

**LONELINESS IN THE THERAPEUTIC DIALOGUE:  
AN INTERPRETATION ACCORDING TO THE CONCEPTS  
OF WINNICOTT AND HEIDEGGER**

**By**

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## **SUMMARY**

Loneliness is ubiquitous in the life world of every human being. When the phenomenon is recognised and lived, it can be a positive experience propelling the experiencing person to growth and meaningful relations with others. However, the dread it elicits and the anxiety it engenders in a person may have as a result, a denial that leads to symptoms which can be pathological, such as severe anxiety or depression.

Concomitant with this is an inauthentic or false way of being which leads to disconnectedness from others and alienation from the self. This exacerbates the feelings of loneliness. The experiencing person will do almost anything to avoid this as is often seen in man's frenzied daily activity and intellectualisation, denying the affective part of the self.

These 'difficult to bear feelings' are often the reason for the experiencing person to seek psychotherapeutic help. The psychotherapeutic dialogue can assist the unfolding of the experience of loneliness and make that which is implicitly known to the patient more explicit. In this way loneliness and inauthentic living can be confronted and alleviated.

Because loneliness is a lived phenomenon it cannot be studied through measurement. It can only be understood as it is experienced by the person. For this reason a qualitative, descriptive-dialogic case study research design was chosen for this study.

Data for the study was obtained from one long-term psychotherapy patient who provided a rich source of information. Salient themes on the way in which the patient entered into dialogue with the therapist through various phases in the psychotherapeutic process, were extrapolated. These themes were discussed according to some of Winnicott's and Heidegger's concepts, representing the object relations and phenomenological paradigms, respectively. To facilitate the movement from Heidegger's fundamental ontology to an ontic- psychological discourse, relevant concepts from Buber and Binswanger were used.

The problems engendered by the denial of loneliness and an inauthentic or false way of being is aptly illustrated in the case in question. Although the understanding and verbalisation of loneliness is painful, it also brings relief. The therapeutic alliance makes the

phenomenon in question more accessible to the patient and therefore, makes it a positive experience rather than a ground for dread and anxiety.

Loneliness must be confronted and lived. The alleviation of it is only possible through meaningful relationships with others. To have meaningful relationships, where separateness and mutuality are the essence, one must live in a true and authentic manner.

**Key words**

Loneliness

Inauthentic Self

Authentic Self

True Self

False Self

Heidegger

Winnicott

Object relations and existential philosophy

Psychotherapy

Qualitative research

## OPSOMMING

Eensaamheid is alomteenwoordig in die leefwereld van elke mens. Indien die fenomeen herken word en deel is van die persoon se bestaan kan dit as positief gesien word. Dit kan die persoon voortdrywe na persoonlike groei en gesonde interpersoonlike verhoudings. Indien dit egter ontken word as gevolg van die angs en vrees wat dit voortbring, kan dit negatiewe gevolge hê en presenteer as patologiese gevoelens van angs en depressie.

Gepaardgaande hiermee is 'n onegte, false leefwyse wat lei tot a gevoel van vervreemding van die self en 'n afbreking van verhoudings met ander. Dit het tot gevolg 'n verskerping van die gevoel van eensaamheid. Die persoon wat hierdie gevoelens ervaar sal enige iets doen om dit te vermy. Dit word gesien in dolsinnige daaglikse aktiwiteite of 'n afstomping van die persoon se gevoelslewe deur middel van intellektualisering

Hierdie ondraaglike gevoelens is dikwels daarvoor verantwoordelik dat die persoon vir psigoterapeutiese hulp aanklop. Die psigoterapeutiese dialoog is dikwels die bemiddelaar om hierdie gevoelens wat gewoonlik onuitgesproke is, tot uitdrukking te bring. Deur middel van hierdie proses kan eensaamheid en die vervreemding van self gekonfronteer en meer draagbaar gemaak word.

Synde eensaamheid 'n geleefde fenomeen is, is dit nie as sodanig kwantifiseerbaar en meetbaar nie. Dit kan slegs verstaan word deur te kyk na hoe die mens dit beleef. Daarom is 'n kwalitatiewe, beskrywend-dialogiese gevallestudie as navorsingsmetode vir hierdie studie gebruik.

'n Ryk data basis is vir die doel van hierdie studie uit die notas van 'n psigoterapie met een langtermyn patient verkry. Hooftemas oor die wyse waarop die patient met die terapeut in dialoog getree het, tydens verskillende fases van die psigoterapeutiese proses, is onttrek en bespreek. Hierdie temas is volgens sommige konsepte van Winnicott en Heidegger, wat onderskeidelik die objekrelasies en fenomenologiese paradigmas verteenwoordig, bespreek. Om die oorgang vanaf Heidegger se fundamentele ontologie na 'n ontologiesielkundige diskoers te vergemaklik, is gebruik gemaak van relevante konsepte van Binswanger en Buber.

Die gevallestudie illustreer duidelik die probleme wat ontstaan wanneer gevoelens van eensaamheid ontken word en die persoon op 'n false manier lewe. Dit bring ook duidelik na vore die verligting wat die verstaan en verwoording daarvan meebring. Deur die psigoterapeutiese proses is dit moontlik om die fenomene wat ondersoek word meer toeganklik vir die patient te maak. Sodoende word die gevreesde gevoelens omskep in 'n meer positiewe ervaring.

Eensaamheid moet gekonfronteer en beleef word. Versagting van die gevoel van eensaamheid kan slegs daargestel word deur betekenisvolle verhoudings met ander. Betekenisvolle verhoudings waarin die persoon homself en ander as unieke individue ervaar en sodoende die pad oopmaak vir wedersydse aanvaarding, alleenlik moontlik indien mens jou ware self ken en op 'n egte manier leef.

### **Sleutelwoorde**

Eensaamheid

Onegte Self

Egte Self

Ware Self

Vals Self

Heidegger

Winnicott

Objekrelasies en eksistensiële filosofie

Psigoterapie

Kwalitatiewe navorsing

## **NOTE ON THE USE OF GENDER SENSITIVE TERMS**

For the sake of simplicity the masculine pronoun will be used throughout the study, with exception of the case study itself. This does not imply any gender discrimination.

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## CHAPTER 1

### INTRODUCTION

#### 1.1 AIM OF THE STUDY

The aim of the study is to describe how the experience of loneliness unfolds in the context of the psychotherapeutic dialogue. And how this is related to moving, from an inauthentic/False way of being to a more authentic/True way of being, as a person's loneliness becomes more accessible to him. Although the context of the study is psychotherapy, the aim is not to describe or evaluate the *therapeutic process* from any specific theoretical orientation. The aim is rather to explicate the *meaning of loneliness as experienced by a patient* in the light of, firstly, the phenomenological perspective as represented by Heidegger and, secondly, object relations theory as represented by Winnicott.

It is not the aim of the study to integrate the above two perspectives in a meta-theoretical model, but to compare them, to determine whether there are points of convergence and divergence between them, and how they relate to loneliness. Such a comparison could deepen one's theoretical understanding of the ground and nature of these two approaches. The extent to which they both can be applied to the factuality of experiences, such as loneliness (see below), will enhance one's understanding of being human.

Furthermore, it is not intended to compare the views of Heidegger and Winnicott in their entirety. Rather, attention will be given to specific concepts represented in their work, including man's situatedness in the world, his relationships with other people, authentic/true and inauthentic/false ways of being, facticity and temporality. The meaning of these concepts, and the rationale for choosing them, as well as the motivation for focussing on Heidegger and Winnicott, will be discussed later in this chapter and in Chapters Three and Four. In the present chapter, brief reference will be made to the legitimacy of comparing Heidegger's fundamental ontology with Winnicott's object relations theory, and this will be discussed in greater detail in Chapter Five.

In addition to Heidegger, Buber's philosophy will be discussed, to facilitate the move from Heidegger's fundamental ontology to a discussion on an ontic-psychological level. In this regard, where appropriate, concepts from the work of Binswanger and other persons associated with the existentialist and phenomenological movements will be used.<sup>1</sup>

## 1.2 RATIONALE OF THE STUDY

Loneliness is an existential given. It is a fundamental human trait and characteristic. It is part of being human, yet often ignored. One of the reasons why researchers avoid it, is that it has, as a characteristic, the ability to evoke anxiety, and a fear of being tainted with the experience of loneliness (Fromm-Reichmann, 1959). Therefore, it is a condition often euphemistically referred to as depression. Loneliness, however, must be differentiated from depression. When one is lonely, one seeks to rid yourself of this unpleasant experience by re-establishing relationships, while depression leads to apathy and withdrawal from others (Weiss, 1973). Seligson (1983) claims that the scientific community is all too willing to label loneliness a social or philosophical problem rather than a psychological issue.

The experience of loneliness and its importance for psychology and the psychotherapeutic process need to be recognised and confronted. This is confirmed by Rogers (1990: 215) when he quotes Ellen West's words: "I scream but they do not hear me". He stresses the importance of communicating with the 'real self' of the patient in the therapeutic alliance when he states:

"In the therapeutic relationship, where all of herself was accepted, she could discover that it was safe to communicate her self more completely. She could discover that she did not need to be lonely and isolated - that another could understand and share the meaning of her experience. She could discover too that in this process she had made friends with herself - that her body, her feelings and her desires, were not enemy aliens, but necessary and constructive

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<sup>1</sup> This creates a terminological dilemma. As will be discussed in Chapter 5, Heidegger was an ontologist, he dissociated himself from being referred to as an existentialist, and used a hermeneutic phenomenological method. Other authors who will be used in this study, and who are associated with existentialism and phenomenology, such as Buber and Binswanger, were not primarily concerned with ontology. For the sake of simplicity, the term existential-phenomenological will be used with full recognition of Heidegger's position in this regard.

parts of herself. It would be unnecessary for her to utter those desperate words, 'I am perishing in the struggle against my nature'." (Rogers, 1990: 217).

This statement encompasses the core of this study.

Modern, technocratic Western society is a fertile breeding ground for the experience of loneliness and alienation from the self. The emphasis is on intellectualisation and rational thought which alienates one from one's affective experience. Achievement, possessions and status rule the day. Humanness is lost. People today are in a crisis, they are strangers in the world. Man has become problematic to himself as never before (Fromm, 1993; Kruger, 1988). According to Irma Kurtz (1983), loneliness serves contemporary unhappiness and neuroses just as cancer serves contemporary death.

Concomitant with loneliness is alienation from the self, and since existence is co-existence, it implies at the same time disconnectedness from others. According to Leiderman (1969) disconnectedness and longing are two necessary conditions for loneliness.

Many people entering the consulting room of the psychotherapist experience disconnectedness from others and from the self. This inability to enter into, or to maintain meaningful relationships, where genuine mutuality exists, is a source of severe distress. It may manifest, as Quinodos (1993) postulated, in depression and other pathologies.

This study will illustrate how the patient's experience of her loneliness unfolded in the course of psychotherapy, to where it could be verbalised. Although it was a painful experience, it also offered relief and tempered her feelings of disconnectedness. A careful analysis of how the phenomenon is experienced can be of value in bringing about a deeper understanding of what modern man is experiencing, when he feels utterly alone. As Erlich (1998: 138) states:

"A better understanding of loneliness should help us to both deepen our theoretical grasp of relatedness and to expand our technical facility in working with these patients."

## **1.3 THEORETICAL FRAMEWORK**

### **1.3.1 Overview**

As theoretical background an overview of the various perspectives and views on loneliness will be given. To explicate the case study, which will be discussed in Chapter Seven, the existential-phenomenological perspective as well as an object relations perspective will be used. A comparison of the divergence and convergence of these two approaches with regard to the understanding of loneliness will be done.

The existential-phenomenological paradigm is included because it provides a unique and specific portrayal of the psychological predicament of contemporary Western man and the underlying reality of human beings in crisis (Gunzberg, 1997; Schneider & May, 1995). Martin Heidegger's views, Martin Buber's philosophy and Binswanger's existential analytic approach will represent the existential-phenomenological paradigm. The reasons why this study focuses on the work of Heidegger, Buber and Binswanger are given in paragraphs 1.3.3 and 1.3.5.

The object relations paradigm is included to understand man's relatedness to others and to himself. It explains how the undifferentiated infant emerges as a unique person, through its interaction with primary caregivers. It gives credence to both normal and abnormal development (Ivey, 1990). Donald Winnicott's theory within the object relations paradigm will be used to enhance the understanding of the development of the self. The reasons why this study focuses on the work of Winnicott are given in paragraphs 1.3.4. and 1.3.5.

Although the above mentioned paradigms view a person's life-world from different perspectives, they are in agreement that man develops and lives in his world with other's. The convergence and divergence of Heidegger, Buber, Binswanger and Winnicott's views will be discussed in Chapter Five.



### 1.3.2 Loneliness: An Overview

The literature reviewed to which both philosophy and psychology contributed, was vast. This will be reported in detail in Chapter Two. The main controversies seem to be whether man is lonelier in modern Western technocratic society, and whether loneliness is experienced on various dimensions.

The first school of thought holds that man has become problematic to himself as never before. People are in emotional turmoil if one considers the increase in the rate of depression and anxiety disorders in Western society. Although it is agreed that loneliness is an existential truth, many authors (for example, Buber, 1958; Fromm, 1993; Kruger, 1988; Moustakas, 1961; Rogers, 1990; Van Den Berg, 1972; Wright, 1995) hold the view that loneliness is exacerbated by man's modern way of living. They claim that loneliness and self-estrangement are common in modern life due to the emphasis on intellectualisation and rational thought, conformity, power and status. Man has lost touch with his affective experience and in doing so creates a distance between himself and others, himself and his world and his own true self. The way to alleviate this terror of isolation seems to be in becoming what man really wants to be: a feeling, loving, caring human being, in relationships which confirm him.

Mijoskovic (1979) and Erlich (1998), amongst others, argue the point that man's loneliness in modern society is due to alienation. They hold the view that human beings are intrinsically alone and in a continuous struggle in an attempt to alleviate their loneliness. Loneliness and disconnectedness, are according to them, part of human relatedness.

Another controversy is whether man experiences, as Sadler (1978) and Rokach (1987) postulate, loneliness on different dimensions, for example on an interpersonal dimension, cosmic dimension and others. This is a difficult question to answer because these dimensions are enmeshed and the one often presupposes the other. However, in this study an overview of these dimensions will be given for the sake of clarity. These dimensions will be discussed in Chapter Two.

### **1.3.3 Existential-Phenomenological Paradigm: Martin Heidegger, Martin Buber and Ludwig Binswanger**

Heidegger's philosophy emphasises holism and he is unrelenting in his attack on traditional dichotomies. He gave philosophy and psychology an important view of man and his world. He was discerning in his analysis of the ills of our age, and brought Western science and modern technology under scrutiny (Dreyfus & Hall, 1995; Inwood, 1997).

Heidegger did not develop a philosophical anthropology, he was not a psychologist, he resisted being labelled an existentialist and was also hesitant, especially in his later works, to use the term phenomenology (Spiegelberg, 1971). His philosophy nevertheless laid important ground for existentialism and has had an important influence on psychology (Chessick, 1986; Mills, 1997; Solomon, 1988). The legitimacy of using his fundamental ontological concepts in the context of psychology, will be discussed in Chapter Five.

His philosophy is voluminous, and it is not within the scope of this study to discuss it in its entirety. Therefore only those aspects salient to the phenomenon under investigation, namely loneliness, will be examined. These will include his views on Being-in-the-world, authentic/inauthentic way of being, facticity and temporality. Binswanger was influenced by Heidegger and applied several of the latter's views in his existential analyses. His work provides a useful bridge between Heidegger's fundamental ontology and psychology, and will be discussed as such.

Buber as a philosopher, educator and humanitarian was poignantly aware of the breakdown in relationships in the modern, technocratic world. For him individualism and the de-emphasis of the interrelatedness of being human, result in distancing between person and person, which leads to isolation. He does not only accentuate the split between persons, and the split within their own psyches, but also the split between people and nature. (Hyckner, 1991). His philosophy is one of hope, the emphasis being that every individual has the capacity for meaningful relationships and true mutuality.

This study focuses on the disconnectedness of people to their world and to themselves. Buber's views assist in the understanding of how loneliness can be alleviated.

#### **1.3.4 Winnicott and the Development of the Self**

Within the object relations theory, Winnicott's (1960/1984a) compelling interpretation of the development of the self, out of its relational matrix, is relevant to this study.

According to Winnicott the processes leading to the development or inhibition of the self are seen and understood solely in the context of the child and the environmental provisions supplied by significant others. Winnicott was convinced of the fundamental importance of external reality and its violating impingements on the infant's perception of the world (Greenberg & Mitchel, 1983; Khan, 1975/1992).

Several of his ideas are focal points in this study. The following concepts, postulated by him, will be addressed: the interrelatedness of the individual and his environment; the holding environment; the cohesion of the psyche and the soma; the True and False Self; transitional space; and object usage.

#### **1.3.5 Rationale for comparing Heidegger and Winnicott**

Is it legitimate to compare concepts from such diverse orientations, as Heidegger's philosophy and Winnicott's theory of object relations? Not only does the aim of their work differ, but also the methods they used. Heidegger was in search of the fundamental ontological structure of Dasein, with the view to understand the essence and meaning of Being, and he used a hermeneutic phenomenological method (Spiegelberg, 1971). Winnicott (1960/1984a) aimed to understand the development of a person in terms of its relational matrix, and developed his theory on the basis of his observations of the interactions between people as well as his patients' experiences in the consulting room. Although an ontological discourse must be distinguished from an ontic discourse (for example, psychology), they are both concerned with the understanding of human beings. One is an account of the basic structure of the other (Gendlin, 1988). In this regard, it may be meaningful to compare how Heidegger and Winnicott viewed man, and how their views converge and diverge, but with full understanding and acknowledgement of the differences between them. (Whether a transition from Heidegger's fundamental ontology to an ontic

discourse about the lives and experiences of individuals is possible, will be addressed in Chapter Five).

This is not the first time Heidegger's work is interpreted within a psychological framework. In the psychological literature, various attempts have been made to use Heidegger's fundamental ontology, in a psychological-ontical discourse. Examples of this include the work of Chessick (1986), Gendlin (1988), Kruger (1988) and Mills (1997).

There could be potential points of convergence between the views of Heidegger and Winnicott. A possible convergence concerns solipsism and dualism. Depth or psychodynamic psychology, in all its varied manifestations, is situated in a solipsistic view of man. "Die mens is hiervolgens 'n afgekapselde wese. Hy is tot homself ingekeer. Daar is versperrings tussen hom en enigiets buite hom" (Preller, 1977: 138). Preller discusses the development of solipsism in Western thought and specifically in psychology. He illustrates how there was a progressive movement in psychology from the early dualism and solipsism inherent in classical psychoanalysis, with its emphasis on the subjective inner world, to greater recognition of man's relationships with his environment in the later proponents of depth or psychodynamic psychology.

It was only through the influence of phenomenology, that psychology obtained an opportunity to free itself fully from solipsism. The most fundamental contribution in this regard came from the work of Heidegger (1927/1980). For him, the essence of man is in his relationship with his world. However, this must not be interpreted that man first exists and then relates to people and things in his environment. The word "relationship" is in fact not really appropriate. Man is, in the most original and essential sense, already in the world. Man is not '*vorhanden*', a thing between things, but *ex-ists*. This being-in-the-world is reflected in Heidegger's description of *Dasein* as '*In-der-Welt-sein*'. Man cannot be, without being in a meaningful world (Heidegger, 1927/1980; Preller, 1977).

Where does Winnicott stand with regard to dualism and solipsism? As one of the representatives of the later psychodynamic movement, his theory is essentially a relational theory, in that he emphasises the relationships between people. Despite Winnicott's claims of continuity and alliance to the work of Klein and Freud, his work resides solidly within a

relational/structural model (Greenberg & Mitchell, 1983). Mills (1997) argues that there is convergence between certain concepts of Winnicott and Heidegger, including that Winnicott, like Heidegger, negated a subject-object dichotomy. "Like Heidegger's hermeneutical treatment of Dasein's existential ontology, Winnicott has obviated the subject-object dichotomy in regards to the ontical structures of the self. The maternal holding environment is part of the very ontic structure of Dasein – it is constitutive of Dasein's Being" (Mills, 1997: 52).

Another potential convergence between Heidegger and Winnicott is related to Heidegger's concept "*Mitsein*" – that it belongs to the ontological structure of Dasein as Being that it is always with other people. Winnicott, and object relations theory in a broader sense, also emphasise man's relationships with other people. Whether there is, in this regard, convergence between these approaches, is related to the broader question already referred to above, namely whether it is possible to interpret a factual situation in terms of the ground structures of Being.

