

Psychoanalytic Inquiry
1007, 27, 13, 326-349

Searching for Love and Expecting Rejection: Implicit and Explicit Dimensions in Cocreating Analytic Change

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I have spread my dreams under your feet
Tread softly because you tread on my dreams.

—William Butler Yeats, "He Wishes for the Cloths of Heaven"

I KNEW SOMETHING WAS WRONG WHEN NATALIE CAME INTO MY OFFICE. On these occasions, she barely looked at me; her thin face was drawn tight, losing its usual attractiveness. Body movements and aura were anxiety-laden and constricted. This particular day, I internally prepared myself first to withstand, and then to understand, her massively painful upset—what I anticipated to be an admixture of traumatic hurt, intense shame, covert anger, and her deflating conviction that I did not love her. Rapidly, I searched my mind as to what might have happened since our last session or what might I have done in the previous session that could have activated her sense that I preferred someone else over her, that I loved someone else more than her, excluding, as she had made clear, my wife and family.

Over the past 8 years of analysis, beginning when she was about to turn 44, Natalie and I had become all too familiar with these hair-triggered pain-

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ful self-states in which she felt traumatically rejected, a rejection that sapped the very vitality from her, a rejection that, to her, proved once again with torrents of shame that she was a "fool" to have hoped and been proven so wrong.

Rejection themes and sensitivities had spun out of her familial past, in which she had experienced her mother as typically emotionally absent, unresponsive, and unable to differentiate meaningfully between her three daughters. Her much younger brother seemed to stand apart because of his age and gender. Although her mother's use of Natalie as her confidante, beginning at an early age, provided her with some sense of importance and self-differentiation from her sisters, Natalie, otherwise, did not feel recognized as a person, that is, a person with her own needs, desires, and experiences.

Her experience of her father was more complicated. Although depressed and, more often than not, emotionally unavailable, he was the more dynamic parent who carried the energy, intellect, and power in the family. In the earlier years, when she was the only child, her father would, on occasion, take her onto his lap, nuzzle her, and whisper sweet phrases into her ear that "we have the special relationship," creating a deeply satisfying and tantalizing intimacy.

All of this changed, however, when Natalie turned five and her sister was born. Her father, apparently, was captivated by, and shifted his focus and energy to, the baby, leaving Natalie feeling deeply betrayed, rejected, abandoned. Simultaneously, both parents, we pieced together, subtly and more grossly, turned to Natalie to become the caretaker of the baby, her new "parentified" role. They lost sight of her as a child with her own needs for recognition and love. Natalie poignantly captured the lack of access to her father in a model scene (Lichtenberg, Lachmann, and Fosshage, 1992) that had her father intensely working at his desk and Natalie hesitantly standing at the doorway desperately, and usually futilely, searching for an affectionate invitation from him. Later, during her adolescent years, she experienced her father to be awkward and avoidant when they would pass one another in the hallway, without the slightest acknowledgement from him. Not only had she lost her father's affection, she also developed painful feelings of being unwanted, unacceptable, and, at the worst of times, even repellent as a person and as a developing woman.

In spite of these traumatic experiences, Natalie resiliently (Fajardo, 1991; DiAmbrosio, 2006) kept searching for love in its various forms, perhaps most centrally in the form of affirmation that she was a worthy, lovable person. Highly intelligent, she achieved academically, what had be-

come a primary source of self-esteem, even though her sense of her intelligence and capability was compromised by the paternalistic attitudes in her family that denigrated women along these dimensions. Nevertheless, Natalie had broken out of the paternalistic mold to become the only woman in her Midwestern family to go to college, not to mention her graduate training and successful academic career.

