

Comment to Stephen Seligman

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When I was asked to read a work by Seligman, I accepted gladly because I was expecting an interesting ‘intersubjective encounter’ set against the repetitive interpretations that simply add more words to what has already been said or written. After the first reading I thought *Well done, Seligman!* although Seligman hardly needed this appreciation on my part. The thought had popped into my head because Seligman’s ideas and the way he wrote them reified as I read. With a work that is particularly harmonious, something like a significant relational exchange, the first sensation is admiration, attunement, identification, mirroring, empathy, and projective identification. This stage momentarily suspended a second stage, that of discrimination.

This second stage came into being shortly afterwards through sentences from the writing that had insinuated themselves into my mind despite the many things that go on each day. Even this second stage was not clear-cut but shifted between an appreciation of Seligman’s skill in representing the dynamic of the concepts, and the feeling that some of his theories, through association, gave shape to my own. Unlike the speed of direct intersubjective exchanges, the passage from ‘immersion’ into Seligman’s thinking to a dialogue between our two forms was inevitably longer, being mediated by the writing and the need to express thoughts about the work. Despite being an encounter with writing, the dynamism of the shifting between similarity and difference was interesting as I could experience the self in cohesive continuity, set against the conception of a static self.

Many interesting points emerged from reading the book, but I will briefly focus on those which I consider particularly significant: a) the likely and easy idealization of the analyst, and b) the role of behavior in psychoanalysis.

a) In the not-too-distant past, much literature was dedicated to negative therapeutic reactions and negative transference, considered so because

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the analyst's contribution to the relational exchange which gave rise to these negative reactions (almost always traced back to patients' defensiveness), was ignored. In contrast, little has been written about the ease of idealization and self-idealization of the analyst, and consequently of psychoanalysis and psychoanalytic institutions themselves.

That Seligman attracts their attention is both admirable and real. Too often some forms of intersubjectivity examined by Seligman are conceived and implemented in a unidirectional mode¹. In this way, an analytical relationship is established where the consequence is an analyst who is unrealistically but omnipotently 'good'. In other words, the analyst knows how to listen, understand, welcome, empathize, take the patients' anxieties, and return them transformed. It may be that the beneficial effects of this idealization unconsciously become the main criterion for positively assessing the effect of a therapy.

Where children are concerned, this idealization can lead down an even steeper and slippery slope with potentially harmful consequences.

Even prior to performing any psychoanalytic act, in the patients' eyes we are experts in the unconscious and, therefore, by definition, we are able to access a sphere which is precluded to the patient. As a consequence, to the patient, the relationship is asymmetric even before it begins. When we meet parents, we are seen as the 'experts': *i.e.*, in their minds we are capable where they have failed. We also meet them at a time when their parenting skills have broken down.

After having been told that her daughter was inoperable the mother of a cardiopathic child consulted a myriad of hospitals. After a dramatic and exhausting search, she finally found a hospital willing to operate, surgery was successful and when she came in for a consultation about dietary problems, she said: *For my little girl, I would have moved heaven and earth.*

Such attention of parents for their children exposes them to an almost unconditional acceptance of any proposal that may improve their child's condition, and exposes them, all too easily, to an idealization of the analyst.

Often analysts mistake this acceptance on the part of parents for a working alliance when in reality it is a functional dependence in which, unfortunately, parents delegate many of their parental skills. Moreover, parents exclude themselves from the therapeutic project and accept unnecessary individual analysis for their children.

As for the children, the risk is to convey the experience of an ideal relationship which is unrealistic in real life. This can cause children to fantasize that they would feel good in that sort of relationship, exposing them to a conflict of loyalty with their parents.

¹By 'mode' I mean all aspects of the memory system and procedural representation involved in each exchange.

As for analysts, they can create a self-idealizing complacency in which they consider normal parental functions as special abilities. I remember an eloquent discussion about Bion and the transformation of β elements into α elements, and the emphasis on the transformative capacity of projective identification of analysts, inevitably stressing their special skills.

There is no special skill but a normal human situation in which one person is open and receptive to the anguish of another. The very fact of not being the protagonist of that anguish, makes it possible to understand it and 'feel' it to a lesser degree, and so contain it. The containment, whether verbal or behavioral, is felt by the patient who feels the anguish and containment at the same time. Thus, the fear of falling apart or going mad with anguish, *i.e.*, of not containing it, is gradually mitigated and the anguish is rectified. It is this human lending, sharing, and identification that leads to healing.