There might also be a relationship between Heidegger's views on authenticity and inauthenticity, on the one hand, and Winnicott's views on the True and False Self. According to Heidegger (1927/1980; Mills, 1997), authenticity is the process of becoming one's possibilities, whereas inauthenticity involves losing oneself in an anonymous mass, '*das Man*'. For Winnicott (1967/1986) the True Self is the vital core of the personality, whereas the False Self is an illusion of a personal existence based on compliant adaptation to external demands and expectations, rather than an expression of the real self. Accordingly, Mills (1997) endeavours to link inauthenticity (Heidegger) and the False self (Winnicott).

Heidegger (1927/1980) states that Dasein is thrust into the world at a certain time and place, in an environment over which he has no choice. This, being situated, delineates man's choices and creates his possibilities. In a related context, Winnicott (1960/1984a) emphasises that the infant is born into a holding environment and says that "Human infants cannot start to be except under certain conditions" (Winnicott, 1960/1984a: 43). The infant's development is inextricably linked to this environment, especially maternal care, which facilitates or hinders the development of its potential.

Winnicott (1963/1984a) views the development of a sense of time, and an integrated self, with a past, present, and future as important developmental tasks. According to Heidegger (1927/1980), Being depends on all three dimensions of temporality, past, future and present. Dasein's past happens out of its future, the past is in the present, which is the way it is appearing now. In the views of both Heidegger and Winnicott, there is a convergence of past, present and future.

The above potential points of convergence will be discussed in greater detail in the rest of this thesis.

#### **1.4 OVERVIEW OF THE RESEARCH METHOD**

For the purpose of this study, the lived experience of loneliness and alienation of the self, as evidenced during psychotherapy, will be researched qualitatively. The phenomena under investigation cannot be quantified or constructed in a controlled setting. Therefore the qualitative research method is appropriate, as it remains faithful to the human phenomenon as it is lived.

A descriptive-dialogic case study research method was applied. A detailed description of the method is presented in Chapter Six. One long-term psychotherapy patient was used as subject. Extensive case notes were made during the course of four years of psychotherapy, and these provide a rich data source. According to Kruger (1988), one of the criteria for selecting participants in qualitative research deals with the extent to which the particular person elucidates the phenomenon under investigation. As will become evident in the study, a central theme in the dialogue with the patient was her loneliness and her disconnectedness from others, herself and her world.

The study contains four basic components according to Edwards' (1993) guidelines for conducting case studies. These components are: existing theoretical frameworks within which the case material is to be understood; identification of the case study against the background of these theoretical frameworks; careful and systematic description of the

person's experience; and finally an analysis and discussion of the case material in view of the above theoretical frameworks and the aim of the study.

## **1.5 CONCLUSION**

The importance of the experience of loneliness and the implications thereof for the psychotherapeutic process cannot be denied. This study will concentrate on how it was experienced by the patient in the consulting room through the psychotherapeutic dialogue.

An overview of the literature on loneliness reviewed will be given in the following chapter.

## **CHAPTER 2**

### **LITERATURE REVIEW ON LONELINESS**

#### **2.1 INTRODUCTION**

This chapter will provide a literature overview of the phenomenon of loneliness and will include a discussion of its various dimensions. Different thoughts and perspectives will be dealt with. Special reference will be made as to how loneliness is seen in the context of modern Western technocratic society.

#### **2.2 THE EXPERIENCE OF LONELINESS**

Whether it is acknowledged or not, every human being experiences loneliness. Loneliness does not discriminate between the rich and the poor, the prostitute and the priest, the child and the adult. It is inside one and outside. It is not a disease, nor pathology in itself, but a human reality. All people contain their own loneliness as they experience it and they contribute to the loneliness of others. Moustakas (1972) views loneliness as a positive experience as it affirms a person's identity, and enables him to take steps towards a new life. Klein (1963) also holds that loneliness, when experienced, becomes a stimulus towards object relations. However, when the denial of loneliness is used as a defence, it interferes with good object relations.

Loneliness, it would seem, becomes pathological when one attempts to avoid it through one's own frenzied daily activities. The modern Western technocratic society is well equipped in assisting one in one's alienation from self, others and the world. According to Kruger (1988) man has become problematic to himself as never before. The fact that man is in despair, due to the loneliness and emptiness he is experiencing, is not a novel idea. "Man's dislodgement from a meaningful relation to the world was accurately prognosticated in the nineteenth century and has grown considerably deeper in the twentieth" (Kruger, 1988: 1).



Man's crisis is further stressed by Wright (1995). He reports that the rate of depression has been doubling in certain industrial countries every ten years. Suicide is the third most common form of death among young adults in North America. Fifteen percent of Americans have a clinical anxiety disorder. Irma Kurtz (1983) states that just as cancer serves contemporary death, so loneliness serves contemporary unhappiness and neuroses.

This is a clear indication that people today are in emotional trouble. They are strangers in the world. They do not understand their world or others in the world with them. They are torn between being alienated individuals in a technocratic society, and what they crave to be, namely, feeling, loving, caring human beings in relationships which confirm them as such. Rogers (1990) in his discussion of the case of Ellen West, claims that people experience more loneliness and isolation today than in earlier times. According to him, the loneliness seen today is as a result of two elements, namely: an estrangement of man from himself, "and the lack of any relationship in which we communicate our real experiencing - and hence our real self - to another" (Rogers, 1990: 210).

Mijoskovic (1979) disagrees with this view that man's loneliness in modern society is due to the alienation caused thereby. He postulates that man is intrinsically alone and is in a continuous state of attempting to escape the solipsistic prison of his frightening solitude. According to him man has always been acutely alone and can never fully share his consciousness with others. May and Yalom (1984: 369) explain:

"Existential isolation is a fundamental isolation from other individuals, and from the world as well... No matter how closely we relate to another individual there remains a final unbridgeable gap. Each of us enters existence alone and must depart from it alone."

Erich (1998: 138) agrees with them and claims that "Loneliness is the other side of the Janusian face of relatedness... man's loneliness, no less than his relatedness, is an inherent part of his humanness". Klein (1963) refers to an inner sense of loneliness, that one can be alone, even in the presence of friends. She claims that this is due to "an ubiquitous yearning for an unattainable perfect internal state" (Klein, 1963: 300).

Agreement exists that loneliness is not a modern phenomenon. However, it can be said that modern Western society frustrates man's ability to alleviate his loneliness and alienation. The emphasis on intellectualisation and rational thought estranges one from one's own emotional experience, and therefore from oneself and from others. As Kurtz (1983: 107) states: "We are born into a threatening crowded jungle, where we must instruct our children never to talk to strangers..., then to whom can we talk? Who will be our fellows?"

Moustakas (1961) poses many questions that need to be answered. He asks why it is that modern man yearns for relatedness to others, but is unable to experience it? Why is it not possible for people to be honest and direct in their meeting with others? Why is self-estrangement and loneliness so common in modern life? Why is loneliness anxiety such a widespread condition in contemporary society?

Perhaps his considerations on loneliness can assist in this predicament. He sees loneliness in modern Western society in two ways: the existential loneliness experienced as an inevitable part of being human and the loneliness of self-alienation and self-rejection, which is, according to him, not loneliness per se, but a loneliness anxiety. This loneliness, according to him, stems from "a fundamental breach between what one is, and what one pretends to be, a basic alienation between man and man and between man and his nature" (Moustakas, 1961: 24).

Fromm (1993) concurs with Moustakas when he says that man is a "mass man", highly socialised but very lonely. Modern man is alienated from others and confronted with a dilemma. He is afraid of contact with others and equally afraid to have no contact. He adds that the danger of intellectualisation is all the greater today. Fromm (1993) ascribes this to the prevailing alienation from one's own affective experience which leads to an almost totally intellectual approach to oneself and to the rest of the world.

Moustakas (1961: 24) explains it as follows:

"Insidious fears of loneliness exist everywhere, nourished and fed by a sense of values and standards, by a way of life, which centers on acquisition control. The emphasis on conformity, directions, imitation, being like others, striving power and status, increasingly alienates man from himself. The search for safety, order

and lack of anxiety, through prediction and mastery arouses inward feelings of despair and fears of loneliness. Unable to experience life in a genuine way, unable to relate authentically to his own nature and other selves, the individual in Western culture suffers from a dread of nothingness."

It seems as if man is lost to himself and to others. He has lost his sense of neighbourliness and community life. He is an individual, but not a unique individual separate from others. He is tied to others through conformity, competitiveness and a solipsistic view of man.

Gaev (1976) affirms loneliness as both an existential truth, a part of being human, and a loneliness that becomes chronic and pathological when we are unable to form close relationships with others. The question that needs to be asked is: what does relating to others in a meaningful way entail?

Buber (1958: 11) holds that "all real living is meeting." There are two fundamental ways of meeting. The other person can be met as a Thou, as the unique person he or she is, or as an It, as something to be used. Buber's sole purpose was an attempt to ground the meaning of human existence in the sphere of concrete human relations (Brice, 1984). May (in Schneider & May 1995) concurs that the possibility of acceptance by, and trust for another, is essential for an "I am" experience; and human nature contains the potential to establish loving, sharing connection with others.

In Buber's I-Thou meeting there is genuine mutuality. The other person is separate and unique. The person is confirmed as a person with whom "I" share a world. Although they are separate people they are joined in a partnership in the world (Brice, 1984). Quinodos (1993) agrees with Buber's view when he claims that one becomes aware that one is unique, that the other is unique and that one's relationship with oneself and with others assumes infinite worth. This is aptly illustrated in the Little Prince when he says that his fox was just like a hundred other foxes "but I made him my friend and now he is unique in the world" (Saint-Exupery, 1944/1995: 83).

According to Sadler (1978) loneliness in the modern Western world is becoming a problem not only because there are so many new occasions for its occurrence, but also because people will probably experience it on many dimensions. This is a controversial perspective,

as many authors see loneliness as an existential truth. However, for the sake of clarity, an outline of the dimensions of loneliness, as postulated by various authors, with different theoretical approaches, will be given next. It must be emphasised that these dimensions are often difficult to distinguish from one another, and one may presuppose the other. There is thus no definitive experience of loneliness on one dimension only.

## **2.3 DIMENSIONS OF LONELINESS**

### **2.3.1 The Interpersonal Dimension of Loneliness**

This is the most recognised form of loneliness and often the only one given acknowledgement. It is the feeling of being separated from those one cares for, of being abandoned or isolated from significant others. People seen in the psychologist's consulting room often testify that they fear being alone and of having inadequate interpersonal relationships. Their "cry" speaks of feelings of rejection, abandonment and being cut off from fellow human beings. All these could constitute despair for the experiencing person, as interpersonal relations are of the utmost importance to all human beings. It is within a relationship of mutuality that one is confirmed as the unique person one is (Boss, 1994; Buber, 1958; Sadler, 1969,1978; Sullivan, 1953). Even Mijoskovic (1979), with his almost negative view on loneliness, states that true interpersonal dialogue is the only way to temporarily alleviate loneliness.

For Weiss (1973) loneliness is related to the need for human intimacy. He differs from the existential view, in that for him, loneliness is not an integral and fundamental part of being human, but rather a response to a relational deficit. The person experiences a restlessness, which forces him to look for closeness and intimacy, which he experiences as absent. He postulates two kinds of loneliness: the loneliness of emotional isolation due to the loss of a close emotional attachment; and the loneliness precipitated by the absence of an engaging social network. This will be discussed under the social dimension of loneliness.

Gaev (1976: 10) concurs with Weiss when she speaks of emotional loneliness as "a general feeling of sadness and longing that we feel when our need for closeness with significant

others is frustrated." She uses as an example marital relations that do not include intimacy, as a common cause of emotional loneliness in modern society.

Parkes (1973) sees separation anxiety as one of the main components of loneliness. This loss is constituted by the abandonment felt by the orphan, the despair due to divorce, and the agony experienced by the death of a loved one.

Weiss (1973) disagrees with Parkes when he differentiates loneliness from depression and grief. He claims that when one is lonely, one is driven to rid oneself of this unpleasant experience by integrating into new relationships or regaining lost ones, while depression leads to apathy and withdrawal from others. Seligson (1983: 33) on the other hand, states that: "Unlike the depressive, the lonely individual reaches out but can never communicate and, consequently, never quell the longing." Weiss (1973) adds that in grief other emotions seem to form part of it, such as sadness, anger, and shock. He claims that this is not the case with loneliness.

The views of Parkes and Gaev on the one hand, and Seligson and Weiss on the other hand as described above, differ in terms of whether loneliness is a separate, definable experience, or whether it is related to, or even expressed through, other emotions. It might be possible that loneliness may manifest itself in many different emotions that may be more accessible to the individual than the experience of loneliness. For example, depression can be a result of loneliness if it is not understood and confronted. People generally do almost anything rather than to admit that they are lonely, and their frantic daily activities attest to this. To be alone is shameful. It attacks one's self esteem. One feels that people see one as not "good enough" when one is alone: that others do not want to be with one and therefore something within one is lacking.

The interpersonal dimension and the social dimension of loneliness are closely linked to each other, and are difficult to distinguish. The social dimension, however, elucidates additional facets of loneliness, and this is discussed next.

### **2.3.2 The Social Dimension of Loneliness**

In societies where the social bond is of great value, one of the worst forms of punishment and cause for loneliness is ostracism or exile or being excluded (Schneider & May, 1995).

This type of isolation and abandonment is aptly described in the myth of Prometheus. He was cast out by Zeus as punishment for stealing fire. He was chained to a cliff where he spent many years in total abandonment. He needed a fellow human to rescue him, a half god, from despair (Schwab, 1974). This symbolises how important it must be for "mere mortals" to belong. Even in individualistic societies a sense of not belonging to a group significant to one, can be very painful. One of the worst forms of punishment that can be inflicted is that of solitary confinement. Children are punished by sending them to their rooms, to be alone. In doing so, they are taught that being alone is not solitude, which can be creative, but only an unpleasant experience to be avoided at all costs.

Gaev (1976) views a lack of belongingness as the cause of social loneliness. This is the loneliness referred to as alienation, and may be as a result of pathological barriers within the person, or a social pathology within society. Modern technology is associated with this. Although it has brought people "closer" to one another, it has also alienated them. One need only to consider ways of communicating: the telephone, the internet, e-mail and other forms of communication. There is no need for direct human contact, and in this sense technology hampers "real meeting".

Becker (1974) refers to a social\environmental dimension which refers to the loneliness caused by ways of life which separate people from one another. Social psychologists speak of the 'cut-offness' and solitariness of civilised man. In a related context Kierkegaard used the term "shut-upness" (Matthews, 1996). This solitude is not the same as the state of being through which creativity arises. It lies more at the heart of Western technocratic culture.

### **2.3.3 The Cultural Dimension of Loneliness**

The cultural and social dimensions of loneliness are closely linked. Cultural dislocation or alienation is a significant factor in modern life and in the experience of loneliness. In the

South African context, it is associated with westernisation and urbanisation, which implies that people have to forfeit aspects of their culture in order to survive, without the new culture having a clear or enduring shape. Bührmann (1984: 100), in her study into Xhosa indigenous healers, explains the African continent's dilemma as follows:

".. because of the extreme pressure on its Black inhabitants to develop a Western-orientated society, a Western type of ego-consciousness with Western goals and measures of achievement, they also now have difficulty in listening to the ancestors, and even more important, understanding their messages. This leads to anxiety, confusion and a search for identity."

Rolheiser (1979) calls it a rootlessness-loneliness characterised by having no roots or meaningful grounding in a tradition. A detailed consideration of this aspect is beyond the scope of this study. Suffice it to say that the collapse of traditions brings a sense of desolation and a person will often use self-destructive means to alleviate this (Schneider & May, 1995).

Becker (1974) talks of maturational loneliness. Whereas previously, for example, ethnic groups had rituals to launch the adolescent on his road to maturity, performing these rituals has declined. In Western culture there is no clearly defined way for the adolescent to find his own identity and he can thus be plunged into an abyss of feelings of worthlessness and futility.

#### **2.3.4 The Cosmic Dimension of Loneliness**

The cosmic dimension of loneliness refers to a person's awareness of himself in relation to the universe and/or to some ultimate source of meaning, or God. When one feels out of touch with the universal order and/or God the feeling of loneliness increases. Parry (1993) claims that in the Western world God has become increasingly marginalised; there is less need of God to explain the unexplainable. Mijoskovic (1979), on the other hand, states that people invented God in order to alleviate loneliness.

Another facet of the cosmic dimension of loneliness is death. Death, the great inescapable of human life, has been made commonplace, instead of inescapable, through killings featured in the news and in entertainment (Parry, 1993). According to Heidegger

(1927/1980) one's attitude towards death pervades and shapes one's whole life. It can be assumed that in making death commonplace man distances himself from his own death and therefore from the realisation that he is finite.

Becker (1974) adds a further aspect to this dimension of loneliness with, what he refers to as, the loneliness of individuation. According to him this kind of loneliness emerges when one has achieved everything in life one has set out to do, and one suddenly realises that one's achievements "ring hollow". The rewards are not what one thought they would be. The sense of achievement is no longer satisfactory. This is experienced in the consulting room when "successful" people question the meaning of life and express feelings of emptiness. Eigen (1996) claims that many people seek help because they feel dead. They have a sense of inner deadness which may persist even in an otherwise full and meaningful life.

### **2.3.5 Physical Loneliness**

Maurice Merleau-Ponty (1962) gives a forceful account of man's relatedness to his world through his body. His ideas centre on the body-subject as the means of man's access to the world of perception, which in turn allows for access to his life-world. Perception is thus a bodily event, man perceives through his body and the body is the subject of perception. According to him perception of another person involves co-existence and an assessment of a certain intention in the other person. This does not only involve external stimuli but relies heavily on a pre-established relation to others prior to a particular perspective. It has its root in man's whole psychological past. Merleau-Ponty calls this integration of the psychological and the physical, the ambiguity of existence. He further claims that others must be experienced in order to exist for the experiencing person. This implies that one cannot experience the other if one is alienated from one's own body. The body must grasp that which is offered by the world. Man's alienation from his body will cast him into a solipsistic realm of existence, and hence he cannot be essentially open, to live with others, in a common world. It can be postulated that the dreaded experience of loneliness will ensue.

The above is related to the need for physical contact with others. When human closeness and touch is lost, physical loneliness is the outcome. According to Gaev (1976), the divorced or bereaved often experience this kind of loneliness. When a person has been part of a



union where this need was met, it can result in acute pain of physical loneliness when this relationship is altered or severed. It can, however, be postulated that even within an ongoing relationship this need for intimacy may be unfulfilled and be part of the cause of loneliness and despair.

### **2.3.6 Loneliness and Psychopathology**

Erich (1998) claims that in the scope of difficult-to-bear feelings of those who seek psychological treatment, loneliness has its own stellar position. He states that it differs from other central human emotions, in both quality and implication, and is pervasive in those who seek psychological help. Seligson (1983) holds the same view when she claims that loneliness should be seen as a separate diagnostic category. According to her it is often perceived as depression, but whereas the primary affect of depression is anger, in loneliness it is longing.

Becker (1974) speaks of developmental loneliness which results from a deprivation of fulfilling relationships with important others during development. He views this as a neurotic loneliness. The individual's object becomes his all and he has little capacity to tolerate himself, unless he is continually immersed in others. He fears losing others, as he fears losing his whole world, since he is so dependent on others to validate him or to fulfil his needs. These individuals have problems in their capacity to love others or even to really love themselves. Social critic Christopher Lasch has said that "ours is an age of narcissism" (Wolfe, 1978: 55).

Gaev (1976) speaks of the loneliness of the inner self. This is defined as a feeling of inner void, a detachment from one's self. Sadler (1978) refers to the inability of a person to have a relationship with the self or to endure solitude. This self-estrangement is the ground for anxiety and despair according to Kiekegaard, Freud and others (Schneider & May, 1995; Weston 1994). Here loneliness is constituted by a perceived separation from that which one regards to be a total integrated self. This aspect is dealt with in more detail under the object relations view of loneliness.

The loneliness of psychosis or mental illness must be the most extreme way to experience loneliness. The pioneering investigators into the phenomenon of loneliness see interpersonal isolation or loneliness as central to psychopathology. Van den Berg (1972: 105) claims that loneliness is the "nucleus of psychopathology". He says that the mental patient is alone and lives in isolation with few relationships. Loneliness is the core of his illness. If there were no loneliness, there would be no psychopathology. He views the hallucinations of the mentally ill as a creation of their own objects, in their isolation. Laing (1974) describes the schizophrenic as an individual who finds the situation so unbearable that he needs to retreat from reality backwards into his inner world, and he is filled with loneliness and despair. The person is centred in the self and as Quinodoz (1993) stated, it becomes an abyss of depression and anxiety which starts with a person's failure or inability to relate to others. Only through a meaningful relation to the world and others can this loneliness, isolation and alienation be alleviated.

