

Cartesian and Post-Cartesian Trends in Relational Psychoanalysis

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This article illuminates the ways in which relational psychoanalysis has remained caught in the grip of the Cartesian, isolated-mind philosophy it has sought to subvert. Residual Cartesianism is examined in the work of Sullivan and Fairbairn, in “present-moment” thinking, in the mutual-recognition model of intersubjectivity, in the concept of projective identification, and in the mixed models prevalent in relational theorizing. The aim of this critique is to move relational theory toward becoming ever more contextual.

One of the greatest difficulties encountered in bringing about favorable change is this almost inescapable illusion that there is a perduring, unique, simple existent self, [which is] in some strange fashion, the patient’s, or the subject person’s, private property.

—H. S. Sullivan (1950, p. 329)

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The fundamental assumptions of traditional psychoanalysis have been pervaded by the Cartesian doctrine of the isolated mind. This doctrine bifurcates the subjective world into outer and inner regions, reifies the resulting separation between the two, and pictures the mind as an objective entity that takes its place among other objects, a “thinking thing” that has an inside with contents and looks out on an external world from which it is radically estranged. Cartesian philosophy, with its “myth of the isolated mind” (Stolorow & Atwood, 1992, p. 7), has in Western culture been transformed by history into common sense, and it has until recently maintained a stranglehold on psychoanalytic thought (Sucharov, 1999).

During the past two decades, a number of viewpoints have appeared that have sought, in varying degrees, to emancipate psychoanalytic theory from Cartesian isolated-mind thinking (Stolorow, Atwood, & Orange, 1999). Among such evolving efforts to create a post-Cartesian psychoanalytic theory have been our own intersubjective systems theory (Stolorow & Atwood, 1992) and American relational theory, as represented most prominently in the work of Mitchell and Aron.

Although Mitchell (1988) does not appear to have been influenced by our earlier efforts to elaborate an intersubjective, contextualist perspective in psychoanalysis (e.g., Atwood & Stolorow, 1984), his general description of relational model theorizing is highly compatible with our viewpoint:

In this vision the basic unit of study is not the individual as a separate entity . . . but an interactional field within which the individual arises and struggles to make contact and to articulate himself. *Desire* is experienced always *in the context of relatedness*, and it is that context which defines its meaning. Mind is composed of relational configurations. . . . Experience is understood as structured through interactions. (pp. 3–4)

In a similar vein, Aron (1996) wrote the following:

Relational theory is based on the shift from the classical idea that it is the patient’s mind that is being studied (where mind is thought to exist independently and autonomously within the boundaries of the individual) to the relational notion that mind is inherently dyadic, social, interactional, and interpersonal. From a relational perspective, in investigating the mind the analytic process necessarily entails a study of the intersubjective field. (p. x)

In this article we attempt to demonstrate that despite the important efforts of Mitchell, Aron, and other relational thinkers to recast psychoanalytic theory as a contextual psychology, relational psychoanalysis has, in significant ways, remained caught in the grip of the very Cartesianism it has sought to subvert. First we consider briefly the work of Sullivan and

Fairbairn, theorists whose contributions are often cited as forerunners of contemporary relational theory. Then we question the “present-moment” thinking evident in much relational discourse. After discussing several influential conceptions of intersubjectivity, we next offer a critique of the concept of projective identification, a notion currently in vogue in relational circles. Lastly we examine the mixed models prevalent in relational theorizing.

We wish to emphasize that among the works we critically review in this article are theoretical advances that we regard as having deep historical significance and great clinical value. Our critique is intentionally and avowedly one-sided, aimed not at a fair and balanced portrayal of the contributions under study, but seeking instead to expose and challenge Cartesian assumptions hidden within even the most progressive of viewpoints. Indeed, we continue to search for such hidden assumptions in our own thinking. We are also aware that earlier important challenges to the Cartesianism of traditional psychoanalysis were made by “existential psychoanalysis” (see, e.g., May, Angel, & Ellenberger, 1958). The existential analytic writers, however, tended to import into psychoanalytic theory concepts derived from isolated philosophical reflection—Heidegger’s (1927/1962) ontological categories, for example—rather than grounding their ideas in the intersubjective dialogue of the psychoanalytic situation.