Relationships with boys during high school were sparse, for her distrust of men and their reliability, combined with shame-ridden negative body images that had emerged out of the relationship with her father, tended to dominate the scene. Several men pursued her early in college. One she did not trust. The other, an energetic, earnest young man, found his way to her heart and they married just after graduating from college. In spite of her attractiveness, Natalie's negative self-percepts plagued her throughout her marriage, leading to intense attacks of jealousy, of feeling unattractive and unloved, all of which contributed to episodes of depression. In contrast, because Natalie had built considerable confidence as a caretaker, themes of negative self-feeling much less frequently entered the scene in relationship to her two children, who, at the beginning of treatment, were thriving teenagers.

Implicit and Explicit Domains: Two Fundamental Pathways of Change

Today, we are making considerable inroads into understanding the participation of the implicit and explicit domains of learning and memory in psychological development and, in turn, therapeutic change (Clyman, 1991; Squire, 1994; Pally, 1997; D. N. Stern et al., 1998; Lyons-Ruth, 1999; Rovee-Collier, Hayne, and Colombo, 2000; Siegel, 1999; Davis, 2001; Schore, 2003a, 2003b; Lichtenberg, Lachmann, and Fosshage, 2003; Fosshage, 2005a; Gothold and Sorter, 2005, among others). Although the "implicit and explicit dance" (Fosshage, 2004) in the psychoanalytic arena is intricately complex and far from clear, we now recognize that implicit learning occurs through relational processes, often out of awareness, and explicit learning occurs through the more traditional psychoanalytic emphasis on exploration and expanded awareness. Our understanding of the development of implicit procedural knowledge supports the fundamental importance of relational experience within the psychoanalytic encounter, an emphasis that has emerged in contemporary re-

lational (using the term broadly) psychoanalytic approaches (Stolorow, Brandchaft, and Atwood, 1987; Mitchell, 1988). The current cutting edge focus is on assessing the interconnection between implicit and explicit processing (Lyons-Ruth, 1999; Boston Change Process Study Group, 2005; Fosshage, 2005a).

In considering the implicit and explicit domains, I (Fosshage, 2003a, 2003b, 2004, 2005) have proposed two fundamental pathways to analytic change. These pathways are related to the developmental and repetitive pulls of the transference (Stolorow and Lachmann, 1985; Fosshage, 1994; Stern, 1994; Lichtenberg, Lachmann, and Fosshage, 1996). The first pathway emerges out of a patient's striving to cocreate hoped-for, developmentally needed, relational experience (Kohut, 1984)—Years: "I have spread my dreams under your feet." In response to this developmental pull, an analyst must tread softly, as well as participate fully in the cocreation of needed growth-promoting experience (Fosshage, 1997). The implicit procedural learning that occurs in the analytic relationship provides one major avenue of analytic change (Kohut, 1984; Fosshage, 1992, 2005A; Shane, Shane, and Gales, 1998; Stern et al., 1998; Boston Change Process Study Group, 2005).

In contrast to a patient's hoped-for relational experience, a patient has learned, often at an implicit level, to expect and, subsequently, to construct repetitions of thematic traumatic experience. Although dreaded, a repetitive interaction offers the solace of confirming expectancies and, thereby, maintaining familiar, even if seriously problematic, psychological organizations and forms of attachment. In response to this repetitive interactive pull in the transference, an analyst variably (depending on the analyst's subjectivity) becomes drawn into a repetitive problematic interaction.

A second pathway to change involves patient and analyst through joint exploration gradually extricating themselves from these variably cocreated interactive mazes of problematic patterns of thinking, feeling and relating. When in the grip of a repetitive enactment, the jointly reflective process, itself, contributes to new implicit relational learning—for example, "upsets can be talked about." Additionally, reflective awareness of the contributions of each participant to a repetitive enactment disrupts its replication and serves to deactivate and suspend embedded implicit models. New implicit and explicit models, in turn, are gradually established in long-term memory on the basis of current relational experience.

Motivational pulls for growth and vitality, on the one hand, and for maintenance of psychological organization and patterns of relating, on the

other, provide the respective bases for positive and repetitive interactions in the analytic relationship. Although the term *enactment* has typically been used to refer to repetitive, problematic interactions, I differentiate between vitalizing and repetitive enactments to account for these different motivational thrusts and different processes of change (Fosshage, 1995a).