The fact that each person must individuate and establish himself as an individual who can move towards intimacy is anxiety provoking. Failure to make this move brings loneliness and the threat of unrelatedness to the experiencing person. Many of the phenomena observable, during the onset of a disorder, reflect efforts to escape anxiety and loneliness, and although loneliness is an integral part of life, unrelatedness means destruction.

As anxiety is closely linked to loneliness it is appropriate to discuss it briefly.

### **2.3.7 Loneliness and Anxiety**

Fromm-Reichman (1959) states that loneliness and the fear of loneliness on the one hand, and anxiety on the other, are often used interchangeably in clinical terminology. Sullivan's (1953) concept of anxiety is central to his theory on interpersonal relations, namely, that anxiety is always interpersonal in nature. It is a disruptive force in relationships, it sets limits to them, and disallows a person to be truly available. In anxiety man is flung back on himself and this closes man off from his world and turns him away from others (Sullivan, 1953).

Quinodos (1993) and Fromm-Reichman (1959) concur when they state that separation anxiety can also be seen as the fear of finding oneself alone and abandoned. Moustakas

(1961) speaks of loneliness-anxiety and he says that a person would rather experience anxiety than acknowledge his own loneliness.

Anxiety, however, need not only be a destructive force. Heidegger viewed anxiety as positive and necessary as it is the fundamental mood of authentic being. It pulls man back from inauthentic living, and forces him to heed the call of his conscience (Heidegger, 1927/1980).

## 2.4 CONCLUSION

Loneliness is an existential truth in the sense that all people experience loneliness in the course of their lives. It is an age-old phenomenon. However, the modern Western technocratic society exaggerates this experience as its expectations of individuals drive them apart to live, not in separateness and togetherness, but rather as lonely individuals.

Different theoretical approaches are used in an attempt to understand this all too familiar but terrifying human experience. Whichever way one views loneliness, as alienation and isolation from the self, or as a social isolation or as a combination of the two, the conclusion must be that man cannot be alone, he cannot bear loneliness. In contrast to solitude, which allows for creativity, a space in which to think, to confront oneself and one's emotional experiences, loneliness alienates. Solitude, however, can become unbearable, and be experienced as loneliness.

As Gotz (1974: 229) explains:

"loneliness can be conquered only by those who can bear solitude. How does one learn to bear solitude without succumbing to loneliness? How can one learn to use solitude creatively? ... this can be accomplished through slow, grinding realisation of the nearness of man to man, through the establishment of a habit of recollecting togetherness, through the development of patterns of effectively creative sharing and through the rooting in ourselves."

The following chapter will attend to the existential-phenomenological view of man and his world. Martin Heidegger and Martin Buber's philosophies will represent this paradigm.

## **CHAPTER 3**

### **THE EXISTENTIAL-PHENOMENOLOGICAL APPROACH**

#### **3.1 INTRODUCTION**

This chapter will give a brief overview of the existential-phenomenological approach. Its view on loneliness will be discussed. Heidegger's philosophy, Martin Buber's work on meeting through dialogue, and Binswanger's views on existence as being-in-the-world will receive special attention. Heidegger's philosophy includes many concepts relevant to this study. However, his philosophy has a rigidity about it, that leaves a feeling that man has little chance in the face of his modern world to live authentically. Buber, on the other hand, tempers Heidegger's thoughts with a hopefulness which articulates a belief in man's ability to be connected to others and to his world. Whereas Heidegger was a fundamental ontologist, Binswanger applies several of his views on an ontic-anthropological level.

#### **3.2 AN EXISTENTIAL-PHENOMENOLOGICAL VIEW OF MAN AND HIS WORLD**

Kruger (1988) states that to speak of modern man as being alienated, an anomic being living in a godless, meaningless universe, of being in despair, is not new. The existential view of a person attempts to "understand the reality underlying all ... human beings in crisis" (Schneider & May, 1995: 2).

Existentialism is an expression of profound dimensions of the modern emotional and spiritual temper shown in almost all aspects of modern culture. It is a unique and specific portrayal of the psychological predicament of contemporary Western man. It focuses on the uniqueness and isolation of individual experience and claims that humans are responsible for their own acts towards themselves and towards others (Gunzberg, 1997). Existentialism is the endeavour to understand man by cutting below the cleavage between subject and object which has bedevilled Western thought and science since shortly after the

renaissance. May (in Schneider & May, 1995) calls this division, between subject and object, the cancer of psychology.

Maurice Merleau-Ponty (1962: vii) claims phenomenology to be:

"the study of essences ... but phenomenology is also a philosophy which puts essences back into existence ... It is a transcendental philosophy ... but it is also a philosophy for which the world is always 'already there' before reflection begins - as an inalienable presence; and all its efforts are concentrated upon re-achieving a direct and primitive contact with the world, and endowing that contact with a philosophical status."

It is the study of all human experience as free as possible from presuppositions or bias. It sees humans as free agents not controlled by their environment, with the ability to choose and thus having control over their own destiny. Phenomenology is the basic method of existentialism. In studying the phenomena inherent to human existence, for example perception, it endeavours to give us a direct description of our experience as it is (Gunzberg, 1997; Hoeller, 1993).

It is a matter of describing, not explaining or analysing man's everyday 'life world'. It emphasises that one is not the outcome or meeting point of numerous causal agencies which determine one's bodily or psychological make-up. All knowledge is gained from one's experience of the world, and all human experience is in and lived through one's body. The focus is on meaning and how one lives the meaning, for example, one's loneliness. Furthermore, phenomenological psychology attempts to articulate and reveal explicitly, that which is lived implicitly (Merleau-Ponty, 1962).

Loneliness, the focal point in this study, is one such phenomenon. It is therefore pertinent to discuss the existential-phenomenological view of loneliness briefly.

### **3.3 LONELINESS**

Loneliness is an existential truth. It is inevitable. It is part of what it means to be human and something that needs to be accepted (May & Yalom, 1984; Mijoskovic, 1979; Moustakas, 1972). However, loneliness can be alleviated through encountering the being of another

person. Loneliness becomes problematic and even pathological, when one is unable to share one's world and the experience thereof with others, through disconnectedness and alienation from the self.

May (in May, R. Angel, E. & Ellenberger, H.F. 1958) claims that modern Western man finds himself in a predicament. Man has reduced his world to an abstraction and thus denies himself the reality of his own experience. Man finds himself floundering in loneliness and isolation. He sets himself in servitude of a function, for example his economic function, and sees himself only in the light of this function. He abdicates to the widespread conformist tendencies of modern society. Modern man does not experience himself as being-in-the-world. He has lost his world and his experience of community. The prevailing problem of loneliness and alienation reflects the state of man whose relation with his world is broken. This alienation is not simply a lack of interpersonal communication, but also an estrangement from nature and from one's own body.

Valle and Halling (1989) expands on this with the statement that when man's self sense is merely egoic, loneliness and isolation can dominate his experience and he feels acutely separated from others. If, however, he can discover that the core of his being is united with the whole creation, man will realise that he can never be separated from those he loves.

Some existentialists, amongst others Sartre, believe that personal relations can never be anything but a struggle for power, but Merleau-Ponty disagrees with this view (Matthews, 1996). Although he recognises the fact that one mind is distinct from the other and that this often allows for conflict and competition between human beings, he denies that this possibility represents the essence of one's relationships with others. Merleau-Ponty's (1962) views on perception and communication rest on the principle of intersubjectivity. He says feelings and thoughts can be communicated to others and concludes that it is through the body that man is in the world, and that he is present to the other and to himself. The body is both the perceiver and the perceived, the unifier and the unified. Man lives in the world before he acknowledges it through an intellectual act. Intersubjective relations are not only possible but also actual. Man cannot refuse to be related to others and he has natural ties to society and to others. However, he chooses his relations to others, admits them, and offers himself into the communion. How he communicates is therefore a choice (Barral, 1993).

Martin Heidegger's thoughts on being-in-the-world and how this is accomplished, Martin Buber's meeting through dialogue and Binswanger's views on existence will be the point of reference in an attempt to understand how man meets his world. A brief overview of some of the philosophies which led to Buber and Heidegger's conceptualisations of man and his world will be given to reiterate the struggle for understanding of the self, and of being-in-the-world.

### **3.4 PHILOSOPHICAL BACKGROUND**

Philosophers through the ages have grappled with the question of the self and the self's connection with the world it exists in. Jean-Jacques Rousseau found a self while strolling through the woods in solitude. He found a self that is intrinsically good, despite the artifices and superficialities of social life. Furthermore, he concluded that the self does not only belong to the person, but is shared with all humanity. Although Rousseau is today proclaimed by some as a "narcissist", connecting the self to the world seems hopeful in the face of being alone and lonely. He emphasised feelings, rather than thought, as the key to the self. This is an important concept when taking into account the modern Western world which places such great value on intellectualisation and neglects the affective part of being human (Solomon, 1988).

Rousseau's view is opposed to that of Descartes who saw the subjective self as a thinking thing which satisfied the need to logic. This view did not hold with empathy and human fellowship (Solomon, 1988). Furthermore, Descartes' split between mind and body, and self and world, created a view of reality in which man is essentially separate from his world. This entrenched an existence which is essentially lonely.

According to Hegel, human existence is primordially a matter of mutual recognition. It is only through mutual recognition that one is self-aware and through which one strives for the social meanings of one's life. A similar view is held by Husserl (cited in Solomon, 1988) who proclaimed that philosophy must rise out of and return to lived experience. He says "The monadically concrete ego includes also the whole of actual and potential conscious life... In one's own experience one can discover the world, and realise the nature of everyone else's

experience as well" (Solomon, 1988: 130). He focuses on the life-world as the pre-given ground of all practical and theoretical activities. Husserl proposed a descriptive psychology in which one must return to the 'things themselves'. This does not imply a naive observation, but a multidimensional experience calling on insight, reason and above all intuition (Frankl, 1993; Merleau-Ponty, 1962). The emphasis is on man and his world, man and his relationship to the self and to others. This was partly the background Heidegger used for the formulation of his thoughts on man as being-in-the-world.

### **3.5 MARTIN HEIDEGGER (1889-1976)**

Heidegger's philosophy has its origin in the wake of World War I, in Germany, where he brought the destructiveness of Western science and modern technology under scrutiny. He is one of the most controversial of all modern philosophers and is seen either as a charlatan, or as a philosopher of stature. He has been called an "... irredeemable German redneck, and, for a time, a gullible and self-important Nazi" (Inwood, 1997: 1). It seems that as a man, he was dogmatic, morally small and narrow in his living (Chessick, 1986). It can be argued that his living was incongruent with his thoughts, as he joined the Nazi Party and lived his life in isolation.

Nevertheless, he brought to philosophy and psychology an important perspective of man and his world. Although Heidegger, a founding father of phenomenology, adamantly denied he was an existentialist, his philosophy laid important ground for it (Chessick, 1986; Solomon, 1988). He was discerning in his analysis of the ills of this age and has been claimed by some to be its best hope, of a cure for these ills. He also described, and this is of particular relevance to the present study, the nature of man's relationship with things and people, and how one is socialised into a shared world (Dreyfus & Hall, 1995; Inwood, 1997; Ott, 1993). For the purpose of this study, only his thoughts relevant to loneliness will be discussed.

Heidegger, a student of Husserl, "saw in Husserl's phenomenology the means to undermine Descartes' dualism, the mechanistic vision of the world and the solipsistic illusion of self that it fostered" (Solomon, 1988: 153). His philosophy's emphasis is on holism and in his *Being and Time* he is unrelenting in his attack on traditional dichotomies and dualism.



### 3.5.1 Dasein: Being-in-the-world

The question is raised, what does it mean to be a person? Heidegger (1927/1980) holds that BEING is a primordial condition or "ground" which allows everything else to come into existence. He formulated the concept Dasein in his deliberations on man and his world.

Who is Dasein? Dasein is an entity which is in each case I myself; its being is in each case mine and Dasein's essence lies in his existence. He emphasises the da, the 'there' of Dasein to stress Being's being there: being there in the course of its everyday activities and practices. There is, according to him, Being and Nothingness and between these lie all man's possibilities. "Dasein is mine to be in one way or another" (Heidegger, 1927/1980: 68). According to Heidegger, anxiety pulls one back from Nothingness and is therefore an appropriate bridge between these two poles (Being and Nothingness) of the self (Heidegger, 1927/1980; Hoeller, 1990; Solomon, 1988).

Dasein exists through being-in-the-world. No distance exists between man and his world. There is no existence, no 'being there' without a world in which to exist. Humans are there, living in the world with others. Humans are living in and living with. A person without a world makes no sense. In saying this he opposes the solipsistic view of man. Mills (1997: 44) explains:

"Dasein's original disclosedness as Being-in-the-world, one is thrust into the ontological contingency of "Being-in" (around-world), an environment (Umwelt) and "Being-with" (with-world) others (Mitwelt) and with-oneself (own-world) (Eigenwelt), which underlies all participation, engagement and concrete involvement with the world that is given in one's immediate preoccupations and concerns."

The view that man and world form a unity and presuppose one another, is a central idea in the existential-phenomenological approach. Whereas Heidegger (1927/1980) and Binswanger (1944/5, 1947/1963) refer to man as "Dasein," Merleau-Ponty (1962: 430) uses the term "presence" and refers to the subject and object as "two abstract 'moments' of a unique structure which is presence". Van den Berg (1953: 4) describes man as a dialogue

and says "De mens is een dialoog, hij is de voortdurende 'vanzelfsprekende' communicatie met zichzelf, met de anderen en met de dingen." Luijpen (1969) emphasises the concept "recontre" which expresses the view that an encounter is only possible if both terms of the encounter are present and imply one another. An encounter cannot occur if something is not met; at the same time, that which is met cannot be part of the encounter if there is no subject that meets it.

Heidegger's emphasis on Dasein's being-in-the-world presupposes Dasein sharing his world with others. Dasein is Being-with-one-another, there is thus a relationship of Being from Dasein to Dasein. Existence is thus co-existence. Our understanding and knowledge of the Other, is implied in our Being-with, as self-knowledge is grounded in Being-with. He explains:

"Not only is Being towards Others an autonomous, irreducible relationship of Being: this relationship, as Being-with, is one which, with Dasein's Being, already is. Of course it is indisputable that a lively mutual acquaintanceship on the basis of Being-with, often depends on how far one's own Dasein has understood itself at the time; but this means that it depends only upon how far one's essential Being with Others has made itself transparent and has not disguised itself. And that is possible only if Dasein, as Being-in-the-world already is with others" (Heidegger, 1927/1980: 162).

He adds that empathy does not constitute Being-with, but only becomes possible on the basis of Being-with. Empathic understanding of Others are often suppressed and substituted by different ways of Being-with. It can be postulated that how man is in Being-with-the-other will be a determinant in realising his potential, in other words, how far we have journeyed on the road to authenticity (Heidegger, 1927/1980). This implies that man can only enter into mutual relationships with others if he realises his own potential and the extent to which this is the case, will play a significant role in how he experiences loneliness.

Furthermore, one is embodied and bound by one's shared embodied, perceptual capacities. One views oneself as a whole human being. It is through one's body that one meets the world and other people. The body is inconspicuous and lies in the background of Dasein's doings and, as such, man is centred in his relationship to the world. The latter is both

constituted by, and constitutive of, the self. The world is constitutive in that the self comes into being in the world and is shaped by the world. It is not a process of cause and effect between the world and the self but rather a nonreflective taking up of that which the person's world offers, in the form of culture and tradition. By taking up the meanings of that which the world offers, a person who can make sense of the world evolves (Inwood, 1997; Leonard, 1989). Heidegger (1927/1980: 153) summarises as follows: "Yet man's substance is not spirit as synthesis of soul and body, its rather existence."

A central idea in Heidegger's thoughts, as described above, is that man exists in relation to others. One can never not be in relationships, and even in loneliness, one is related to others in a certain way. "Being-with is an existential characteristic of Dasein even when factually no Other is present-at-hand or perceived. Even Dasein's Being-alone is Being-with in the world. The Other can be missing only in and for a Being-with" (Heidegger, 1927/1980: 157).

### 3.5.2 Temporality

Human lived experience is for Heidegger temporal. Dasein is born in a particular time, and this time is not of Dasein's choosing. One cannot counteract the effect of when one was born. Dasein can also not refute that it is going to die. "... Dasein exists as born; and, as born it is already dying, in the sense of Being-towards-death" (Heidegger, 1927/1980: 426). Since life is a 'Sein zum Tode', temporality is an essence of human existence. Dasein's attitude towards its own death pervades and shapes its whole life. As Inwood (1997: 61) puts it, "A life without the prospect of death would be a life of perpetual postponement". Time is thus finite, one's time is finite and ends with one's death. Birth and death are thus connected and Dasein is the 'between' (Heidegger, 1927/1980). Realising this has profound implications for striving towards authentic living since it confronts one with the very nature and meaning of life.

This temporal, human lived experience depends for meaning on memory and anticipation. Being depends on all three dimensions of temporality, past, future and present. Heidegger uses three terms to describe this: Existence refers to the future, facticity to the past and fallenness to the present, "...authentic Dasein is not wholly engrossed by the present and by

the immediate past and future. Authentic Dasein looks ahead to its death and back to its birth and beyond its birth to the historical past" (Inwood, 1997: 59). Dasein does not endure through time, but it acts and brings about its future. Behaviour and choices are related to how the future is seen, and are also related to the past. Dasein's past happens out of its future, the past is in the present, which is the way it is appearing now. "Thus 'the past' has a remarkable double meaning; the past belongs irretrievably to an earlier time; it belonged to the events of that time; and in spite of that it can still be present-at-hand 'now'" (Heidegger, 1927/1980: 430). Heidegger claims that the past, present and future are all involved in the advent of true speech (speech will be discussed in more detail in paragraph 3.5.5) (Chessick, 1986; Dreyfus & Hall, 1995; Kruger, 1988; Solomon, 1988).

The psychotherapeutic alliance is in search of true speech, and true speech involves past, present, and future. A patient does not stand in the present alone. How he views his future will be of cardinal importance, and his view of the future will reflect his view of the past. If his past seems chaotic, his future will be inaccessible, because, as Van den Berg (1972) claims, an accessible future means a well ordered past. It will thus be the task of the psychotherapeutic encounter to make the past comprehensible, in order to open up the patient's future for him.

Since existence is co-existence, a person is never situated in time, as an isolated individual. The temporality of one person refers to the temporality of others (Heidegger, 1927/1980). Contact with others becomes manifest in time and the way in which the time is filled, reflects the quality of relationships with others.

Being born at a certain time, over which Dasein has no control, can be expounded by what Heidegger termed as Dasein's 'facticity' or 'thrownness'.

### **3.5.3 Facticity - 'thrownness'**

Dasein discloses itself in the everydayness of Being-in-the-world. People are, according to Heidegger, born to a situation; in a sense they are 'thrown' into a situation. Heidegger (1927/1980: 174) states:

"... we call it the "thrownness" of this entity into its "there"; indeed, it is thrown in such a way that, as Being-in-the-world, it is the "there". The expression "thrownness" is meant to suggest the facticity of its being delivered over".

Dasein is thrust into the world at a certain time and place, in an environment over which he has no choice. Therefore Dasein is situated in a world, and this, being situated, delineates man's choices and creates his possibilities. The self can thus only develop insofar as its world will allow. The freedom of the self to constitute its world is a situated freedom and man is constrained in the way he can constitute the world. Although Dasein has possible ways to be, Heidegger does not claim that it can become whatever it wants. Circumstances place restrictions on what "I" can do (Inwood, 1997; Leonard, 1989; Mills, 1997).

Therefore, man is limited by this existential structure, his 'facticity'; the fact that he finds himself in a world in which the tasks are already there for him. Although one is 'thrown' into a situation over which one has no control, the way one chooses to live the situation will determine whether one will reach one's potential. One is thus not helpless in the face of one's environment or determined by it. One has the ability to choose. However, making these choices that are one's own, is far more problematic than it appears to be. Self-knowledge according to Heidegger is not merely a matter of self-recognition. It is inevitable that facing the future will cause Angst, and then one loses oneself in complacency in the midst of one's frenzied everyday life. For Heidegger anxiety is important as it is due to fallenness, and therefore pulls one back from absorption in the public world and forces one to heed the call of one's conscience, and to strive to an authentic existence (Chessick, 1986; Heidegger, 1927/1980).

