects in the future. On the other hand, dissatisfaction with the outcome of an affective experience with which one has identified at least tentatively, given that he has indeed experienced himself as responsible for his primary identity, may be a decision to change what he is to become, without denying what he experiences himself to be. To acknowledge and continue to experience what he seems to be, with the intention to change. The continuation of therapy beyond this point involves the elaboration and experience-in-depth of the elements of the internal conflict reflected in the decision not to deny what is unsatisfactory now, but to attempt to change in the future. The process of elaborating, experiencing fully, and resolving conflicts will be dealt with more fully later..

The critical issue here, as well as in the other cognitive choice cell, is not over the source of a given emotion, i.e. not whether a particular affect or affective behavior has indeed been "repressed" or "concealed" in a person's past, it may simply be that it was never learned and the therapeutic relationship constitutes a situation where truly new experiences are "tried on" and possibly added to one's repertoire; but the critical issue is rather that an affect which is experienced as new, may also be

experienced as (at least in the present) "belonging" to oneself or not. These cognitive decisions are evaluative, and the crucial choice regards the "fit" of a given affective experience; an individual in therapy can come (rightly or wrongly) to experience himself as having the ability and the responsibility to choose, on the level of his personality, what he will own (i.e. accept responsibility for) as his, what he will identify with as himself, and therefore what he will incorporate into the subsequent and continuing experience of what is characteristically "himself."

The affective-interpersonal choice cell involves risking the expression of an affect in a relationship experienced (in actuality or through fantasy) as present. The choice may be perceived as whether or not to act on a spontaneous impulse felt in intrapersonal awareness (e.g. to express affection to a person of the same sex) or it may be perceived as choosing whether or not to act as if one did indeed feel a particular affect, and to try it out in this kind of interpersonal theatre, where, like Stanislavsky, one tries to actually be the character portrayed. Any way in which a therapist implicitly or explicitly encourages an individual to express feelings in a relationship tends to focus attention to some degree upon the individual's assumed freedom of choice and therefore responsibility with regard to his significant interpersonal behavior. Although expression of difficult emotions may not be a sine qua non of personal development, it is difficult to fully know, or make the most knowledgeable guess about, the intrapersonal and/or interpersonal con-

sequences of a particular emotion in a particular situation, apart from actually experiencing the risk and subsequent consequences of expression within a relationship. If an adult finds that he has categorically inhibited, or simply never attempted to emit, certain classes of behavior such as expressions of affection or hostility which might be perceived by himself or others as bordering on the extra-normative (e.g. expressing any degree or manner of hostility to an authority figure), then therapy can initiate the process of differentiation which involves discovering behaviors which can fully satisfy one's needs to give and receive affection, and to aggress, within a new, tentative, and self-validated normative framework which is left open to possible revision and which is perceived as subjectively acceptable in light of both affective needs and cognitive ideals. Such a normative structure is not felt to be constraining.

A dynamic new normative structure, is likely to be the outcome of a series of cognitive-interpersonal choices wherein the experienced outcomes of risking, within real or fantasized relationships, affects perceived as dangerous because of their peripheral-normative (i.e. bordering on the extra-normative) quality, are evaluated in light of one's intuited needs and cognized ideals. Each evaluation of an affective experience within a relationship, results in a decision to (1) incorporate a particular behavior into a repertoire which is perceived as clearly and decidedly normative by that particular person, (2) reject it as clearly and decidedly extra-normative and therefore personally unac-

ceptable (e.g. physical violence, or unnecessarily controlling other adults), or, (3) and here the element of conflict emerges again, a particular affect (having spontaneously emerged and not been rejected from attention, or having "been tried on for fit" voluntarily) is shared and experienced as intuitively urgent, imminent or unrelenting, and yet is regarded as essentially unacceptable within the normative structure as it exists. For example, intensely felt jealous anger at the object of a spouse's infidelity experienced as possibly "justified" and yet detested in oneself for its implication of one's need to control the spouse and the spouse's liason, who might be regarded as responding to needs one has recognized in oneself. When such a conflict emerges between what are felt to be mutually antagonistic responses (anger and understanding-rejection of anger) the work of therapy is to elaborate each side of the conflict, and to fully experience each pole in oneself, independently and with regard to their struggle. Differentiation of such awareness and experiencing, refers to the substantive alteration which occurs in the experience of analagous future situations. The intention to change, which may emerge from a negative cognitive-interpersonal evaluation, with a concurrent intention, however, not to inhibit any covert awareness and thus not to avoid (the possibly absurd experience of) responsibility for the decision to be the person one is, i.e. have the particular awareness and impulsive reactions one does have, can lead to experiencing oneself as indeed changed, with reactive affective awareness and perceived impulses which are morally acceptable and satisfiable within the personal normative

structure. This process of elaborating and experiencing such conflicts will be dealt with fully in subsequent discussions. An implicitly selective emphasis upon intrapersonal or interpersonal modes of being-in-therapy can lead to therapeutic orientations which focus upon one or the other of these modes but which may still have similar outcomes. Gestalt Therapy, for instance, tends to focus upon elaborating and owning the elements of conflict especially through fantasy, thus emphasizing the intrapersonal mode of experiencing and ultimate resolution of the conflict. Such a therapeutic posture follows from Perl's self-described "unlikely assumption" that "everything is a projection." Those therapists who emphasize encounter, however, focus upon the interpersonal mode of elaboration and expression of the elements of one's (possibly intrapersonal) conflict in the context of actual and immediate relationships. These technical emphases, of course, have a great deal of overlap; an "intrapersonal" Gestalt-Therapeutic dialog involves an implicit risk to share the contents of the dialog with at least one other presumably significant person: the therapist. And encounter modes of therapy may leave more implicit the choice to be self-aware which is within the choice to act as if one were feeling a particular emotion toward someone who is present. Thus, "acting as if" one were feeling something which an individual has regarded as a non-characteristic affect in himself, and sharing this present awareness with another person are at least implicit within therapies which emphasize either intrapersonal or interpersonal experience. Either therapeutic mode is likely also to encourage the perceiving of

oneself as free to choose, and therefore finally responsible for, one's affects. These two ways of knowing about the self, intra- and interpersonal, are present within both intrapersonally oriented and interpersonally oriented therapies, and either one or a combination of both may lead to an elaboration-through- experience of an individual's particular conflict.

An "interpersonal way of knowing about the self" should be clarified. The suggestions to act as if one felt some given affect must come either from a second party or from oneself; the latter is unlikely in a person who is blocked from certain affective experiences because he learned to selectively attend to his own feelings, excluding certain of them such as hostility, interpreting the somatic cues that some others in a similar situation might regard as anger, as a headache or upset stomach. To the extent that the suggestion to try on a particular affect comes from another person, e.g. the therapist, the suggestion probably reflects a perception of the individual which is incongruent with the individual's stated or implied self-awareness. If the individual chooses to act as if he did feel the suggested affect, risking to share that affect (at least implicitly in the affective-intrapersonal case of the person who brackets the presence of the therapist in order to try experiencing himself as having an affect he wouldn't ordinarily share), and finds upon evaluation, that it does indeed fit, then he is likely to infer that there was some pre-existing condition, such as hostility, present within himself of which

he was unaware and which he was able to discover through the interaction with a second person coupled with his own risking of the uncharacteristic behavior. The possibility that the suggested affect was just a suggestion is likely to be overruled to the extent that one perceives himself as free to evaluate the fit. The importance of this feedback process, learning about oneself by actively comparing one's self-perceptions within a present relationship, can be seen in therapies which emphasize intrapersonal modes of experiencing oneself where the therapist-client feedback relationship is implicit and more apparently in those therapies which emphasize interpersonal encounter where the relational nature of the therapeutic experience is explicit.

According to Gestalt Therapy a growthful existence requires that the emergent self be accessible to awareness, that it be accepted and that it be communicated. By preventing awareness and/or disclosure (when disclosure is felt to be necessary) of important elements of the self or by refusing to own those elements as a part of oneself a person creates a block to his awareness and therefore, a block to his own optimal functioning. The ensuing dis-integration is central to much functional mental illness, but may also be central to the process of growth. The denial of feelings is an implicit choice to not allow a crucial part of one's being to exist in awareness, and hence in experience. It is "existential suicide" because it represents the choice to prevent one's own growth by stopping or blocking the growth process, i.e. blocking aware involvement in otherwise

implicit decisions which determine much of the quality of an individual's existence: to be aware; what is to be shared of oneself; and the continuation or alteration of present patterns of awareness and disclosure in the future. Where a person does not consciously participate in these decisions, then, by default, they will be made without his awareness.

Neurotic dis-integration is likely to be characterized by, one, depression: reduced affect, a relatively narrow range of direct one-to-one emotional expressiveness; two, anxiety: the tension produced by the need for expression at the same time as self repression; three, secondary emotions: e.g., guilt, or thinking that one's feelings are bad, which does not reduce emotional energy; four, "shoulds": rationales that attempt to explain away the need for emotional expression by using external values for specifying appropriate behavior.

Integration of the alienated parts of one's self is a necessary condition for developing to the maximum limit of one's potential. The whole person is autonomous, he assumes responsibility for what he is, does, and becomes; and in communicating he can be intimate, he shares his feelings without making unstated demands for reciprocation or "payment" from others. The process of becoming whole, autonomous, and intimate entails, 1, becoming aware of alienated feelings; 2, accepting responsibility for what one perceives himself to be, particularly the affective quality of his awareness; 3, accepting responsibility for the

perceived quality of one's interpersonal relationships; 4, accepting responsibility for continuing to respond as one has responded, affectively and behaviorally, and for the direction taken by any change in these patterns of response; and 5, developing the ability and inclination to share one's affective awareness, especially in significant personal relationships, voluntarily relinquishing modes of affective behavior calculated implicitly or explicitly to manipulate others. This risking to communicate affect, choosing to reveal one's self to another without attaching a simultaneous demand to the act, is the fundamental element of adult love.

That event which can be experienced as "personal growth" by people acting in an integrated manner, i.e. the differentiation of conflicting tendencies into affectively rich and morally responsible complementary elements of the self, is an internal cue that they are, to some degree, fulfilling their potential as evolutionary entities. Evolution specifies directional development for each organism, extending through the entire span of its existence, through the recapitulation of phylogeny, and in the case of the ontogenesis of man, toward the realization of psychological and physiological goals that can only be approached intuitively. It is natural, in a sense, to grow toward one's maximum potential by acting as an integrated whole, the elements of the self acting in concert. However each person can be thought of as choosing whether to be fully aware of his emergent self or to restrict his awareness to what is deemed

safe, and acceptable by a "disembodied" intellect, disintegrated from and distrusting the fullness of one's affective nature. The wisdom of the organism is such that the person who accepts awareness of and responsibility for his emergent self will probably choose to grow in a constructive manner, rather than in a manner which is self-, and/or other-destructive.

Adult growth, the change experienced in relatively integrated (or integrating) personalities, is a positive, basic change in the core of the self. For such change to occur feelings must be free, i.e. allowed to be present and accepted into awareness and free to be expressed when necessary. Blocking awareness of feelings inhibits growth. Energy spent blocking feelings is invested in maintaining a divided self at the expense of growth.

The prospect of growing is likely to be experienced as dangerous, threatening the existing condition which the dis-integrated person has learned to choose implicitly to attempt to maintain. To grow means facing change and unpredictability. To allow feelings means facing the fearful consequences of repressed contact emotions, such as hurt or rejection by another.

The implied conflict in the limitation of affective awareness("body") by reliance upon a relatively rigid normative structure ("mind") which

specifies what affects a person should have, often excludes from awareness difficult affects such as hostility which are unlikely to become differentiated without conscious attention. Avoiding awareness avoids the problem of responsibility, i.e. that the mind-body dichotomy which is central to the dis-integrated person must be experienced explicitly and lived in the present. The "mind" part of this dichotomy, enforcing the "shoulds," the rules which restrict emotional awareness, most often restricts such difficult emotions as hostility and affection which may lie in a shadowy periphere-normative borderland between the normative and non-normative. Such emotions are unlikely to become differentiated without conscious attention. Avoiding awareness by choosing in implicit fashion to restrict awareness ("non-awareness" in the affective-introspective cell of figure 1) avoids the problem of responsibility for what one has felt (the cognitive-introspective decision to continue). Restricting awareness avoids the problem of choosing to risk disclosing one's awareness in a relationship and thereby avoids the responsibility for one's own internal affective consequences in an affective encounter (implicitly choosing not to share an awareness in the affective-interpersonal cell). Restricting awareness avoids the question of responsibility for what one is becoming in relation to others (the implicit cognitive-interpersonal decision to continue). Thus restricting or blocking awareness avoids facing directly questions of responsibility for what one is by dichotomizing oneself into a normative, acceptable "mind", and a non-normative, generally unacceptable "body".

Freud conceptualized this mind-body dichotomy as a struggle between the super-ego and the id; Perls, ("debunking the whole Freudian crap"), unassumingly referred to the alienated elements as "topdog" and "underdog"; in the practice of affective-relational therapies, the dichotomy is sometimes referred to by the designations: "head" and "guts". Typically implicit in neurotic behavior are cognitive evaluations (mind) which prescribe acceptable awarenesses (for body) and which proscribe unacceptable ones (also body). An individual's cognitive evaluations, the shoulds, of his own awareness tend to be colored by his orientation toward the acceptance of one sex-role constellation of affects, the dominant mode of contact-emotional experience, as being somehow "better or more appropriate than the contra-sexual constellation. Those affects which tend to be most difficult to deal with i.e. the sub-dominant mode of contact emotional experience, tend to be colored by association with the qualities of the contra-sexual role. Thus a man may tend to experience affects which reflect his independence and therefore his cultural maleness, such as aggression, hostility or ambition, as more acceptable within himself than affects which might be seen as reflecting his dependence, such as weakness, passivity or affection. In such a case, those affects, the disclosure of which will be experienced as risking the most, could be expected to fall into the category of dependence issues, while the cognitive evaluation could be expected initially to reflect a value placed upon affects of the independence category. Finding a resolution of the conflict between pre-reflective, immediate, feelings and reflective,

cognitive evaluations which does not deny or escape either, is to resolve the experienced dichotomy between probitious mind and incorrigible body; is to transcend one's cultural role prescriptions by establishing personally authentic values and goals which allow a full range of affective behaviors which can express both independence and dependence.

This dichotomous situation reflects a person's attempt to use cognitive means to subjugate his feelings, e.g., "I should not be angry, because I might kill someone." Thus a person must become aware of his disintegrated thoughts and feelings and identify with both. The difficulty arises in becoming aware of and accepting the feeling part which requires a conscious (and cognitive) deconditioning of one's self in order to make responses that have been virtually extinguished, i.e. the awareness and expression of feelings. Like a leap of faith, this deconditioning requires a cognitive choice to bring about a non-cognitive condition, the paradoxical release into awareness of what one has experienced to some extent as genuinely outside of awareness. One must withhold an often repeated, often rewarded response: the repression of feelings, while risking other responses which have probably been negatively reinforced and consequently unused for a period of years, i.e. self-awareness and self-disclosure. The paradox is reduced if the therapeutic relationship is seen as revealing incongruities between one's self-image and the self as perceived by another, by disclosing oneself (i.e. what one is aware of) and by receiving the counter-disclosure of another's impressions, or by being helped to discover one's

own discontinuities as they are manifest in his disclosures.

The implication that some affect (e.g. anger) which has not been attended to has none the less been present in a person might be inferred from such behaviors as repeated inattention or joking derogation. When such incongruent implications come to an individual's attention, through feedback or possibly self-reflection, they can be evaluated for their internal congruence, i.e. does any such affect come to awareness if the individual attends to himself with special attention to the possibility of the particular affect, or if he acts as if he felt the particular affect. If there is congruence, if anger makes sense in light of an individual's somatic awareness and knowledge of himself in the present situation, then he should be more likely to interpret a similar configuration of somatic and cognitive conditions in the future as indicating what had been implied in his former behavior without awareness.

