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Therapeutic Action in the
Shared Implicit Relationship

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The Art of Regulation: Therapeutic Action in the Shared Implicit Relationship

Nancy VanDerHeide, Psy.D., Psy.D.

Therapeutic action in Christine Kieffer’s treatment of “Dina” inheres in the re-organization of Dina’s implicit patterns of affect and arousal regulation, which, in turn, facilitate moments of mutual recognition and enhanced reflective capacities. This article explores the case in the context of contemporary psychoanalytic theories that embrace the fundamental significance of implicit, non-linear mutual and self-regulatory processes. The discussion highlights the role of maternal disrupted affective communication patterns in the development of dysfunctional attachment and the acquisition of controlling strategies that further compromise an individual’s ability to form healthy relationships. Dina’s growth in the context of her relationship with her analyst illustrates many of the key concepts in theories of intersubjectivity, mentalization, and psychoanalytic complexity.

Keywords: controlling strategies; complexity; disrupted affective communication patterns; intersubjectivity; mentalization; mutual recognition; non-linear dynamic systems; self-regulation

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The Parent/Infant Dyad and Disrupted Affective Communication Patterns

Lyons-Ruth and her associates (Lyons-Ruth and Jacobvitz, 1999; Lyons-Ruth, 2006a, 2006b) have long concerned themselves with the etiology of dissociative symptoms and the pervasive patterns of affective, self-image, and relationship instability that characterize many disorders. Recent research (Lyons-Ruth, 2006a) confirms the surprisingly decisive role played by the absence of regulating and positively toned caregiver responses in the development of the disorganized–disoriented attachment style, which, until recently, has been more commonly associated with frightening and blatantly abusive caregiver behavior. More specifically, Lyons-Ruth (2006a) asserts that children manifest disorganized–disoriented attachment styles in response to their caregivers’ disrupted affective communication pattern—that is, behavior that is significantly less extreme than that of patent maltreatment (Lyons-Ruth, 2006a). She identified two broad categories of caregiver profiles with regard to attachment: helpless/fearful and hostile/self-referential.

Although the two groups represent mothers whose overt behavior toward their children is diametrically opposed, members of both groups display disrupted affective communication patterns that fail to regulate the stressful arousal of their infants. Additionally, longitudinal studies highlight the disrupted communication patterns of the helpless/fearful mothers, primarily characterized by inhibition and withdrawal, as substantially more predictive of dissociation and borderline symptoms by adolescence than were those of the hostile/self-referential mothers, whose parenting style is
typically negative and intrusive. The explanation for this discrepancy lies in the overriding importance of continuous, highly attuned regulation of fear and stressful arousal in infancy.

In addition to disrupted affective communication patterns, caregivers fitting either parenting profile also have in common a propensity to cluster at complementary poles of a dominant–submissive dyadic system. Such parent–infant dyads feature the predominance of one person’s perspective, needs, and voices over those of the other, who is helpless to alter the imbalance. Futile efforts to seek safety and relief from dysphoric affect and painful levels of arousal from such parents leads many children, by ages between three and five, to develop conspicuous strategies intended to engender more coherent, effective involvement with them. Controlling strategies take one of two forms: controlling/caregiving or controlling/punitive (Lyons-Ruth and Jacobvitz, 1999; Hesse et al., 2003; Cortina and Liotti, 2007).

Kieffer depicts her young patient’s behavior as overridingly bossy, coercive, and demanding, both on the playground and in their sessions. Given Dina’s traumatic background and diagnosis with a disorganized–disoriented attachment style, her well-developed controlling/punitive strategy is, accordingly, not based on the kind of sadistic enjoyment of the other’s pain and humiliation often attributed to bullies, but on the heavy burden of managing her own anxiety and self-cohesion. In addition to wrecking havoc on her social life, this strategy reinforces the defensive rejection of important attachment-related feelings in operation since infancy, and replaces them with feelings related to dominance–submission.