Sullivan

Interpersonal psychoanalysis grew out of Sullivan’s (1950, 1953) attempt to replace the intrapsychic determinism of Freudian theory with an emphasis on the centrality of social interaction. Indeed, Sullivan wished to resituate psychiatry and psychoanalysis within the domain of the social sciences. His investigatory stance, however, vacillated between one that assumed a position within the experiential worlds of those involved in an interaction (an intersubjective perspective) and one that stood outside the transaction and presumed to make objective observations that were subject to “consensual validation.” The latter stance is illustrated by Sullivan’s concept of *parataxic distortion*, a process through which a person’s current experiences of others are said to be “warped” in consequence of his or her past interpersonal history. We wish to emphasize that the concept of parataxic distortion enshrines a variant of the Cartesian doctrine of the isolated mind, a mind separated from an objective reality that it either accurately apprehends or distorts. This objectivist stance contrasts

with a perspectival one, in which it is assumed that one's reality is always codetermined by features of the surround and the personal perspective from which these are viewed.

Fairbairn

The foundation stone of Fairbairn's (1952) metapsychology was his postulation of the motivational primacy of personal relatedness rather than instinctual discharge. Hence, libido for Fairbairn is always object-seeking rather than pleasure-seeking, relational rather than hedonic. Child-caregiver relationships undergo internalization, according to Fairbairn, only when they fail. The child adapts to depriving, ruptured, or traumatizing relationships by taking into him- or herself the badness of the needed other, thereby safeguarding the tie, preserving the hope of extracting love, and achieving the illusion of omnipotent control over the surround. An endopsychic world riddled with splits and repressions thus becomes established as a defensive and compensatory substitute for the faulty relationships with caregivers. Most important for the turn away from Cartesianism, from Fairbairn's viewpoint the basic structuralization of the psyche is seen as resulting from early patterns of experienced interaction with others. Psychological development is a property of the child-caregiver system.

Although Fairbairn highlighted the crucial importance of the surround in early developmental experiences—what Mitchell (1988) aptly termed the “developmental tilt”—in Fairbairn's theoretical vision the endopsychic world, once established, is pictured as operating as a closed system, a Cartesian container housing an array of internalized personages. The internalized object relations are seen as dynamically active structures that behave at times like drives, at times like demons—autonomously and with a life of their own. Thus, in his view of the fully structuralized psyche, Fairbairn reverted to an image of the isolated mind, a mind whose dynamisms are insulated from the constitutive impact of the surround. In the analytic situation, this residual Cartesianism precluded the recognition and exploration of the part played by the analyst's personality, theoretical assumptions, and interpretive style in codetermining the evolution of the patient's transference experience.

Fairbairn's developmental theory strongly influenced the work of later object relations theorists. Kernberg (1976), for example, offered a revision of Freudian drive theory in which he pictures the basic building blocks of personality structure as units consisting of a self-image, an

object image, and an affect. Units with a positive affective valence are said to coalesce into the libidinal drive, whereas those with a negative valence form the basis for the aggressive drive. Although Kernberg acknowledges the early developmental and motivational importance of affect—another example of developmental tilt—once integrated into enduring self-object-affect units, affect states are seen to behave like drives, stirring within the confines of a Cartesian isolated mind and triggering all manner of distorting defensive activity. The lifelong embeddedness of affective experience in ongoing intersubjective systems thereby becomes lost.

Present-Moment Thinking

Among the various contexts considered in current relational discourse, by far the most prominent is the analysand–analyst dyad. Relational theorists such as Mitchell (1988), Aron (1996), Hoffman (1983), and Renik (1993) have provided not only extensive criticism of an exclusive theoretical and clinical focus on intrapsychic phenomena, but have also advocated consistent attention to the analyst's contribution to clinical phenomena and to the formation and transformation of meanings. In our own work, we have insisted that analyst and patient form an indissoluble psychological system and that the organizing activities of both participants are crucial to understanding the meanings and impasses that develop in the intersubjective field. Thus, one crucial contextual consideration—the here-and-now—includes the interacting subjective worlds and organizing activities of both patient and analyst, including the analyst's theories and the cultural traditions of both participants.