Feelings have a somatic component, i.e. arousal, which can be identified as well as a cognitive component which relates affect to past, present and/or future experience. Developing and maintaining awareness of the physical and cognitive components of feelings is crucial in achieving integration. "Integration" describes a state of being where mind and body are not at odds, where mind "trusts" body; where one acknowledges somatic reactions (such as the flush which may attend being slighted), and gives them their cognitive due, which is an awareness (of anger in this

case) which is congruent with the data of external events as seen upon self-reflection or in the feedback of others. Dis-integrated awareness is awareness which to some degree excludes affective data in a person who has not been able to successfully integrate such data into a self which can satisfy both personal needs and moral demands. Such a person tends to regard feelings which have not been integrated into an acceptable pattern of behaving as if they were inappropriate or invalid data about the self in relation to the world. Most often feelings which come to be regarded as invalid are contact emotions whose expression may precipitate some feared development within a relationship. The concept of "integration" assumes that one can know how one feels and that knowing this has a positive value. Neurosis, or dis-integration, occurs when full self-awareness, the ability to know one's feelings, atrophies or is somehow distorted. This ability can be developed in a professional or non-professional therapeutic relationship, but is unlikely to develop without the participation of another person . because the initial decision to avoid feelings probably always involves the participation of a significant other person.

An outcome of integration that is very difficult, if not impossible, to develop alone, is congruence between what one wishes to communicate, what one feels, and what is perceived by others. A person may communicate himself to others in a way that gives the others access to undistorted information about one's feelings. It is unlikely that awareness, acceptance and communication could develop autonomously, outside of a facili-

tative relationship in any person who has blocked the growth of these skills, since it is in relationships that neurotics have typically chosen to withhold their full awareness from themselves as well as from others.

A means of facilitating integration in a therapeutic relationship is through feedback. The purpose of feedback is to resolve discontinuities in one's perception of one's self (e.g. between how one thinks he should be and how he fears he could be), and to resolve discontinuities between one's own perception (of self and others) and that of the others. The elements of feedback in therapeutic communication are, 1, the disclosure of conventionally unacknowledged material: feelings, impressions, "unacceptable" and "irresponsible" thoughts; and 2, counter-disclosure: B discloses personal reactions to A and A's disclosure, thus the consequences for A, of risking disclosure may be immediate and explicit. Feedback enlarges one's self-perspective by incorporating the data of another's experience of one's self into one's self-awareness. By incorporating such "objective" data, one can increase the degree of self-awareness by learning to attend to cues which others may notice but which may have been unattended to by oneself. Such significant feedback is often in the form of perceived incongruities; for example, the person who describes himself as relaxed may consider other possible awarenesses as it is pointed out that his knuckles are white and his feet are twitching, possible indicators of tension. Feedback extends one's self-perception to

include other's perception.

Feedback does not occur in most conventional encounters. Where it does occur, two conditions can arise which typically are absent from relationships. First, because feedback is a means for discovering and sharing feelings which are critical elements of the self ordinarily withheld, A becomes accessible to B, he can share himself. Congruence, the existence of undistorted communication within oneself and with others, a necessary condition for integration, is the product of a relationship and is, at best, difficult to achieve in isolation.

In a mutual feedback relationship, three concepts whose incorporation into the self constitute a basis for growth (differentiation of emotions), can be learned, experienced, and integrated into the self. They are, 1, self-awareness, i.e. the acceptance of the legitimacy of one's feelings, especially contact emotions, as real and essentially inescapable parts of oneself. 2, autonomy, or responsibility for one's self, i.e. the perception of the self as somehow free to choose among divergent ways of being and becoming. 3, intimacy, or love, i.e. giving (risking disclosure, sharing, exposing one's self-awareness) without strings (without demanding reciprocation from or control over another), and a non-judgemental attitude toward the feelings (as separate from actions) of others.

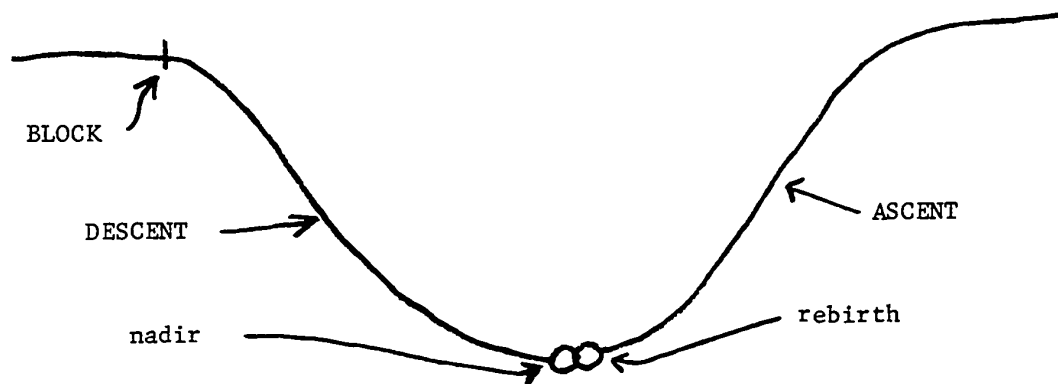


Figure 2
The experience of the therapeutic Process

This diagrammatic model, depicting the course of the psychotherapeutic experience of becoming integrated, assumes that as the self is free to emerge into awareness, and to be expressed, and as one experiences himself as (or acts as if he were) responsible for the quality of his present and subsequent existence, then one can continue to develop or grow. But as critical elements are withheld from awareness and/or expression and as one experiences himself as essentially helpless and determined by external forces, then growth or differentiation of the self is not likely to occur. A block to attention occurs when a person chooses to not accept or express contact emotions toward significant others, often a parent. Psychotherapy, from this perspective, can be conceptualized as deliberate trying to not block one's feelings, recalling the Eastern Mystic's paradoxical injunction: try not to try. Blocking attention to feelings can be regarded as a conditioned response to

contact emotions, which generalizes to other emotions as well. Extinction of the blocking response must be accomplished without withholding the negative reinforcer: the avoidance of a painful stimulus: painful emotions such as hurt, and rejection. Thus, to overcome a block, one forces oneself to act contrary to his previously conditioned responses, and risks taking the consequences of an aversive stimulus.

The term "block" reflects an interpretation of past events which often grows out of a therapeutic experience. Having become aware of, and having experienced a conflict within oneself, an individual is likely to attempt to incorporate such a discovery into a consistent structure of ideas about himself or find some personally satisfactory grounds for rejecting it. One owns or discards what one has tried on; that which he owns typically fits other ideas one has about oneself. The possibility that people may, for instance, distort memories, or selectively attend to those memories which reinforce a particular notion about the self which has emerged in the present, does not obviate the experiencing of oneself in the present as having blocked one's own awareness in the past. The feelings which are regarded here as having been "blocked", might conceivably have just never been learned, being experienced truly for the first time in the therapeutic context. Such feelings are nonetheless inaccessible to particular individuals and become accessible in the course of therapy. The term "block", then, reflects a contemporaneous interpretation rather than a necessary historical fact. Thus it may "make sense",

for example, to think that one was, in some manner, forbidden by a parent to express hostility, even though that parent if presented with such an hypothesis might deny it categorically; the intuitive fit may be more compelling than legitimate suggestions to the contrary. The "block", and the other stages of the therapy experience presented here, constitute an explanatory structure which fits the experiential facts and tentatively explains their relationships, without attempting to test the veridicality of present experience with relation to the past.

A breakthrough, where feelings are released to awareness and risked in expression, reduces a block to the development of the self because self-awareness is a condition necessary for differentiation. A breakthrough into increased awareness can be facilitated in long, intense, feeling-centered encounters in groups or one-to-one affective relationships where feedback norms prevail implicitly or explicitly. Such encounters may generate more tension in a person than can be repressed from awareness or they may simply generate possibilities for affective behaviors which had not been part of a person's repertoire. Since no social imperative exists to prevent or unblock blockage as a condition of maturity in most cultures, feelings repressed during early childhood may be found in adults. Feelings of hurt, anger, or self-disgust are apt to emerge after a breakthrough and are likely to be connected to childhood experiences. Expression of these feelings entails experiencing them actively in the present.

The Descent represents a return, in the present, to unresolved feelings, as they emerge into awareness. The work of this part of therapy is counter-repression in an intrapersonal and/or interpersonal mode to focus on feelings which have not been fully experienced, and which possibly did not completely disappear in the past, and live them out in the present. The reinforcement for allowing the descent is that it is experienced as growth; that as feelings are experienced fully they can take on a quality of completion so that they may be regarded as finished leaves one free to develop. Giving oneself over to the experience of a difficult emotion, such as hostility, which is nonetheless compelling for its intuitive fit does not necessarily commit one to a sentence of endless repetitions or intensifications of that emotion. On the contrary, it is the experiencing fully of the conflict, of which a particular emotion may be a part, through which one comes to differentiate the emotion and the conflict is defined and elaborated in the descent. Having moved beyond the block by a change in attention, i.e. by beginning to attend to possible affects of which one was previously relatively unaware, one begins the process of changing that which has come to attention. Emotional growth, then, includes these two kinds of change: 1, an expansion of attention to include new affective contents, and, 2, the differentiation of affect.

Maintaining the process of increasing awareness and differentiation requires a posture of explicit or at least implicit self-responsibility,

acting as if all behavior were functional, i.e. as if everything one did (of any significance) one did because one wanted to, because one implicitly or explicitly chose to so do. Thus all one's life, each moment, one had chosen to behave, to feel as one did, and to develop in the direction one developed. At this moment, one has chosen to behave, to feel, as one is doing, to be as one is, and to become exactly what one is fated to become by circumstance unless one intentionally intervenes to attempt to bring one's implicit existential choices (all of which probably can't be brought always to awareness) into line with one's explicit self standards and goals. What one is, i.e. one's immediate awareness and what one wishes (including what one has implicitly wished) to become need to be differentiated by attending to them intensively and exploring experientially for standards, goals, and ways of being with compelling intuitive fit, which also can exist in harmony, obviating the self-destructive ambivalence although not necessarily the dynamic tension, between present experience and goals, of neurosis. The realization of self-responsibility can lead to understanding and coming to control the reward contingencies under which one chooses to be and become what one has been, is, and is becoming. Like Perls', "Everything is a Projection," self-responsibility is a useful but "unlikely assumption."

Differentiation begins in the descent with the emergence of a conflict out of the self-evaluation following upon an experience of a "new" affect. To the extent that a new affective experience which is compelling

in its intuitive fit cannot be acceptably integrated into the existing cognitive structure of ideas and memories of, and prospects for, the self then, unless similar affects in the future are to be in some way excluded from awareness, the cognitive structure and/or subsequent affects will need to be altered to produce an acceptable condition. The conflict which emerges is likely to be characterized by an ambivalence between an experienced or immanent affect and an evaluative, possibly moral, standard, a should, which regards the affect as unacceptable. Differentiation proceeds at the level of both the affect and the evaluation, to experience and clarify each fully, owning each, shunning responsibility for the presence of neither within oneself. Nor is an "acceptable condition" necessarily one of homeostasis, of experienced quiescence. It is also possible that particular individuals will find the dynamic tension which characterizes the process of change to be rewarding in itself fostering an intention to continue the process by constantly reevaluating themselves according to increasingly demanding and idealistic standards.

The Transformation: Nadir, Rebirth, and Ascent

The Nadir, the lowest point, occurs when a crisis is reached in the divided self's struggle for acceptance and integration of a new affect, on the one hand, and for maintaining the old (mind-body) dichotomy, on the other. The nadir represents the experiencing, and (possibly dreadful) acceptance into full awareness and expression within a relationship

of those feelings which were most feared; which were most thoroughly conditioned to be avoided. Such an experience may be accompanied by hopelessness - that the consequences of dredging up feelings is as bad as it was feared, and that they may never improve; that one may never feel anything else (than hurt or hatred, for instance); that nothing could be worse; the expectation of eventual reinforcement (growth) may be lost; suicide may be considered. The experience of the nadir finally stops, and the next event begins.

The term "Rebirth" in the figure above, as well as referring to the experiential quality of this stage in the therapeutic process, also suggests that unaccepted feelings may have begun very early in childhood, even infancy and have only now been fully experienced as an adult. The rebirth is the redeeming aspect of the Nadir experience; having fully accepted into awareness and having fully lived one's most dreaded affective potential, one now experiences oneself as whole, as no longer withholding any part of oneself from oneself nor compelled by shame or guilt to withhold oneself from others, however disgusting or dreadful as it may still be regarded, this prodigal element of oneself has ceased to be denied and disowned; this is the experience of integration.

During the Ascent, the change brought through differentiation is manifest within oneself and is likely to be manifest within one's immediate relationships. There is likely to be a substantive alteration in the way

in which what have been difficult affective situations are to be experienced in the future. By intending to change and yet intending also not to inhibit the covert awareness of difficult contact emotions, and therefore, intending not to avoid the decision implicit in an act of affective awareness, there begin to emerge subsequent affects in analagous future situations which are both increasingly personally satisfying and morally acceptable. The person who experiences himself as whole is more likely now, during the ascent, to share his awareness, and thus himself, in explicit immediate relationships. Having accepted responsibility for himself, one is aware of the freedom of his choices. All that has been accepted (i.e. the whole self) can be given (expressed) to others. The continuing change in one's perception of one's own awareness as increasing qualitatively with awareness of "new" and clarified elements of oneself; the change in one's perception of one's own self-responsibility, in one's perceived degree of freedom and wholeness, and the continuing differentiation of affect as it emerges into awareness within subsequent situations, are all likely to be experienced as growth.

The sequence of experience described by this model is not fixed. The period of time covered from the block to the ascent may extend into years, although much of the sequence can sometimes be seen to occur within a single therapeutic episode of a few hours and possibly less. Indeed, an individual may sometimes be seen to repeat the sequence or elements of the sequence many times in the course of long-term therapy and within signifi-

cant personal relationships. Nor are the described phases as they occur in a person's experience necessarily fixed in the linear order in which they are presented here. The model only suggests that over the course of a complete therapeutic period, all the specified stages are likely to be experienced and their logical relationship can be seen clearly and possibly understood by reference to this model.

Two creative responses of integrated, autonomous people to the fact of their differentiation or individuation entail commitments of the self to continuing self-directed differentiation. They are love and spiritual awareness. Love is the choice, on an interpersonal level, not to separate one's self from another in spite of the fact of one's experienced absolute existential separation from others, but rather to actively attempt to reveal what lies within one's boundaries to others without making demands on the other for reciprocation or for control of the other. This is a skill that can be acquired in the therapeutic process; it is "giving without strings," it is risking to share one's self-awareness without an intention to manipulate another thereby. Acceptance of one's whole self, which also can occur in therapy, can generalize to acceptance of the other when one chooses to love. The reinforcement for love and spiritual awareness comes from their being experienced as growthful, i.e. as facilitating continuing changes in perception of oneself and another and/or facilitating the differentiation of emotions within oneself and within a relationship.

Spiritual awareness can be a continuation of the differentiation process intrapersonally. As self-awareness increases, encompassing an increasing range and fullness of affective experience, an individual may be struck by the basic universality of these events. Concentrative meditation, particularly, is a method of focussing one's attention upon that which is universal among men: pure awareness, devoid of content. The first aphorism of the yoga sutra of Patanjali (yoga having provided the historical basis for all eastern religion), states that "yoga is the intentional stopping of the spontaneous activity of the mind." To concentrate upon the no-thingness of mind which is independent of, and yet the ground of, culture, learning, memory and thought, is to dwell upon an essence or spirit which is common to all humans, a part of the individual self wherein there is a one-to-one correspondence to all other selves. This ubiquitous essence is also eternal, i.e. it is the same now as it was for the first man, and, further, it exists apart from time, time being a concept, the existence of which, is grounded in the activity of the mind. The individual, then, who directs the thrust of his differentiation intrapersonally may find himself approaching this awareness of a spiritual essence. Therapy specifies ways of relating to the self and to others that can generalize to one's relationship to god. For example, a "leap of faith" can be a non-logical response to the concept of a deity that is roughly equivalent to deciding to act as if one were responsible for one's feelings, or have faith in one's ability to resolve contact-emotional dilemmas by means other than inattention in spite of "rational" or

conditioned reasons for believing otherwise. Trust, acceptance, and love are other therapy-reinforced values that the diety may come to assume when one chooses to identify himself with the diety. Love and spiritual awareness can be responses to differentiation that seem to exist more fully within others and to more nearly include others by deliberately acting in spite of the physical and language limitations which enforce isolation.