Dina, thus, has no frame of reference for being helped by the affective communications of another; indeed, responses generated outside of her control could prove dangerously disorganizing. Her tireless attempts to wrest specific, but unidentified, responses from her analyst, without having to confront her own needs for authentic connectedness, exemplifies her use of this strategy, as is apparent when she executes the role of autocratic teacher to Kieffer’s hapless student, “Crystal.”

**Intersubjectivity and the Negotiation of Recognition**

After months of struggle in the “classroom,” it comes as no surprise that interactions between Dina and her analyst have frozen into oppositional complementarity—the breakdown in mutual recognition described
by Benjamin (2000). Whereas Kieffer, initially relieved to be assigned a role in which she could historically count on excelling, tries valiantly to follow her patient’s lead, Dina seems equally dead-set on demolishing “Crystal’s” self-esteem. By the time the schoolroom vignette begins, both are immobilized by their helplessness in the face of the other’s intractability, incapable of wresting from the other a response that will provide some badly needed validation. Reading between the lines, I imagine their “doer/done-to” exchange to go something like this:

**Dina says:** “Crystal, stop your daydreaming and write!”
**Translation:** “You’re killing me here! I’m already nine years old; I can’t stand this much longer! Don’t be like everyone else and leave me all alone in here!”

**Kieffer thinks:** “It’s not fair!!!”
**Translation:** “You’re killing me here! I’ve tried everything but you’re never satisfied! How much longer are you going to throw my empathy back in my face and make me feel like a failure?”

Kieffer’s inspired diary entry breaks the impasse, marking, as she says, “the tentative beginning of a new mode of our relating” (p. 3). In decentering from her perspective on the situation, she allows everything she knows about the pain of emotional abandonment, loneliness, confusion, and despair to pour out onto the page, communicating her deep understanding of Dina’s most powerful feelings and longings, as well as much about her own intentions. Finally, Dina is able to experience some of the empathic understanding Kieffer has tried in vain to convey over their interminable months in the “schoolroom.” A moment of recognition is made possible by Kieffer’s use of her own subjectivity, and made mutual by Dina’s acknowledgment of the entry’s impact. Dina feels seen and understood by someone who has risked exposing her own vulnerability. Part of the beauty of the intervention lies in Kieffer’s presenting this “interpretation” in a way that lets Dina resonate with the affect without having to consciously acknowledge it as hers and, in doing so, move that much closer to tolerating it.

Benjamin’s (2004) theory of intersubjectivity explicates a recursive, dialectical process of recognition and its breakdown into complementarity. Most of the time, the analyst is the one who, in making room for the patient’s perspective, rescues the dyad from the standoff or begins
extricating them from an enactment. The analyst accomplishes this by permitting herself full access to the experience of shame and inadequacy that impasse typically engenders. Subsequently, she is freed from the enactment to encounter more fully her patient’s dissociated pain and to respond from a place of differentiation informed by affective attunement (Bromberg, 2000). Benjamin refers to this process as the synergistic action of “the third in the one,” or intentional third—that is, the analyst’s capacity to discriminate between her own needs and those of her patient; and “the one in the third,” which is the affective resonance that is a property of the dyad. Mutual recognition temporarily triumphs over complementarity in the foreground of the oscillating gestalt—a consequence of the space of thirdness co-created as Kieffer and Dina surrender to the intersubjective third (Benjamin, 2004).

Such recurring experiences of breakdown and repair are crucial to Dina’s progress in therapy. Glimpses of Kieffer’s subjectivity impart credibility and meaning to her interactions with Dina. As Kieffer survives Dina’s adamant negation of her perspective in service of Dina’s need to preserve her own sense of what is transpiring in their relationship, Dina experiences her analyst as someone with a separate center of initiative and intention, someone with a mind similar to hers who exists outside of her imagination, someone she cannot magically control. Thus, Dina comes to know herself as subject, and her sense of self is bolstered by increased cohesion as she sees herself through the eyes of an important other who deeply understands, and can tolerate, her anguish.