Even a focus on dyadic context, however, can be vulnerable to residual Cartesianism in the form of atomism and atemporality. There is a tendency of some relational theorists (Gill, 1982; Mitchell, 1988) to privilege the here-and-now or snapshot context. They tend to de-emphasize developmental contexts, as if serious consideration of these might infantilize the patient or create developmental tilt. Probably their concern is a theoretical one that we share: Developmental thinking can easily become reductionistic or degenerate into mechanistic objectivism. If it does, the complexity of psychological meanings—both found in and formed in intersubjective systems—is lost to a simplistic notion of causal genesis or etiology. We believe, however, that historical–developmental and cross-sectional contexts or dimensions cannot be neatly separated and that serious attention must be accorded to their interpenetration. Ontologically, we regard the past and the future as inevitably implicated in all

present moments (Bergson, 1910/1960). Epistemologically, we find it impossible to know an isolated moment. Clinically, we find ourselves, our patients, and our psychoanalytic work always embedded in constitutive process. Process means temporality and history. To work contextually is to work developmentally. To work developmentally is to maintain a continuing sensibility to past, present, and future experience. Developmental thinking refuses the snapshot view—what Derrida (1978) and Culler (1982) called the “metaphysics of presence,” or restriction to decontextualized moments or interactions—and affirms the emotional life of persons who have come from somewhere and are going somewhere.

Unfortunately, serious attempts at relational theorizing can still slip into atomistic thinking. For example, Maroda’s (1991) courageous and thoughtful book on countertransference makes the following claim:

The only tenable position for us to adopt is to focus on the nature of interaction and the emotional states of the therapist and the patient *at the moment* to determine what approach is most helpful within the realm of what is genuine and humanly possible. (p. 21)

Without a developmental sensibility, a salutary emphasis on the personal presence and involvement of the analyst with the patient can lead to isolating the present moment. This present-moment thinking then becomes the new rule of technique, resulting in an overemphasis on what Renik (1999) called an “ethic of self-disclosure” by analysts; or there is an overemphasis on the provision by analysts of “positive new experiences” (Shane, Shane, & Gales, 1997) that are not shaped by developmentally preformed organizing principles, as if experiences with no historicity, freeze-framed into an isolated moment, could ever be possible. The irony is that extremely well-intentioned and thoughtful attempts to understand clinical process in relational ways are undermined by antihistorical, decontextualized—and thus Cartesian—conceptions of human nature. Thinking contextually means ongoing sensitivity and relentless attention to a multiplicity of contexts—developmental, relational, gender-related, cultural, and so on (Orange, Atwood, & Stolorow, 1997).

Intersubjectivity and Mutual Recognition

The concept of intersubjectivity has become an important theme in current relational theorizing. Unfortunately, however, recent psychoanalytic discourse on intersubjectivity has been clouded by the intermixing and confounding of different uses of the term *intersubjective* that have dis-

tinctly different meanings at different levels of abstraction and generality. Developmentalists such as D. N. Stern (1985) have used the term *intersubjective relatedness* to refer to the developmental capacity to recognize another person as a separate subject. In a similar vein, Benjamin (1995), drawing on Hegel's (1807/1977) idea that self-consciousness is achieved through the reflection of one's consciousness in the consciousness of another, has defined intersubjectivity as mutual recognition. Ogden (1994), by contrast, seems to have equated intersubjectivity with what for us is only one of its dimensions, a domain of shared experience that is prereflective and largely bodily, what we call *unconscious nonverbal affective communication*. For us, intersubjectivity has a meaning that is much more general and inclusive, referring to the relational contexts in which all experience, at whatever developmental level—linguistic or prelinguistic, shared or solitary—takes form (Stolorow & Atwood, 1992). For us an intersubjective field—any system constituted by interacting experiential worlds—is neither a mode of experiencing nor a sharing of experience. It is the contextual precondition for having any experience at all (Orange et al., 1997).