Following is a description and analysis of a therapeutic sequence wherein all the elements of the model presented in Figure 2 can be seen to be present. The sequence referred to is taken from a film by Everett Shostrom, entitled: "Three Approaches to Psychotherapy;" Carl Rogers is seen interviewing a woman named Gloria.

Gloria is recently divorced and she soon tells Rogers that she worries about what effect having men in the house will have on her daughter, Pammy's, emotional well-being. She discloses that she has jeopardized her open relationship with Pammy about sexual matters by telling Pammy, falsely, that she, Gloria, had not made love since her divorce. Gloria wants to know, "What will hurt her more?" the lie, or the truth, that she is not sexually continent. She says she doesn't know if Pammy could accept her if she really knew her. Gloria moves beyond the Block to her own inner self when she begins to talk about her conflicted feelings directly ("I am a little ashamed of my shady side"), rather than through her projections

onto her daughter. In the Descent toward her vaguely intuited center, the affective elements of her inner conflict emerge: she hopes that Rogers will "help her get rid of her guilt feelings" about lying and casual intercourse, which have made her "uncomfortable" and "dissappointed" in herself. Her statement that "I want to feel good about me -- no matter what I do," further expresses her desire to resolve the conflict she sums up in these words: "My actions won't let me approve of me" (i.e., acting on her sexual feelings, as well as lying about it, almost inevitably ends in her feeling guilty). The issue of responsibility emerges over her wish to risk being honest with her daughter (and herself, by attempting to accept her own behavior), while fearing that such honesty may hurt Pammy (and herself with seemingly inevitable guilt); in her words: "I want to be honest...but I don't want to take responsibility for maybe hurting her." She asks Rogers to confirm her impending decision: "Do you feel that, to me, the most important thing is to be open and honest?" Rogers answers indirectly. Then, :O.K., I want to work on accepting me."

The Nadir, experienced as "a hopeless feeling," occurs when she tries to "accept what seems so wrong." Gloria steepens in her hopeless predicament until Rogers notes that she seems to "hate herself more when she lies" than when she is "bad". Gloria's Rebirth is reflected in her decision to risk being honest, whatever the consequences. It is seen in her statement, "That's solved....I feel relieved." With this, she returns from her intrapersonal experience to have an interpersonal encounter,

notable for its immediacy, with Rogers; as in this statement: "I want your approval, and I respect you, but I can talk to you."

* * *

The preceding example showed the presence of most of the elements of the model diagrammed on page 21: The Block to experiencing the whole self; the breaking through the Block and the Descent toward experiencing unresolved feelings; the Nadir, where the desire for intergration is experienced as inadequate for breaching the disparate parts of the Self; and the Rebirth, where the duality is transcended by risking some new action.

Especially clear in the foregoing example is the transition between the Block and Descent. On the far side of her Block to her inner experience, Gloria projects her fears and guilt about her own actions, onto her daughter. She has lied to Pammy in order to keep the girl from being aware of her mother's indiscretion; but this concern for her daughter serves to insulate her from her own non-acceptance. Her personal fears about experiencing her own inner hurt are put aside when she can focus on her concern for Pammy. This motherly responsibility would serve in the absence of self-responsibility.

The references to Pammy decrease in frequency as she begins to acknowledge that her fears for Pammy are also fears about herself. The non-acceptance she expects from Pammy, she finds in herself. The incongruity

which she perceived in her behavior is transformed into an internal conflict. The disappointment over her lie and the shame over her sexual behavior prove to be Gloria's own feelings about herself. She honestly doesn't know if she can accept her own self if faced directly, and the hurt she feared for Pammy she encounters in herself when the Descent ends in the Nadir.

* * *

Other theories of personal growth can also be described in terms of the foregoing model. I will briefly look at K. Dabrowski's Theory of Positive Disintegration, Jung's Analytic theory of individuation, Perl's Gestalt description of the layers of neurosis, and Joseph Campbell's mythology-derived Journey of the Hero.

K. Dabrowski's (1964, 1972) Theory of Positive Disintegration is a theory of personality development which parallels, in many respects, but in others, diverges from the model presented here. Dabrowski sees the task of therapy being "to convince the patient of the developmental potential that is contained in his psychoneurotic processes," (1972, p. viii) which Dabrowski believes to be the sine qua non of disintegration, and hence, of development. Further, he states that individual development "cannot be achieved alone." The idea that there is positive developmental value in being aware of and experiencing the internal conflicts within a person who has in some way blocked the process of experiencing those conflicts, and that such experiencing is unlikely to be achieved with-

out the participation of a significant other person is in keeping with the present model. However, the nature of those particular experiences which constitute the crisis in the conflict between fear-of-self and emerging self-awareness (the transition between levels III and IV in Dabrowski's model; the descent and nadir in the present one) is not so elaborated as to make a thorough comparison possible. In Dabrowski's words: "The theory of positive disintegration is not concerned with specific conflicts at various developmental stages" (1972, p. 245); the following comparison then is made within this limitation.

Dabrowski specifies five levels of development, the last "four stages of positive disintegration forming an invariant sequence" (1972, p. 301). Level I is the stage of "primitive integration", characteristic in its most extreme form, of psychopaths, and possibly infants. "A primitively integrated individual spends his life in pursuit of his basic needs... He responds to social influence only as a measure of self-preservation. There are no internal conflicts" (1972, p. 111). Level I corresponds to the period preceding the block in the present model, the block representing a way of dealing with internal conflicts which are implicit by the mechanism of pressing those conflicts out of awareness. The block corresponds to Level II, in Dabrowski's theory of positive disintegration, i.e. the stage of "unilevel disintegration" characterized by relatively "unconscious" and "unaware" "conflicts between drives and emotional states ... of similar intensity" (1972, p. 306) that may be experienced as

tension, moodiness, or psychosomatic illness. This is the level where psychoneurosis first appears. The "psychoneurotic differs from the psychopath in that he is sensitive, restless, and capable of somatic expression of mental process." (1964) Thus, "psychosomatic sensitivity is an essential condition of disintegration." In other words there must be some physical or "somatic" component (vid. page 18) of the internal conflict to attend to in order to motivate an individual to bring about some change in his condition, i.e. he must have some sensitivity to feelings.

While Dabrowski's theory implies a continuous development from birth to Level V, the model presented here posits a learned and eventually dysfunctional method of dealing with the (especially emotional) contents of the self during the period leading to the block, leaving open the possibility of learning more functional ways of dealing with these contents, which might obviate the development of neurotic mechanisms on Level II and during the period preceding the block. On the other hand, Dabrowski does refer to a "recovery of a lost unity" (1964, p. 3) during the process of positive disintegration, which seems to leave open to him the possibility of an estrangement from the self occurring as a result of learning. However, he defines disintegration as "the loosening of psychic structures...from emotional disharmony to complete fragmentation of personality structure", beginning with unilevel, or relatively unaware disintegration, whereas the present model regards this period leading to the block as one involving an interfering with the flow of the process of the

self from entering awareness, an imposed structuring, rather than a loosening of the process of awareness. The difference is one of emphasis stemming from Dabrowski's more developmental perspective (that the initial disintegration into conflicting elements represents the gradual dilation of awareness), and my own learning perspective (that reification represents the learned constriction of awareness). Both theories agree that a period of relative unawareness precedes one of increasing awareness. The block (vid. page 22) represents the fear of being fully present to the self, as well as to the other, and is spanned by risking self-expression. Breaking through the block, then, constitutes the transition between levels II and III, from relative unawareness to a period of increasing awareness.

Level III is the "dramatic, sometimes tragic" (1972, p. 106) stage of Spontaneous Multilevel Disintegration wherein the new self-awareness begins to emerge in the form of 1) a "hierarchization of values", the process of developing a sense of "higher and lower" values within the self, and 2) a sense of "subject-object" in oneself, i.e. "a sense of looking at oneself as if from outside" and of experiencing "dissatisfaction with oneself" (1972, p. 305), of there being both the "judge and judged" within oneself. Hence level III is characterized by passing through feelings of disquietude with the self, shame, inferiority with respect to what one ought to be, guilt, anxiety over one's shortcomings, "through a state of disharmony and conflict between various sets of

tendencies" (1964, p. 93). During this stage, also, "the individual comes gradually to an elaboration of his previous experiences" (1972, p. 103). This phase of level III is the "phase of stratified disintegration" or the "soul's night", akin to Kierkegaard's 'fear of trembling'" (1964, p. 63) marked by "grave intrapsychic conflicts like doubting one's own worth, doubting the meaning and sense of life, facing one's own responsibility" (1972, p. 106); it constitutes the end of level III and the transition to level IV. This description of the stage of Spontaneous Multilevel Disintegration bares similarities to descriptions presented elsewhere in this thesis of the descent and nadir. The Descent corresponds to level III; in the descent a growing self-awareness and self-disclosure result in the elaboration of the intrapersonal conflicts which culminate in a psychic crisis, the nadir, in the pit of which despond are resolved the issues which Jung personified as the anima or animus, which Campbell saw in the personifications of the Goddess and the Temptress, i.e. the issues which center around sub-dominant contact emotions. The nadir is the event occurring during the descent, which corresponds to the phase of stratified disintegration in Dabrowski's conception.

"The state of hopelessness lifts gradually" (1972, p. 106) and reveals level IV, the stage of Organized Multilevel Disintegration, "a level of stable moral values" (1964, p. 93). There is now a significant degree of tranquility and harmony in the inner psychic milieu. With the closing of

the "phase of stratified disintegration there emerge three 'dynamisms', or 'mental forces,' whose parallel development began with the start of level III and which distinguish the "self-developing," "self-aware," and "self-directing" personality; they are: 1) an authentic ("in accordance with one's inner truth," i.e. one's autonomously developed hierarchy of values) Personality Ideal, 2) a new Disposing and Directing Center (the center which controls behavior) independent of "primitive drives (self-preservation, sexual, aggressive, etc.)", 3) a viable Third Factor (factors one and two being heredity and environment) which is the agent of autonomous (i.e. "consciously developed independence from lower drives and the external environment") choice, and therefore, of self-criticism and self-control, in the service of "inner psychic transformation," or personality development. The formation of these dynamisms is equivalent to the period of rebirth in the present theory. The personality ideal, the new disposing and directing center, and the third factor, as repositories of authenticity and autonomy, reflect the resolution of the issues of feeling and responsibility, in their fusion of inner drives with conscious ideals. Thus the evaluation of "higher and lower" made by the third factor, now constitute a simple, intuitive choice between "more preferred and less preferred" (1972, p. 296). The individual on level IV has come to trust his feelings as reliable and worthy sources of information about himself and about how to behave in the world. The new disposing and directing center guarantees a "positive release" (1972, p. 303) of psychic energy, having transcended the "tendency towards excessive inhibition of lower

level functions characteristic of the majority of psychoneuroses" (1972, p. 50). The new personality ideal has the quality of an "internal imperative" (1972, p. 302). His newly conscious self-responsibility is indicated in this passage describing level IV "Now it is the individual himself who takes the initiative in organising a hierarchy of his own inner contents, while in the preceding stage of development it was the contents and the experiences themselves that were pressing for change and growth (hence the name of the stage 'spontaneous multilevel disintegration')." "

Having reached level IV, the developing personality "will admit no retreat from the road ascending to a personal and group ideal" (1964, p. 63), i.e., "to a positive, fully conscious, creative level" (1972, p. 107). This phase of level IV corresponds to the period of the ascent described on page 28, where the renewed person, with access, in awareness, to his whole self, experiences himself as being responsible for the quality and direction of his existence, able to share himself by being open with others without feeling controlled by, or attempting to control others.

Developmental level V, the stage of "secondary integration," is the "outcome of the full process of positive disintegration" and is characterized by "the integration of all mental functions into a harmonious structure controlled by higher emotions" (1972, p. 304), to Dabrowski. The fully developed personality which emerges onto level V is "described

as self-aware, self-chosen, self-affirmed, and self-determined unity of essential psychic qualities....which are universal: autonomy, empathy, authenticity, responsibility; and individual: (a) exclusive, unique, unrepeatable relationships of love and friendship; (b) consciously realized, and chosen primary interests and talents; (c) self-awareness of the history of one's own development and identification with this awareness" (1972, p. 180). Such an ultimate outcome is also compatible with the model presented herein, which specifies that self-awareness, intimacy, and autonomy are the outcomes of therapy.

The moral aspect of positive disintegration is reflected in the emergence of an inner hierarchy of values arising from the "spontaneously developing conflict of value" of level III. "Reflection, hesitation, and inhibition instead of automatic reactions to stimuli" (1964, p. 90) are the characteristic psychoneurotic mechanisms which lead eventually to the "sublimation" of the primitive drives of aggression, sexuality and even self-preservation, which in the psychopath are expressed as ego-centric "ambition, pride, security, power, need to dominate" (1972, p. 157). In the positively disintegrating personality, such drives are transformed into alterocentrism, empathy, and altruism; thus, the issue of control is resolved in the giving up of manipulative control of others and the assumption of an authentic responsibility for the self in relation to others and in regard to one's own continued development. In the present model this moral development is presented as the development of an aware-

ness of self-responsibility and differentiation during descent of the relevant inner conflicts over contact emotions, i.e. dependence and/or independence, and the eventual resolution of these differentiated conflicts occurs in the nadir, out of which there typically emerges the "whole" personality which is experienced as fully self-responsible (autonomous) and, as the result of the transcendent integration of conflicting elements, free in the sense of having a full range of behaviors with which to fulfill his needs without hurting or controlling others, indeed, behaviors which often tend to enrich others' experience. The reborn and ascending person's dependence, or need for others, for example, comes to be expressed as concern for others. He is able to love, i.e. to show warmth and affection and to express (disclose, reveal) himself, including both his anger, or independence, and weakness, or dependence, without attaching demands to these gifts. This tempering of drives by genuine concern for others is equivalent to the "authentic hierarchization of values" in Positive Disintegration which reflects the moral development of personality in Dabrowski's theory.

* * *

From the experiences of growth, Jung abstracted what he believed to be the structure of personality and his descriptions are of the underlying structures and dynamics of change, more than description of the experience of change, which is what the present theory attempts.

Jung's (Jacobi, 1968) process of individuation begins with the

decision to confront the Shadow, the "personal darkness" which represents that which is commonly "rejected and represses or less lived in the course of one's conscious existence." The Shadow is absorbed in the personal and collective unconscious. In terms of the model diagrammed on page 21, beyond the block lurks the Shadow or the descent, an area of vague, undifferentiated and unrealized possibilities for affective and cognitive awareness and behavior; the block represents the decision not to encounter one's own unconscious contents out of fear of the possible consequences of the descent into their possibly terrifying elaboration.

The second stage of the individuation process is characterized by the encounter with one's contrasexual component, the anima in the male and the animus in the female. At least in the man or woman dominated by the thinking function, the anima/animus is the feeling, or emotional part of the self. "In the thinking type person which apprehends the contents of the inner and outer world predominately through thinking or cognitions, ...the course of the process of individuation...in the end descends to the...darkness of the womb, the unconscious," to the function of feeling. The encounter with the anima or animus, then, is very like the descent in the present model, where one's feelings particularly in the sub-dominant contact mode of emotional experience, are faced and experienced in spite of their inherently frightening nature.

The next step, for Jung, is the appearance of archetypal "mana

personalities," or figures with "extraordinary power." It is the discovery within one's unconscious of the "primordial image" that forms "the innermost essence of the psyche of either sex." Thus conscious realization of the contents making up the archetype of the *mana* personality means, "for the man the second and real liberation from the father, and for the woman, liberation from the mother, and with it comes the first genuine sense of his or her true identity". In the present model this liberation from the parent corresponds to the stage of rebirth where the individual accepts and integrates those elements of himself that he has denied or repressed, and takes full responsibility for, thus assuming power over, what he is and what he is becoming; he is liberated from the limitation imposed upon his experience by the dominant contact mode.