Colliding Organizing Principles and Intersubjective Systems Theory

Joelson’s discussion of Kieffer’s article highlights the potential for disjunction and enactment in a therapy wherein the dyad’s key organizing principles conflict. Stolorow and Atwood (1992) discuss the meaning-making function of organizing principles that originates in the earliest, mutually influential contact between infant and caregiver.

Organizing principles are unconscious, fundamental assumptions about relating that guide the ways in which a person interprets his or her experiences and makes meaning of them. The transactional patterns upon which organizing principles are based, together with their associated meanings, operate outside of awareness as part of the pre-reflective
unconscious. When activated by similar experiences, organizing principles fit those new events and perceptions into the preexisting patterns, from which the individual then derives their meaning.

According to Joelson, one of Dina’s theories (her “one-ship psychology,” as Joelson calls it) emphasizes her rigid reliance on self-regulatory efforts to maintain a relatively cohesive sense of self, despite the cost of those efforts to her connections with others. This conflicts with Kieffer’s “two-ship psychology” and its emphasis on the essential contributions of mutuality to the regulation of affect and arousal, as well as to the development of increased capacities for intersubjective relatedness.

Joelson also recognizes the hope that Dina and Kieffer elicit in one another, and the impact of subsequent disappointments on the process. When Dina’s hopes trigger fears of disappointment, rejection, and abandonment, Kieffer’s capacity for empathic immersion in Dina’s subjective experience falters as she encounters repeated failures in her attempts to convey her understanding and Dina increases her self-regulatory efforts. This recursive pattern could escalate indefinitely. Not until Kieffer is able to regain her empathic footing and write a diary entry that reaches her does Dina relax her coercive behavior, rewarding Kieffer with an A+ for her efforts. Joelson tracks these interacting organizing principles, detailing their intersubjective collisions, as well as the calmer times when they work in concert. In doing so, she articulates the importance of Kieffer’s steadfast curiosity to the ultimate outcome of the treatment, even in the midst of managing the impact of her own crushing organizing principles.

Intersubjective systems theory posits a bi-dimensional transference situation comprising a repetitive/conflictual dimension and a developmental, or selfobject, dimension as emphasized in self psychology. These dimensions represent two classes of unconscious organizing principles, which oscillate between the foreground and background of the dyad’s interactions. When the analyst is sufficiently attuned and responsive to the patient’s affect states and needs, sufficient safety exists for previously unmet developmental needs to become available as the patient’s longings for the analyst’s healing attentions. The arrival of the repetitive/conflictual dimension of the transference, on the other hand, signifies the patient’s expectation and fear of re-experiencing an early, traumatic, developmental failure with the analyst.

In addition to the struggles brought about by intersubjective disjunction referred to by Joelson, I believe that activity in the repetitive/conflictual dimension of the transference provides another
reasonable conjecture regarding their painful student–teacher interactions. In light of the studies cited earlier (i.e., Lyons-Ruth, 2006a), there is a good chance that Dina’s disorganized–disoriented attachment style and other difficulties stem from inadequate attention to her needs for help with affect and arousal regulation from withdrawn and otherwise unavailable caregivers.

Although there is every indication that Kieffer was a generally active and genuine presence in Dina’s game of school, the possibility exists that Dina may have perceived any caution, hesitation, or even tentativeness on Kieffer’s part as a traumatizing repetition of early neglect. Her reaction to such an experience, informed by the meaning she derives from her strongly entrenched organizing principles, would likely be the intensification of her controlling/punitive strategy. Kieffer’s diary entry was a powerful expression of her authentic presence, and its therapeutic action may have been as a multilayered interpretation regarding the activation of the repetitive/conflictual dimension of the transference. The resolution of that dimension usually ushers in the developmental dimension and its reinstatement of growth-oriented needs—the forward edge, as Tolpin (2003) called it. Indeed, Dina did relax her combative stance in response to the intervention.