How does thrownness relate to loneliness? One may be born into an environment where there is little meaningful contact with others. The loneliness which can be associated with this may force one to live in a false manner, which closes one off from true communication with others. However, Heidegger claims that one still has a choice how to live the situation, and a choice to live authentically, which will bring about true communication and alleviate one's loneliness. Only when one lives authentically can one form meaningful relationships.

The question that needs asking is why do some people strive for authenticity and others are constrained by an inauthentic existence?

### 3.5.4 Authentic and Inauthentic Ways of Being

Heidegger's concept of authentic being is of importance to this study. What does it mean to be authentic? According to Mills (1997: 43), authenticity, viewed from Heidegger's perspective "is a uniquely temporal structure, and a process of unfolding possibility. It is a state of being that is active, teleological, contemplative and congruent - an agency burgeoning with quiescent potentiality". Authenticity implies becoming one's possibilities, and is uniquely subjective in nature. Heidegger (1927/1980: 313) states:

"But because Dasein is lost in the "they", it must find itself. In order to find itself at all, it must be 'shown' to itself in its possible authenticity. In terms of its possibility, Dasein is already a potentiality-for-Being-its-Self, but it needs to have this potentiality attested."

Fallenness, on the other hand, embodies absorption in the world of objects, together with deprivation of freedom and a dominance of They. This being lost in the They constitutes a way of living to fit in with the other, and denying one's own possibilities for authentic living. "Falling Being-in-the-world is not only tempting and tranquillising; it is at the same time alienating" (Heidegger, 1927/1980: 222). It takes from Dasein the burden of anxiety and dread, that goes with being human. Genuine discourse is replaced by idle chatter and the 'must do', 'must see' which results in self-destruction through meaningless frantic activity in an attempt to escape anxiety. In doing so, Dasein forfeits the forward drive to 'I', for a drive to things and people (Heidegger, 1927/1980).

According to Heidegger, if man were an isolated self, who only tried to know, but did not care about the world, he would not be the being that he is. As said above, this Being-with-others can be of two kinds: inauthentic or authentic. He describes inauthentic as concern (Sorge) for people, as things or objects. This has no moral connotation, but has rather to do with curiosity. Authenticity, on the other hand, implies that there is a connectedness with people through common causes, and he refers to this as solicitude 'Fursorge' (Chessick, 1986). This implies that contact with others is established through participating in a common world. The implication of this, would be that, loneliness would occur if people do not share a common world of meanings.

Heidegger (1927/1980: 159) states:

"Solicitude proves to be a state of Dasein's being-one which, in accordance with its different possibilities, is bound up with its Being towards the world of its concern, and likewise with its authentic Being towards itself."

Dasein's primary concern, however, is its own identity and finding one's own identity is the key to authenticity. According to Heidegger, if one wants to live authentically, one must become a truly independent self, who does not lose oneself in the anonymous mass -*das Man*. There is a lifelong effort to find one's own identity, to define oneself, for oneself and for others. Heidegger claims that this can not be done through the following notions: competitiveness, which sets one apart from others; or publicness, which he claims suppresses the exceptional in the obsession to promote a well rounded personality; nor averageness which is what one is to fit in with others. In averageness the uniqueness of selfhood is diffused and lost and it is an existential characteristic of the They. It reveals the tendency of Dasein to 'level down' all possibilities of Being. Related to this is adaptation, which requires from one to be as if one has no choice but to follow orders (Heidegger, 1927/1980: 164,165). One would wonder how he integrated these concepts with his own averageness as member of, and adaptation to, the Nazi party.

Although it is a lifelong effort of man to find his own identity, to define himself for himself, and for others, he does not start off with his 'own self'. It is rather a question of being wholly defined by others, and their expectations of him. Heidegger's term *das Man*, refers to, "just this more-or-less anonymous sense of self, anonymous in the sense that we are nothing more than a placeholder, the one who happens to be the oldest son, the biggest or smartest kid in class" (Solomon, 1988: 163). The implications of this is, that to become an authentic Being, this anonymous sense of self must be redefined to allow for the emergence of one's own true, unique self.

In an attempt to elucidate this Mills (1997) states that, Dasein does not only show itself in the everyday, mundane modes of existence, it also does so in a false manner. It presents to the world a false self due to the conformity expected of it. This fallenness is described as a separation of self from authentic selfhood, and authentic community. It is the universal

tendency of humans to lose themselves in the everydayness of present concerns, and preoccupations. In this way they alienate themselves from their personal, unique possibilities. Therefore, the anonymous one, the fallen, *das Man* who identifies with the 'they' of everydayness as averageness, is a constricted Dasein. Dasein is thus a reduced self, a stifled existence, a false being (Heidegger, 1927/1980).

To break with *das Man*, requires action. Both inauthenticity, as well as, authenticity, begin with the recognition of the challenge to take hold of oneself, either by fleeing it, or by accepting the challenge. Heidegger (1927/1980) stresses the importance of anxiety for individual choice in order to really exist, as opposed to a so-called existence. He claims:

"Anxiety makes manifest in Dasein its Being towards its ownmost potentiality-for-Being -- that is, its Being-free for the freedom of choosing itself and taking hold of itself. Anxiety brings Dasein face to face with its Being-free for the authenticity of its being" (Heidegger, 1927/1980: 232).

Anxiety, according to Heidegger, individualises and brings Dasein back from falling and makes manifest to it that authenticity and inauthenticity, are possibilities of its Being. This means that Dasein must find its truth within itself, in isolation, although authenticity involves others (Heidegger, 1927/1980).

Being authentic, refers to making one's own life choices autonomously and without rationalisation or excuses, so that one's decisions are one's own. Man must create meaning for himself in his orientation to the future. Meaning is created by structuring existence around fulfilling realistic, and uniquely individual future goal possibilities. Denne and Thompson (1991: 110) interpret this as follows:

"...individuals must first acknowledge and experience the suppressed dread of finiteness which previously led them to live automatically and inauthentically according to the forms, routes and opinions of the masses. Then they must accept the limitation of finiteness and any other uniquely personal limitations, but go on to choose to take responsibility for living toward unique personal possibilities which precede death."

Inauthenticity, on the other hand, implies not making one's own choices, and confronting the call of one's conscience (Solomon, 1988).



Heidegger (Chessick, 1986: 93) believed "that people must recover authentic engagement or attunement with each other and with the world... He concluded in a mystical fashion, that poetry can lead to the illumination of Being: "Stop, listen, hear, remember, respond to the call of being - it opens up the spirit."

Mills (1997: 43) poses the question:

"Is it possible that the very ontological structures of Dasein itself are false? Can the Being of Dasein be thrown into a deficit world, a world tainted by fallenness and inauthenticity, so much so that Dasein's Being-in-the-world is predetermined as a falsehood? To what degree is worldhood itself structurally differentiated into various existential modalities which are inauthentic, thereby affecting Dasein's modes of being and the very way in which selfhood is disclosed?"

This statement leaves one to wonder whether Dasein can transcend its own 'thrownness'. Can the child immersed in a culture and family, which expect compliance from him, and make this compliance a necessity for the survival of the self, do anything else but live inauthentically and present to the world a false self? What price will Dasein have to pay to heed the call of its conscience? Maybe this is what Heidegger meant when claiming that Dasein can only find itself in isolation.

Those patients who enter the consulting room, living inauthentically, claim their lives to be meaningless and empty. Through the psychotherapeutic encounter, the patient can be given the courage to listen to the call of his conscience and thus enable him to live more authentically.

### **3.5.5 *Befindlichkeit*: Being in a Mood**

To describe the way Being is in the world, Heidegger chooses three concepts of existence which can be easily misunderstood: *Befindlichkeit*, understanding and speech. These three concepts are interrelated.

*Befindlichkeit* can be translated as the placement of the self in life and in the world. It has also been translated as 'state of mind', as the 'sense of one's situation, or as "moodness". It

includes affect, mood and feeling, "how we sense ourselves in situations" or where one is affect-wise at a given time (Gendlin, 1988: 44). "A state-of-mind is a basic existential way in which Dasein is its 'there' " (Heidegger, 1927/1980: 178). Loneliness, just as anxiety, would thus be one aspect of *Befindlichkeit* and would reflect the quality of the relationship between man and his world.

Heidegger (1927/1980: 174) explains:

"In a state-of-mind Dasein is always brought before itself, and has always found itself, not in a sense of coming across itself by perceiving itself, but in finding itself in the mood that it has."

*Befindlichkeit* is neither an interactional nor an intrapsychic concept, it is both before the distinction is made, and always has its own unique understanding.

As stated, *Befindlichkeit* has its own understanding. It does not necessarily imply a specific awareness of the mood or a knowledge of it. Rather, it refers to how man is managing his 'living-in' and 'living-with'. The situations he finds himself in are not a mere fact, independent of him. Man is active in these situations, with its attendant difficulties and possibilities. How he copes with these is his mood. Man's perception of the world varies from mood to mood, and the mood has an implicit understanding of these intricacies of being. It is not a cognitive understanding, but a sensed or felt thought, because understanding is inherent already in how man has lived and is living a certain situation. "Ontologically mood is a primordial kind of Being for Dasein, in which Dasein is disclosed to itself prior to all cognition and volition, and beyond their range of disclosure" (Heidegger, 1927/1980: 175). Man's encounter with his possibilities is in itself thus modified by his affectivity. A mood can only be replaced by another mood and a mood cannot be replaced by another mood through cognitive understanding, it must be experienced (Chessick, 1986; Dreyfus & Hall, 1995; Gendlin, 1988; Heidegger, 1927/1980).

Heidegger (1927/1980) further states that speech, or rather the capacity for speech, is already involved in any mood or affect. Because mood has an understanding, there is the possibility of interpretation, of appropriating what is understood. This does not imply that man can always articulate what he lives, but that there is always the capacity for speech involved in any situation. To hear the other, to be open to each other's speech, is part of

what man is. It allows Dasein to articulate in speech that which is affectively understood (Gendlin, 1988). Dialogue, for Heidegger, is more than a conversation. It is a shared openness towards the other, in an attempt to listen to the unsaid, and to allow it slowly to come to speech. "Being-in and its state-of-mind are made known in discourse and indicated in language by intonation, modulation... 'the way of speaking'" (Heidegger, 1927/1980: 205).

To the extent that the ontological structure of Dasein is unveiled at an ontic level, Heidegger's concept of *Befindlichkeit* can assist in one's understanding of the patient's perception of his world. The patient's mood, whether implicitly known to him or not, will determine how he perceives, and reacts in situations. Through psychotherapy this mood can become articulated. The patient can find words for what he feels. In so doing, the patient is enabled to replace one mood with another. In the movement from the implicit to the 'lifting out' of the feeling, the feeling changes. To be more specific, a movement from a prevailing mood of anxiety, to that of the awareness of loneliness, may occur. By doing this, the patient comes to perceive his world differently and this can then influence his way of being in various situations.

Furthermore, Heidegger (cited in Chessick, 1986) claims that Being can only appear when people retire from active investigation and achieve a state of what he called *Gelassenheit* - serenity, composure, release, relaxation, a disposition that "lets be". One can assume that this letting-be-ness does not imply that Dasein becomes complacent or self-satisfied, but that it allows things to present themselves as they are. The other person is permitted to express freely what he is. In the therapeutic relationship this will be important.

To conclude, if one wants to live authentically, one must become a truly independent self, who does not lose oneself in an anonymous mass, thereby living inauthentically. Heidegger's Dasein must find its truth within itself, in isolation. Heidegger views everyday life as dull, banal, enslaved and meaningless and his authentic existence portrays a man who stands out. However, one feels him to be almost pessimistic in his emphasis on the difficulties in becoming an authentic Being in the face of everyday life.

Although he does acknowledge the importance of others, it seems that there are many graces in human life that he ignores. Heidegger's description of an inauthentic existence as

shallow, impersonal, anonymous and conformist, gives one the impression that he may be condemning man too quickly. His views are based on his experiences, and his way of being-in-the-world. It could be argued that he was perhaps more rigid in his relationships than people who have more lively relationships with those they are being-with. Other people do not necessarily relate as inauthentically as he claims. People often genuinely do care for friends and family, and show solicitude for the human community.

Notwithstanding these criticisms, his work does invite contemplation and his concepts are valuable to the world of psychology. His concepts of temporality, bodiliness, authentic/inauthentic self and 'being in a mood', are important. It brings understanding of Dasein's perception of its situation, and will lay the ground for how it will be in the situation.

Although Heidegger views anxiety as positive, existentially, anxiety is also seen as isolating. "In anxiety man is flung back on himself, in anxiety man is isolated and the distance between man and man and man and world is increased" (Preller, 1991). Anxiety suspends man's involvement in the world and makes him speechless. Therefore, loneliness is increased. It could be claimed that anxiety in moderation is necessary for Dasein to pull itself back from "fallenness". However, should anxiety become prevalent, it is pathological and closes man off from his world.

### **3.6 MARTIN BUBER - A PHILOSOPHY OF DIALOGUE**

Martin Buber's approach constitutes a paradigm shift from the views of the human as a psychologically isolated self, to the realm of the interhuman. Buber described his viewpoint as the "narrow ridge". Friedman (1960: 3) says that this "expresses not only the 'holy insecurity' of his existential philosophy, but also the 'I-thou' or dialogical philosophy which he has formulated as a genuine alternative to the insistent either-or's of our age."

Martin Buber was a philosopher, an educator, and a humanitarian, who was poignantly aware of the breakdown in relationships in the modern technocratic world. He realised that the technocratic emphasis placed on individualism, leads to distancing between person and person. Hyckner (1991: 5) explains as follows:

"This de-emphasis of the interhuman results in isolation, alienation and the inevitability of a modern-day narcissism. It creates an obsession with the self - a hyperconsciousness. The reality of the other person is hidden by this narrow focus. The modern phobia about intimacy is a reflection of this. The relational becomes subjugated to an overemphasis on separateness. Such overemphasis on separateness creates a split not only between persons, not only in our relationship with nature, but also within our own psyches. The dialogical outlook is an attempt to heal those splits."

Although he was not a psychologist, his dialogical perspective is of immense value to the psychotherapeutic relationship.

Buber (cited in Friedman, 1960) claims that man's culture has abdicated before the world of It, and holds that there are four kinds of evil bedeviling modern Western society. He emphasises the loneliness of modern man in the face of an unfriendly universe in which man lives together with man, but they do not meet; man's inability to integrate modern day technology into his life in a meaningful and constructive way; the inner duality of modern man; and the deliberate and large scale degradation of human life within the totalitarian state. It must be mentioned that he does not see I-It, which constitutes the experiencing and use of the other, as being in itself evil. Only when It is allowed to have mastery and shuts out real meeting, does it become evil. Buber (1958: 34) says: "And in all seriousness of truth, hear this: without It man cannot live. But he who lives with It alone is not a man." The concepts I-It and I-Thou will be dealt with in more detail later in this chapter.

According to him no true community exists and the only way in which to rectify the evils of contemporary life is to strengthen the forces of good through the will for genuine relationship and true community (Friedman, 1960). What is genuine relationship in Buber's view, and how does it present itself?. He explains as follows:

"the principle of human life is not simple but twofold, being built up in a twofold movement which is of such kind that the one movement is the presupposition of the other... the first movement [is called] 'the primal setting at a distance' and the second 'entering into relation'. That the first movement is a presupposition of the other is plain from the fact that one can enter into a relation only with being which has been set at a distance, more precisely, has become an independent

opposite. And it is only for man that an independent opposite exists" (Buber, 1965: 60).

The emphases of his thoughts is then on man's ability to be a truly separate self from others, and in so being one can enter into true dialogue with another. This does not imply merely a 'setting at a distance' and 'making independent' of the other, but rather an acceptance of one's own uniqueness, and an acceptance of the other person's 'otherness' (Buber, 1965).

As Buber (1958: 11) averred, "all real living is meeting" and the primary attitudes of man to his world are twofold, that of I and Thou and I-It. The I-It relationship constitutes experiencing and using. It does not take place between man and his world but rather within man and therefore it is subjective and lacking in mutuality. This is a relationship of subject-object, the other must become an object for I-It. According to Buber (1958: 3) "I-It can never be spoken with the whole being." In other words, in the I-It relationship one is never totally present in one's meeting with the other.

The I-Thou, on the other hand, views the other person as separate and exclusive, but confirmed as 'he with whom I share the world'. There is genuine mutuality in the relationship. There is no subject or object, rather a we, in which each person authentically meets the other and himself. This does not necessarily imply that words are involved, genuine relation can thus be spoken or silent. Buber (1958: 9) explains:

"Even if the man to whom I say Thou is not aware of it in the midst of his experience, yet relation may exist. For Thou is more than It realises. No deception penetrates here; here is the cradle of the Real Life."

Buber says "in the beginning is relation, the inborn Thou which is realised by the child in the lived relations with what meets it" (Friedman, 1960: 60). The world though, is not ready made. The child must find his own world through hearing, touching, seeing, and shaping it. Buber claims that the infant-mother relationship was primarily, a mutual relation between I and Thou. In the effort to establish relations, actual relations unfold and the child says Thou without words. It is through this meeting with Thou that he becomes I, and the relation split into I and the thing. The child eventually loses his relation with Thou and perceives it as a separate object. It is through this that he falls into the I-It. In this way he differentiates from

the mother and paves the way for I-Thou relations (Brice, 1984; Friedman, 1960). It is inescapable to revert to It. Buber (1958: 16) claims: "But this is the exalted melancholy of our fate, that every Thou in our world must become an It."

He does not explain how this distance or separateness is achieved, but to be separate is important for a possibility of mutuality and I-Thou relations. If the child does not attain this separation, he may still learn how to be empathic, but this does not necessarily mean true mutuality. In empathy one gives up the ground of one's own consciousness, whereas a prerequisite for true dialogue is a centredness in oneself. In the silent or spoken dialogue between the I and the Thou both personality and knowledge, come into being. Personality does not develop within the individual, or as a result of socialisation, but is a function of relationships. One's personality is called into being by those who enter into relation with one (Friedman, 1960).

In the I-Thou there is mutuality and togetherness in which one remain oneself. The Thou is neither an It nor another I, and if the other is seen as another I, it is only a mirror image of oneself. Although such a relationship where the other is seen as another I can be warm and friendly, it is really an I-It relation (Friedman 1960).

Buber states that, as subject-object evaporates the we emerges. The relationship is in-between and not within a person. Each partner in the relationship meets himself, and the other, authentically. The true self can emerge in a relationship that is real. It is difficult in daily life to be honest and true to oneself in one's relationships. It requires less dependence on, or control and manipulations by, the other. It requires a relationship of true mutuality. Man is so busy conforming, or searching for wealth and power, that his very 'humanness' is lost. The most complete development of the self, is the development of the self in relation to others. The fundamental nature of a person lies in communication with others. A person must make himself available and thereby more transparent, both to himself, and to others. There is no merger or incorporation which would constitute an I-It relationship. The I-Thou relationship constitutes a full mutuality in the acceptance of differences, which fundamentally and inevitably separate two persons (Buber, 1958, 1965; Friedman, 1960 ; Matthews, 1996). This implies that when one enters a relationship constituting I-Thou, one will be able to alleviate one's loneliness.

I-Thou relationships are immensely satisfying, but are not without anxiety. Buber (1958: 15) wrote that "Love is responsibility of an I for a Thou." Because this love is fully mutual and concerned with both sides of the relationship, such responsibility is often lived anxiously.

The I-Thou form of relating cannot be sustained continually, and healthy adult relating vacillates between the I-Thou and the I-It. At times it is necessary to relate in the I-It, as long as it does not exclude the possibility of becoming an I-Thou. In the I-It one steps back into oneself in order to regain energy, but there must be a desire to come back together again. There is both distance and relation, being a-part-of and apart from. In a healthy existence there is a rhythmic balance between the two. I-It relationships are far less satisfying than I-Thou relations, however, within every I-It relation lies the possibility of an I-Thou relation. In pathological I-It relations the ability to bridge this gap, is greatly diminished (Brice, 1984; Buber, 1958; Hyckner, 1991).

Buber (1958) claims that it is through 'grace' that the I-Thou relation presents itself, and that such relationships are 'rare' and 'ideal'. He poetically says: "The It is the eternal chrysalis, the Thou the eternal butterfly" (Buber, 1958; 17). Brice (1984) disagrees and states that these relations happens more often than Buber believed.