The Hegelian mutual-recognition model of intersubjectivity has led to a clinical emphasis on bringing the patient to a recognition of the subjectivity of the analyst, as if this goal defined the psychoanalytic process and could serve as a criterion of its success. Benjamin (1995), for example, contended that “a theory in which the individual subject no longer reigns absolute must confront the difficulty each subject has in recognizing the other as an equivalent center of experience” (p. 28). Her mutual-recognition theory “postulates that the other must be recognized as another subject in order for the self to fully experience his or her subjectivity in the other's presence” (p. 30). To our ears, Benjamin's subjects, whether “the self” or “the other,” sound very much like monadic Cartesian mind entities, with the exception that their objectification and separateness are not pre-given but achieved through an interactional process of mutual recognition.

In Benjamin's framework, fantasy is the antithesis of mutual recognition in that “all fantasy is the negation of the real other” (p. 45). The real other is defined as one “truly perceived as outside, distinct from our mental field of operations” (p. 29). This definition is a rather dramatic return of the Cartesian subject-object split, the separation of an absolutized external reality from a mind that perceives, distorts, or negates it. But according to whose decontextualized, preconceptionless, God's-eye view do we say what is real and what is negation? Not even Habermas (1971/1987), whose

use of the term *intersubjectivity* Benjamin (1998) invokes, but whom she faults for not paying “sufficient attention to the subject’s destructive omnipotence” (p. 93), would claim to know this definitively or in advance of a communicative process.

It would seem that residues of Klein’s (1950) idea of inherent destructiveness, perhaps made more palatable by Winnicott (1969/1971), have evolved in some relational quarters into the notion of negation of the “real” other. Ogden (1994), another Hegelian Kleinian, defines psychoanalysis as “an effort to experience, understand, and describe the shifting nature of the dialectic generated by the creation and negation of the analyst by the analysand and of the analysand by the analyst” (p. 6). Benjamin’s and Ogden’s conceptualizations have in common a vision of substantialized Cartesian minds recognizing, creating, or negating one another. It would appear that Hegel’s reflection model, so soundly criticized by 20th-century phenomenologists and existentialists, has become for some relational psychoanalysts a way to exhort the aggressive Kleinian infant to become an ethical, less self-absorbed adult. One deleterious clinical consequence of such a hidden moral agenda is that psychoanalysis as questioning dialogue or making sense together (Orange, 1995) can degenerate into the analyst’s imposing a demand for recognition on the patient, with the latter’s ability to do so being taken as a measure of analytic progress. Our own intersubjective systems theory, by contrast, imposes no such predetermined developmental outcome, except perhaps expansion of the patient’s experiential horizons and enrichment of his or her affective life. In dynamic intersubjective systems, the outcomes of developmental or therapeutic processes are emergent and unforecastable, rather than pre-programmed or prescribable (Stolorow, 1997).

Benjamin (1998) has recently declared that our viewpoint should be categorized as an interpersonal theory, thereby staking her claim to the term *intersubjective* for her own mutual-recognition theory. Yet interpersonal theorizing throughout its history has all too often been preoccupied with overt social behavior, the question of who is doing what to whom, such as the patient’s provocations, manipulations, coercions, gambits, and the like. Our intersubjective perspective, by contrast, is not a theory of behavioral interaction. It is a phenomenological field theory or dynamic systems theory that seeks to illuminate interweaving worlds of experience. This was our meaning of the term *intersubjective* when we first began using it more than two decades ago (Stolorow, Atwood, & Ross, 1978).

Projective Identification

We view the notion of projective identification as one of the last seemingly unassailable strongholds of Cartesianism in relational psychoanalysis. Contemporary relational theorists typically use an interpersonalized version of projective identification, in which Klein's (1950) description of a primitive fantasy is transformed into an actual, causally efficacious interpersonal process through which a person is presumed to translocate parts of him- or herself into the psyche or soma of another. Consider, in this regard, Kernberg's (1975) discussion of Ingmar Bergman's movie, *Persona*:

A recent motion picture . . . illustrates the breakdown of an immature but basically decent young woman, a nurse, charged with the care of a psychologically severely ill woman. . . . In the face of the cold, unscrupulous exploitation to which the young nurse is subjected, she gradually breaks down. . . . The sick woman seems to be able to live only if and when she can destroy what is valuable in other persons. . . . In a dramatic development, the nurse develops an intense hatred for the sick woman and mistreats her cruelly. . . . *It is as if all the hatred within the sick woman had been transferred into the helping one, destroying the helping person from the inside.* (pp. 245–46, italics added)

Here we see a caricature of the Cartesian isolated mind unleashed. A unidirectional influence system is pictured, wherein the subject's own omnipotent intrapsychic activity is claimed to create not only her own emotional experiences, but the affective states of the other as well.