**The Moment of Meeting and the Shared Implicit Relationship**

The school vignette can also be usefully examined from another level of description: the “local level,” defined as the site of the small, specific events constituting the moment-by-moment process of the therapeutic dyad (Boston Change Process Study Group [BCPSG], 2005; 2010). Our introduction to Dina in the classroom takes place on the brink of a “now moment”—one of those critical, potentially pivotal instants in every analysis that demands courage of both parties. If seized and embraced, such a moment can blossom into something deeply transformative—a state of dyadic consciousness or “moment of meeting.” Failure to take the risk may simply cost the dyad an opportunity for potential growth; or, in worse-case scenarios, strand the therapeutic couple even deeper in a painful enactment, or end the treatment altogether. Two equally appealing alternatives beckon to Kieffer at that critical juncture: protest her “teacher’s” unfair treatment of her, or detach altogether; either way, she abandons Dina to
her private torment. Nevertheless, it is certainly understandable that she “wanted the attacks to stop—now” (p. 3).

Fortunately for all, Kieffer transcends her indignation and chagrin, thereby submerging herself in the wrenching anguish that Dina cannot yet consciously bear. Kieffer’s inspired move reaps multiple rewards. It not only breaks the months-long impasse, it also disconfirms Dina’s expectation that others will fail to meet her emotional needs—one of her most detrimental organizing principles. Over time, similar experiences can accrue to new convictions that will color future events with the increased confidence that those needs can, and will, be met.

Dina also benefits from exposure to the split-off affect that underlies her rage and informs her need to control the people around her, buffered by distance and displacement into something she can manage. In much the same way that Hallmark commercials fill peoples’ eyes with tears “for no reason,” Dina, albeit deeply moved by the words she reads, is spared the discomfort of directly owning the agonizing feelings she can safely attribute to “Crystal.” We know she receives from her analyst something she has been demanding with relentless ferocity because her entire demeanor changes—her face softens into that of a little girl, and she grants her pupil the A+ that restores Kieffer to her own sense of value.

Kieffer’s actions capture the now moment before it slips out of reach into the sequence of interpersonal relational moves, or communicative gestures, comprising the dyad’s interactional “moving-along process” toward their intersubjective goals (BCPSG, 2005). The strong emotional quality of a now moment imbues it with a sense of significance relating to the direction in which the relationship is moving, such that it serves as a crossroads of sorts. Kieffer summons the resolve to transcend her defensive impulse and crafts her highly personal, novel response, transforming the now moment into a potential moment of meeting. The moment of meeting is realized as Dina registers Kieffer’s emotional shift out of her defensive state of mind, as well as her underlying intentions. Moments of meeting entail a state of dyadic consciousness in which individual initiatives regarding the relationship reach a new level of fittedness, creating a new intersubjective context from which the therapy can proceed.

In a moment of meeting, each person’s implicit relational knowing—in other words, the procedural knowledge each carry about ways of being in their relationship—readjusts to accommodate the new intersubjective goal jointly determined by the fit between their respective initiatives. Overlapping aspects of each partner’s implicit relational knowing accrue
to the intersubjective domain called the “shared implicit relationship.” For perhaps the first time, Kieffer and Dina each experienced the other as sincerely reaching for a sound, caring relationship, rather than attempting to frustrate her aims with opposing agendas of her own. Moments of meeting reorganize implicit relational knowing and facilitate the long-lasting therapeutic effects of the concordant changes in the shared implicit relationship (BCPSG, 2010).

Mentalization and the Reflective Function

Children like Dina, with their highly impulsive and aggressive behavior, have come to the attention of educators and therapists because of their profoundly disruptive impact in the schoolyard. Recent studies demonstrate that even as the aggressors are suffering, both socially and academically, their victims too can suffer profound damage from their treatment at the hands of schoolyard bullies (Twemlow and Parens, 2006). Both parties carry their scars into adulthood, where their emotionally violent experiences are frequently reflected in their mental health, relationships, and a range of antisocial behaviors. As Kieffer mentions, this behavior is understood by some to result from deficits in mentalization—the process by which brain becomes mind (Jurist, 2010). Specifically, this refers to the developing capacity to think about mental states, both one’s own and those of others, in a wide array of contexts, including predicting behavior and attributing meaning to feelings (Fonagy and Target, 1998). Psychodynamic therapy and psychoanalysis are well-suited to incorporate the goal of increasing a child’s capacity for mentalization.