What then is genuine dialogue? For Buber it is 'truth'. One imparts oneself to the other as what one is. It constitutes being authentic which does not imply that one discloses all of oneself to the other, only that one genuinely sees the other. This implies inclusion or 'experiencing the other side'. Friedman (1960: 87) explains:

"Genuine dialogue can thus be either spoken or silent. Its essence lies in the fact that each of the participants really has in mind the other or others in their present and particular being and turns to them with the intention of establishing a living mutual relation between himself and them."

When one speaks about communication or dialogue it implies a gap between selves and suggests the possibility of bridging the gap. For Buber this is 'experiencing the other side'. It is not empathy. Empathy means to feel oneself in the other, through relinquishing the ground of one's own consciousness. One suspends one's awareness of oneself to



understand the other better. Buber describes it as: "transposing oneself into the dynamic structure of an object, hence the exclusion of one's own concreteness, the extinguishing of the actual situation of life, the absorption in pure aestheticism of the reality in which one participates" (Friedman, 1985: 197).

Experiencing the other side is the essence of all genuine love. Experiencing the other side, or as Friedman phrases it, inclusion, or imagining the real is the very stuff of betweenness. It is "a bold, imaginative swinging 'with the intensest stirring of one's being' into the life of the other so that one can, to some extent, concretely imagine what the other person is thinking, willing and feeling and so that one adds something of one's own will to what is thus apprehended" (Friedman, 1985: 198). One turns one's entire existence to the other person in a concentrated attempt to experience the other person's experience as well as one's own (Hyckner, 1991). The person does not lose his centre or the core of his own being in the meeting with another. It is the extension of one's own concreteness, the complete presence in the reality in which we participate (Friedman, 1960).

Buber's belief in the person's ability for true mutuality and I-Thou encounters brings hope to the consulting room. The I-It way of being can be given the opportunity to become an I-Thou relationship. Friedman (1985) expands for the psychotherapist Buber's views with his thoughts on empathy, identification, and inclusion (which is the core of 'betweenness'). Friedman postulates that both empathy and identification are very limited means of understanding, as both rely on one side of the relationship. With empathy, one leaves oneself and moves into the other, while with identification one tunes into the other, while focusing on oneself. "Neither can grasp the uniqueness of the other person, the uniqueness of oneself, and the uniqueness of the relationship" (Friedman, 1985: 201). Inclusion or 'imagining the real', on the other hand, presupposes two separate, unique people meeting each other with a common goal. Neither person loses his centre or personal core. Both stay unique and separate but theirs is real meeting.

In conclusion, Buber's view of man and his ability to enter into genuine dialogue seems hopeful. Every person has an inherent ability to genuine mutuality. He does, however, imply that a child is dependent on his caregiver, for his discovery of Thou and his own

separateness. A person's personality, as he puts it, is called into being through relationships with others.

In the following section, concepts relevant to the present study from the work of Binswanger will be discussed.

### 3.7 LUDWIG BINSWANGER

In contrast to Heidegger, Binswanger's (1944/1958, 1946/1958) aim is not to propose an ontological thesis about Being, but to make ontic statements, that is, to explicate factual findings about forms and conditions of existence.

Binswanger (1946/1958) applies Heidegger's ontological thesis, that the basic structure of existence is Being-in-the-world, on an anthropological level. He states that "Heidegger, in his concept of being-in-the world as transcendence, has not only returned to a point prior to the subject-object dichotomy of knowledge and eliminated the gap between self and world, but has also elucidated the structure of subjectivity as transcendence" (Binswanger, 1946/1958:193). By investigating the structure of Being-in-the-world as transcendence, various ways of transcending can be discerned. These ways of transcending are modes of being in the world, such as thinking, feeling, or creating. Examining ways of transcending opens new horizons for describing psychopathology, such as psychoses, which Binswanger regards as modifications of the fundamental or essential structure of Being-in-the-world.

Binswanger (1944/1958) distinguishes between three world-regions, or three aspects of the world, which characterise being-in-the world, namely *Umwelt*, *Mitwelt* and *Eigenwelt*. The *Umwelt* can be translated as the environment – the world of objects in which people orient themselves bodily and in which they act. The *Mitwelt* is the world of relationships between people. The *Eigenwelt* entails the relationship of I-Myself; this is not a subjective, inner relationship, but the basis in terms of which people experience reality.

According to Binswanger, man is inextricably situated in these worlds, and to understand a person, one needs to describe and understand his world-design. The latter ought to include an account of the entire structure of the existence of the individual. In this regard, the life-

history of the individual plays an important role. However, whereas in psychoanalysis the examination of the life-history is the goal of investigation, for Binswanger (1946/1958) it merely provides material for understanding the person's world-design. In his work "The case of Ellen West", Binswanger (1944/1958) describes various forms which the world-design, as ways of transcending, can take. These include, for example, separation or opposition between the *Umwelt*, *Eigenwelt* and *Mitwelt*, here one of these worlds can become dominant over, or there could be a falling apart of 'the world' into irreconcilable worlds.

Binswanger used the above distinction of the *Umwelt*, *Eigenwelt* and *Mitwelt* in his earlier work to organise his descriptions. He later organised his analyses around a larger frame of reference, namely the distinction of "existential modes". The latter relate to dimensions of *Dasein* in regard to the *Mitwelt*, and consist of "dual", "plural", "singular" and "anonymous" existential modes. The dual existential mode is an extension of Buber's views on the I-Thou relationship and is roughly equivalent to the concept "intimacy". The plural mode relates to formal relationships, competition and struggle, where intimacy has made way for individuals "grappling" with one another. The singular mode involves a person's relationship with himself, such as the experience of one's body. The anonymous mode, is the mode of the individual living and acting, in an anonymous collectivity as a way of escaping from, or fighting fellow people (Ellenberger, 1958).

*Dasein*, according to Heidegger (1927/1980), is thrown into the world at a certain time and place, and into an environment where he has no choice. Binswanger (1944/1958) makes reference to thrownness, such as being born a woman, having particular parents and not others, being endowed a particular physical appearance, having to grow up in a particular country, and other similar 'acts of fate'. He describes how people revolt against this thrownness, for example, rebelling against being a woman. It is, however, not possible to escape one's thrownness, and efforts to shatter it or break through it, result in its reassertion in a different, perhaps pathological, way. "The more stubbornly (dictatorially) the human being opposes his being-thrown into his existence and therewith into existence in general, the more strongly this thrownness gains in influence" (Binswanger, 1944/1958: 340). Binswanger seems to have used Heidegger's ontological insight regarding thrownness, to gain understanding of particular, factual modes of Being-in-the-world.

According to Heidegger (1927/1980), Dasein finds itself in a particular fundamental situation (*Befindlichkeit*). The meaning of this situation can be determined through interpreting its prevailing mood. Mood is thus a basic existential way in which Dasein is its 'there'. This oneness of mood and world is reflected, on an ontic-anthropological level, in Binswanger's (1946/1958) views about moods and feelings. According to him, a feeling or a mood can only be understood if one understands how the existence that has the mood, or is in it, is in-the-world. To understand a mood thus requires an explication of the world-design of the person.

Binswanger (1944/1958) regards temporality as the fundamental horizon of all existential explication. According to him (Binswanger, 1946/1958), transcendence is rooted in time, in its unfolding into the future, its past ("having been") and the present. He emphasises, that the world-design can become narrowed and constricted to such a degree, that the self can be prevented from maturing. In this instance, the genuine orientation toward the future becomes replaced by a predominance of the past, the experiences the person has already lived. He, for example, describes Ellen West's life as one which no longer ran into the expanse of the future, but which circled in a bare, empty present, ruled by the past. Such an existence is deprived of its authentic life-meaning, of its existential ripening which involves unfolding into the future. If existence is 'cut off from its future', the world in which it exists becomes insignificant and irrelevant; in other words, there is nothing left for existence from which, and by which, it can understand itself.

However, existence is not only 'determined' by its future, the same as it is not 'determined' by its past. Future and past form a unity. "All futurity of the existence is therefore 'has-been' and all having-been is of the future" (Binswanger, 1944/1958: 303). The past (having-been), which includes the thrownness of existence, provides the 'capabilities' by virtue of which the existence exists, whilst the future provides possibilities for the actualisation of these 'capabilities' through practical action in the present. Such existential realisation forms the ground for authenticity.<sup>2</sup> "*Authentically* I am myself, or I *exist authentically* when I decisively resolve the situation in acting, in other words, where present and having-been unite in an *authentic* present" (Binswanger, 1944/1958: 298).

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<sup>2</sup> This view of authenticity is reminiscent of Heidegger's (1927/1980) view that authenticity is the process of becoming one's possibilities.

The authentic present involves creating the present by practical action. With regard to the latter, Binswanger (1944/1958: 274) says:

"It is practical action which places the existence on the earth, teaches it to stand and walk on it; more correctly expressed - in practical action, in everyday pre- and nonprofessional conduct (family, friendship, games, sports), and in professional activity, the existence establishes itself on the earth, creates its own *Lebensraum*, its possibilities of orientation and, at one with it, its 'practical self'. 'For it is only through the practical that we first become truly certain of our existence.' He who stands with both feet firmly on the ground knows where he stands, where he is going, and who he himself ('in practical life') is. Such a standing, going, and knowing we call 'striding', that is a 'ranging from one place to another' which knows about itself, its standpoint, and its goal."

A constricted world-design forms the ground for anxiety. Anxiety emerges when the world becomes shaky or threatens to vanish, thus delivering existence to nothingness. "The emptier, more simplified, and more constricted the world-design to which an existence has committed itself, the sooner will anxiety appear, and the more severe it will be" (Binswanger, 1946/1958:205). The world of the healthy is varied and if one region is threatened, other regions offer a foothold. However, if the world is dominated by one or a few categories, the threat to the preservation of that one or few categories intensifies anxiety (Binswanger, 1946/1958:205).

In conclusion, Binswanger applies several of Heidegger's views on the ontological structure of Dasein, including Being-in-the-world, thrownness, mood, temporality and authenticity on an anthropological level. This transition from an ontological to an ontic discourse can facilitate understanding of factually present individuals, such as in the psychologist's consulting room.

### **3.8 HEIDEGGER, BUBER AND BINSWANGER - A COMPARISON**

Buber, Heidegger and Binswanger hold the view that man is in the world with others. However, where Heidegger is concerned with the ontological structure of Dasein as Being-

in-the-world, and with *Mitsein* as an existential, Buber and Binswanger are interested in the relationships between people, at an ontic level.

According to both Buber and Heidegger, the Western technocratic society restricts man from being an authentic self. It compels man to live in the It. However, Buber seems to be more encouraging of man's ability to enter into a meaningful relationship with his world and others. For him there is always the possibility of an I-Thou. His view of man seems to be tempered with an awareness of man's immense struggle for mutuality and intimacy, in a technocratic world that is set for alienation. Binswanger, in his description of Ellen West, also reflects a positive view: "The possibilities of the truly singular or authentically existential and of the true dual and authentically loving mode of existence are still open even to this *Dasein*, if only for swiftly passing moments" (Binswanger, 1944/1958: 290). Heidegger, however, appears to be more pessimistic in his view of man. This should be viewed in the light of his own existence, which in a way opposes the views he puts forward. It almost seems as if he viewed man as being doomed to 'fallenness', and the only way in which man can pull back from it is through isolation.

Although Buber, Binswanger and Heidegger's thoughts have similarities and differences, one salient point emerges, man must experience his world with his whole being. This will enable man to enter into relations of true mutuality and genuine dialogue with others. If man is isolated from his world, himself and others he will be living in the solipsistic realm of the self, and will suffer the dreaded experience of loneliness.

The following chapter will focus on object relations theory in which Donald Winnicott's view on the development of the self out of its relational matrix, will be the focal point.

## **CHAPTER 4**

### **OBJECT RELATIONS THEORY**

#### **4.1 INTRODUCTION**

Although viewpoints differ, the importance of object relations is accepted by all psychoanalytical schools. Object relations theory, as an approach, has evolved over the last fifty years and comprises many theorists of diverse perspectives. The history of object relations theory, including the approach of Melanie Klein, Fairbairn, Guntrip, Kernberg, and many others is not within the scope of this study. In debating which theory would be most valuable in the understanding of the phenomenon under investigation in this study, it was decided that Winnicott's interpretation within the object relations theory, to be pertinent.

#### **4.2 AN OBJECT RELATIONS PERSPECTIVE: WINNICOTT'S VIEWS ON THE DEVELOPMENT OF THE SELF**

Masud Khan (1975/1992: xi) in his foreword to Winnicott's "Through Paediatrics to Psychoanalysis" claims of Winnicott, that one cannot begin to understand him and his talent, if one is not aware, that for him, psyche and soma are in perpetual dialogue and debate. Each man, according to him, has to find and define his own truth. Despite his protestations of continuity and alliance to the work of Klein and Freud, his work constitutes an approach to human experience which resides solidly within the relational/structural model (Greenberg & Mitchell, 1983).

Winnicott's work is creative and provocative, as his many publications bear witness to. Although Winnicott encountered a vast range of human suffering, despair and hopelessness, he saw the individual's destiny in a positive light. Winnicott saw his own work as limited, and his views only as revisions of earlier theoretical stances (Eigen, 1996).

According to Winnicott, the processes, leading to the development or the inhibition of the self, can only be seen and understood in the context of the interaction between the child, and the environmental provisions supplied by significant others. Winnicott was convinced of the fundamental importance of external reality, and its violating impingement on the infant's perception of the world (Greenberg & Mitchell, 1983; Khan, 1975/1992).

According to Winnicott the earliest object relations are established through the interaction between the developmental needs of the child, and maternal provisions offered by the mother, which are entirely separate from drive gratifications (Greenberg & Mitchell, 1983). He claims that gratification by itself does not necessarily meet the needs of the infant for a nurturing, holding environment. Maternal provisions are thus independent of the mother's ability to gratify the instinctual needs. A baby can be fed without love, but an autonomous healthy human being will not evolve out of a loveless impersonal environment (Winnicott, 1971/1988).

Winnicott's contribution is important for the understanding of loneliness. His ideas centre on what he depicts as the continuously hazardous struggle of self for an individual existence, which simultaneously allows for intimate contact with others. Various of his ideas are focal points in this study, for example, his view on the interrelatedness of the individual and his environment as well as the psyche and the soma. His understanding of the True and False Self and his concepts of the holding environment, bringing the world to the person, transitional object/transitional space, object relating and object usage. His view on the isolate core of the person which never communicates, which is sacredly private and worthy of preservation is an important consideration when one is in dialogue with another.

The above concepts are salient to the study and will, for the sake of clarity, be presented under various headings with the understanding that these concepts are not separate but inherently linked. Comments made, in the text, on the psychotherapeutic alliance are to explicate how Winnicott's theory can assist the psychotherapist in his dialogue with a patient.



### **4.3 DEVELOPMENT OF THE SELF**

The focus of this study is the experience of loneliness. Loneliness is inextricably linked to one's ability to enter into relationships with others. Furthermore, one's way of relating to others depend to a large extent on how one experiences oneself as an individuated, integrated being, and how far one has travelled on the road to ego maturity. According to Winnicott, the development of the self and/or distortions thereof will play an important role in one's ability to be alone. In health one has the capacity to tolerate aloneness. If a person is not able to tolerate the lonely state, the dreaded experience of loneliness will prevail, which according to him is illness (Winnicott, 1971/1988).

An understanding of Winnicott's views on the development of the self, presupposes an understanding of the importance of certain environmental provisions and the child's dependence on them.

#### **4.3.1 Environmental Provisions and the Holding Environment**

According to Winnicott, the development of a healthy, creative self, is dependent on an environment he has termed good-enough mothering. He claims that it is useless to describe babies in the earliest stages, except in relation to the mother's functioning. The infant does not develop in isolation; there is no such thing as a baby, only a baby and a mother in a relationship. "Human infants cannot start to be except under certain conditions" (Winnicott, 1960/1984a: 43). He recognises that these conditions do not determine the infant's potential. The infant's potential is inherited, but its development is inextricably linked to maternal care. Selfhood, as Winnicott termed it, is a developmental accomplishment rather than a biological given (Ivey, 1990; Winnicott, 1960/1984a). Therefore a good-enough holding environment by the primary caregiver is of cardinal importance. The importance of the holding environment will be reiterated throughout the text.

For Winnicott, the term holding does not only imply the actual physical holding of the infant, but also the total maternal environmental provisions before the ability to "live with others" develops. The term "living with" implies object relations, and the infant's emergence from the

state of merger with the mother. The latter implies that the infant can now recognise objects as external to himself (Winnicott, 1971/1988).

However, what does the holding environment entail? It includes the actual physical holding of the child. By holding her child, the mother can demonstrate her love for the infant. In unison with this, is the total management, handling and care of the infant. Holding protects the infant from physiological insult, takes into account the whole routine of care, and follows the day to day changes regarding the infant's physical/psychological growth and development. Although the baby possesses a spontaneous impulse to grow, it depends entirely on the mother's care (holding environment) for development. In this climate it is possible for the infant to start "existing and not reacting", and to differentiate his ego from that of the mother. This optimal environment makes possible the shift between infantile dependence, to independence and the cognitive shift, from omnipotent conception to realistic perception. Maternal care is thus important for negotiating the difficult stages from primary narcissism to object- relating (Winnicott, 1960/1984a, 1962/1984, 1971/1988).

Winnicott furthermore describes the mother's function as a mirroring function. He states: "In individual emotional development the precursor of the mirror is the mother's face." (Winnicott, 1971/1988: 130). In answering the question 'what does a baby see when looking at his mother's face?', he suggests that the baby sees himself. The mirroring function of the mother provides the infant with a precise reflection of his own experience and gestures, despite their fragmented and formless qualities. "When I look, I am seen so I exist." (Winnicott, 1971/1988: 134). The mother's ability to resonate with the baby's wants and needs allows for the infant to become attuned to his own bodily functions and impulses, which is the basis for the slowly evolving sense of self. The negative implications of this mirroring function of the mother will be discussed in more detail in paragraph 4.3.3.

This responsiveness of the mother is not necessary for long. The infant must learn the reality that the world is outside his control, and that his powers are limited. This is made possible by the mother's failure, little by little, to shape the world according to the infant's demands. This maternal failure is necessary for the development of separation and differentiation. The mother now knows that the infant has a new capacity, that of giving

signals, to guide her to what the infant needs. It must be emphasised that the mother must fail the infant's id but never its ego (Khan, 1986; Winnicott, 1960/1984a).

The holding environment has important implications for therapy. During the various phases of therapy, a patient often enters a state of regressed dependence, which he cannot manage on his own. He requires someone to recognise this need and to be there to meet him in this need. How does Winnicott view this regression? According to him regression is not a return to certain phases of libidinal fixations. He views regression as a return to that time in which the environment has failed the child. Where adequate parental provisions were absent, development stops, and the absent developmental needs dominate subsequent living. In other words, regression is a search for missing relational experiences. Winnicott sees in the analytic/psychotherapeutic setting, a place where these missing parental provisions are provided and the early developmental needs filled. It is in this attentive, reliable and responsive environment, where no premature demands are made on him, that the patient can become 'unstuck' and proceed to grow (Winnicott, cited in Goldman 1993).

In the therapeutic relationship it is important for the therapist to allow for the patient to give signals according to his needs. Being too readily there with an 'understanding' of the patient's needs, will foster an inability in the patient to gain control. It is necessary for the therapist to fail the patient little by little, and in doing so, place the world before the patient. Therefore the patient can be allowed to move from dependence to independence, when intellectual understanding can be tolerated. The holding environment is important to allow for regression and dependence, but it does not imply that the psychotherapist must be unnecessarily gratifying. The important role of interpretation, at the appropriate time, must not be denied. As Winnicott says, interpretation can be a good hold (Winnicott, 1971/1993).

Winnicott expands his view of the mother as a mirror to encompass the mirror role of the whole family. He claims that as the child develops, the child becomes less and less dependent on reclaiming the self from the mother and the father's face, and from siblings. However, if a family is intact, each child derives benefit from being able to see himself in the attitudes of the individual members, or in the attitudes of the family as a whole (Winnicott, 1971/1988). It can be assumed that Winnicott had in mind a relative healthy functional family unit in his use of the word intact.

#### 4.3.2 From Unintegration to Integration

Winnicott has provided a powerful account of the development of the self out of this relational matrix which comprises the mother and the family. Almost all his contributions centre on what he depicts as the continually hazardous struggle of the self for an individuated existence, which at the same time allows for intimate contact with others. His key interest is the delicate and intricate dialectic between contact and differentiation.