The final step in individuation is "self-realization." In Jung's words: "Neurosis is always a substitute for legitimate suffering". He distinguishes between inauthentic suffering, the ailments arising from neurotic evasion of suffering through repression, and "authentic suffering" which is a natural part of human existence and which "always bears with it an enrichment. In this light, conscious realization may be interpreted as the transformation of an inauthentic into an authentic suffering". Self-realization leads not to the absence of suffering, but rather to an "outgrowing" of particular sufferings, that result from "the raising of the level of consciousness. Some higher or wider interest arose on the person's horizon". The present model proposes that a Nadir of suffering

is followed by an Ascent which is free of the fear that initially caused the Block, because the consequences of accepting and communicating the feared emotions have been experienced and survived. The Ascent here is not the end of suffering, indeed it is the consequence of choosing to accept suffering when suffering is the consequence of being one's self, i.e. choosing to be fully aware of and explore experientially the ramifications of those affective and cognitive contents which emerge for a person and which are intuited and conceived to be significant, rather than leave such contents in the shadow of inattention.

* * *

Fritz Perls (Fagan and Shepherd, 1970) has a model for change, as it occurs in Gestalt Therapy, which is implicit in his description of the "five layers of neurosis". Perl's model is similar to the one presented here. The first layer surrounding the neurotic personality is the "synthetic" or "phony layer" where we behave according to roles rather than being our "authentic selves." The phony layer is equivalent to the persona in Jung's theory. It corresponds to incongruous behaviors which are reflective of a block to full attention, in the model on page 21. As in the "phony layer," the blocked individual withholds himself from full awareness and from expression and attempts to be as he "should" be (Top Dog) rather than as he "is" (Under Dog). The consequence is to block the process of the emergent self and structure one's identity into a role.

The second and third layers in Perls' model are the "phobic layer"

which constitutes "the resistance...to being what we are," i.e., "the fears that maintain phony behavior," and the "impasse," feeling caught blank, confused. This is analogous to the Descent in figure 2, wherein an individual begins to experience an internal conflict where one element which, out of fear, had been alienated from awareness comes to be faced and felt as the presence within one of one's feared potential. Fear of painful emotions is a negative reinforcer which must be experienced if it is to be overcome, and that fear becomes apparent in the descent.

The "layer of neurosis" which corresponds to the Nadir in figure 2, is Perls' "implosive layer". According to Perls, this layer is characterized by feelings of "grief, despair and self loathing" as well as by experimenting with new behaviors. In the model presented here, the effort, which characterizes the descent, to face emergent feelings, experiencing and expressing them within a present relationship is likely to culminate in strong negative feelings toward one's self since it entails acting counter to all the "shoulds" that maintained the block to the self in the past. Thus the individual finds himself trying to communicate all the elements of himself that he has believed, and to some extent, still believes, should not even exist in him. The Nadir is the crisis in the battle between self rejection and self acceptance. It is the climax of self rejection. In Perls' scheme it would be the strongest "implosion".

The last layer that Perls describes is the explosive layer. Explosion

into joy, grief, orgasm or anger, reveal the authentic self emerging at the core of the personality. Likewise the ascent represented in the model in figure 2 symbolizes the personal growth that occurs in the person who does not withhold himself from himself or others and who has freed himself of blocks to his existence, allowing his self to emerge and accepting in awareness, all of what emerges.

* * *

Joseph Campbell, in The Hero With a Thousand Faces (1949), describes an archetypal journey drawn from the myths of many countries, representing the course of human transformation. Campbell sees the journey being made in psychoanalysis, and Kuiken (1971) has shown that the hero's journey can be seen in the encounter group process.

The first division of the hero's journey is the Departure or separation from his old world. Here the hero heeds or refuses "the call to adventure." If he accepts the call, he receives unsuspected assistance in the form of "supernatural aid." Campbell notes that "the doctor in psychoanalysis is ...the Wise Old Man" of mythology. The hero finds that a "shadow presence...guards the passage" across the "threshold of adventure." "Crossing the first threshold," the hero finds himself in "a world of unfamiliar yet strangely intimate forces: signifying the unconscious and represented in myth as being in the "Belly of the Whale" or "passage into the realm of night."

Seen from Campbell's mythological perspective, the elements of the hero's transforming journey can be seen in the model presented here. The Block is the Threshold of Adventure, the wall that holds back the night-sea of the unconscious, that part of one which has been hidden from the light of awareness. To experience the frightening and unacceptable parts of one's self is to embark on an adventure which is an unpredictable encounter with a shadow spirit.

The Call to Adventure in a therapeutic sequence is provided by the challenge to be "immediate," i.e. to attend to, and to express one's present experience; to disclose oneself to another. This being-in-the-present constitutes moving out of one's stable, reified, predictable role, and into the process of one's existing self. This being-in-the-present is what has been blocked, and the removal of the blockage by allowing oneself to be immediate precipitates the descent into awareness of the dark, frightening realms of self-discovery. Immediacy, or being fully in the present, then, is the means by which one can come to participate in the process of one's emergent self: a dynamic connection between the alienated element of the body, rejected contact emotions, and the disembodied dominant element in control. As the self emerges into awareness and comes to be accepted as valuable and as necessary for completeness, immediacy becomes an end in itself, a self-reinforcing mechanism that continues to keep the hero in touch with his own underworld after his ascent.

Before a person will risk the immediacy that begins his journey he must believe that something may be existing in himself of which he may be unaware. A clue to such an intriguing element may come from some incongruity or ambiguity in his self-perceptions or in the perceptions of him by others. Further, he must have some indication that uncovering this hidden and probably feared, aspect will have some positive meaning in his life. Without such a hunch to justify his risking immediacy he is likely to ignore the opportunity; this is the Refusal of the Call that Campbell found to be not too infrequent element of myths and fairy tales.

The spirit guarding the threshold of self-awareness is fear. It is fear that causes and maintains the block to attention. One may fear that once he crosses the threshold of awareness he will be engulfed by the wild elements of his unknown self. He may fear being seen as inconsistent if he allows apparently contradictory elements of himself to be seen. Or he may fear change; he may fear that immediacy threatens the stable structure of his blocked existence and offers only an unpredictable process in return. "Super-natural aid" to overcome fear comes from the therapist, who "provides the adventurer with amulets against the dragon forces he is about to pass" in the form of acceptance: that he does not reject the individual for attempting to experience and express his whole self in this relationship. Wholeness is seldom achieved in isolation even though the journey is in discovery of one's own lost elements and at those times when it is intuitively known to be important to communicate to someone, the therapist is

there with his miraculous charm: acceptance, where the client himself has proffered rejection. In the adventure of the integration process it will be necessary to confront and attend fully and directly to every dreadful, repulsive element of the self and accept each one, like the Irish Prince Niall who had to kiss a hag guarding a well, and became king thereby, and transformed the hag into a beautiful maiden.

Crossing the First Threshold is risking immediacy while allowing oneself to be afraid no less. Here one relinquishes control and commits himself to destiny. By becoming immediate it ceases to be possible to be as one should by; one is left to be as he is. This giving up of control is the first indication of the detachment which later comes to characterize the ascent, i.e., the integrated person trusts himself to communicate his experience without calculating his own responses in order to control others.

The second stage, that of "Initiation," is the period of trials and victories. After a "Road of Trials" the hero meets "The Goddess" which is life both wonderful and terrible, to be taken as she is; the firm but gentle lover is potentially king. "Attonement with the father" reconciles the hero's rivalries with the father for mastery, of/or responsibility for, his world. The hero's reward is "apotheosis;" he experiences the immortal bliss of Gods.

The stage of "initiation" can be thought of as the descent, nadir and rebirth of the model in figure 2. In the descent, the individual in therapy, like the hero on the Road of Trails, gradually uncovers and defines the previously rejected elements of himself: anger, lust, etc. This process of differentiation leads to the critical encounters with the embodiments of his own most feared aspects. The father, the authority, the master, embodies responsibility for the self, the master of one's destiny. The issues that the father represents are responsibility and control; responsibility for the self and control of one's feeling process. The crisis results first from the ego-annihilating necessity of taking full responsibility for having attended only to a single dominant mode of experience, and blocking one's spontaneously emerging self. Thereby, one also begins to take responsibility for feelings in the sub-dominant mode, no longer so simply blocked in their eruptions into awareness. The hero at this crisis abandons himself to destiny. The individual in therapy abandons his attempts to maintain a dominant mode of contact-emotional experience which he had exercised by excluding difficult affects in the sub-dominant mode.

The meeting with the Goddess and the experience of Woman as Temptress refer to the need to give and receive affection and the corollary need to express one's independence. The embodiments of the self symbolized in myth as goddess and temptress constitute the duality of emotion, from selfless "giving", love (dependence) to impure aggressive (independence)

desire. To accept them and integrate them in a creative synthesis within the self frees one to fully be himself, both animal and divine. The adventurer into awareness can fully experience his animosities and unfulfilled needs. As he journeys into, and becomes, his own dark-light self, he comes to experience himself in life as being whole and free, open to bliss and to sorrow. He comes to experience his present fully, and thus, timelessly.

One or the other of the two critical issues of dependence or independence, tend to be more significant and dreadful for a particular individual. The more dreadful encounter is experienced as the Nadir. It is the most difficult encounter and although its embodiment varies with individuals, it will most likely focus on one of the two crucial issues symbolized by the confrontation with the goddess (dependence) or woman as temptress (independence) (desire). The mystical marriage of the hero with the goddess represents the resolution of feelings of dependence in a transcendent incorporation. The Nadir is further distinguished by its surprising consequences: Rebirth, the experience of having been renewed by the heroic journey that liberated the self.

The third and last stage of the hero's journey consists of his "Return" to the real world with his magical boon. Campbell finds that mythological hero's may exercise a Refusal of the Return and remain detached from the world they left. Or they may be pursued by demons in a

Magic Flight from the underworld from which they may or may not escape by a hair's breadth. Or again, they may find Rescue from Without where the hero is snatched back from annihilation by some benevolent force. The Hero who successfully negotiates the Crossing of the Return Threshold alone and with his presence about him, however, becomes the Master of Two Worlds, the upper as well as the lower; the mind, or how he should be, and the body, or how he is.

The crisis at the return represents the problem of integrating the integrated self back into the exterior world of duality which probably hasn't changed to accommodate the newly aware and sharing self. The individual in therapy may prefer continued dependence on the group or therapist to exposure to a predictably unaccepting world, and thereby refuse to return by increasing his involvement with Therapy at the expense of his involvement with his own outer world, this would correspond to a Refusal of the Return. The Magic Flight from the underworld constitutes an escape rather than a victorious emergence. Such an exit is not likely to leave the adventurer with much inclination to return again to his underworld. In therapy this would amount to having experienced one's inner self but having been deeply shaken by, it deciding to try to re-establish a secure, reified existence. In the Rescue from Without, rather than integrating his outer and inner worlds, the adventurer chooses the outer world over the inner and denies the significance of his inner experiences, thereby closing the door to his inner self behind him.

But if he fully accepts his whole self and would have it be in harmony with his outer world, then he must experience another crisis at this threshold, the crisis of Rebirth (Campbell's word). This crisis is precipitated by the seeming incompatibility of the ebullient self emerging in awareness, and the outer world with its demands for control. The solution is a transcendence that leaves him the Master of Two Worlds. The integrated person can participate in the external world without being bound to it, without identifying with it, without needing to control its outcomes. Thus he can find expression for his deepest self when he feels the need for such expression; and the necessity to sometimes withhold expression does not imply that he must withhold anything from awareness. He is able to share himself freely in relationships, without making demands. Thus, he is detached from the world, and his detachment is the source of his freedom within it. His acceptance of himself holds the door open to his inner world; and immediacy, the means by which he enters that world, has become an internalized function. The Ascent represents the experience of being whole; the process of existing experienced as growth; the hero finds that he is the very boon he set out to find.

CHAPTER III

THE BLOCK

The effort to withhold real and present, but unacceptable parts of the self from awareness, and from the view of others, divides and reifies the self. The naturally unfolding process of self-emergence is blocked, and elements of the self are aligned in a static internal conflict; some parts attended to, while others are systematically ignored. The process of resolving this conflict and the eventual achievement of a transcendent synthesis that destroys neither side, constitutes psychological growth.

The first step in that process is to experience the deadlock, the Block to awareness that prevents growth. When one has seen evidence in the form of incongruity in his own behavior, that there is more to him than he is fully aware of, he may choose to explore particularly dark realms of himself that he has previously avoided. Thus, a critical part of therapy involves becoming aware of inner contradictions and dilemmas.

The Blocked person who comes for therapy is apt to be motivated by the burden of persistent or recurring secondary emotions, such as guilt or shame, or by the failure of some other mechanism of inattention to feelings, such as denial, or distortion of one's relationship to his feelings. The mechanisms of inattention may follow the unsatisfactory resolution of situations which have generated contact emotions (e.g. feelings of aggression-

hostility or sexuality-affection) without resulting in some direct expression. For example, when one feels anger, a direct expression first involves the acceptance of the presence of that anger into awareness; second, some expression of anger, which might be as moderate as "I feel angry toward you", or as undifferentiated as a physical blow. Whether a particular situation requires actual expression to, and hence contact with, another in order to be resolved is indicated by one's experience of emotions associated with the awareness. Thus, if a particular situation repeatedly appears in fantasy associated with feelings of anger, then this is an indication that awareness and acceptance may not have been sufficient, and that some contact-expression may be necessary if the situation is to be finally resolved. Experiencing secondary emotions tends not to reduce the emotional energy that generated them, thus they persist and recur. Having secondary emotions avoids the risk of a direct expression of contact emotions, which would be more likely to reduce the emotional energy generated in the situation, but might also result in censure, rejection, emotional, or, conceivably physical, pain. In avoiding the potentially dreadful consequences of interpersonal encounters, depression may result. The general reduction of affect associated with depression has the effect of muffling hostility and inappropriate sexuality in one's awareness; it also may have the effect of muffling happiness.

The various mechanisms of inattention tend either to divert the energy generated by encounters to less threatening objects or to retroject it into,

and usually against, the self. A popular example of diverted hostility is the man who kicks his dog when he is angry at his boss. Diverted hostility, a distortion of the relation of a feeling to its context, may also be manifested in the effort to control the object of one's hostility. For example, expressing hurt or disappointment when what is felt is anger, may be a way of controlling the future behavior of the person who caused the anger, and safer than risking the other's retaliation. Secondary emotions that result from retrojection (Gestalt definition) tend to reflect dissatisfaction with the self, such as reproaching one's self for unacceptable or inappropriate sexual or aggressive impulses, i.e., inclinations to act. Feelings of inferiority, self-disgust and guilt are such secondary emotions; their effect is to reject and alienate that part of the self which has been the source of these impulses. An assumption of this writer is that growth is more likely when the offending impulses are fully experienced in some way rather than continually avoided. Such experiencing may be in the safety of the particular therapeutic environment and may be through fantasy rather than "reality." The essential element is that the unacceptable, but present, impulses be owned fully and expressed, when necessary, as real parts of the self which have some ultimate value.

The Blocked person finds himself partly unacceptable and he attempts to separate off his unacceptable parts; he may deny their existence in the face of contrary indications. By various means he may attempt to negate these parts of himself. When he is unsuccessful he may ascribe responsibility

for their presence to factors outside of himself. His body is likely to be seen as the source of his unaccepted impulses and his mind as the legitimate source of his identity. As a consequence of this alignment, he may not attend to much of his experience so that he may be genuinely unaware of, and unable to, express his present feelings. The thought of inner change in the direction of more openness is likely to be considered a threat to his being or his sanity and he may seek ways of altering his environment to relieve his discomfort long before trying to change himself directly, as in therapy. In one sense, it would be a victory if he could maintain the Block to his awareness in the face of a therapist's efforts to help him be aware of himself.

Guntrip (1968) presents the "self-induced blockage of the maturing process" (p. 186), in a psychoanalytical framework which sees resistance to psychotherapy as a disfunctional and ultimately self-destructive attempt to save the ego from a schizophrenic break along the lines of internal elements in conflict. He describes three aspects of ego functioning:

- 1) a "libidinal ego" which represents the "primary aspect" of a potentially whole self; it embodies the helpless, dependent, weak, child who was traumatized by unloving parents;
- 2) an "antilibidinal ego" an identification with angry parents which results in the attempt to crush the weak child out of awareness so the person can function in the real world without being helpless;
- 3) a "central ego" which constitutes "the conscious self through which the therapist must work towards the reintegration of the

whole self" (p. 188). This central ego attempts by adopting pseudo-adult patterns such as tough, self-sacrificing, intellectual, and so on, to disencumber itself of this internal conflict by repressing it as far as possible into the unconscious so that it can deal with the external world.