To reiterate, the first pathway to change involves repeating, again and again, new implicit and explicit experience that gradually accrues to new vitalizing implicit relational knowing. The second pathway requires explicit exploratory focus to extricate patient and analyst from the reflexive hold of repetitive enactments. The process of extrication implicitly creates new experience. Simultaneously, the new understanding enables patient and analyst to change (Slavin and Kriegman, 1998), creating, in turn, new implicit and explicit experience. The new experience is gradually logged in long-term memory when the old implicit mental models are suspended or deactivated.

To Love and to Be Loved

Fundamental experiences of love—that is, to love and to be loved—are central in development and maintenance of vitalized self-experience. Ferenczi was the first of many (Bacal and Newman, 1990; Shaw, 2003) to believe that “love is as essential to a child’s healthy growth as food” (Thompson, 1988, p. 187). To love involves a deep empathic knowing, liking, respect, caring, and tenderness for the other. To feel loved is to feel deeply understood, known, respected, affirmed, liked, cared for, and treated tenderly. With various shadings, nuances, and emotional valences, love experience ranges from parental love, to caregiver’s love, to friendship love, to romantic love (using the term *romantic love* to include, yet expand, the erotic, capturing a fuller, richer experience).

Repetitive thwarting of developmental needs for love during childhood establishes negative percepts of self and self-with-other and other implicit patterns of thinking and relating that seriously encumber cocreating experiences to love and to be loved needed throughout one’s life. In the analytic relationship, a patient often searches for developmentally needed experiences of love and, yet, constructs (perceptually, cognitively, and interactively) with expectancies of rejection. *A patient, generally speaking, enters the analytic arena with two sets of expectancies—expectancies of hope for what is needed for growth and expectancies of repetition of the problematic*

past. Reciprocally, the analyst enters the arena with his or her needs and implicit and explicit patterns of thinking and relating. With their respective subjectivities, patient and analyst interact implicitly and explicitly.

The Analyst’s Love of the Analyst

From the beginning, psychoanalysts have attempted to unravel the nature of the analyst’s love of the analyst. Whereas Freud (1915) thought that the analyst’s transference love was anchored in perceptions and feelings of the previous caretakers, he then added that this is true in “every state of being in love” (p. 168), diminishing the difference and the possibility of distinguishing between mature, healthy love and neurotic, transference-based love.

In a similar trajectory, an analyst’s love has been traditionally viewed as involving an unrealistic or defensive idealization of the analyst, that is, a remnant of primary (infantile) or secondary (defensive) narcissism. When idealization is a remnant of primary narcissism, the analytic task is to foster the analyst’s conscious awareness of his or her infantile wishes and desires for an idealized other, to enable the analyst to renounce these wishes, to grow up, to become realistic. When serving a defensive function, the analytic task is to uncover and understand what the idealization is defending against. Over the course of time, it was gradually discovered, however, that all love relationships appear to involve some form of idealization (see Bergmann, 1987). Because idealization partakes in all love relationships, then, its appearance cannot be easily rendered as a transferenceal, unrealistic, or other pathological designator in love relationships in general or in the analyst’s love of the analyst.

In an important theoretical advance that has helped us out of this conundrum, Kohut (1971) recognized a form of idealization emergent in the transference that was vitalizing and self-enhancing—what he called idealizing selfobject transference. On the basis of his clinical observations, Kohut posited a life-long need for idealized selfobject relationships and delineated a developmental line for its maturation (Kohut, 1977, 1984). Idealized selfobject relationships can range, for example, from an all powerful caretaker to an admired person who has qualities that one considers to be ideal, serving as incentives for one’s own development. Conceptualizing a type of idealization that is vitalizing, matures, and is psychologically needed throughout one’s life normalizes this selfobject form of idealization