The infant starts its life in a state of unintegration, "an immature being who is all the time on the brink of unthinkable anxiety" (Winnicott, 1962/1984: 57). The infant strives for the establishment of a 'unit self'. This requires the ego to move from an unintegrated state, to a state of structured integration. Integration covers almost all the developmental tasks (Winnicott, 1967/1986).

How does the child manage this hazardous journey from unintegration to integration? Greenberg and Mitchell (1983: 190) poses the questions:

"how does a child discover himself within the mother's care without losing himself to her? How can a child differentiate himself, yet retain maternal resources? How can one communicate without being depleted, be seen without being appropriated, be touched without being exploited. How can one preserve a personal core without becoming isolated?"

In answer to these questions the mother's ego coverage plays a cardinal role. Ego-coverage refers to the supportive function of the mother in her relationship with the child during his journey to integration. If the ego-coverage given by the mother is good enough it enables the infant to "build up a personality on the pattern of going-on-being." (Winnicott, 1962/1984: 60). Should the infant not have this person to gather its bits together, it starts with a handicap in its own self-integrating task. "All failures bring about a reaction of the infant, and this reaction cuts across the-going-on-being." (Winnicott, 1962/1984: 60). Anxiety (unthinkable anxiety) in this early stage, relates to the threat of annihilation. The alternative to being is reacting and reacting interrupts being and annihilates. If these impingements, or

rather the infants reaction to these, are persistent, a pattern of fragmentation of being is set into motion.

An important aspect of the mother's task here is her ability to tolerate the infant's aggression. Before integration the infant is ruthless and unconcerned. He is not yet able to realise that he destroys in excitement the very thing he loves in restful periods. Here aggression is seen as a part of love. If aggression is lost at this stage through the mother not being able to let herself be used as an object for the infant's rage, there will be some degree of loss in the capacity to love. This aggression drives the infant to a not-me, an object external to himself which assists the infant in the process of integration and object relating. (Winnicott, 1950/1992). One could postulate that, should the capacity to love be lost, it will have devastating consequences for future object relations, which in turn will lead to the experience of loneliness.

The mother's task is to guide the child towards object relating. "Object relating is something the maturational process drives the baby to achieve, but cannot happen unless the world is presented to the baby well enough." (Winnicott, 1967/1986: 30). Therefore, the mother does not only create a holding environment for the child, she also brings the world to the child. The adapting mother presents the world in such a way, that the baby starts with a ration of the experience of omnipotence, which is the basis for the baby coming to terms later with the reality principle (Winnicott, 1967/1986). However, the infant meets with the reality principle now and then, and not all at once. Winnicott (1962/1984: 62) claims the initiation of object relating to be complex and explains the process as follows:

"It cannot take place except by the environmental provision of object-presenting, done in such a way that the baby creates the object. The pattern is thus: the baby develops a vague expectation that has origin in an unformulated need. The adaptive mother presents an object or a manipulation that meets the baby's needs, and so the baby begins to need just that which the mother presents. In this way the baby comes to feel confident in being able to create objects and to create the actual world. The mother gives the baby a brief period in which omnipotence is a matter of experience."

It is a paradox: the baby creates the object but the object is already there, otherwise he would not have created it. This paradox must be accepted according to Winnicott and not resolved. This is crucial for the healthy development of the child (Winnicott, 1962/1984).

The infant changes from having a relationship with a subjectively conceived object, to having a relationship with an object perceived as 'not me'. The infant evolves from being merged with the mother, to being separate from her, and this is related to the phase of 'living with'. The infant now enters a stage of concern and the capacity to feel guilty, because he realises that he is damaging the loved person. This implies ego integration in the sense that the infant is able to see the object as separate from himself. Winnicott (1971/1988: 206) states:

"The individual's ego integration is sufficient for him to appreciate the personality of the mother figure, and this has the tremendously important result that he is concerned as to the results of his instinctual experience, physical and ideational."

The infant now starts the lifelong task of managing its inner world. The infant can distinguish what is inside and what is external, actual as well as its own fantasy (Winnicott, 1950/1992; 1971/1988).

Furthermore, the mother must assist in the child's task to establish a satisfactory working arrangement between the psyche and the soma. Winnicott terms this personalisation as a kind of positive form of depersonalisation. The physical part of infant care, for example, touching, bathing, feeding is designed to help the infant in this task. "The self finds itself naturally placed inside the body, but may in certain circumstances become dissociated from the body or the body from it." (Winnicott, 1972/1996: 525). This dissociation is as a result of maternal failure. He claims that in health, the use of the body and all its function, is enjoyable for the individual (Winnicott, 1950/1992; 1967/1986; 1972/1996)

In conclusion Winnicott terms three trends in early ego development which he matches with three aspects of infant and child care, which are described next. Firstly, integration is the tendency towards the establishment of a unit self, in other words, the building up of a personality on the pattern of a continuity of 'going on being'. This process is linked to the holding environment and all it implies. Secondly, personalisation refers to a firm union

between ego and body, with the skin as the limiting membrane. This aspect of development is linked to the handling of the child by the care-givers. Thirdly, realisation refers to the child's ability to cope with reality, at which stage his ego is integrated enough to initiate object relating. Here he sees the mother's ability to present an object that meets the baby's needs as important (Winnicott, 1945/1992; 1962/1984).

During his journey to integration, the infant thus moves through various modes of dependence. The phase of absolute dependence exists where it cannot gain control, but can only go on being through its mother's ego-supportive function, or it suffers disturbance through lack thereof. This is the time of 'primary maternal preoccupation. Not only is the infant in a dependent state, but so is the mother, which Winnicott termed absolute dependence. If the mother is at this stage unable to perform her task of protecting her infant's going-on-being, it interferes with the infant's natural tendency to become an integrated self with a past, present, and future. This development of a sense of time is a necessary ingredient for mastering the repetitive losses that must be endured in the course of living. Eventually, the mother must gradually fail the child in order to give the infant reason for anger. If this is not allowed, the infant will be unable to fuse aggression with loving. If all is well, the reward is that the child's development is not distorted and moves to a state of relative dependence (Winnicott, 1963/1984a).

During the phase of relative dependence the child becomes aware of what he needs from maternal care and can then, to a growing extent, relate it to personal impulses. Should the mother be away for a moment, beyond the timespan of his capacity to believe in her survival, anxiety appears. The child becomes aware that he is dependent on his mother and can understand this cognitively (Winnicott, 1963/1984a).

The infant now moves towards independence. It can now do without care (maternal preoccupation). The child is able to begin to give things up, to throw them away (weaning age). The infant now has developed a sense of time which is a prerequisite for the appreciation of the difference between fact and fantasy. This is the depressive position, or as Winnicott called it, the stage of concern. During this process there has been the accumulation of memories of care, the projection of personal needs, and the introjection of care details. If these were 'good enough', the child will develop confidence in the

environment and his reaction to loss will be grief and sadness. Intellectual understanding and its implications now emerge (Winnicott, 1963/1984a; 1963/1984b; 1971/1988).

This does not imply that the infant now does not need care from its environment, only that the care becomes both more and less. Maternal preoccupation is no longer necessary and others in the child's environment will play a significant role in the child's care, that is 'living with' others. Winnicott (1972/1996: 525) explains:

"The relationship between the boy or girl with his or her own internal psychic organisation becomes modified according to the expectations that are displayed by the father and the mother and those who have become significant in the external life of the individual."

The child has now grown and continues to grow from dependence and immaturity to independence. The child now has the capacity to identify with mature love objects without the loss of his individual identity. By this nature the person will be able to enter into meaningful relations with others which will in turn alleviate loneliness.

#### **4.3.3 Failure of Environmental Provisions**

What happens when the baby does not see itself in the mother's eyes, but sees reflected there the mother's own mood, or worse still, her defences? What if the mother cannot 'put aside' her own needs, to enable her to resonate with the needs of her baby? Winnicott claims the consequence to the infant, to be the atrophy of his creative ability and he must find other ways of getting something for himself from the environment. The baby sees his mother's face which is not a mirror. The mother's mood dominates, and the baby learns that his personal needs must be withdrawn, otherwise his central self will suffer. This failure thus undercuts the child's sense of hallucinatory omnipotence and constricts his belief in his creativity and powers. It drives a wedge between the evolution of the psyche and its somatic underpinnings (Winnicott, 1967/1988; Greenberg & Mitchell, 1983).

It must be clarified that Winnicott did not refer to the satisfaction of instincts when he referred to the meeting of the infant's needs. He explains as follows:

"In the area that I am examining the instincts are not yet clearly defined as internal to the infant. The instinct can be as much external as can a clap of



thunder or a hit. The infant's ego is building up strength and in consequence is getting towards a state in which id demands will be felt as part of the self, and not as environmental. When this development occurs, then id satisfaction becomes a very important strengthener of the ego, or of the True Self; but id excitements can be traumatic when the ego is not yet able to integrate them, and not yet able to contain the risks involved and the frustrations experienced up to the point when id-satisfaction becomes a fact" (Winnicott, 1960/1984b: 141).

Therefore, should the infant be forced to integrate id-excitements before it is ready, it will have crippling consequences for the infant's ego development. This leads to distortions of the ego-organisation which lay down the basis for schizoid characteristics, or the development of a self which takes over its own care to compensate for the mother's failure. Precocious development, leading to the organisation of a personality that is false, will be discussed in more detail later.

Mirroring and impingements play an important role in the psychotherapeutic process. The psychotherapist should allow for the patient's intolerable feelings and simply mirror them, not 'act' out on them. Acting out will constitute impingement on the patient which will hamper his going-on-being, and will lead to him reacting to the therapist's failure by reverting to previous dysfunctional behaviour.

#### **4.3.4 Too Good-mothering**

Winnicott's recognition of the danger of the too-good mother is not often quoted, but it seems that the implications for the child's development are important and warrant mention. He speaks of the mother who adapts to a baby's desires too well, beyond the first few months. The mother does not wait for the child to signal his needs, and the child has no means of gaining control. This leads, either to a permanent state of regression, or merger with the mother, or a total rejection of her. The infant actually gains from experiencing frustration and this enables it to make objects real. It is the mother's task to disillusion the baby gradually in order for him to distinguish the 'not me' from the 'me'. This is where Winnicott believes the too good mother fails in her task. (Hopkins, 1996; Winnicott 1960/1984a).

Hopkins (1996) assumes that this must lead to emotional alienation from the mother manifesting in the inability to turn to her in times of distress, and an inability to confide in her. If a child is not allowed to be frustrated, how can it disclose distress. Furthermore 'too good-mothering' may lead to permanent regression and merger. The mother-infant couple needs to balance the infant's experience after the first three months between satisfaction and frustration, as well as separation and merger.

The implications of this for therapy could be profound. Should the psychotherapist be a too-good mother he might hamper patient's emergence from a state of dependence and/or regression in the therapeutic alliance. Furthermore, the person entering the consulting room usually finds himself there because of 'difficult to bear feeling states'. The symptoms of these can vary from severe pathologies, to more day to day feelings of depression, boredom, meaninglessness, anxiety, anger, and many others. The psychotherapist must be able to hold these initially, but must eventually bring them to the patient's awareness. In other words, these feelings must be tolerated and not denied. The patient must not be reassured in order to make these feelings more bearable for both therapist and patient.

Winnicott saw in the very vulnerability of man, his true potential for relating to others. This relating is due to need and desire, and not merely for the autonomous gratification of compelling id impulses through the complicity with others. Therefore, to develop a healthy self the infant is dependent on the environmental provisions afforded by the primary care giver, in early infancy comprising a holding environment, a precise reflection of the mirror functioning, and the careful process of disillusion of the infant through maternal failure.

However, what will be the outcome if the environmental provisions fail the child and the ego-supportive function of the mother is inadequate?

#### **4.3.5 Precocious development and the emergence of the False Self.**

According to Winnicott the True Self is the vital core of the personality. He holds that the True Self is ultimately unknowable. It is the secret, sacred, inviolable centre of our being. He claims that the lack of contact with others, as well as total accessibility to others, pose grave

dangers for the survival of the Self. The private isolate core must be afforded the privacy it needs for survival. Eigen (1996: 81) puts it as follows: "The sin against self is the communication with the core of cores, the self beyond reach, the self that is essentially private, one's psychic heartbeat". Everything revolves around, grows out of, guards and extends this still, quiet centre. It is immune from the reality principle and forever silent. Here communication is non-verbal and absolutely personal. "It belongs to being alive. And in health, it is out of this that communication naturally arises" (Winnicott, 1963/1993: 38).

Winnicott's view on the inviolate core of Self needs further clarification. He claims that:

"Although healthy persons communicate and enjoy communicating, the other fact is equally true, that each individual is an isolate, permanently non-communicating, permanently unknown, in fact unfound. The question is: how to be isolated without being insulated?" (Winnicott, 1963/1993: 33).

It could be postulated that the core is as Eigen (1996) says 'the core of cores'. This could mean that it is only a small part of the Self that must stay private and in so doing communication from the True Self will evolve, when it is ready, in order for it to be creative and spontaneous, and not to be atrophied.

Winnicott (1971/1988) explains the implications for the infant's ego development should it experience its environment as threatening. Any impingement on this isolation of the True Self constitute major anxiety, and defences are now brought into play to ward off the impingements which might disturb this isolation. Impingements at this stage constitute claims from the outside world on the infant before it is ready. Winnicott depicts an image of the child establishing a private self that is not communicating but at the same time wanting to communicate. "It is a sophisticated game of hide and seek in which it is a joy to be hidden but a disaster not to be found." (Winnicott, 1963/1993: 32). According to him defences are strengthened against being found before being there to be found. He claims that, that which is truly personal and feels real must be defended, at all costs, even in the face of compromise

During the development of the True Self, the holding environment is essential. If the good-enough mother repeatedly meets the infant's omnipotence and to some extent make sense of it the True Self evolves. Winnicott explains that ideally the True Self, nurtured in a non-

impinging environment represents "the inherited potential which is experiencing a continuity of being, and acquiring in its own way at its own speed a personal psychic reality and a personal body scheme." (Winnicott, 1960/1984a: 46).

The alternative to 'being' is reacting. Reacting on the other hand interrupts 'being' and annihilates, so the infant must choose between 'being' and annihilation. Should the holding environment not be good-enough and the mother's own defences interfere with the way of 'being', the child must react to his environment. Persistent maternal failure to provide a holding environment, for the infant, thus leads to fragmentation of the infant's experience and to it precociously taking over its self care. The child now turns away from the mother and into himself, leaving the False Self to comply with the demands of his environment. This results in a split between the True Self which becomes detached and atrophied and the False Self. The False Self becomes an illusion of a personal existence based on compliant adaptation to external demands and expectations, rather than as a spontaneous expression of the infant's real self. The False Self covertly protects the True Self. As Winnicott phrases it "The True Self has been traumatised and it must never be found and wounded again" (Winnicott, 1967/1986: 33).

When a child feels his going-on-being to be so threatened by environmental impingements, the only way to survive is to become exactly that which the external environment wants it to be. Although parents in modern Western society are sophisticated in their knowledge of child rearing, they are also competitive. Their children must be as good as, or better than others, regardless of the cost to the child. The only way for the child to behave is to comply, and to become the 'good', 'clever', 'sporty', 'pretty' one.

Once the False Self is firmly in place, it draws on cognitive functions in its anticipation of, and reactions to, environmental impingements, resulting in an overactivity of mind and a separation of the cognitive processes from the affective or somatic grounding. The affective, and linked to that, its somatic underpinnings, goes into hiding. Intellect takes over. A patient once described this way of being as only existing in the top of her head. Winnicott (1967/1986) claims that society is easily taken in by the False Self organisation, and has to pay heavily for it. Functioning in the mode of the False Self often leads to academic and occupational success, but over time the person experiences himself as bored, detached and

lacking in spontaneity. Occupational success is often 'not owned', and the person lives in fear of being caught out. Although the False Self is a successful defence, it is not an aspect of health (Ogden, 1992; Winnicott, 1967/1986).

Winnicott (1960/1984b) classifies the False Self organisations according to its defensive nature as follows: at one extreme there is the False Self presenting as real, in all living relationships, while the True Self is hidden. Less extreme in nature is when the False Self defends the True Self, but the True Self is allowed a hidden life and its potential is acknowledged. Even more towards health is the True Self which evolves at a risk, and the False Self's main concern is to find conditions which will make this possible. More towards health is when the False Self is built on identifications, which is normal in adolescence. In health, the False Self gains and maintains a place in society (that is, it fits in with social expectations) which the True self can never achieve on its own.

Winnicott (1963/1993) claims that the False Self's communication with the world does not feel real, and therefore is not a true communication. It can be postulated that this often leads to a dreaded experience of loneliness as the True Self never communicates. The personality is, as Alice Miller (1987) puts it, an "as if" personality. This, in turn, leads to feelings of disconnectedness with others which results in the isolation and alienation of self. The fear of annihilation of the True Self evokes anxiety, and this anxiety is often one of the symptoms patients present with in the psychotherapist's consulting room. It can manifest itself in frenzied daily activity, which is the only way in which the person knows to make himself feel real. The person may do continual 'good', without questioning his own needs and desires. He has learnt that own needs are not allowed, and the person stays in service of the needs of others.

Premature interpretations in the psychotherapeutic relationship can be experienced by the patient as impingement, forcing him to develop at somebody else's pace and according to somebody else's understanding of him. This can play into the hand of the False Self and affirm to the patient that this is the only way of relating. The True Self must be given a chance to enter into the dialogue without the fear of being traumatised yet again.

However, personhood according to Winnicott, is fragile and there is always tension between subjective experience and objective reality. According to him it does not matter how successfully one negotiates this fear of exploitation of the True Self. It persists as the deepest dread, and therefore remains as a self that is non-communicating, and the personal core of the self is truly isolate (Greenberg & Mitchell, 1983). This must be respected in the consulting room. The patient must be allowed to preserve his personal core, without demands from the psychotherapist on the patient to make himself totally accessible to the therapist. Should the psychotherapeutic environment seem threatening to the patient, the patient will most likely turn back into himself, which will strengthen the False Self defence.

Although this isolation and alienation from the self leaves the individual in the despair of loneliness, Winnicott provides hope when he says that a person can acquire the ability to be alone and to accept his loneliness under certain conditions.

#### **4.3.6 On the ability to be alone**

Erich (1998: 136) states as follows:

"psychoanalytic treatment of loneliness, more often than not, is negatively defined or is characterised as the absence of a positive, either the lack of presence of the other, or the incapacity to tolerate this absence and be alone".

Winnicott, however, looked at the aloneness of the individual in a novel way. According to him psycho-analytic literature gave credence to the fear of being alone and the wish to be alone. He poses a question about the ability to be alone. He thus addresses the positive aspects of being alone which leads one to an understanding, of why people cannot tolerate the lonely state, and of what has to be done, to open up this experience for the human being (Winnicott, 1958/1984).

Winnicott (1958/1984) claims that this capacity to be alone is one of the most important signs of maturity in emotional development, and is a highly sophisticated phenomenon. He states that when a person can say "I am alone", integration is a fact. In the psychotherapeutic alliance it presupposes the ability to tolerate silence. Furthermore the infant's relationship to the mother, which he terms ego-relatedness, is of immense value for

the development of the capacity to be alone. He puts it as follows : "I attach a great importance to this relationship, as I consider that it is the stuff out of which friendship is made. It may turn out to be the matrix of transference." (Winnicott, 1958/1984: 33).

Although this capacity to be alone presupposes a certain sophistication, the infant can be alone at a very early age, in the presence of another. Here, the ego immaturity is naturally balanced by ego support from the mother. He suggests that it is extremely important for the mother, not only to shape the world to the infant's demands, but also to provide a non-demanding presence when the infant is not making demands or experiencing needs. This is a holding environment resonating with the child's needs. It enables the infant to experience needlessness and complete unintegration, a state of "going on being" out of which needs and spontaneous gestures emerge. The mother's non-demanding presence makes this experience of formlessness and comfortable solitude, possible. A relative freedom of persecutory anxiety exists, and good internal objects are in the person's personal inner world, and available for projection at a suitable moment. This capacity becomes a central feature in the development of a stable and personal self. It is thus a paradox: it is an experience of being alone while somebody else is present but undemanding (Greenberg & Mitchell, 1983; Winnicott, 1958/1984).

The child can only tolerate being alone, or his loneliness, within the safe knowledge that the mother is present. Winnicott therefore, not only humanises aloneness, but renders it an ego-related experience positively involving the other person. However, should the mother fail here in her task, the child will probably develop a dread of being alone, and therefore a dread of loneliness.