The task of the therapist is to somehow reach the deepest, repressed and hated, immature level of the personality by passing through the "rival policies for saving the libidinal ego" of the anti-libidinal and central egos. Having reached this level he seeks to gain the trust of the individual's weakest, most timid element and by providing the comfort and acceptance that the parents failed to provide, to permit the "rebirth and regrowth of the lost living heart of the personality."

The block, as that term is used in the present model is reflected in the mask-like pattern of behavior adopted by the central ego to shield it from awareness of the internal conflict between the libidinal and ~~anti-libidinal~~ egos. The profound nature of the risk taken by a person disclosing something of himself in order to break through his block and begin the descent into regions that he genuinely fears, is illuminated when the function of the block is regarded, in the person's experience, as critical for his adequate functioning in the world, as in Guntrip's description. To encounter the anti-libidinal ego is to face the issue of one's retrojected aggression and experience the full impact of self-hatred and, probably, to risk the expression of hostility for the unaccepting parents. The subsequent encounter

with the libidinal ego entails facing, in one's awareness, the dreadful weakness and helplessness at his core. Each of these steps involves taking the risk of facing potentially overwhelming elements of the self; to face self-hatred may risk considering suicide; to face anger toward parents may risk considering ingratitude as gross as paricide; and to face helpless weakness in oneself may mean questioning the meaning of existence. The nadir is not characterized by one particular content such as accepting weakness in the self, but rather by the experienced ultimate dreadfulness which is likely to color that issue which has most impact for a particular individual. The present model, unlike Guntrip's description, does not specify which are the crucial issues in all cases. The risks that are associated with the disclosure of each element of the self correspond to "resistance" as it is encountered after breaking through the initial Block to awareness.

Mowrer (in Gazda, 1968) sees the problem of the self withheld from expression as a moral one of deceiving others about oneself because of guilt over the nature of the inner contents. His model of therapeutic change is based on the processes of the early Christian religion, pointing to the etiological root, ligare: to tie or bind, of "religion," and seeing this goal of reunion, or reintegration, as identical with the goal of psychotherapy. He sees in the original practice of "exomologesis," or a full confession of one's inner guilts before the intimate company of the People of the Way, an analog of the process of self-disclosure as it occurs in psychotherapy.

He further connects the practice of meaningful penance to the acceptance of responsibility for what one is and is to become. Thus, in Mowrer's conception, to resolve the incongruity of an external role-mask which conceals the shame of inner sin, is simply to accept the moral imperative to "confess" one's guilt in a community of accepting people, do "penance" and be "forgiven." But, however much the self is hidden in a deceptive maneuver to be concealed from moral censure, indicated by the fact that "confession" or self-disclosure does occur, still the hidden element of the self is experienced as at least partially, and significantly hidden from full awareness; in Jung's metaphor, it is experienced as an ominous "shadow." And for whatever possible deceit, the attempt to deceive others is also a serious attempt to deceive oneself, motivated by genuine fear (or hatred) of the concealed elements.

Mowrer's analysis ignores a crucial element of religion: the "lost soul" who would be reunited with God must make a leap of faith before he considers confession and penance. He decides to believe in the existence of an unseen spirit although the spirit may never have been experienced consciously. In psychotherapy, an individual explores what are likely to be "unfinished" situations (i.e. situations which never have been satisfactorily resolved, hence, they may be heavy with current emotional significance) and in some way dramatizes that situation (e.g. the Gestalt "dialogue" between personified attitudes toward oneself), "acting as if" the situation had some personal meaning, "trying on" possible feelings to see if they "fit," i.e.,

to see if they connect a person to some felt emotional experience in the present. The divided self is nearly as incongruous, one part to another, to itself as it is likely to be to others; the Block is experienced as a real separation, at least an obscuring screen. And it is by way of a leap of faith, of trust in the acceptance of another, that he chooses to risk an attempt to experience in "public" what he has dreaded in private.

Mowrer's analysis also ignores a crucial element of the complete therapy experience, which may not have been a part of the early Christian's religious experience, in Guntrip's words, "the rebirth and regrowth of the lost living heart of the personality," the libidinal ego. Mowrer's "exomologesis" discloses what one had tried to conceal, i.e. the libidinal ego, without resolving the conflict, without achieving an integration and differentiation of the libidinal ego, on the contrary, "confession" is followed by "penance" rather than acceptance. Hence, in Mowrer's model, the outcome of therapy is a victory for the anti-libidinal ego. That part of therapy, as described herein, which is to bring to awareness and expression the elements of an internal conflict, is accounted for by Mowrer, but the subsequent part, to achieve a dialectical resolution through differentiation is obviated by Mowrer's (like Dabrowski's) dualistic insistence upon the irredeemably sinful nature of the libidinal ego.

Following are examples of individuals in therapy with counsellors of differing theoretical orientations; each individual is Blocking elements of his experience at least from communication to the therapist. Such Blocking

is most often present in the initial stages of a therapeutic sequence although it may continue indefinitely.

The effect of blocking parts of one's self from attention and communication can be seen in the following selections from Johnson's recording of a series of interviews with a 19 year old male client. The excerpts are taken from the first through the tenth interviews.

Male client:

"...So many things you do believe and you've been conditioned to believe. Then if you try to break away from your conditioning, try and be sort of an individual...you start to think: 'Am I doing this because people think that's the thing to be?'...I don't know whether I'm a hypocrite...there's so much to a person."

"To break through the net (of the many contradictory, artificial, conditioned possibilities into the possibilities that are really you) you've got to separate off every little...thought...and compare that with every other thought...and think why you thought that... I once thought that the way to do it would be to be hypnotized and explore your mind...cause there's so many thoughts you're not even aware of... Just sitting by yourself you can't go right in your mind...It's just the incapability of the conscious mind...to go into the subconscious.

That's where you keep all your...fears,...your conscious mind isn't going to admit all these. If you were - if a person were - didn't have these barriers - well, supposing they suddenly broke, it'd probably scare the hell out of somebody and literally drive them insane."

"No person feels that anything can actually harm them."

"All I need is several million dollars."

Fourth Interview

Johnson: "As a person, I really want to know you."

M: "I don't know why you should...I'm not here to help you. I don't know if I know how to be a real person - there's so many of me - maybe I don't trust you - I don't know - maybe I just don't trust myself. I don't know what would happen...if I got very personal with you - I don't know how I would unknowingly react; that could have all kinds of disastrous effects - maybe it wouldn't have any."

"I don't trust men...this is ridiculous but I've really got this thing going about queers - and getting to know an older man...I'm kind of worried, "is this guy a 'homo,' trying to put the make on me, or what?" Sometimes I think I've got bad homosexual tendencies and this bothers me. To me it's frightening."

"Not being able to make love to a girl - that really had me worried first time it happened. The second time it really bugged (me).

I don't even like to think about it. It's kind of frightening."

"I used to worry about masturbating too much."

"Almost everything I feel strongly about (I may be a hypocrite about"; I can never get in on it."

"And yet, I want to know...I think hypnotism can do it - I don't know...might be a lot of crap in me...All that shit gets stored up."

Sixth Interview

M: "What I think it is, is I really have to get emotionally involved with a girl. That's why I can't make love to a girl...But there's no problem...if I can't make love to a girl because I'm not in love with her, I'm not gonna - it just means...I'm really sort of a prude...shy, modest...hypocrite...I've always had the feeling I'm not adequately equipped, so to speak - but I don't know how much that bothers me."

Eighth Interview

M: "When I get to the point where I feel like this - I'm not here. There's nothing to happen - no problem. Whatever goes on, I don't like it - it's not right...I gotta be happy...I can't go around being depressed - people don't want to be with you."

Ninth Interview

M: "This thing of not being able to become really involved in anything - (to) be real. I don't think that's really the problem, but rather: why can't I do it. I don't know if I can do anything about it until I find out... the reason for it. I don't know what I'm afraid of, exactly, probably I'm afraid of - when you lose control. People generally say, "well, you're very immature." People punish me for it. If I want to scream, I won't."

"I'm afraid of holes (i.e., cuts) in me - that's scary."

(five minute silence).

"I can't keep thoughts going."

"So I can't make love; what a joke."

"Fuck is a weird word - It's so dirty,...filthy, rotten, mean and evil. And "cock;" all the goddam words for sex are so fucking filthy sounding..If you want to put across a feeling - there's nothing better than four-letter words because they are so real; so rotten. God! People are so weird."

Tenth Interview

One hour of unbroken silence.

The client in these interviews is aware of a dichotomy within himself that he conceptualizes as conflicting beliefs that make him, conceivably,

a "hypocrite," if what he does does not reflect what he "really" believes. However, his communications give no indication that he is presently experiencing the conflict which he alludes to, or more than a cognitive level, i.e. there is no indication that he is actually experiencing any of the effects, such as fear, that he includes in his speculations about himself. The mind-body alignment of this dichotomy is evident in his effort to find an objective, rational means of sorting through and evaluating "the net of...possibilities" that will yield those ultimate "possibilities that are really you." If his own rational processes do not seem to give him full access to his own identity, then some external, truly objective means such as hypnosis might be able to bypass the "net," or Block, to his "real" self without threatening the final integrity of "the barriers" which he regards as protection against being overwhelmed by subconscious contents; "Well, supposing they broke, it'd probably scare the hell out of somebody, and literally drive them insane." The fear of exposing what is inside and ordinarily invisible, to himself as well as others, may be behind the statement: "I'm afraid of holes in me" from the ninth interview.

His remoteness and disconnectedness from this experiencing self, whom he presumes knows which of all the possibilities is really him, is reflected in the predominant use especially evident in the first interview of the grammatical second person when referring to the first-personal concerns that brought him to the psychologist. This separation from parts of himself helps to support the idea that he is somehow "conditioned," or

controlled by forces outside himself, or at least inaccessible (the sub-conscious) to his control. Thus, he does not see himself as responsible for much of what he is. In some way, his being seems not to be connected to his body: "I'm not here;" and : "So I can't make love, what a joke." His feeling that he is "not adequately equipped" referring to the size of his penis, a graphic symbol of his potency in the world, underlines his supposed insufficiency in the face of more powerful forces. He has no ally in the form of intuition in his ambivalent search for himself; intuition is not likely to be in the service of reason, as he says: "Maybe I don't trust myself."

Since he identifies with what he perceives as his relatively weaker, but more dependable, thinking aspect, he is invested in maintaining what control he has as a kind of intellectual basis against the forces of his inner darkness. His desire not to change this situation, but rather to understand it more clearly, is apparent when he says: "This thing of not being able to become really involved in anything - be real, I don't think that's really the problem, but rather: why can't I do it?" He can see, intellectually, that his fear of losing control may be keeping him separated from himself and others but he does not experience the full emotional impact of that consequence anymore than he fully experienced his fears that he has "bad homosexual tendencies," "may not be able to make love to a girl" and may be "masturbating too much," but as he said of his inadequate equipment: "I don't know how much that bothers me." He is further removed from

experiencing the feelings likely to be attached to these issues by regarding them as symptoms, a kind of epi-phenomenon, that result from the failure of his "mind" to more adequately control his "body." He seems to believe that if he can "find out the reason for it" that he will be able to get the upper hand in this conflict and establish a control that would eliminate these symptoms. His strongest commitment, it seems, is not to the elimination of his inner and outer separation but rather to establishing a more thorough control of his mind over his body.

The emotions he does express are secondary emotions, that is, they substitute for interpersonal, or contact, emotions when such contacts are feared or for some reason avoided. This client feels that expressing his impulses in any way that he knows of, e.g., if he "got very personal" with the therapist, would have "disastrous effects." As it is they cause him to be, in himself, ways that he thinks he shouldn't be: He shouldn't have these vague homosexual feelings; he shouldn't be impotent; and he shouldn't over-masturbate. The external source of these injunctions seems clear when he says: "When (I) lose control...people punish me for it."

These feelings are no less real and significant for being "secondary." And should he move beyond his Block, he would probably move into experiencing fully in the present feelings of fear and inadequacy. That he does not so experience these feelings in the interviews is indicated by the offhand (This is ridiculous, but...), past tense (That really had me worried the first time, or I used to worry about...), and second and third person

(People will say you're very immature) descriptions of his affective states. The only description of a feeling recorded in these interviews, that was not so diluted was his statement: "I'm afraid of holes in me - that's scary" (followed by a long pause) possibly a symbol for some deeper fear; thus, the symbolization served to insulate him from some dread element in the original fear thus symbolized. A clear and direct example of his avoiding contact emotions is his response to the therapist's invocation: "I really want to know you," with the indirection: "I don't know why you should." Such avoidance of his internal, affective realms presumably protects him from some of the negative consequences of awareness and expression of these affects, and to this extent could be thought of as functional. However, such avoidance simultaneously negates a rich and powerful element of himself, without which growth of the personality beyond the point at which it was blocked, is very unlikely; and to that extent such avoidance is dysfunctional.

This client, motivated by his vague feelings of disharmony, and by his anxiety over what may lie within him, brings himself to the threshold of that inner world, again and again. And, in Campbell's metaphor, refuses the "Call to Adventure," again and again. Like Sisyphus in Hades he repeatedly rolls the heavy stone of his awareness up to the brink of his inner self, only to have it roll back down again. At that precarious point where his gnawing desire to "get in on" "all the shit" that "gets stored up," "where you keep all your fears," seems to be just balanced by

the fear itself, that "it'd probably scare the hell out of somebody," he says: "When I get to the point where I feel this - I'm not here... there's no problem," but somehow, "it's not right." And then the stone rolls back. "I gotta be happy...I can't go around being depressed - people don't want to be with you." The yawning vacuity of being poised over a precipice can be imagined in the hour-long silence of the last interview.

The reduced affect of depression often characterizes the Blocked person's communications, especially about himself. He may, as in the following excerpts, be unable to convey much of his internal experience even about issues that very likely have had real and recent emotional impact at some level. The interview is of W. Evraiff, an elementary school counselor, and a student, Edna, who is having difficulties in school that are thought to be connected to her home situation.

Edna (monotone): "He (father) starts talking about everybody on my mother's side...we just stopped going over there anymore and we had a big argument...so then he doesn't hardly come over any more and we don't go over there...."

Evraiff: "...so you feel that when you do visit your dad you don't really get out of it what you wanted to...you just get criticism."

Edna: "Yes, ma'am, my grandmother, she is always beating on me...she always gives my (older) sister special privileges."

Evraiff: "...so you feel your age has a lot to do with how your grandmother treats you?"

Edna: "Yes, Ma'am."

Evraiff: "...I'm just going to help you think about your problem and see if you can figure out some way that it won't bother you so much."

Edna: "...teachers, they expect you to learn as fast as a high school student, and some of the work you don't catch on to."

Edna describes her problem issues without any indication that she has experienced them on an emotional level in their retellings. For instance she recounts that "We had a big argument" and "My grandmother, she's always beating on me," without any reference to her affective reactions or even cognitive evaluations. She further separates herself from her experience when she speaks of herself in the second person; for instance, when she says "(teachers) expect you to learn as fast as a high school student, and some of the work you don't catch on to." Depression, disconnectedness, the absence of emotional color, point to an experiential vacancy, a gap in her awareness and expression of herself, a blocking, or reification, of her (possibly painful) emotional process.

The reification of a dynamic, emerging self into a relatively static, blocked structure characterized by a lack of self-awareness, is most likely to develop in a family environment as part of a learned pattern of behavior that complements a pattern of blocking in the family as a whole. In the following example stereotypical behaviors of family members can be seen to be ritually repeated, each member predictably replaying a relatively

unchanging role with no consequent change in the emotional climate, a family version of the Sisyphean tragedy.

The interview is an example of Family Therapy by Epstein. The boy's name is Kenneth; it was Kenneth's behavior and speech problems that prompted the family to initiated therapy.

Family enters therapists office; Kenneth can be heard giggling.

Epstein: "(to Kenneth) you're putting on a show, huh?"

Kenneth: "Yeah (giggle.)"

E: "What do you want them to see, Ken? (giggles) hm?"

K: "(giggle) Well (giggle), it's hard - to explain (giggle) - I uh - try (giggle), oh, never mind (giggle)."

Father asks Kenneth to explain.

K: "(giggle) But, it's hard to explain (giggle), and I can't."

E: "I think you could."