We have come to regard the doctrine of projective identification—the objectified image of one mind entity transporting its contents into another mind entity—as faithfully diagnostic of Cartesian, isolated-mind thinking. Nevertheless, the concept, in one form or another, is an extremely popular one in current relational discourse. Mitchell (1988), for example, seemed to use a variant of projective identification when he claimed that the analyst inevitably becomes a “coactor” in the patient's drama, “enacting the *patient's* old scenarios” (p. 293) and inexorably falling into “the patient's predesigned categories” (p. 295). Ogden (1994) found that the concept of projective identification “provides essential elements” (p. 48) for his conception of intersubjectivity. S. Stern (1994) chose projective identification as the theoretical linchpin for his “integrated relational perspective” (p. 317) on transference–countertransference enactments. Aron (1996) aptly criticized the notion of projective identification for portraying the analyst as an empty (Cartesian) container with no participating subjectivity of his or her own, but then referred approvingly to the concept's clinical utility.

Sands (1997) has even proposed a marriage between the interpersonalized version of projective identification and Kohutian self psychology. As expounded by Sands, the theory of projective identification is invoked to “explain” those disquieting intersubjective situations in which the analyst feels “taken over” or “subjugated” by the patient’s mind, as though there were an emotional “exchange of bodily fluids” whereby “the patient gets under the analyst’s skin” (p. 663). It seems to us that what Sands is describing are the analyst’s visceral experiences of invasion, psychological usurpation, and self-loss, along with the fantasy the analyst uses to organize them. This fantasy attributes the analyst’s disturbing experiences to the patient’s unconscious intent. The theory of projective identification then objectifies and reifies the analyst’s fantasy, transforming it into a real interpersonal process (or better, transpersonal process), whereby parts of the patient are presumed to be translocated into the analyst, much in the manner of a demonological possession. The tautological circle is now complete, as the patient is said to have “[taken] up residence inside the analyst” (Sands, 1997, p. 656) and to be “speaking to [the analyst] through [his or her] countertransference” (p. 654). The analyst feels invaded because he or she has, in fact, been taken over! In this respect, the theory of projective identification bears a striking resemblance to the delusion of the influencing machine (Tausk, 1917), which we (Orange et al., 1997) have understood as a vivid concretization of the experience of loss of personal agency resulting from extreme pathological accommodation (Brandchaft, 1993/1994) to an alien will.

Schafer (1972) long ago demonstrated how psychoanalytic formulations of mental actions such as internalization and externalization used reified fantasies of bodily incorporation and expulsion as pseudoexplanations of psychological processes, and we (Atwood & Stolorow, 1980) showed how such formulations involved an intermixing and a confusion of phenomenological (subjective) space with physical (objective) space. The theory of projective identification is a dramatic example of such confounding.

In addition to the errors of objectification and tautological circularity, there are other problems with the use of the concept of projective identification to explain the analyst’s visceral states. There is, for example, the mistake of inferring causation from correlation. Because the analyst feels something that is also in the patient’s experience in a not-yet-articulated form (correlation), it does not follow that the latter has produced the former (causation). It is equally plausible that there is a conjunction—an intersubjective correspondence—between regions of the

patient's less articulated and the analyst's more articulated worlds of experience, a conjunction that creates the possibility of affective attunement. In general, the theory of projective identification wraps a cordon sanitaire around the analyst, obscuring the contribution of the analyst's organizing activity to the course of the therapeutic interaction.