In the consulting room it is often necessary for the psychotherapist to fulfil this ego supportive function. It also presupposes the ability to tolerate silence, to allow the patient to be without any demands made on him.

Winnicott makes use of the concept of transitional space to clarify the evolving child's move from total dependence, to relative independence. Here inner reality, as well as external life, plays a role.

#### **4.3.7 Transitional objects and transitional space**

Winnicott regards the formation of "transitional objects" as another aspect of the larger process entailing the development of the person. Transitional phenomena refer to developmental "in betweenness" of the hallucinatory omnipotence and the recognition of objective reality. Winnicott perceives this transitional area as:

"the third part of life of a human being, a part that we cannot ignore, it is an intermediate area of experiencing to which inner reality and external life both contribute. It is an area that is not challenged, because no claim is made on its behalf except that it shall exist as a resting place for the individual engaged in the perpetual task of keeping inner and outer reality separate yet interrelated" (Winnicott, 1971/1988: 3).

As an infant emerges it moves from a state of illusory omnipotence in which it, through the mother's facilitation, feels it creates and controls the world it lives in. The infant evolves to a state of objective perception in which it becomes aware that its powers are limited, and that others exist independent of him. At this stage the infant can use symbolism and can distinguish between fantasy and fact, as well as between internal and external objects. The infant uses the transitional space to move from the purely subjective, to the objective (Winnicott, 1971/1988)

Winnicott contrasts these two states as solipsistic subjectivity and objective perception, the inner world with the world of outer reality. The relations with transitional objects constitutes a transitional realm. Winnicott refers to it as a period of hesitation, between these two states. Movement between these two states are not linear as both children and adults vacillate between them (Greenberg & Mitchell, 1983; Eigen, 1996; Winnicott, 1971/1988).

The transitional object is not under magical control nor outside control and the origin and nature of it must not be questioned. Transitional objects are important for what they are as well as for what they are not. They are not the mother or the self, but feelings of mother and self are invested in them. It is not the first object of object relationships, but rather the first possession and the intermediate area between the subjective and that which is objectively perceived (Winnicott, 1971/1988).



According to Winnicott there are special qualities to the infants relationship with the object. The infant assumes a right over the object which he can affectionately cuddle, handle, abuse, lose or rediscover. The object must not change, unless the infant changes it, and it must survive instinctual loving, hating and perhaps aggression. It must show a reality of its own but is not from the inside, nor from the outside, and becomes deattached with time. Its thingness is not important, only that it helps the child to sustain the growing inner reality and helps it to differentiate it from the outer world (Eigen, 1996; Winnicott, 1971/1988).

The parent who understands this, allocates the object to neither of the two realms, and does not question the baby's right and privileges he created over the transitional object. Due to the ambiguous and paradoxical status of the transitional object, it helps the baby to negotiate the gradual shift, from the experience of himself as the centre of a totally subjective world, to himself as a person amongst other persons. Transitional experience is not only a developmental interlude but remains a highly valuable realm within the adult experience. It allows the child to play, and the adult to play with his fantasies, without the threat of being lost in the totally subjective solipsistic realm (Greenberg and Mitchell, 1983; Winnicott, 1971//1988).

In the transitional experience, access is maintained to the most private wellspring of thoughts and imagery without one being held accountable for them in the clear harsh light of objective reality (Greenberg and Mitchell, 1983). A transitional space must be made available in the psychotherapeutic situation, to allow for the patient to move from a solipsistic realm of self, into the realm of fulfilling object relations. It is the transitional space which allows the patient to 'play' in the consulting room.

#### **4.3.8 Object relating and Object-usage**

In later writings Winnicott highlights another feature of the emergence of the person. He distinguishes between "object relating" and "object-usage", in his understanding of the function of aggression and destruction in the process of separation.

Object relating is defined as subjective, projective experiencing in which the other is under the infant's illusionary control. Object-usage on the other hand is the perception of and interaction with the other, as independent, real and outside the infant's control. The infant reacts against a sense of unreality. It needs to break out of its fantasy world, with rage and fury. Now everything depends on the object's reaction. If it survives, it brings forth a new sense of realness. The infant can now really use another for its true growth. He does not have to falsify himself. According to Winnicott, for object usage to occur, object relating must already be established (Slochower, 1994; Winnicott, 1971/1988).

Winnicott examines that which makes the transition possible. Again a paradox is involved: the child destroys the object because he has experienced it as separate and outside his subjective control. The child places the object outside his omnipotent control because he is aware of having destroyed it. Thus the child uses and destroys the object because it has become real and the object becomes real, because he has destroyed it. The survival of the object is crucial. The object is there to receive the communication that it has been destroyed. In other words, to use an object, there must be an external object which allows itself to be used. In this way, the child moves to that which is external to himself and is part of the change to the reality principle. Obviously for this maturational process to happen a facilitating environment is crucial. The mother's non-retaliatory durability allows the infant the experience of unconcerned 'usage' which in turn helps him in creating the belief that others outside his omnipotent control are resilient (Greenberg & Mitchell, 1983; Winnicott, 1971/1988).

In the psychotherapeutic alliance the psychotherapist must frequently allow the patient to use him as an object, whether the use is destructive, aggressive, or loving. The therapist's resilience to withstand these attacks, without retaliation, will play a major role in the process which allows the patient to relate to the therapist.

In summary: Winnicott's basic hypothesis, namely, good-enough environmental provisions, and most importantly the mother's holding function, are critical for the infant's optimal development. The mother's failure to provide the infant with a good-enough holding environment, induces pressure on the relatively mature child, as well as the adult, to correct the imbalances and dissociations in ego-integration. If the mother is unable to regulate, both

external and internal stimuli, it will impinge on the infant. These impingements on the developing child are disruptive of true ego-integration and lead to premature defensive organisation and functioning. The development of the False Self is one result of these failures in the caretaking environment.

The central themes of Winnicott's work are usually presented in the form of thought-provoking paradoxes. These are not tightly reasoned, but more in the way of discussions, and reflects his idiosyncratic thought processes. Khan (1975/1992), one of his most faithful followers, describes his style as "cryptic". It can be said that Winnicott's formulations allow themselves to be taken in many directions. However, he placed great importance on 'feeling free', and his formulations always have in mind growth and freedom for the self. Winnicott has been criticised for being vague, but, as Eigen (1996: 70) puts it: "vague but usable". This becomes apparent when one realises that his theory does not lend itself to the concreteness of linear reading. Another of his concepts, which is open for criticism, is that of the incommunicado core of self. Guntrip asks, how a self which is dependent on a relational matrix for its development, can have that which is most precious to it, outside the range of human communication (Eigen, 1996).

Notwithstanding, it is a theory that seeks understanding of the development of the self in a creative way. He himself claimed that he did not want to be tied down to his own terms, that he wished to use them flexibly. There is no dogmatism in his approach. He believed in personal freedom.

#### **4.4 MASSUD KHAN - CUMULATIVE TRAUMA**

The question can be asked how Winnicott's theory can be related to the further development of the child. To assist in this Massud Khan's (a follower of Winnicott) views will be briefly examined. Khan (1986) coins the phrase, "cumulative trauma", for these impingements from the mother's failure in her role as a protective shield. According to him, a treacherous aspect of 'cumulative trauma' is that it operates and builds up silently throughout childhood into adolescence. These impingements do not necessarily mean gross failures but rather consistent failures over a period of time. He claims that this failure:

"tends to get organized into an active collusive relationship between mother and child in the late oral, early anal and phallic phases- the phases where the emergent instinctual process and maturational ego- process test the mother with their full need and demand....the chief psychic process of such collusive relationship is identification... the phase at which the child himself acutely becomes aware of the distortive and disruptive effects of this collusive bond with the mother, is in adolescence. Then the reaction is dramatically rejective of the mother and all past cathexes of her, This, of course, makes the adolescent process of integration at once tortuous and impossible." (Khan, 1986: 133).

Khan (1986: 135) further states that, although the infants ego is weak, vulnerable and extremely dependent on the mother's role as protective shield, it would be remiss not to recognise the infant's inherent resilience and strength. Although the ego can survive these impingements, and "mute the cumulative trauma into abeyance", emerging to fairly healthy and normal functioning, it may break down in later life under acute stress and in crisis. One can assume that it is at this time, that the patient will enter the consulting room, and it is then that awareness of 'cumulative trauma' can be important in assisting in the journey towards growth.

#### **4.5 CONCLUSION**

Winnicott views can facilitate our understanding of the experienced phenomenon of loneliness. His views on the importance of an environment that is able to allow a child to develop to his full potential, emphasises the importance of one's interrelatedness with others. In the event of this environment, in the form of parental provisions, not being available, the child cannot develop into an emotionally mature and authentic being who can relate to others. The development of a rigid False Self and the inability to be alone, are some of the consequences of this. The child feels alienated from himself which leads to loneliness, which is not recognised as disconnectedness between self and others, and is a cause of dread. Miller (1987: 15) calls this alienation from the self, "the True Self's 'solitary confinement' within the prison of the False Self". This contrasts with a healthy narcissism which depicts an ideal case of a person who is genuinely alive, with free access to his True Self and authentic feelings.

The loneliness and desertion experienced in childhood foster a sense of abandonment. It even manifests where children are the pride of their parents. This "pride" however, is conditional and available only as long as the children adhere to the mould the parents have set for them. There is a sense of emptiness and self alienation that comes to the fore as soon as they feel they have failed. This accommodation to parental needs (Winnicott's False Self) is so ingrained in Western society that children often find it difficult to differentiate and/or to develop a True Self. The child's own real needs are not recognised and he only receives recognition and love when the False Self is presented. Alienation within the self and from others follows, and the person is lonely (Brice, 1984; Miller, 1987; Quinodoz, 1993).

It usually requires the therapeutic alliance to enable the person to grow into full personhood, and to live authentically in genuine dialogue with others without losing his separate being.

In the following chapter the convergence and divergence of the thoughts of Winnicott, Heidegger and Buber will be addressed

## CHAPTER 5

### WINNICOTT AND HEIDEGGER: CONVERGENCE AND DIVERGENCE

#### 5.1 INTRODUCTION

An important question that must be addressed is whether the transition from Heidegger's fundamental ontology to an ontic discourse is legitimate. This is discussed in the first part of this chapter. Thereafter, the convergence and the divergence of the views of Winnicott and Heidegger will be discussed. Where applicable, reference will also be made to the views of Buber and Binswanger to facilitate the discussion of the movement from an ontological level, to an ontic-anthropological and psychological discourse.

#### 5.2 HEIDEGGER'S FUNDAMENTAL ONTOLOGY AND PSYCHOLOGY

As already stated in Chapter 1, Heidegger did not develop a philosophical anthropology, he was not a psychologist, he resisted being labelled an existentialist and was also hesitant, especially in his later work, to use the term phenomenology. His aim, in his work *Sein und Zeit*, was to investigate the nature of the Being of Dasein. This is a fundamental ontological investigation into the Dasein. He aimed at understanding man as a whole, in totality, by revealing and explicating the conditions or structures of his existence. Possibly, in view of his approach to understand Being by enquiring into the existence of man, and also because of the incompleteness of Being and Time, Heidegger is sometimes referred to as an existentialist (Preller, 1977; Spiegelberg, 1971). He rejected this label. Human existence was not, for him, the primary or final philosophical problem. This should be seen in the context of the development of Heidegger's thought and his work after *Being and Time*. Analysis of the ontological structure of Dasein was a preparation for the final question about Being in general (Preller, 1977; Spiegelberg, 1971). In spite of this, his work had an important influence on existentialist thinkers. Kruger (1988: 24), while recognising Heidegger's refusal to identify himself as an existentialist, goes as far as to say "that it was he who first elaborated the various dimensions of standing out to the world or existence" and

says that in this thinker, the two streams of phenomenology and existentialism are joined together.

In his later work, Heidegger avoided the use of phenomenological terminology. His approach was not phenomenological in the sense of Husserl's phenomenology. However, the careful reviews by Spiegelberg (1971) and Preller (1977), show that Heidegger used phenomenology as a method, especially in his work *Being and Time*. This is summarised by Preller (1977: 92-93) as follows:

“Wat dus na vore kom, is dat Heidegger se fenomenologie van hermeneutiese aard is; dat dit die uitlegging of aan die lig bring is van wat sigself aanvanklik nog verberg; dat dit wat hy wil oopdek, die Syn is; dat hy hiervoor by die mens begin; dat dit in sy hermeneutika gaan om 'n fenomenologies-analitiese vasstelling van die menslike eksistensie. Vir Husserl was die fenomenologie dié filosofie, vir Heidegger was die fenomenologie slegs die middel tot die oplossing van sy basiese probleem: dit het nooit 'n oorheersende rol in sy filosofie gespeel nie.”

As Heidegger used the human being, as his point of departure in his search for the meaning of Being, an impression is created that he is a philosophical anthropologist. This is not the case, his only interest in philosophical anthropology was that it provided him with a stepping stone, on the way to ontology (Spiegelberg, 1971). Heidegger's ontology, nevertheless had an important influence on the view of man, as reflected in the works of people such as Binswanger. Binswanger integrated Buber's views, on the I-Thou relationship and Heidegger's views about, for example, Being-in-the-world and Being-with-others, and made it subservient to psychology (Muller, 1967).

Although the search for the meaning of Being is done through an analysis of the concrete being, Being is not located in being. The opposite is true. The essence of man is given in Being (Preller, 1977). To discuss whether Being becomes unveiled in the ways in which people live, the differences between the following constructs must be clarified: (a) ontological and ontical; (b) existentiell (German: *existenziell*) and existential (German: *existenzial*); and (c) *Sein* (Being) and *Seiendes* (“thing-in-being”).

Ontology is concerned with Being and searches for the general characteristics of Being. This raises the possibility that one can, in addition to asking about the characteristics of Being in general, also classify Being in categories and ask about the characteristics of each category or class. Such classes could, for example be plants, animals or people. This would lead to a regional ontology. According to Preller (personal communication to promoter, 23 February 2000) every discipline has its philosophical assumptions or regional ontology. This must, however, not be regarded as "part of" fundamental ontology. Fundamental ontology is concerned with the ground of every ontology, also the philosophical assumptions of a discipline and thus it can be enriched by the regional ontologies of various disciplines. It must nevertheless be considered that understanding of Being in a fundamental sense, can lead to better understanding of Being in the sense of a regional ontology.

Whereas ontology is concerned with the nature and meaning of the fundamental structures of Being, the concept ontic relates to factuality, in that it investigates possible ways to be (Dreyfus, 1992). Thus, on an ontic level, one is concerned with entities or objects, such as children, patients, technology; whilst at an ontological level, one is concerned with the essential characteristics of the entities. On an ontic level, the world is "that 'wherein' a factual Dasein as such can be said to 'live'" (Heidegger, 1927/1980: 93), for example the child's world, the work environment, or the consulting room. On an ontological level, world refers to the "worldiness of the world", a way of being common to all subregions.

Under existentiell Heidegger understands the *individual* experience of a particular person, such as being lonely; thus, it relates to the individual's understanding of his own life. Heidegger describes this personalised character of Being as *Jemeinigkeit*, and Spiegelberg (1971) refers to this as *ipseity*. Heidegger is not interested in ipseity for its own sake, but as a stepping stone towards discovering existentials. Existentials refer to *general* and fundamental characteristics of the Being of Dasein, that is, the ontological structures of existence, implying that human existence is to be studied for its general categories (Dreyfus, 1991; Heidegger, 1927/1980: 33; Preller, 1977; Spiegelberg, 1971). The aim of Heidegger's ontological investigation into Dasein is to determine these existentials and their interrelationships (*Zusammenhang*).



Existentiell understanding concerns beings, that is, entities and the facts about them, such as people's experiences; it is an ontical discourse. Existential understanding, on the other hand, concerns ways of Being, that is, the understanding of the ontological structures of existence, in other words, what it is to be Dasein (Mills, 1997). There is thus a clear distinction between the ontical and the ontological, between existentiell and existential and Heidegger was concerned with the ontological and the existentials.

Although ontological is distinguished from ontic, the two are about the same world, the same beings. Dreyfus (1992) says, the one is an account of the basic structure of the other; they are two ways of considering the same being, and ontology may help to restructure concepts used in psychology.

Related to the above, reference can be made to Heidegger's distinction between *Sein* and *Seiendes*. The former can be translated as Being and the latter as "thing-in-being" (Spiegelberg, 1971). In *Being and Time*, Heidegger's approach is that it is through the analysis of a specific thing-in-being (namely the human being) that Being can be understood. In his later work, he regarded Being as the ground of all things-in-being. From this follows that Being is an abstract property or attribute of things-in-being (Spiegelberg, 1971). However, it is more than just a property. It assumes an active role, determining the fate of things-in-being. In the fifth edition (1940) of *What is metaphysics?* Heidegger states that Being never occurs without things-in-being. However, Being and not things-in-being forms the central theme of Heidegger's thinking (Spiegelberg, 1971: 288).

The above discussion forms the basis for the question whether it is legitimate to link psychology, which deals with understanding of the human condition, with ontology. Preller (personal communication to promoter, 23 February 2000) does not regard this as possible. According to him, the ground structures with which a fundamental ontology deals can never be equated with factuality ("n Grondstruktuur kan egter nie van sy wortels losgesny en in 'n faktiese situasie gedwing word nie").

The argument in this regard can be further explicated by a brief discussion regarding whether one can understand psychopathology in terms of Heidegger's ontology of Dasein,

and thereafter a discussion of whether being unveils Being (that is, whether the ontic unveils the ontological).

According to Heidegger, man is “thrown” into the world, and the human being cannot be except in the framework of an encompassing world with which it belongs together (Spiegelberg, 1971). One can ask, is it then not possible that the Being of Dasein is thrown into a deficit world? The individual person cannot avoid participating in such a world, because by the very nature of Dasein’s Being, it cannot *not* participate in the pragmatics of society. In relation to inauthenticity Heidegger (1927/1980: 158) says “Being for, against or without another, passing by, not “mattering to one another” – these are possible ways of solicitude. And it is precisely these last-named deficient and indifferent modes that characterize everyday, average Being-with-one-another.” Mills (1997) argues that while this averageness and everydayness are ontological, they are modes of inauthenticity that cannot be avoided nor refused, and which the individual person must confront. Would the foregoing then not entail that Dasein’s Being-in-the-world could be predetermined as deficient? In more concrete terms, if the world which Dasein *is*, is disordered, would Dasein itself not then be disordered?

Mills’ views are reminiscent of Binswanger’s appropriation of Heidegger’s work, when he describes different forms of being and even ‘failures of being’. Binswanger is of the view that the ontological structure of Dasein can be disordered, and that one can identify which factors are responsible for the occurrence of a specific ontological structure (Preller, 1977).

The above view by Mills is based on the following reasoning: By virtue of Dasein’s ontological predisposition as Being-in-the-world, it is possible that a deficient world could manifest as deficits in Dasein’s psychological development:

“ ... if environmental conditions are such that that Dasein’s ordinary ontological structure is subject to more extreme forms of inauthenticity, the false development of the singular Dasein may not be eluded. The false Dasein results from interactions with pre-existing, deficient modes of Being-in-the-world which are thrust upon selfhood as its facticity. These false ontological structures lead to further vulnerabilities that predispose Dasein to develop psychological

deficiencies as well. Thus the psychological attributes of the self are corporeally manifested in Dasein's ontology" (Mills, 1997: 56-57).

Preller (personal communication to promoter, 23 February 2000) argues against such interpretations of Heidegger's fundamental ontology. *In-der-Welt-sein*, as ground structure of Dasein, is not a "characteristic" which can be disturbed by a turbulent life resulting in psychopathology. This would imply a return to a particular spatially, temporally and materially situated subjectivity.

"Die *wêreld*, soos dit daseinsanalities in die begrip, in-die-wêreld-wees, gebruik word, is dus nooit 'n geografiese gebied, bestaande uit syndes, of selfs geheel van losstaande syndes, nie. Dit is 'n suiwere sinsuitdrukking van die mens as oopheid. Hiermee is enige teenoorstelling van subjek en objek, selfs enige vraag na die verhouding van subjek en objek, tot niet gemaak" (Preller, 1977, p. 121).

However, following Mills (1977) and Dreyfus (1992) it can be argued that understanding of the human condition is grounded in a structural ontology. To understand something, to reason about it, of necessity requires something prior to it, an underlying ontology. Heidegger says that it is ontically characteristic of Dasein that it understands itself and this understanding itself is ontological. "Dasein is ontically distinctive in that it *is* ontological" (Heidegger, 1927/1980: 32).<sup>3</sup> Based on the latter remark by Heidegger, Dreyfus (1992: 16-17) argues that social practices actualise Being's ontological structure.