K: "(giggle) Well, I don't (giggle)."

F: "If you take your time, do you think you can do it?"

K: "No--O.K.? O.K."

E: "You mean you don't want to?"

K: "(giggle) I - don't - know how."

E: "I'm interested in what you feel about what he just said."

F: (begins to stammer)

Mother: (simultaneously) "I feel he (Kenneth) just doesn't want us to know what he really feels."

F: "That's pretty much my feeling."

K: (starts to talk in background)

M: (simultaneously) "...I feel like an ogre." (giggle)

E: "Why? You are?"

M: (giggle) "I don't know (giggle) - well, I had felt responsible for his condition."

K: "uh, oh, oh, oh, oh."

M: (simultaneously) "Since the onset."

K: "Oh, I - think - I've -"

M: (simultaneously) "I knew it must be something in the home."

K: "..got - the"

E: (to K.) "You know what you're doing now, you see?"

K: "Uh! Hold it! Hold it! Hold it! Hold it! Hold it! Hold it!"

E: "You want to hog the show, see. And we asked you before, uh,"

K: "I - know why - uh, uh, uh."

E: "He's a pretty controlling guy, isn't he?"

K: "I was...see, uh, - uh, it's - something - serious,- uh, uh, about t-t-to happen...so - uh, I started clowning around."

E: "Um hm. Did that eliminate the seriousness of it, Ken?"

K: "mmm No - but -- re - member - last - time?"

E: "What about last time?"

K: "When, uh, he - mentioned - that - uh - it was - something serious - about - to happen, I start, um - laughing and c-c-clowning around?"

M: "I remember...So, you wanted to avoid a serious discussion?"

K: (giggle) "Yes. Probably (giggle.)"

M: "Why? Is it that painful to you?"

K: (giggle) "I don't know!"

M: "Do you remember that we had said that we welcomed the opportunity that maybe we could find something out that would help all of us?"

K: "Ye - es."

M: "So, relax and enjoy it - (they giggle together)."

The therapist explains that Kenneth uses his clowning and interruptions to keep control of situations, and that the parents "feed" the problem because they regard him as "so-called sick."

M: (interrupting) "This is one of the things that puzzles me...We were very disciplining with the older one - and he developed a lot of nervous ticks - We did spanking...everything that the book said you shouldn't do, I believe - And he is quite mature...responsible and grown-up, I, we feel; so you give me the answer (giggle). And with him we have been easier...I mean, really, I'm puzzled by it."

E: (to father) "Do you have any ideas about that?"

F: "No. I (mother begins to speak simultaneously) honestly don't."

M: "Do they enjoy that? They must enjoy the discipline."

F: (ignoring M.) "I will honestly say that we gave this one"

K: "I"

F: "uh"

K: "Ugh, grunt, etc."

F: "I...felt that, uh, we had given him, uh, a lot more freedom, uh, even from the first day that, uh, uh,"

M: (interrupting) "I think that (freedom) is a lot of nonsense.... Discipline makes them feel that we love them."

K: (interrupting) "Uh, uh, uh, uh, - All those books are pretty stupid." (giggle)

M: "Oh, I don't know. You do a lot of reading. Do you feel they're stupid?"

M, E, and K have a short discussion about the value of books.

K: "Books are pretty stupid, they are."

M: "No, I feel maybe I haven't done the right thing - maybe I'm inadequate - I really don't know."

The therapist describes a "pattern" in dealing with Kenneth that he says was also present in the previous interview, referring to M's indirection in dealing with K.

M: "Well, I had said to him before we came in, "Ken, you're clowning again." Now it could be more direct and say, "Cut it out"...but I concern myself with how he's going to react."

F: "I'm more forceful...I lay down the law. He tends to jump a little faster if I say it to him."

M: "That's funny. Because I feel like the ogre in the family. I do most of the disciplining...Everything...is placed on my shoulders... The general reaction is: "Mother will be mad." So maybe I shouldn't be mad (giggle)."

E: "I think...you're hinting at - Do you have any idea?" (to F)

F: "That she'd prefer that I take over the discipline?"

E: "Yes."

M: "A little bit of it."

E: "Why did you say a "little bit of it?"...I think you're doing with your husband now just...what you've done with the kids: tiptoe up to a situation...and be very careful...It isn't so important whether you discipline the kids or whether you don't...It's our feelings that are involved in it...you're making yourself very vague...you're telling your husband that you are kind of angry about...having to do all the disciplining...but you won't come out and say this."

E: "Why do you feel so doubtful about really standing up for your feeling?"

M: "In our family...I am the Big Chief."

E: "I think you like to be."

M: "I don't want to be."

E: "No. Without it being obvious."

M: "I don't want to be."

E: "Why not?..."

M: "...for the most part, women have taken over the home...the man doesn't count anymore..."

E: (To F) "How do you feel about that?"

K: (laughs nervously)

M: "I've listened to lectures (giggle) on it...someone has pointed out to me...if you ask a child: "Who's the boss in the family?" They'll say, "Father thinks he is, but Mother knows she is. And I don't want it."

F: "Well, I've never had my wife call me up and complain...I'd like to do it if the situation is there - If I'm home to do it."

E: "You use "the situation" in the same way Kenny uses his stuttering... its an excuse."

M: "My father...we did feel that he was the father, and my mother was the soft person, and I don't feel that way about myself...and I think that's the way it should be."

K: "Yeah."

E: "Do you agree, Kenny?"

K: "No."

E: "Why not?"

K: "I - oh, guy...(giggle) you always put me on the spot."

E: "K...is afraid of taking the role of the boy...becoming a man, and this is what you're complaining about your husband..."

M: "Well...certain areas..."

E: "...Like Kenny, it's very hard to pin you down...you get very slippery..."

M: "Am I slippery? That's very strange...many times I felt cornered and I couldn't get out."

E: "Oh, you're doing a great job! Even more difficult than...Kenny.

You use the smile - You use "No, that's not quite it, but this way"

M: "When you analyze it, you make it that definite and nothing is that definite."

E: "There again, you see..."

M: "...Now, what do we do about it?"

E: "How do you feel you should handle your husband?"

M: "Well, I better stop doing what I'm doing, I suppose (giggle) and let him take over."

E: (To F) "How would you do it?"

F: "I don't know what further I could do, uh, because...you have certain hours that you're away from home " (M begins to talk simultaneously)

M: "I'm going to lay off the discipline on the weekends (giggle)."

The therapist observes that they have begun to look at Kenny when they speak to him but that they still don't look at each other when they are talking together.

Each person in this family gives indications that he is divided internally by expressing himself in ways that could be interpreted to have more than one meaning. The mother says, in several ways "I feel like an ogre... [because] I do most of the disciplining..." and "the older one is quite mature" in spite of the rather strong disciplining ("everything the book said you shouldn't do") that he received. However, the implication that

Father should take over most of the discipline so Mother could feel like "the soft person...the way it should be," is owned only grudgingly ("a little bit"). Many of her statements are tempered and lent additional ambiguity by including a giggle with them: "I better stop doing what I'm doing (the disciplining, presumably), I suppose (giggle), and let him take over." Also, there seem to be indirect messages in the frequent mechanism of interrupting when she seems to be disagreeing. As when Father is saying: "We had given...a lot more freedom...even from the first day that..." Mother interjects: "I think that (freedom, presumably) is a lot of nonsense... Discipline makes them feel that we love them." Ostensibly she is taking issue with the theoretical issue of permissive child rearing, but the manner of her introducing her argument, by way of interruption and the rather insulting and ambiguous phrasing imply an underlying personal issue.

The father, too, expresses an ambiguity that may reflect an internal dichotomy. Many of his statements contradict the Mother without owning that they are contradictions. When Mother implies that the have more discipline: "They must enjoy the discipline," Father implies that freedom is more important: "We had given him a lot more freedom." In their ambiguity and indirection they avoid direct emotional contact with each other. In the entire interview neither makes a direct statement to the other. When Mother is presumably speaking about Father she uses the third person: "The father" or "the man;" when he speaks of her, he third personalizes her as well: "my wife," or "she." By thus avoiding one another,

they avoid parts of themselves; no doubt, anger, in their case.

Mother attempts to control Father and son indirectly without disclosing any of her blocked inner self. Thus she can wield power without taking responsibility for wanting it: "I'm the Big Chief...but I don't want to be," and she can punish without revealing any anger, as when Father says, "I'm more forceful...I lay down the law," Mother stabs quietly: "That's funny. Because....I do most of the disciplining." Her interpretations also, are meaningful ways of both controlling and punishing her family without taking responsibility for doing so and without risking exposure of the emotions that cause her to "feel like an ogre". In this respect, her goal of getting father to do the disciplining she hopes would have the effect of allowing her to be seen as the "soft one," as her mother was, and as it "should" be, and thus block her darker side more thoroughly from herself and her family. Mother seems to have considerable energy invested in keeping her block and its secrets from her awareness. When the therapist points out that she "won't come out and say" that she is angry with her husband, she offers a long explanation of why women shouldn't get angry, and when he points to the mechanism of the block itself: "It's very hard to pin you down" she gingerly avoids being pinned down: "That's very strange...many times I felt cornered and I couldn't get out." Getting out of her slipperiness gets her out of accepting herself.

Father seems to be depressed, experientially disconnected from his

feelings, and incongruent, indications that he is to some extent blocking part of himself from awareness, certainly from others. His depressions can be inferred from his repeated failure to respond to being interrupted by his wife and son. Indeed, he seems to leave spaces in his speech for others to step into: "I...felt that, uh, we had given him, uh, a lot more freedom, uh, even from the first day that, uh, uh," finally Mother interrupts: "I think that is a lot of nonsense," no reaction from Father. He admits no connection between his behavior and Kenneth's behavior: "We had given him a lot more freedom...I don't know what further I could do," he is disconnected from his family as he is disconnected from his depressed feelings. This separation from his experience allows him to hold an image of himself that is clearly incongruent with his wife's image of him. He says: "I'm more forceful...I lay down the law" in the face of his wife's more believable statement: "I am the Big Chief."

Kenneth shares and upholds both his parents' blocking mechanisms and yet he more often indicates an ability or willingness to reveal that which his block conceals. Like Mother, he attempts to control others, thereby protecting himself, as in the start of the interview where his clowning would deflect the adults' attention from issues that threaten to upset their intricate group block. At that point, Mother saw in Kenneth's behavior what she failed to see in her own: "He doesn't want us to know what he really feels." But, finally, with all the associated mixed messages of a stammered interruption, he ingeniously discloses his motivation for the previous behavior: "something serious, uh, uh, about tttto happen...so uh I started

clowning around."

Like Father, Kenneth projects a self-protective impotence: "It's hard to," "I can't," "I don't know." But while Father is staunchly impotent to the end (his last remark begins "I don't know what more I could do, because...") Kenneth is not. When the therapist calls for Kenneth's stand on Mother's prescription for parental roles, rather than "slip out" of the question as Mother herself might have done; and rather than plead an excusable impotence after the fashion of Father, he disclosed something of his present inner experience of being trapped and uncertain when he said: "(giggle) You always put me on the spot." In this context, even his self-negating giggle seems relatively congruent. Such disclosure begins to move him beyond his and his family's Block.

CHAPTER IV

DESCENT

The descent is the period of differentiation, i.e. exploration and elaboration, of the parts of the self which have been unclearly perceived. It is initiated by risking the disclosure of some previously withheld content with personal affective significance and is maintained by continuing to risk disclosure. It is likely to be marked by occasional hesitation, especially before risking any new disclosures, and may be ceased at any time by reinstituting familiar blocking mechanisms such as assuming a "pseudo-adult pattern" of behavior as described by Guntrip (1968). But the fact that the initial block has been overcome by disclosing some sort of withheld element of the self and did not result in rejection by the therapist is likely to reflect the growth of a trusting relationship where subsequent disclosures are facilitated.

Certain constellations of contact emotions tend to be associated with particular issues which arise in the course of the Descent. For most people, these issues can be classed in one of two categories: dependence issues and independence issues. Dependence issues include those affects most often associated with the culturally-defined feminine role: sexuality, love, warmth, affection, dependence, the ability to show passivity, weakness, passivity and receptivity. Independence issues involve culturally more "masculine" affects including hostility, control, aggression, ambition and independence.

An additional issue, responsibility, emerges over the choice implicit in having developed a dominant mode of contact which emphasizes either independence or dependence or dependence, at the expense of the other mode. Responsibility involves identifying with one's previous experience as opposed to blaming parents or others (however reasonable this may be) for who one is and what one has done, and assuming responsibility for what one is to become. Each of these issues is likely to entail what are experienced as significant risks in order to reveal anger or weakness or to attempt to accept responsibility for behavior which one feels was unjustifiable, for instance, that has not been fully experienced for years. Also, each issue is likely to involve a critical confrontation where one faces the decision whether or not to attempt to allow the most feared or hated internal experiences (e.g. illicit sexuality or anger toward a parent) to invade the undefended consciousness and be accepted as a legitimate part of the self and expressed to another. It is not uncommon to find issues of one class defending against the experiencing of issues in another class. For example, a masculine issue (regardless of the actual sex of an individual) such as anger, withholding a feminine issue such as weakness; such an individual might experience anger toward himself for being weak. The full experience then of his weakness might entail a nadir experience. One of these issues, dependence or independence is likely to be experienced as most threatening to one's acceptable image of oneself, and therefore most difficult to face and integrate. Confronting that issue and fully living the most threatening experienced constitutes the nadir, accepting the enemy into the home.

The following excerpts are taken from a recorded interview demonstrating hypnotherapy, by B. W. Newton. The patient is a woman schizophrenic in a mental institution. She slowly reveals that she is experiencing a certain preoccupation with (the therapist's imagined) anger, and then under hypnosis expresses an undifferentiated inner struggle.

Woman: "Have you ever noticed that I talk differently at times?"

Newton: "um hum."

W: "Why?...Can one deliberately or undeliberately (voice becomes secretive and quiet) change the tone of one's voice, almost like someone else were talking?"

N: "Do you remember having done that here?"

W: (pause) "What?"

N: "What were you thinking about?"

W: "Oh, nothing. What did you say?...I don't remember."

N: (pause) "What is it now?"

W: "I was just wondering when it's going to start."

N: "When what's going to start?"

W: "Your anger. hm. I'm going to be wondering quite a bit until you get very angry with me."

N: "If that's so, it will be kind of a relief, won't it? If it happens."

W: "I shall haul off and belt you a good one if you point your finger at me. There's something about pointed fingers that's like sharp things."

N: "Take a deep breath (hypnosis induction). You have been trying to say something...that perhaps consciously you've been unaware...but

inside you've been trying to say something...You'll be able to say it...to experience it...Let go. Let go."

W: "I want out (anguished struggling sounds, gasping) Let me out!

Out! (sobs) Out...(imploring) Don't cry. Don't cry. Don't cry...

Let-me-out...Out. Out. Out. Out...let me out. It's dark. Too dark.

Dark. Break it! (urgent) Break it. Break it. Break it. (struggling)"

N: "I'm going to wake you up...you will be feeling relaxed and comfortable. It will seem like you have been dreaming."

W: "I feel a little too relaxed and comfortable. I like you...is it all right (to want to tell you I like you)?...I think that maybe I never learned how to express myself, how to be free."

When the woman in this interview says that she is wondering when the therapist's anger will start, she is showing a willingness to share a present awareness which is a minimum condition for moving beyond the Blocks and beginning the Descent. Sharing this awareness, however, does not reveal anything explicitly about the affective significance presumably associated with this awareness. She does not break through this block to directly sharing an affective awareness, however. She does not reveal anything until she is hypnotized and given the suggestion that she can "let go" of the block which is distorting her messages. She swiftly descends to the level of inner struggle that she seems to experience vividly and with strong emotion. Two "selves" seem to be present in her struggle: one, crying, trying to "break out," to free herself from some inner darkness; the other

presumably experienced as preventing her release, imploring her not to cry out. That she says she feels "a little too relaxed and too comfortable" afterwards may reflect the fact that she probably doesn't often "let go" to such an extent; she suggests that perhaps she never learned "how to be free." Having experienced the "freedom" to reach into the conflict being waged within her, if only in a dream-like state, she also acts as if she were free enough to risk direct sharing of her feeling of liking the therapist. She continues, un hypnotized, to communicate in this relatively unclouded fashion for a short while.