Additionally, the model of causality reflected in the theory of projective identification is a linear one: *X* (the patient's hidden intent) causes *Y* (the analyst's visceral state). Increasingly, we are recognizing that grasping the vicissitudes of relational systems requires a nonlinear model of causality as offered by dynamic systems theory (Stolorow, 1997). Patterns take form within a dynamic system through the intercoordination or cooperative interaction of its elements, following a trajectory unforecastable from any one element (e.g., the patient's unconscious intention) seen in isolation. We are not objecting to the idea that patients may bring a hidden intentionality to the analytic encounter—only to the notion that such intentionality is the cause of, and can be directly inferred from, the analyst's visceral states.

There is more. The visceral states implicated in attributions of projective identification are states in which the experience and expression of affect have remained largely somatic—in which, that is, affect has failed to evolve from its presymbolic, bodily form into symbolically articulated feelings. Yet the theory of projective identification presupposes the operation of highly developed symbolic processes—symbolizations of self, of other, and of the intended affective communications between them. The hidden intent to communicate—at the heart of the interpersonalized version of projective identification—presupposes the operation of symbolic thought. How can one intend to communicate experiences that have not yet been symbolized? Such a formulation is as untenable theoretically as Klein's (1950) attribution of complex fantasy activity to presymbolic infants.

Tellingly, Sands (1997) described the process of projective identification as occurring “in some mysterious way that we cannot begin to comprehend scientifically” (p. 653). We suggest, to the contrary, that the understanding of affective communication would be greatly enhanced by abandoning neo-Kleinian mysticism and demonology and turning instead to the laboratories of contemporary infant researchers. Beebe, Lachmann, and Jaffe (1997), for example, summarized the results of a highly relevant study by Fox (reported in Davidson & Fox, 1982) in which electroencephalographic (EEG) recordings were taken from 10-month-old infants viewing videotapes of faces displaying different affect states:

If the infant is shown a videotape of a smiling–laughing actress, the pattern of EEG activation is one of positive affect; if the infant is shown a distressed, crying actress, the pattern of EEG activation is one of negative affect. The infant cannot escape the emotion of the partner as reflected on the partner’s face. (Beebe et al., 1997, p. 143)

Surely no one would argue that the affects from the videotapes got under the infants’ skin and into their brains because of the taped faces’ unconscious intent to communicate these states to the babies. The Fox study demonstrates that infants are prewired to participate in nonverbal affective communication. Any assumptions about unconscious intentionality or projective mechanisms presumed to explain such communication are entirely unwarranted.

Because we are contextualists, it is our belief that the meanings embedded in a theoretical idea cannot be fully comprehended without examining its historical and personal contexts of origin. Klein’s (1950) metapsychology, of which projective identification is an integral component, is a monadic drive theory that accounts for psychological life in terms of the workings of an innate aggressive drive located deep within an isolated mind. The theory of projective identification can be viewed as an attempt to escape this self-encapsulated isolation and to find some form of communicative connection with a fantasized other. The result is a portrait of two decontextualized Leibnizian windowless monads trying to create windows. Kleinian theory, no matter how much it is interpersonalized, is drenched in Cartesian presuppositions.

Why is it that the concept of projective identification has been so successful in getting under the skin of psychoanalysis? We believe that one reason is that the concept allows therapists and analysts to disavow unwanted aspects of their own affectivity, attributing them to unconscious projective mechanisms originating in the mind of the patient. In effect, the theory of projective identification does to the patient exactly what the theory says the patient is doing to the clinician. The demon of projective identification, a stubbornly persisting relic of Cartesianism, needs to be cast out if relational theory is to become more fully contextual.

Mixed Models

Prevalent in contemporary relational theorizing are mixed models that perpetuate rather than subvert the original Cartesian division between outer and inner realms. Ghent (1992), for example, stated that from a relational viewpoint “both reality and fantasy, both outer world and inner

world, both the interpersonal and the intrapsychic, play immensely important and interactive roles in human life" (p. xviii). Similarly, Aron (1996) described "relational theory as maintaining both one- and two-person psychologies" (p. 47), existing in a complementary and dialectical relationship. This dialectical perspective, according to Aron, allows relational psychoanalysis to achieve a "balance between internal and external relationships, real and imagined relationships, the intrapsychic and the interpersonal, the intrasubjective and the intersubjective, the individual and the social" (p. ix). Accordingly, although claiming that abandonment of drive theory is central to relational psychoanalysis, he allows drives and the isolated mind to slip in through the back door in the form of "inherent motivations" (p. 47), such as universal strivings for union and separateness, or in the guise of preprogrammed developmental stages imported from Freudian and Kleinian theory.