There is another detrimental side to our being 'special'. Our image in the therapy room is not 'eroded' by the presentation of continuous differentiation in the face of children's desires; unlike parents, who have a precise educational mandate, and are obliged day after day to negotiate in a game of harmony and diversification, between answers and limits. We enjoy a privileged position and the risk of idealization and self-idealization can easily gain the upper hand.

When psychoanalysts finally decide to become truly intersubjective, to relativize their role, and to drastically review their models of infant psychoanalysis, with the aid of psychoanalytic training centers they will be able to avoid the risk of idealization, and may also discover that many difficult situations involving children can be resolved by working with and via parents, without meeting the children. Working with the child's environment and the child's main carers will have the effect of reactivating parents' skills and restoring the general situation to normality.

b) Seligman cited Stern, who defines affective attunement as *the realization of behaviors that express the quality of feelings of a shared affective state*, and brings me to behavior.

In psychoanalysis, behavior has always been a headache. Behavior cannot be ignored: without a body, there is no psyche. Behavior, therefore, had to be distanced from thoughts and words, and relegated to a purely defensive role through the theory of acting and enactment

The only acknowledgment of positivity was in the preverbal sphere: mimic posture and prosody.

Yet, some psychoanalysts sensed that the behavioral sphere had more than defensive significance. Winnicott describes an intervention with a little girl of a few months. The mother is present. Winnicott picks up the little girl and, in silence, allows her to dare to the point of biting his finger energetically. In this short sequence, there is no verbal comment. Winnicott defines this intervention an authentic object experience.

Racamier has a shawl wrapped around a seriously ill patient who suffers from lack of containment and the patient wears it constantly. Racamier declares that he cannot imagine that psychoanalytic understanding does not translate into pragmatic acts in the concreteness of reality.

Both realize their patient's need not with words but with behavioral acts, anticipating the theoretical framework that neuroscience and infant research subsequently offered to the behavioral sphere.

Thanks to Larry Squire we have the opportunity to understand and conceptualize the role of behavior in the psychic sphere.

Taking up the line of research in which Brenda Milner identified different memory systems, Squire identifies unconscious non-declarative memory. Subsequently, to avoid confusion with the Freudian unconscious, we will refer to it as procedural non-declarative memory. Larry Squire states that: "memory is not a unitary faculty of the mind but is composed of multiple systems that have different operating principles and different neuroanatomies (Squire, 2004). The major distinction is between the conscious declarative memory's capacity for facts and events, and a set of unconscious non-declarative memory facilities (...) In the case of non-declarative memory, experience modifies behavior without requiring any conscious memory content (...) Non-declarative memory is realized through execution (...) The different memory systems operate in parallel (...) Non-declarative memory refers to a mixed set of skills, habits, and dispositions that (...) take shape from experience, influence our behavior and our mental life, and are a fundamental part of who we are (Squire, 1980)".

The discovery of non-declarative-procedural memory configures behavior as an independent expression and realization of a part of the mental system whose distinctive feature is thinking by actions: in the instantaneity of the execution it creates the memory and therefore the representation, if it does not act it can have neither memory nor representation.

This new contribution leads us to conclude that mental system is composed of at least two systems of memory and representation: the declarative-conscious system and the non-declarative-unconscious system. The first operates through words and thoughts, while the second operates through actions or action procedures. The first is a symbolic-verbal system that has always been recognized and used by psychoanalysis, while the second is a procedural system which has not yet really been assimilated by psychoanalysis.

From the work and contributions of colleagues it appears that the concept of the conscious unconscious, that is, the unconscious of neurosciences, has been accepted but veers towards assimilation, and continually attempts to bring it back to the verbal system, so much so that the terms 'preverbal' and 'non-verbal' are used interchangeably. Incongruous usage cancels the difference between what belongs to the symbolic system and

what belongs to the procedural system. The preverbal arises from the symbolic system but does not yet have words; the non-verbal arises within the procedural system and has no words as it arises from actions, although it may subsequently be translated into words.

Karlen Lyons Ruth (Boston Group) used these new contributions to put forward the interesting concept of ‘implicit relational knowledge’. This consists of basic knowledge built up between parents and children through a myriad of relational exchanges in which meanings are co-created with words and actions.

Despite the potential fruitfulness of a dialogue between the two spheres, the procedural system has not led to any continuity of study and application. Psychoanalysis seems to continue to fear the behavioral sphere and to consolidate its defensive attitude. Yet, it is helpful to know that we can promote change in our professional lives by doubling our range of possibilities and instruments to include procedural as well as symbolic-verbal representations.

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