W: "I'm a terrible juvenile. Sometimes I wish I could be very juvenile...I'd play...as long as I could be very carefree...run down hills and climb trees...and be very secure. I mean, like - "

N: "Like?"

W: "Like you're leading me on, aren't you?"

N: "What do you mean?"

W: "I don't know; all of a sudden it seemed like - if I could be very, very juvenile, I could be little, not a 40-year-old woman, but a 7-year-old child...well-loved and cared for and secure."

N: "Do you feel those feelings now?"

W: "No."

N: (hypnosis induction) "You're going to begin to feel those feelings..."

W: "I can't possibly get too carefree - Don't, don't, don't (sobbing)... Hi, long-time no see." (hypnosis ends) "What are you trying to do? You're doing your work very well."

N: "You don't sound as if you're angry about it."

W: "I'm not...I'm kind of glad."

N: "You sound like you're changing some."

W: "I am. I'm dying. You see, you're wrong, you can't preserve me. You have to let me go, and I don't care. I've known for a long time I have to go. If there's anything good about me, I do hope you can preserve it, but you can't. She's got all of it...I'm dying and I don't care. I feel a little - melancholy...I'm using these words literally; I don't mean actual death. But...she's getting rid of me...you won't be seeing me anymore...unless of course if you get me too angry. - Don't get mad at her..."

N: "I have no intention of getting mad at her."

W: "Don't dare me. I may decide to stick around long enough to get you good and mad at her just to prove a point."

N: "You aren't completely dead, are you?"

W: "No, just had to let you know I was still around."

The woman's response to the therapist's hypnotic suggestion that she feel the child-like love, care and security that she wished for, was to act as if she were perhaps moving in the direction of those feelings, but encountered a kind of (to use Campbell's metaphor) threshold guardian, barring the way, saying "Don't, don't, don't." And, hypnosis or no, she refused to go farther, in some experiential way, and returned to the presently less threatening external world, greeting the therapist as if she had truly been away: "Hi, long-time no see." In the subsequent

interchange she speaks again of two selves, one, the "I" whose changing seems to be experienced as "dying" and is associated with getting angry. A second self, spoken of in the third person, is the one who receives anger.

She has descended into a dark inner world to experience relatively fully what she has likely tried to avoid experiencing in the past. A second approach toward the scene of that struggle further differentiated the opponents: one who gets angry, and one who may also act as a fearsome guard (but describes herself as dying) between conscious awareness and another self who is imprisoned and/or protected by the one wielding anger. The imprisoned/protected self seems to be the victim of anger, the one who was never "free," cared for or secure. In Guntrip's terms, the libidinal ego, repressed by the anti-libidinal ego, whose cruel persecutions are repressed in turn by the central ego who must cope with the external world. In Jung's terms, the animus (in this case) repressing the anima. In Perl's terms, the top-dog keeping down the under-dog. In Campbell's terms, the threshold guardian barring the way to the Goddess. In Dabrowski's model accepting all of one's feeling self is an implied condition necessary to the development of authenticity. And in the terms of the present model on independence issue, anger, which must itself be accepted into awareness, is directed against a dependence issue: helplessness.

Let us recall the first example of a Block, the interview between

Johnson and a "nineteen year old male" client, as well the last example of hypnotherapy, noting as precisely as possible the particular cues that distinguish the former as having begun the descent and the latter as being continuously blocked. Those segments of the previous interview during which the woman was hypnotized are characterized by indications that she is actually experiencing, rather than simply considering the possibility of an inner conflict. However, the nineteen year old male in the interview exemplifying the block, while speculating about possible conflicts within himself, gives little indication on even a descriptive level, that he is aware of actually experiencing any element of that conflict during the course of the interviews.

Wiener and Mehrabian (1968) suggest that, regarding the literal interpretation of communications, there can be discernible extra-linguistic differences in "immediacy," or the degree of directness and intensity between communications that may mean the same thing linguistically. For example, they infer that the communication "John and I have to get together" instead of "John and I will get together" indicates a decrease in the responsibility or participation of the speaker...externalizing the responsibility by the use of "have to." "In these kinds of instances the decrease in mutuality by the imposition of another agent in the action, in contrast to a direct agent-action-object relationship - in a literal sense - is interpreted as reflecting less positive experiences by the communicator in "getting together with John" or of "John" or of the communication of the event to the addressee." Wiener and Mehrabian's indicators of immediacy

as well as other indicators, can be used to distinguish the person who is blocked in his experience of himself from the one who has begun the descent into the here-and-now of his affective awareness.

In their formulation Wiener and Mehrabian specify categories of speech that are likely to reflect variations in immediacy. Most of the quotes considered in the discussion of Johnson's interview with the nineteen year old male are instances that would fall into one or another of Wiener and Mehrabian's non immediacy categories. For example, the statement "... the subconscious...that's where you keep all your fear" indicates spatial separation of the speaker from his fears. The use of the second person includes the speaker in a class of persons without specifying his inclusion. The sentence "I once thought that the way to do it (find out what I believe) would be to be hypnotized" separates the speaker temporally from the experience of his thought. The use of "it" interjects an implicit category where the object of the speaker's thought is implied but not stated. In the sentence "It's just the incapability of the conscious mind...to go into the subconscious," he uses a part of the assumed subject and object (both of which could be himself) to designate what could be referred to more immediately as "my incapability to go into myself." The client's response "I'm not here to help you" to the therapist's statement "I really want to know you" is the use of a negation when an affirmative could be used to change from one element of the subject (knowing) to another (helping). An example of Wiener and Mehrabian's unilaterality

category can be seen in the statement "Is this guy...trying to put the make on me, or what?" where the relationship between the subject and the object is other than vis-a-vis. The statement "I gotta be happy" illustrates passivity where the subject, in this case, is literally stated as being driven to act by external forces. The qualification "maybe" in "Maybe I don't trust you" indicates the possibility that the statement may not be (internally or externally) consensually shared. The use of "somebody" in the sentence "It'd probably scare the hell out of somebody" objectifies the experience of fear as if it were external to the speaker. And in the sentence "Sometimes I think I've got bad homosexual tendencies" modifies the "extensity" or frequency of the considered thought, and leaves undisclosed what might be the speaker's thought in the present. In contrast, the woman in the previous interview, exemplifying the descent during her hypnotic interludes, can be seen to be initially non-immediate and to become suddenly and intensely immediate after the therapist's hypnotic induction. During these times, her expressions are spatially and temporally present: "I want out;" specific: "It's dark;" subjective and unqualified: "Let me out!"

Linguistic indicators of immediacy, as well as the extra-linguistic indicators specified by Wiener and Mehrabian, can be seen to separate the nineteen year old male client from his experience of himself. In particular, most of his tentative speculations about affects are soon negated by counter-statements. For example, the sentence "Supposing (the barriers)

suddenly broke, it's probably scare the hell out of somebody and literally drive them insane." is followed by the contradictory sentence "No person feels that anything can actually harm them." The intimation of fear in the statement "If I got very personal with you...that could have all kinds of disastrous effects" is denied by the end of the sentence: "Maybe it wouldn't have any." And again, what might be the expression of a present feeling I'm not adequately equipped" is negated by the counter-statement "but I don't know how much that bothers me."

The woman illustrating the descent, on the other hand, while experiencing elements of herself in actual conflict, seems to fully "own" each side of the struggle as each is being expressed: "Let me out! Out! (sobs out... (imploring) Don't cry. Don't cry." It is immediacy, then, which is risked by an individual in beginning and maintaining the descent.

However, this arrangement of an angry, persecuting, anti-libidinal ego apparently preventing the emergence into awareness and expression a weak, frightened, needy, passive libidinal ego is not as universal among neurotics as Guntrip seems to suggest. The contrary to this condition of an independence issue serving to keep dependence issue more deeply pressed out of awareness is the following example of a descent, also of a woman, where independence and dependence issues are each differentiated and the dependence issues of affection and fear can be seen to impede the experience of a particular element of an independence issue: anger toward the father. The issue of

responsibility is also differentiated in this descent, and will be seen to involve accepting responsibility for having maintained dependence as the dominant mode of contact-emotional experience. Carl Rogers is interviewing a fairly young adult, Mrs. P. S., who is recently admitted to the receiving ward of a mental hospital:

Mrs. P. S. is sensitively aware of her need for affection and of the ways in which people who seem to care little for her seem to prevent her from forming lasting warm relationships with those who might care more. She feels unattractive:

P.S.: "Since I was a little girl I had this crossed eye...Kids poked fun at me; the boys would tell (the girls) not to go around with me. I was counting on the school-friends and they...let me down...

In my last year of school I made a friend with this one girl... (but) my husband didn't want me to go around with her, because he didn't like her...My other girlfriends that are nice...he doesn't care for their husbands or something like that, so then, he doesn't want me going out with them...a woman has to get out once in a while...and he doesn't want me to go alone anyplace...But then if we went dancing or anything, he'd dance with the other girls and he wouldn't even dance with me...

Then there's...my husband's brother...acts like he's the father...bosses me around...he doesn't work worth a heck...My mother too...she's so bullheaded...she wants to do things her own self, but even

though I'm married she wants to run my life. I hate the idea of everyone telling me what to do...I like to run my life myself...I was old enough to bear a baby - that's a lot of pain. But yet they won't let me make up my mind for myself. My mother did another thing: when my little girl was born I asked my mother "How come her one leg is turned." She said "All babies are like that, don't worry about it." So I didn't worry about it and after my little girl passed away, my mother told me that my daughter was crippled. She kept it from me again...in a way then I felt responsible for my little girl's death...I would have done differently...She let me down.

(later in the same interview)...(So) my mom and grandma came today. All of a sudden I had the nerve to say "The trouble with the whole shooting match of you is...you treat me as though I wasn't wanted or I couldn't do anything." I had the nerve - and I never did before. I didn't care if I hurt their feelings or not...I was always scared to tell them before. In a way, I felt like I wanted to be pitied - But now, I'm married."

Mrs. P. S. carefully justifies her animosities toward the people who seem to be preventing her from finally taking responsibility for her own life. This legitimate anger assists her drive to "run my own life." And in some way, having experienced the pain of childbirth is payment for that right. This legitimized animosity has the sanction of a more acceptable dependence-need for love. Before she had experienced that she had a right to at least

this kind of anger she could not accept anger at all: "I was always scared to tell them." In a sense, her dependence loosened its panic-grip on her independence, and in so doing she saw the role of her own responsibility in being controlled by others: "In a way, I feel like I wanted to be pitied." But when animosity arises toward one who is experienced as satisfying that dependence-need for love, then the issue is differentiated more slowly and resolution is only hoped for, as in the following excerpt.

P.S.: "I always got along a lot better with my father - he passed away...I used to have a lot of fun with him (tells anecdote of having fun with father)."

Rogers: "Those are kind of pleasant memories?"

P.S.: "um hm." (silent pause)

Rogers: "It sort of looks like thinking about those things makes you feel a little bit - weepy? Or am I wrong?"

P.S. (sincerely) "A little bit." (pause)

"I can remember_____ I don't know exactly how it went, but we went over by his brother...the two guys decided to go out...I don't know if I'm getting this quite clearly. Anyhow, my father didn't come back till real late, and my mother was mad. at him - and, I don't know, before I knew it I was going with my father in his car and it was a stormy night...It scared the wits out of me...It seemed so spooky out, just like I was scared we were going to get in a crash or something. Daddy was drinking a little bit...he was driving with

his arm around me. I don't even know how old I was or anything... Even after a while...when we'd go...for a ride...at nighttime...I'd be afraid I was going over a cliff or something...I always thought we were going to come to a dead end and go flying over the cliff...I was scared to look out the window...I'd be thinking we were going to be coming to a cliff and Daddy's not going to be able to stop (pause).

(She recounts another memory, of a younger cousin who was "always better" than she in school and in attractiveness)...Even now...I want to look attractive...If I could talk to a guy...and kiss...all guys will take advantage of a girl...but if he ever did try it on me... I couldn't feel I had the power to even scratch him - I couldn't hurt anybody. I feel like if I hurt them...If I got in a fight with them... that they would die...then maybe they'd send me to prison, or maybe I would die, or something; that's what always comes across my mind... I can't see what made me go into that scared feeling - I don't know when it started...Probably...I feel like I want friends so bad that I don't want to hurt them because I don't want to lose them. Maybe that's the way I feel."

Rogers: (deeply felt): "Maybe it is that I feel so much unwanted by people, and I want friends so much, that I just couldn't take the risk of hurting anybody because I don't want to lose or drive away a friend."

P.S.: (Pause. Comments on lighting and the "relaxed" seating arrangement) "Now my heart's pounding again - I'm always afraid I'm not going to say the right words...I might make a friend go away...I gotta

think ahead of what I'm going to say and yet it comes out different. I don't think that it might drive somebody away but...it's probably just a feeling...the oozy kind.

(Recalls an "awful" childhood dream) And I don't know what it was. I felt like the house was going to cave in on me...I was being smothered - like...like a cloud...trying to pull me in...I'm trying to remember way back. I don't know what I'm trying to reach to, though.

A lot of times...I felt like running away from home. In a way, as much as I love my father, as I grow older, it seems as though, when I was young...I guess every parent has to hit (giggle) their children once in a while, but (pause)...He's been gone four years now and I don't have much memory of him. It's either something I don't wanna, or... (Talks about rest of family until end of interview)."

R: "I feel as though I've gotten to know you quite a bit...Good luck as you try to be yourself."

P.S.: Enthusiastically) "I'm waiting for the day...It's gonna feel like a different soul had jumped into...I've got my hopes up yet."

This descent into feelings and memories of her father hints at a very strong disinclination to negative feelings in herself about a loved one. The depth of the fondness she is feeling is indicated by the weepiness following the recalling of the lost, happy times. But immediately behind the memory of her love is a "spooky" vague (I don't know if I'm getting this quite clearly") memory of impending disaster; of a wild ride that

threatened to send them both "flying over a cliff." The memories of this ominous fear is attached, in the sequence of memories, to a "scared feeling" that comes whenever she wants to "hurt" someone who has shown her affection: "If he did (make sexual advances) on me...I couldn't even have the power to scratch him." Somehow, her "power to scratch" is overpowered by a dreadful fear that she may drive a friend away. When the therapist sincerely reflects that he has shared the experience she thus communicated, she does not respond directly but changes the subject for a time to almost ludicrous, for the time, chatter about the furnishings. It seems as though to acknowledge the sharing of this particular awareness, is a descent beyond the point where she is prepared to go. No, with her heart pounding again, she retracts from the clarity of the shared moment, back toward an obscure, less fully organized awareness: I don't think that it might drive somebody away but...it's probably just a feeling...the oozy kind.

Further exploring and differentiating the contents of the realm of dark, and still potent, if slightly safer, "oozy" childhood memories, blindly trying to "remember way back" she comes, by way of an awful dream of something like a smothering cloud trying to pull her in, to the first, tentative, fleeting indications of resentment toward her father: "I guess every parent has to hit (giggle) their children once in a while, but...I don't have too much memory of him. It's either something I don't want to, or..." More clarification is not forthcoming, and yet there is an intuitive and hopeful sense that in the near future something like a "different soul" will have

"jumped into" something or someone; perhaps it will be the spirit of a grown-bolder awareness jumping into the abyss below the cliff of fear erected by her dependence to protect her precious few close relationships from her own animosity toward her loved ones.

In the following example of a modest descent, the issue of taking responsibility for a dependence-dominant mode of contact experience, can be seen to emerge again, although with much less emotional intensity. Nan is a high-school girl, having come to a counsellor, J. Seeman, for vocational counselling:

Nan: "A lot of my friends know what they want to do right now...I feel like people are pushing me to decide, when I really don't know. It's been bothering me a long time...In a way, I would like to know."

Nan complains of a feeling of being pressured by others, but the experience of the pressure is a part of her personal existence, and she soon owns that there is an internal source of the pressure. It is not only the emotional quality of one's own reported experience that distinguishes a person who is blocked from one who is in the Descent, but also the expressed ability to disclose what are experienced as significant personal issues. Nan's risking to disclose that she has put pressure on herself to make up her mind about the future, after suggesting that she was motivated by outside pressure, is an indication of a willingness to try to be open

about herself.