Aron even attempted to resuscitate the Cartesian dinosaur of objectivity by proposing for psychoanalysis an objectivity that is "dialectical and dialogical" (p. 263), a glaring oxymoron from our point of view and from the standpoint of his own perspectivalism. More recently, Wasserman (1999) proposed an "integrated stance" combining elements from both one- and two-person psychologies, whereby the analyst "retains neutrality, anonymity, and abstinence as analytic ideals, recognizing that they can never be fully achieved" (p. 454).

It is our view that the persisting dichotomies between the intrapsychic and the interpersonal, between one- and two-person psychologies, are obsolete—reified, absolutized relics of the Cartesian bifurcation. The very phrase *two-person psychology* continues to embody an atomistic, isolated-mind philosophy in that two separated mental entities, two thinking things, are seen to bump into each other. We should speak instead of a contextual psychology in which experiential worlds and intersubjective fields are seen to mutually constitute one another. Unlike Cartesian isolated minds, experiential worlds—as they form and evolve within a nexus of living, relational systems—are recognized as being exquisitely context-sensitive and context-dependent. In this conception, the Cartesian subject-object split is mended, and inner and outer are seen to interweave seamlessly. We inhabit our experiential worlds even as they inhabit us. Mind is pictured here as an emergent property of the person-environment system, not as a Cartesian entity localized inside the cranium.

We think that Ghent, Aron, and Wasserman, like many other relationally-oriented psychoanalysts, are caught between two incompatible philosophical worlds. One is the world Freud inherited from Descartes, a

world of Archimedean certainty and clear objectivity, in which isolated mind entities are radically estranged from external others. The other is the world of post-Cartesian contextualism, which recognizes the constitutive role of relatedness in the making of all experience. Relational theorists have tried to combine, reconcile, and preserve elements of these two worlds by claiming that they can coexist in some form of dialectical relationship. We believe that such efforts, although appealing, cannot succeed, because these two philosophical worlds are fundamentally incommensurable. We must choose.

Yet, as we have seen, remnants of Cartesian, isolated-mind thinking persist, even in the works of authors who have argued eloquently and persuasively for their deconstruction. We believe that the reasons for this persistence are more psychological than philosophical. Aron (1996) alludes to a partial explanation in his reference to Bernstein's (1983) concept of "Cartesian anxiety," what we have termed "the fear of structureless chaos" (Stolorow, Atwood, & Brandchaft, 1994, p. 203). Without reified mental entities, without decontextualized absolutes or universals, and without objectivity and its God's-eye view, we are left with no metapsychological or epistemological bedrock to stand on, and the resulting anxiety can be enormous. In order not to retreat back into the reassuring illusions of Cartesianism, we must find ways to embrace the painful vulnerability inherent in what we have called "the unbearable embeddedness of being" (Stolorow & Atwood, 1992, p. 22), especially as this vulnerability is evoked in our psychoanalytic work. Even experiences of discreteness and individuality, absolutized by the Cartesian bifurcation, are embedded in constitutive context.

In closing, however, we wish to emphasize that contextualism in psychoanalysis should not be confused with postmodernist nihilism or relativism, as some critics (e.g., Bader, 1998; Leary, 1994) have done. Relativity to context is not the same thing as a relativism (Orange, 1995), which considers every framework, whether psychoanalytic or moral, to be as good as the next. Pragmatically, some ideas are better than others in facilitating psychoanalytic inquiry and the psychoanalytic process. Moreover, we do not abandon the search for truth, for lived experience, for subjective reality. We hold that closer and closer approximations of such truth are gradually achieved through a psychoanalytic dialogue in which the domain of reflective self-awareness is enlarged for both participants. Within the community of psychoanalysts, it is also dialogue that will enable psychoanalytic theory to become ever more contextual, general, and inclusive.

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