Dina’s reflective functioning, the operationalized form of mentalization, operates at a fairly low level, as can be discerned by her lack of affect regulation, impulse control, ability to monitor herself or others, and her impoverished sense of agency. Researchers understand the development of self-reflexivity to be predicated on the mother’s (or other caregiver’s) own capacity for mentalization—that is, her ability to treat her child as an intentional being, one with meaningful feelings and intentions. Kieffer consistently responds to Dina’s spontaneous gestures as though they carry valid meanings, and treats and Dina herself as an intentional being. These communications accrue to Dina’s developing mentalization. Secure attachment, facilitated in part by the caregiver’s reflective function, is also essential for the development of the child’s reflective function (Fonagy, 2000). Neither Dina’s parents, both low-functioning drug addicts
who disappeared from her life by the time she was two, nor her critical, embittered maternal grandmother, who abandoned her at age 6, afforded Dina anything even approximating a secure attachment.

The possibility of developing a secure attachment to a therapist (Parish and Eagle, 2003) affords patients a second chance to acquire mentalization. As her vignettes demonstrate, Kieffer holds her young patient in mind at both explicit and implicit levels. Her intention and ability to do so, as well as the high caliber understanding she conveys to Dina, are emblematic of the kind of trustworthy relationships that allow secure attachments to evolve. Even more important, she facilitates repair of the ruptures that occur throughout therapy so that Dina comes to expect that the relationship can survive the disruptions. Dina’s reflective functioning does, in fact, improve with her growing attachment to Kieffer, as is evident in the way she repairs her relationship with her best friend, Elena.

**Interaction Structures and Psychoanalytic Complexity**

Elena, it will be recalled, ends their friendship when Dina pinches her cheeks in a jealous rage. The first notable element of Dina’s response is her improved affect regulation. Instead of discarding Elena with her customary “If she doesn’t want me, I don’t want her either” reactivity, she is able to tolerate the pain of Elena’s rejection long enough to know that she desperately wants to salvage the friendship, and seeks out Kieffer’s help to do so. The second critical element in this vignette is Dina’s capacity to think about Elena’s reaction and understand that Elena will not be mollified by a simple apology, but will require something more meaningful from Dina. She comes up with a gift she knows Elena will like, and writes a thoughtful apology that includes her understanding of what Elena might be feeling about her actions, and requests a second chance. Elena happily accepts the apology, and the girls make up, much to Dina’s surprise and delight.

How can we understand the therapeutic action that gave rise to this transformation in Dina? The basis for all aspects of this rather sweeping change, I believe, is Dina’s increased affect tolerance and self-regulation, which make possible a wider range of responses and the flexibility to think about and choose among them. Increased affect tolerance is a direct result of improvement in the quality of mutual and self-regulations acquired in the treatment. Along with the rupture/repair process and heightened affective moments, ongoing regulations comprise one of the
three principles that organize the nonlinear system of interactive regulation described by Beebe and Lachmann (1994).

Interaction structures can be understood best as operating in accord with the dynamic systems principles of psychoanalytic complexity theory (Coburn, 2002, 2007). Self-organization refers to the process by which a system, or aspects of a system, such as patterns of ongoing regulations, reassess themselves and spontaneously increase in complexity and coherence. Perturbations, or small changes to a system, catalyze the reassessment/reorganization process by disturbing its equilibrium. By definition, in a nonlinear system, small events can trigger large results as the system reorganizes in their wake.

Ongoing regulations—the repetitive, predictable patterns of social interaction characteristic of any given dyad—are based on the integration of the couple’s recurring mutual and self-regulations. Over time, as the dyad’s interactions increase the client’s sense that her experiences are shareable and she begins to expect her therapist’s attuned responsiveness to her, her self-regulatory capabilities improve as well. Even incremental changes in ongoing regulations will trigger reorganization of the interaction structures that, just altered, organize the client’s future experiences with others. The dyad’s experiences of rupture and repair, likewise, generalize into predictable patterns that trigger the system’s self-organization.