She next describes the social stratification that she has observed in her school which she feels helpless to change. She sees three "layers:" the "icing" or select little group; the "cake" or the "normals" who are the "smartest" and the best people, including "most of my friends" and the "plate" or the "crumbs" on the "bottom," the "outcasts."

N: "It just depresses me. I don't like it. And...I have to get along with it. Because...(if I opposed it) I'd become one of the outcasts... I'm just a little toad in the pond. I can't just say "Let's change it." I'm tired of it. I decided next year not to get so riled up about it like I did last year...Just be quiet and see if it will work out. Some kids don't let it prick their conscience as much. I think the teachers could do a lot more...Some of them...actually encourage the distinction... They should...teach more democracy and more...togetherness...You can't very well go up to a teacher and say "Look, why don't you... spank Johnny for telling us how much richer he is than we are" because Johnny's too old and we're too old...that's one thing why maybe I'd like to be a teacher...You could do a lot...I hope life isn't like this...Every time you stick your head up, somebody mashes you back down in..It does make you feel small, and wish you could do something about it...(but) you just can't."

Slowly, and with little awareness or identification with it, Nan elaborates an inner conflict that in her experience of it is somehow connected to her feeling of depression and dissatisfaction. On the one hand, a pressure to change: to make up her mind about a future goal, and to reduce social injustice that she feels a party to. On the other hand, a feeling of powerlessness: unable to make up her mind, afraid of being "outcast" herself. The issue of taking responsibility for herself and her actions is prevented from being considered directly by dependence issues: feeling positive about the need to feel accepted, and placing a higher value on her friendship than on any social disparity that her participation in these friendships may indirectly contribute to. The desire to develop the power to change is indirectly represented in her goal of becoming a teacher. To resolve this issue causing her depression and discontent would probably entail a greater risk than any she ventured in this interview, to become aware that the injustice as well as the "icing" and the "crumbs" exist as a part of her, and to experience and identify with each.

CHAPTER V

TRANSFORMATION

The nadir, the rebirth and the ascent tend to form a unit in experience. The nadir represents the experiencing of the most feared or hated element of the self; accepting completely what one has dreaded accepting. In a sense, giving up the fight between the polarized parts of the self by accepting both in awareness and identifying with both elements fully. The fight had been waged with the main purpose of keeping one element of the self from awareness and the nadir results when one plunges into the complete awareness of this most alienated parts of oneself. The weakness or anger, for example, are accepted as having had their source within the self, for whatever contributory role one's environment may have played. The nadir represents the experience of taking responsibility for what one has done and been, is, and is to become, as the means of resolving a struggle that had been waged with the implied and discernible, if unaware, intention of avoiding that responsibility as utterly unacceptable.

The rebirth is experienced as the redeeming aspect of this same awareness: having finally accepted this dread component of the self, one is now whole, complete; the war is over, there is peace at last among one's internal factions: this is the experience of integration which initiates the ascent. The Ascent represents the change in one's relationships with others and in one's intrapersonal experience of oneself as a result of this new,

expanded self-awareness and self-identity; having fully discovered oneself, and having shared that discovery, one can interact without fear of accidentally revealing what one had assumed would be as unacceptable to another as to himself. Having accepted his wholeness in himself, he can share his whole self in relationships. If indeed one's expression of one's wholeness is accepted and possibly reinforced by counter-disclosures and expressions of empathy or warmth as tends to occur in a therapeutic environment, then one is likely to feel that he is more fully present in such relationships than he has been in previous relationships. Further, this being fully present-in-relationship is likely to be experienced as growth, i.e. that there is some intuited developmental value in experiencing oneself as, first, being fully aware, and, second, in sharing one's self-awareness with others.

The following are excerpts from the eighteenth in a series of interviews recorded by J. Seeman of a case with a young man, Jim, whose presenting problem was stuttering.

Jim: "I'm beginning to feel more that I might be showing a lot of aggression in my stuttering toward other people because I know, uh, the other person suffers even more than I do sometimes...I guess I am doing it to make the other person suffer...This is something I could never admit before...It's it's something so new, that I'm probably showing aggression in my speech, I need to say it over and over again...

It surprises me so much...I rather enjoy talking now. And I can also be quiet and sort of enjoy it...But before I didn't want to talk and I didn't want to be quiet either.

...It was a terrible fight. I never realized it. I guess it was too painful to admit that fight...I'm just beginning to feel it now. Oh, the terrible pain...I'm just trying to feel it now, trying to get hold of it here, right now. It was terrible to talk, I mean you wanted to talk and then I didn't want to.

It's so painful, yet I don't feel depressed.

All this heavy burden I've been bearing. I just feel like I'm crushed. Like I've been hit by a truck...You know, I, I, I also never wanted to talk because I was afraid I would reveal myself."

Jim's discovery of aggression in himself is connected in his experience to his new ability to enjoy talking and to enjoy being quiet. The experience of wanting to do neither, he describes as a "terrible fight" within him which produced a "terrible pain" that has come in its fullness only after the realization of its occurrence. Somehow the realization of the "fight" which also caused him to realize his pain, was accompanied by another effect, which was to be relieved of the tension of the struggle, leaving him able to speak or not speak with a new feeling of composure. Even the pain has a new quality which is not all bad: "It's so painful, yet I don't feel depressed." And maintaining the block to awareness of the pain of the struggle which hid his aggression was the fear, the instrument of dependence that could not accept independence: "I never wanted to talk because I was

afraid I would reveal myself."

The aggression which he now assumes to have always been behind his speech comes as a genuine surprise. Accompanying this revelation within himself is a new spontaneity and exhilaration which he follows to the acceptance and integration of his aggression in a rebirth, nadir and ascent:

J: "Boy, I can't even predict my own behavior around here any more (laughing) - something I was able to do before. Now, boy, I don't know what I'll say next...that's quite a feeling...Just let come what may...Before...it was work. Now, I'm beginning to enjoy this, now. It's adventure, happiness...I'm joyful about...Even about all those old negative things. I'm, I'm, I'm joyful with my aggression. Sad and mo- mo- mournful, mournful, mournful about it (keeps repeating world voluntarily."

Seeman: "Now, you're saying to me, "OK, so I'll let you know I have trouble with my speech and I'm going to keep on working, right in front of your face."

J: "Right! That's right! I don't care what you think about it.

Maybe I'm showing ag- ag- ag- aggression like that. Maybe I am.

Maybe I'm, I'm just gonna make you hurt (leans very close to therapist, voice rising) I'm just gonna hurt you all I can with this stuttering.

That's some - hmm, I'm surprised I said that. I'm just going to hurt

you all I can with my speech. I'm just gonna st- st- st- stutter all I c- c- c- can (voluntarily imitates stutter). That wasn't an actual block, I imitated those, but I'm able to do it and I'm able to sh- sh- show ag- ag- aggression (real stutter) towards you like that. Gee! I showed quite a bit of aggression even toward my therapist...Boy this is surprising...I'm surprised you're not blopping me on the head or something. For once somebody's not angry with me. I don't have to worry whether you feel angry at me or not. This is the first time I ever felt like this. That you're not angry with me.

Jim's rebirth precedes his nadir; he experiences "joy" in the knowledge that he can express aggression. He seems to believe, without reservation, that he has the ability to consciously show aggression. The actual nadir occurs after the therapist implies that he may already have begun; "That's right! I don't care what you think about it...I'm just going to hurt you all I can with my speech." Here Jim fully accepts his anger into his awareness and expresses it. His expressing it directly in the immediate relationship with the therapist also constitutes an ascent, a being-fully-present-in-relationship.

The following description of a series of interviews in play-therapy from a recording of D. Baruch exemplifies the nadir, rebirth and ascent occurring in a child, Kenneth, who was brought to the therapist having just failed second grade. He was quiet, friendless and asthmatic. Like

the client in the previous example, the nadir involves experiencing contact-independence which had been thoroughly blocked.

"The differentiation of Kenneth's contact-independence emotions began with his choosing toy soldiers as his first toy, having spent most of the previous interview sitting in the therapist's lap, sucking a baby bottle, his breathing somewhat relieved. He would bomb cars, but in these fantasies the people always got away. Kenneth would ask the therapist, wheezing. "Please, Dorothy, why do they always escape?" In a later interview, Kenneth came with a resolve: "I'm going to kill them." And, indeed, he "killed them all." At that point his wheezing stopped. In a subsequent interview, drawing a picture of a battle, he remarked "I'm a mean old man, and I'm loving it." Following this, Kenneth stood on a chair and told the therapist to crawl to him, and when she did he kissed her. After two years in therapy, during which his I.Q. went from 108 to 140 and his asthma cleared, he was reported to be doing well in school and to have become more aggressive. His new social interests were another reason for terminating the therapy: "When I started with you I didn't need time for playing - now I do."

The nadir in this example occurred when Kenneth allowed himself to say that he killed all the toy soldiers, a fairly explicit allowing into consciousness of withheld anger. The rebirth is seen when he says "I'm a mean old man, and I'm loving it." Having experienced the "mean old man"

in himself, he affirms it as well as himself; he is whole; being mean doesn't necessarily make him unloveable to himself. The ascent begins when he expresses his anger equally with his affection in the immediate relationship with the therapist, commanding her to crawl to him, and then kissing her. His increased aggression in school is a further indication that he is continuing to allow this side of himself to exist. An indication that relationships generally have taken on a fuller meaning for him, comes from expression of a need to take time away from therapy to have more time for playing.

The nadir, experiencing of contact-dependent emotion, i.e. feeling afraid and alone, which has been avoided by a strong contact-independent dominant mode of emotional experience, in the form of self-reliance and identifying with "male" values, can be seen to occur in the following example. Also there occurs the experiencing of an unexpected resolution of some of her fears, the rebirth, and an awareness of the deep relationship with the therapist, somehow enhanced thereby, which begins the ascent. The interview is from a recording of Carl Rogers interviewing an adult woman, identified as Miss Munn; she has been seeing Rogers for some time.

Early she expresses a distaste for "women in general" and describes them as "scatterbrained." She avoids most women and prefers a "mixed group where there are men...much more." She relates this to her childhood when her "submissive" mother was kept under the heel of Miss Munn's

paternal grandmother, a "dominating tyrant."

Miss Munn: "I felt as if I were never young. (I had the) feeling of being older than my mother because I was so sorry for her because she wasn't able to be happy and cope with this dominating tyrant. Why did my mother...put up with it? (There were some) awful experiences ...Father would lose his temper - that was just ghastly. I would think that he would leave and go away and everything would fall to pieces...I wanted so much for him to...care for me. And yet I didn't seem to get what I really wanted and yet I keep on trying - even today. Once I meet one (of his demands) then there's another - endless."

The conflict which is emerging has the function of preventing Miss Munn from suffering as her mother did under someone else's inconsiderate domination. Her response to this threat is to be capable, independent, and level-headed like a man, and in this sense she chooses to dominate her own inclinations toward submissiveness, in the effort to be happy and cope more effectively than her mother. But also there is an awareness of something missing which she expresses as the feeling that somehow she was never young. Her effort to please her father, which includes being like him, the one who held the family together, fails to earn his full acceptance of her and is experienced as an ineffective means of securing happiness.

M: "I always felt I didn't like (mother) - being submissive."

Rogers: "Yet that's the only chance I have of being loved."

M: "I've always felt I was like her - submissive...and not liking the pattern...She allowed herself to be taken advantage of in ways she didn't need to...it's not a good way to be, and yet...that's the way you have to be if you intend to be thought a lot of and loved. And yet, who would want to love somebody who was that sort of wishy-washy person...She could have...refused to take all that she took...and she could have saved me all the suffering. I had to be worried about (her) all the time...Just bogging down in the misery of it all."

R: "I wish she was here to look after me and take care of me."

M: "Maybe nobody could help - (crys). It would be sort of a comfort not to be alone."

R: "It would be nice if you could take someone a good deal of the way into your feelings of aloneness and fear."

M: "I guess I just have (referring to Rogers)."

The nadir occurs when Miss Munn accepts that "maybe nobody could help;" that her mother never helped because of her weakness and her father never helped because he wouldn't accept her. And yet by following the feeling of her own helplessness, she gives herself that which she never received from her parents: Acceptance. By admitting to herself, and experiencing her submissiveness and her consequent need for others, she experiences the depth of her need to express her contact-dependence, that in her which is most like a woman. By identifying with that of her mother (submissiveness)

and that of her father (non-acceptance) in herself, she comes to experience both what she feared (that "nobody could help her") and what she desired ("comfort" in her aloneness). The rebirth is the realization she expresses when she says "I guess I just have" been not alone because she has shared her experience of aloneness and fear with the therapist. This realization also begins the ascent, the awareness of being fully present to another person which is experienced not as being dominated as was feared, but as being comforted. To be known and accepted as one can fully know and accept oneself in the present moment; this is the goal of psychotherapy.

References

- Alexander, F. S. Fundamentals of Psychoanalysis. New York: Norton, 1963.
- Bartley, S. H. Principles of Perception. New York: Harper & Row, 1969.
- Campbell, J. The Hero with a Thousand Faces. Princeton: Princeton University Press, 1949.
- Combs, A. W. & Snygg, D. Individual Behavior: A Perceptual Approach to Human Behavior. New York: Harper & Row, 1959.
- Dabrowski, K. Positive Disintegration. Boston: Little, Brown, 1964.
- Dabrowski, K. Psychoneurosis is not an Illness; Neurosis and Psychoneurosis from the Perspective of Positive Disintegration. London, Gryf, 1972.
- Dollard, J. & Miller, N. E. Personality and Psychotherapy. New York: McGraw-Hill, 1950.
- Ellis, A. Reason and Emotion in Psychotherapy. New York: Lyle Stuart, 1962.
- Fagan, J. & Shepherd, I. L. (Eds.) Gestalt Therapy Now. New York: Harper & Row, 1970.
- Forgus, R.H. Perception; the Basic Process in Cognitive Development. New York: McGraw-Hill, 1966.
- Frankl, V. E. Man's Search for Meaning. Boston: Beacon Press, 1962.
- Gazda, G. M. (Ed.) Innovations to Group Psychotherapy. Springfield, Illinois: C. C. Thomas, 1968.
- Gendlin, E. T. A theory of personality change. In P. Worchel & D. Byrne (Eds.) Personality Change. New York: Wiley, 1964.

- Guntrip, H. Schizoid Phenomena, Object-Relations and the Self. New York: International Universities Press, 1968.
- Hare, R. D. Psychopathy; Theory and Research. New York: Wiley, 1970.
- Jacobi, J. The Psychology of C. G. Jung. New Haven: Yale University Press, 1968.
- Kelly, G. A. The Psychology of Personal Constructs. Vol. II. Clinical Diagnosis and Psychotherapy. New York: Norton, 1955.
- Kirtner, W. L. & Cartwright, D. S. Success and failure in client-centered therapy as a function of client personality variables. Journal of Consulting Psychology, 1958, 22, 259-264.
- Kuiken, D. L. Mythological Parallels in T-Groups. Unpublished doctoral dissertation, University of Texas, 1971.
- Laing, R. D. The Divided Self; an Existential Study in Sanity and Madness. London, Tavistock, 1960.
- Maddi, S. Personality Theories; a Comparative Analysis. Homewood, Illinois: Dorsey, 1968.
- May, R. Existence: a new Dimension in Psychiatry and Psychology. New York: Basic Books, 1958.
- Patterson, C. H. Theories of Counselling and Psychotherapy. New York: Harper & Row, 1966.
- Perls, F., Hefferline, R. F., & Goodman, P. Gestalt Therapy; Excitement and Growth in the Human Personality. New York: Dell, 1951.
- Rogers, C. R. On Becoming a Person. Boston: Houghton Mifflin, 1961.

- Rogers, C. R. Therapy, personality and interpersonal relationships, as developed in the client-centered framework. In S. Koch (Ed.), Psychology: A Study of a Science. Vol. III. Formulations of the Person and the Social Context. New York: McGraw-Hill, 1959.
- Sullivan, H. S. The Psychiatric Interview. New York: Norton, 1954.
- Wiener, N. & Mehrabian, A. Language Within Language: Immediacy, a Channel in Verbal Communication. New York: Appleton-Century-Crofts, 1968.
- Wolpe, J. Psychotherapy by Reciprocal Inhibition. Stanford: Stanford University Press, 1958.

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