Kieffer describes the ongoing challenges of working with Dina, and we can easily imagine the storms, so characteristic of Dina’s relationships, that inundate their sessions. However, Kieffer is an experienced child analyst and, by the time Dina’s crisis with Elena takes place, she has established a “good-enough” analytic space by way of her general consistency and timely responses to Dina’s affective signals. She has provided a safe play space through the establishment of reasonable limits and by engaging Dina, to whatever extent possible, in reciprocal dialogues focused on feelings and mental states (Tyson, 2005). The dyad has established certain patterns of contingent responsiveness to one another, and ruptures have been consistently repaired; with sufficient repetition, both types of interaction have been generalized into the salient organizing principles defining their encounters. In addition, it is likely that the impasse broken by Kieffer’s A+ diary entry generated enough of a heightened affective moment that aspects of Dina’s sense of self reorganized at a higher, and more positively toned, level of cohesiveness. The tremendous organizing power of affect has been long and widely established (Socarides and Stolorow, 1984).
The therapeutic nature of these transformations is evident throughout the session, not just in its outcome. It is already reflected in Dina’s receptivity to Kieffer’s assistance in processing Elena’s rejection, as she is at least somewhat optimistic that Kieffer will be helpful. Dina’s ability to cope with her sorrow about losing her best friend also attests to the therapy’s salutary effects on her capacity for self-regulation. Indeed, the reduction in the dissociative reaction historically attending interpersonal loss speaks to the increased range of affect Dina can now tolerate. Not only does her sense of self remain intact in the face of Elena’s rage, she also remains present to her own need of and desire for the friendship, as well as her hope that it can be salvaged. Finally, with Kieffer’s support, Dina contemplates what Elena might be feeling and needing in order to forgive her. She thinks about what Elena might appreciate and recalls her enjoyment of a music CD, and writes a note of apology articulating what she thinks Elena might have been experiencing during and after Dina’s assault on her. The improvement in Dina’s reflective function resulted from Kieffer’s ability to hold her consistently in mind and relate to her as someone whose thoughts and feelings are meaningful.

In my imagination, this session is one of those lovely hours marked by earnest collaboration and a sense of “flow”—that full immersion in a feeling of energized focus characteristic of creativity. Kieffer notes the event as a turning point in the treatment, and celebrates Dina’s “new sense of hope about the possibility of friendship, as well as a sense of efficacy” (p. 6)—sentiments that are undoubtedly accurate. However, I also see it as the consequence of months of hard work together—a well-earned recompense for their struggles. Certainly, earning Elena’s forgiveness should enhance Dina’s self-esteem; but just as important, the dyad’s ongoing regulations, newly reorganized to incorporate elements of cooperation and shared experience, will reverberate through Dina’s entire system of interpersonal relatedness. Having been countered by Kieffer’s responses, organizing principles heralding rejection, disappointment, and despair can begin to be supplanted by others inviting engagement and expectations of relational success.

**Conclusion**

Kieffer’s work with Dina attests to her empathy, skill, and flexibility as an analyst. Ever aware of the overriding importance of affect in the therapeutic endeavor, she succeeds in helping Dina reclaim aspects of her disavowed
emotional life, despite Dina’s fierce efforts to dictate the terms of their relationship. Much of the benefit Dina derives from this treatment stems from her increased capacity for effective mutual and self-regulation, which, in turn, continues to grow as a consequence of her therapeutic gains.

Lyons-Ruth (2006a) notes one clinical implication arising from her research into disrupted maternal affective communication patterns that she predicts may be controversial among some educators and clinicians. Specifically, her study highlights active augmentation of collaborative communications within the therapeutic dyad as more important to the treatment than are any focused attempts to improve reflective understanding per se (Lyons-Ruth, 2006a). From my perspective, the disclaimer seems unwarranted given the cascading therapeutic effects of the improved regulation of affect and arousal inherent to sound intersubjective communication patterns. Implicit relational knowing is based on ongoing dyadic regulations, themselves comprised of mutual and self-regulations; and the shared dyadic consciousness of a moment of meeting, of mutual recognition, reorganizes the implicit relational knowing comprising the area of overlap between the partners’ individual subjectivities that constitutes the shared implicit relationship.

As our patients’ trust in us increases, through the combination of consistent repair of intersubjective ruptures, gradual weakening of deeply entrenched and maladaptive organizing principles, and meaningful experiences of empathic attunement, their attachment to us becomes more secure, generating greater regulatory functioning. Even brief experiences of mutual recognition and shared dyadic consciousness strengthen the relationship and, correspondingly, the self, at implicit and explicit levels. And, the more we respond to their spontaneous gestures, the more our patients experience themselves as intentional beings, with correspondingly greater capacities to better interpret the meanings and intentions of others, and understand more fully the meanings their own actions carry.

Though distinctive in many ways, the theories discussed in this article share an emphasis on the reorganization of implicit patterns of self- and mutual regulation, which, in turn, generate new contexts that provide a basis for subsequent growth and healing. Every successful intersubjective encounter moves our patients—indeed, moves us all—ever in the direction of risking increasingly authentic self expression in our engagement with others, and allowing others, unconstrained by our needs to hide or control, to genuinely engage with us.
References


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Translations of Abstract

En el tratamiento de “Dina” por Christine Keiffer la acción terapéutica consistió en la reorganización de los patrones implícitos de la regulación del afecto y la excitación, lo que, a su vez, facilitó momentos de reconocimiento mutuo y aumentó las capacidades reflexivas. Este artículo discute este tratamiento en el contexto de las teorías psicoanalíticas contemporáneas que consideran que los procesos implícitos no lineales de regulación mutua y auto-regulación. Esta discusión enfatiza el papel de los patrones maternos de disrupción de la comunicación en el desarrollo de un apego disfuncional y en la adquisición de estrategias controladoras que dificultan la capacidad del individuo para formar relaciones saludables. El crecimiento de Dina en el contexto de la relación con su analista ilustra conceptos clave en las teorías intersubjetivas, mentalización, y complejidad psicoanalítica.

Nella terapia di “Dina” proposta da Christine Keiffer, l’azione terapeutica ha comportato la riorganizzazione dei patterns impliciti di regolazione affettiva e dell’arousal, riorganizzazione che, a sua volta, ha favorito momenti di mutuo riconoscimento e incrementato le competenze riflessive. Questo lavoro esamina la terapia contestualizzandola all’interno delle teorie psicoanalitiche contemporanee che assegnano un significato fondamentale ai processi impliciti e non-lineari di auto e mutua regolazione. Nella discussione si sottolinea il ruolo dei patterns materni disturbati (disrupted) di comunicazione affettiva nello sviluppo dell’attaccamento disfunzionale e dell’acquisizione di strategie di controllo che compromettono ulteriormente la competenza di un individuo a costruire sane relazioni. La crescita di
Dina all'interno del contesto relazionale con la sua analista illustra i concetti chiave delle teorie dell'intersoggettività, della mentalizzazione e della complessità psicoanalitica.

L'action thérapeutique dans le traitement de « Dina » par Christine Keiffer a impliqué la réorganisation des patterns implicites de régulation d'affect et d'activation, qui, à leur tour, ont permis des moments de reconnaissance mutuelle et ont amélioré les capacités réflexives. Cet article discute du traitement dans le contexte des théories psychanalytiques contemporaines articulées autour de l'importance fondamentale des processus implicites et non-linéaires d'auto-régulation et de régulation mutuelle. La discussion met en lumière le rôle des patterns maternels de communication affective perturbés dans le développement de l'attachement dysfonctionnel et l'acquisition des stratégies de contrôle lesquels compromettent davantage la capacité de l'individu à former des relations saines. La croissance de Dina dans le contexte de sa relation avec son analyste illustre les concepts clés dans les théories de l'intersubjectivité, de la mentalisation, et de la complexité psychanalytique.