"While Heidegger does differentiate the ontological from the ontical, the ontical can only be possible vis-à-vis the ontological; thus our social and individual practices embody ontology" (Mills, 1997: 63). This means that existentials form the ground for things-in-being and that Dasein unveils itself in the daily lives of people. Dasein's original disclosedness as Being-in-

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<sup>3</sup> The whole paragraph reads as follows: Dasein is an entity which does not just occur among other entities. Rather it is ontically distinguished by the fact that, in its very Being, that Being is an *issue* for it. But in that case, this is a constitutive state of Dasein's Being, and this implies that Dasein, in its Being, has a relationship towards that Being – a relationship which itself is one of Being. And this means further that there is some way in which Dasein understands itself in its Being, and that to some degree it does so explicitly. It is peculiar to this entity that with and through its Being, this Being is disclosed to it. *Understanding of Being is itself a definite characteristic of Dasein's Being.* Dasein is ontically distinctive in that it *is* ontological." (p. 32).

the-world underlies all participation, engagement and concrete involvement with the world. This can be illustrated as follows: Heidegger (1927/1980: 78) says “Dasein exists. Furthermore, Dasein is an entity which in each case I myself am. Mineness belongs to any existent Dasein, and belongs to it as the conditions which make authenticity and inauthenticity possible.” In his later work, Heidegger clearly related Being to man:

“Perhaps the most significant feature of Being in Heidegger’s most recent accounts of Being is its interdependence with man: Man needs Being, and Being needs man. Both belong together ... this view suggests a final balance between the two poles, being and man, the objective and the subjective” (Spiegelberg, 1971: 317).

With this view, the autonomy of Being has been sacrificed.

This implies that modes of Being-in-the-world, such as authenticity and inauthenticity, must have ownership, they must belong to a particular person, and are unveiled in the lives of individuals. Furthermore, since it belongs to the ontological structure of Dasein that it is free to make choices, and since these choices are made in the context of *ontological* facticity (that is, it is a fundamental structure of Being that it is also factual), authenticity and inauthenticity are revealed in particular contexts, and thus may unveil a milieu which, by definition, may be deficient or inauthentic (Mills, 1997). This argument implies a transition from facticity, as an existential, to the factuality of the daily life. However, this shift or transformation does not imply that facticity and factuality are equated, or that one can use the ontological and the ontical interchangeably. It does imply that facticity provides the ground for the unfolding of factuality, and this opens the possibility for one to discover how the ontological is unveiled in ordinary, daily life. A further argument will be presented to substantiate that the ontological structure is present at the ontic level:

According to Heidegger (Spiegelberg, 1971: 333) the concept *Sorge* (concern) relates to a threefold structure in terms of its directedness, namely “1) it is ahead of itself toward its future possibilities (*Sich-vorwegsein*); (2) it is already involved in its factual being (*schonsein in ...*); (3) it is lost in the world of its daily occupations (*sein bei ...*)”. *Sorge* is the core of all our practical actions in everyday life, including what we wish for, what we want to do. Heidegger also describes temporality in terms of future, present and past, and this bears similarity to the three aspects of *Sorge*, that is, to be ahead of ourselves towards a future

existence, that we are immersed in the facticity of our past, and that we are involved in the daily activities of the present (Spiegelberg, 1971). This implies that facticity is one of the fundamental characteristics of the human being, and since Dasein is always itself in a complete sense as wholeness, this means that the ontological structure of Dasein would also be factually present in these daily activities. This would make it legitimate to describe the concrete, factual life of a person, whilst using one's understanding of the existentials of Dasein as Being. In a related context, Lanteri-Laura (1968) points out that one can understand experiences better, if one understands it at an ontological level. This does not mean that one now "converts" Heidegger, from being a fundamental ontologist, to being a psychologist who describes concrete modes life, but that one recognises how his thinking has influenced the way one thinks about the factual, and thus enrich one's understanding of man.

### **5.3 WINNICOTT AND HEIDEGGER IN DIALOGUE**

In the following paragraphs, Winnicott and Heidegger's views will be discussed. Where relevant, concepts of Binswanger and Buber will be used to explicate this comparison.

Winnicott, although aware of the vast range of human suffering, despair and loneliness, viewed the individual's destiny in a positive light and believed in personal freedom. Heidegger, although more pessimistic in his view on Dasein's destiny, agrees that a person is not helpless in the face of one's environment but has the freedom to choose. Buber concurs with Winnicott in having a more positive outlook on the individual's destiny. For him everyone has the ability to enter into relationships of mutuality in which one is confirmed as the unique being one is (Friedman, 1965; Inwood, 1997; Khan, 1975/1992).

Binswanger's analysis of the tragic life of Ellen West, which culminated in suicide, portrays a growth towards knowledge of true love and true naturalness, a realisation that life is encompassed by death and that one finds life in death. Her death was the fulfilment of the meaning of her existence, and Binswanger's analysis reflects optimism in man's freedom to make choices and to live authentically. "So deeply founded is the essence of freedom as a necessity in existence that it can also dispose of existence itself" (Binswanger, 1944/1958: 308). For Ellen West, her ripening towards death showed itself as a festive joy of authentic

existence. "The festival of death was the festival of the birth of her existence. But where the existence can exist only by relinquishing life, there the existence is a tragic existence" (Binswanger, 1944/1958: 298).

### 5.3.1 One's Relationship to One's World

A focal point of Winnicott's (1960/1984a) view is the interrelatedness of the individual and his environment, his psyche and soma. According to him the human individual can only personalise and know himself through the other. Winnicott has provided us with a powerful account of the development of the self, out of its relational matrix (Greenberg & Mitchell, 1983).

This view about factual life discloses what Heidegger (1927/1980) describes at an ontological level, when he states that Dasein exists through being-in-the-world. Dasein is embodied, and bound to others by its shared embodied, perceptual capacities. Man is centred in his relationship to the world, and Being-in-the-world is the most important and original ontological structure of man.

The worldliness of Dasein, is echoed in the views of phenomenological and existentialist authors, such as Buber and Binswanger. Buber (1958) states that real living is meeting. The Subject-object dichotomy must evaporate and "we" must emerge. The true self can only emerge in a relationship that is real. However, the world is not ready made for the child, so the child must find his own world through hearing, touching, shaping. Thus he is embodied and as such enters into dialogue with his world. True community is needed, and the only way to achieve this is by strengthening the forces of good through wanting to establish genuine relationship and true community (Buber, 1958; Friedman, 1960).

Binswanger (1944/1958, 1946/1958) applies Heidegger's ontological concept of Being-in-the-world on an ontic-anthropological level. He distinguishes between three world-regions, namely the *Umwelt* (the 'environment'), *Mitwelt* (interpersonal world) and *Eigenwelt* (the relationship of I-Myself). Man is inextricably situated in these worlds and to understand a person, one needs to describe and understand his world-design.

Although Winnicott, Heidegger, Buber and Binswanger differ in the way they see man as being placed in his world, they are in agreement that man shares his world with others and that he is embodied in the world. His relationships to the other are a basis of his humanness.

### **5.3.2 The Development of the Self**

Winnicott claims that the human infant cannot begin to be except under certain conditions. He emphasises "the inherent potential of the infant cannot become an infant unless linked to maternal care" (Winnicott, 1960/1984a: 43). Winnicott uses the term holding environment. This term does not only imply the actual physical holding of the infant, but the total maternal environmental provision before "living with others" is established. The infant moves through various stages of dependence to independence. This he does through the accumulation of memories of care, the projection of personal needs and the introjection of care details. If this was 'good-enough', he will develop confidence in the environment (Winnicott, 1971/ 1988). This does not imply that the child now does not need care from its environment, only that the care becomes both more and less. Maternal preoccupation is no longer necessary and the mother must fail the child in order to bring the world to the child. It also implies that others in the child's environment will play a significant role in the child's care. This is 'living with' others.

Winnicott's view incorporates intrapsychic processes and is linked to drive theory. However, it is essentially a relational theory centering on ego-defensive manoeuvres that arise in response to environmental demands (Greenberg & Mitchell, 1983).

According to Heidegger, Dasein evolves through being-in-the-world and is shaped by the world. It is not a process of cause and effect between the world and self but rather a nonreflective taking up of that which the person's world offers in the form of culture and tradition (Leonard, 1989). The child's earliest relations, including the mother-child relation, can thus be seen as part of the very ontic structure of Dasein. As Heidegger says, although it is a lifelong struggle for man to find his own identity, to define himself for himself and for others, he does not start off with his 'own self'. It is rather a matter of being wholly defined by others and their expectations of him. The child finds himself in an environment which has

certain expectations of him, and reacts to him in a certain way. This would imply that a child is 'caught' in his thrownness and lives accordingly. To live authentically he will have to listen to the call of his conscience and become his possibilities regardless of the restraints of his environment (Heidegger, 1927/1980). One can postulate that in this regard, there are similarities between Heidegger and Winnicott's views on the importance of the quality of the emerging person's environment. What Heidegger describes at an ontological or factual<sup>4</sup> level, Winnicott describes on an ontic or factual level; the one is an account of the basic structure of the other.

Buber also reiterates the importance of the child's environment for the development of the self. He says "in the beginning it is relation, the inborn Thou which is realised by the child in the lived relations with what meets it (Friedman, 1960: 60). He claims that personalities are called into being by those who enter into relation with man. If the relation is an I-Thou, there is mutuality and togetherness, in which man remains himself. It can, however, be assumed that should a child merely be seen as another I or an It, the child will learn to relate in the world of I-It. The way the environment relates to the child will, to a certain extent, influence the child's ability to enter into I-Thou relations (Buber, 1958).

According to Binswanger (1944/1958; 1946/1958), one cannot fully understand an individual existence, if one does not understand what occurred in the person's life-history. However, the existential analytic approach differs from the psychoanalytic approach. The latter, according to Binswanger, rests on an anthropology which regards man as a driven, drive dominated creature for whom instinctual development is the history-forming force; accordingly, for psychoanalysis, the examination of the life-history is the goal of investigation. This is in direct contrast to existential analysis, which endeavours to understand being-human in all its existential forms and all the dimensions of its being-in-the-world, and not only man's having-to-be (thrownness), as psychoanalysis does.

"Hence being-human is not considered objectively, that is, as a thing-in-being ("on-hand") like other objects in the world, and least of all a natural object, but rather the phenomenon of his being-in-the-world is investigated, which

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<sup>4</sup> In this context, factual refers to *ontological* facticity, that is, it belongs to the fundamental structure of Being that it is also factual.



phenomenon alone permits understanding of what the world-design ... means”  
(Binswanger, 1946/1958: 315).

In this endeavour, life-history is not used to explain current behaviour in a causal manner, because phenomenology, on which existential analysis is based, is not an explanatory science. Instead, life-history provides material for understanding the person's evolving world-design.

All the above views emphasise the role of the environment in the development of the self as being of the utmost importance. Both Heidegger and Winnicott view selfhood not as a biological given, but that a 'good-enough' environment is necessary to develop a self. As Heidegger claims, man is situated, thrown into a situation, through which the self evolves. Winnicott suggests selfhood to be a developmental accomplishment while Heidegger postulates a development of an authentic self, despite the delineations of the situation in which the person finds himself. Both views encompass a realisation of the 'dangers' the environment can hold for the developing individual. These 'dangers' can be seen as a demand for compliance with, or adaptation to, the expectations of others in the emerging person's environment.

Winnicott, Heidegger, and Buber place great value on the notion of being separate. Winnicott (1960/1984a) speaks of the hazardous struggle of the self for an individuated existence, while Heidegger (1927/1980) posits a self as a truly independent man who does not lose himself in the anonymous mass. Buber articulates the same notions as follows: " ... one can enter into a relation only with being which has been set at a distance, more precisely, has become an independent opposite. And it is only for man that an independent opposite exists" (Buber, 1965: 61). One must become truly separate in order to enter into a relation of true mutuality.

Therefore merger with another or non-individuation (Winnicott), losing oneself in the anonymous mass (Heidegger) or only being another I, or mirror image of the other (Buber) does not promote the development of a true self which can live authentically in genuine, mutual relations with others.

### 5.3.3 The Person's Perception of his World

Winnicott (1960/1984b) postulates that environmental impingements cloud a person's perception of the world. Both the child and adult are in a continual struggle to rid themselves of the results of these impingements.

Heidegger speaks of 'being in a mood'. What is ontologically called *Befindlichkeit* (that is, Dasein finding itself in a particular fundamental situation), is ontically referred to as mood (Heidegger, 1927/1980; Preller, 1977). The latter is not an emotion, but an existential, which ascertains how man perceives his world, how he is in a particular situation. Mood is thus a basic existential way in which Dasein is its 'there'. For example, if the mood is one of hopelessness fostered by being situated, the person's perception of the world will most probably be that he has no choice in how he lives, that he is determined by external factors over which he has no control. It could be argued that an individual in this situation will find it almost impossible to seek for himself his own unique possibilities and choices. He will rather feel helpless when confronted by environmental demands (Gendlin, 1988; Heidegger, 1927/1980).

Heidegger's view on the ontological oneness of mood and world is reflected, on an ontic-anthropological level, in Binswanger's (1946/1958) view that a feeling or a mood can only be understood if one understands how the existence that is in a particular mood, is in-the-world. For example, if being-in-the-world has become constricted, anxiety arises, because if the world is dominated by one or a few categories, any threat to the preservation of that one, or those few categories, holds the threat that the world may vanish, thus delivering existence to nothingness. If, on the other hand, the world is varied, a threat to any one region leaves other regions to offer a foothold.

### 5.3.4 Authentic/Inauthentic Modes of Being and True/False Self

For Winnicott (1962/1984b), a False Self is a result of the developmental conflict rising from the mother-child dyad. Demands from the external object (mother) can lead to repeated compliance and withdrawal from the child's own spontaneity, which leads to the stifling of his spontaneous gestures. There is a failure in the maternal holding environment. Instead, the

mother substitutes her own gestures and the ground is laid for the development of a False Self. In other words, the child turns back into himself and the True Self goes into hiding and is protected by the False Self or an 'as if' personality develops. The child abdicates himself in the face of environmental demands in order to survive. He can never fully interact with the world with his whole being, as he lives in perpetual fear of the True Self being found and annihilated. The anxiety, "unthinkable anxiety", that this engenders and Heidegger's (1927/1980) view on Dasein's existential anxiety, in the face of the knowledge of its own finiteness, bear a strong resemblance to each other.

The False Self is echoed in Heidegger's notion of inauthenticity. As Mills (1997: 52-53) states: "The maternal holding environment is part of the very ontic structure of Dasein - it is constitutive of Dasein's being. Failure in empathic attunement, mirroring and optimal responsiveness is a deficient mode of Being-with, thus a precondition of the False Dasein's inauthenticity".

Winnicott's (1962/1984b) False Self is overly compliant to the expectations of its environment. In the same manner Heidegger's (1927/1980) inauthentic being's 'fallenness' bears witness of becoming anonymous through its very everydayness. Dasein is thus generally constricted and conforms to society's demands.

Buber's (1958) human being, who only lives in the world of I-It, can be likened to the False Self and inauthentic being. When man's world constitutes I-It relationships he lives in a world of objects. Although he is highly 'functional' and does what society expects of him, he does not live according to what he wants to be, namely a person in relations of mutuality which confirm him as such.

For Binswanger (1944/1958), authenticity involves that existence actualises its meaning. This involves integrating one's past and one's thrownness. This provides the 'capabilities' by virtue of which the existence exists, with an orientation towards the future. This in turn provides possibilities for the actualisation of these 'capabilities' through practical action in the present. To be authentic, requires that the past and the future unite in the present where people act. Through action, man establishes himself, creates his possibilities, becomes certain of his existence, and knows where he is going and who he is. This existential realisation forms

the ground for authenticity. It is reminiscent of Heidegger's (1927/1980) view that authenticity is the process of becoming one's possibilities, and Winnicott's (1967/1986) view that the True Self does not imply an existence based on compliant adaptation to external demands and expectations, but is an expression of the real self.

Although there are apparent similarities between Heidegger's views on authenticity/inauthenticity on the one hand, and the views of Winnicott, Buber and Binswanger on the other hand, there is an important difference in their levels of analysis. For Heidegger, inauthenticity and authenticity are fundamental, existential ways of being-in-the-world. It belongs to the essential nature of Being that it can *be* authentically *and* inauthentically. This does not have a theological, ethical or psychopathological meaning, but reflects the ontological structure on Dasein.

Winnicott, Buber and Binswanger, on the other hand, are not concerned with the meaning of Being in an ontological sense, but with the factual lives of people, or the ways in which existence is in its world. However, the question can be asked, how is it possible for a particular person to be a True or False Self (Winnicott), to constrict existence to its past so that there is no unfolding into the future through action in an authentic present (Binswanger), or to live in I-It relationships (Buber)? The mere possibility for this to occur, must be located in the essential nature being-human. To be in a certain way, requires a prior openness of Being for such a mode of existence. "Dasein is ontically distinctive in that it *is* ontological" (Heidegger, 1927/1980: 32). The ontical is only possible in that it is based in the ontological, and the latter is revealed in the factual lives of people. It is thus postulated that the True and False Self, authenticity in Binswanger's sense, and I-It relationships, are only possible because of Dasein's essential nature of being, both authentically and inauthentically.

In defining the True Self, Winnicott (1963/1993) speaks of an isolate, inviolate core of every individual that must never be seen. Although this is a difficult concept to grasp, it bears a resemblance to Buber's (1958) personal core, or centre, which must not be lost in meeting another. Heidegger (1927/1980) also postulates that man must find his own truth in isolation. This implies that there is a part of man that must stay private in order for him to live in a true or authentic manner.

However, man cannot live in isolation, his whole being revolves on his relationships with others. The inability to enter into meaningful relations with others contributes to the dreaded experience of loneliness.

### 5.3.5 Loneliness

Loneliness occurs in one's relationships with others. To be with others is only possible because Dasein is essentially *Mitsein*. "*Mitsein* bestem die ander ook wanneer 'n ander op 'n gegewe oomblik fakties nie voorhande is nie, wanneer die ander afwesig is. Ook die alleen-wees van die Dasein is *Mitsein*. Die ander kan slegs ontbreek in en vir 'n *Mitsein*" (Preller, 1977: 97). Implicit in this passage is that, although *Mitsein* relates to the ontological structure of Dasein and is not an objective togetherness of individuals, the possibility for loneliness to occur has its ground in Dasein's very nature of being-with. Loneliness is ontically possible because Dasein is, ontologically, *Mitsein*.

Being-with is so intricately linked with being-human, that it cannot be negated. Even if one purposefully tries to withdraw from others, being-with reasserts itself (Binswanger, 1944/1958). Loneliness only becomes possible in contact with others; without contact, loneliness is not possible. One discovers oneself, also one's isolation and loneliness, in the other [see, in a related context, Van den Berg's (1949, 1963) discussion of delusions and hallucinations].

According to Heidegger, Being towards others is an irreducible reality of Being. Real mutual acquaintanceship and being with others will depend on how one's own Dasein has understood itself, as well as how far Dasein has progressed to authenticity. This cannot be achieved through meaningless, frantic activity, but rather in a state of letting-be-ness. This requires allowing the other to express himself freely as he is (Heidegger, 1927/1980). This is echoed in Buber's I-Thou relationships where one allows the other to be a separate, unique individual with whom one can have a relationship of true mutuality. Each person meets authentically and there is no merger (Friedman, 1985). Winnicott's (1963/1993) notion of the True Self's ability to communicate with others can be linked to this. For him the ability to be alone in the presence of the other is a true ego related experience

It can be postulated that the above ways of being with others in the world will alleviate loneliness and free man from the terror of isolation.

#### **5.4 CONCLUSION**

Although Winnicott, Buber, Binswanger and Heidegger are divergent in their views, there are many instances in which their thoughts converge in their attempt to understand what it means to be human. There are, however, essential paradigmatic differences between the two approaches, and this will be discussed in chapter 9.

In the following chapter, the research method used in this study, will be discussed.

## **CHAPTER 6**

### **RESEARCH METHOD**

#### **6.1 RATIONALE OF THE QUALITATIVE RESEARCH METHOD**

##### **6.1.1 Introduction**

The main aim of this study is to follow the unfolding of the experience of loneliness and the emergence of a True/authentic self as seen in the psychotherapeutic dialogue/relationship. This experience cannot be quantified, or broken up, or studied as an entity. It can only be seen in the experience of the person in his relationships with people and things in his environment. It encompasses the study of the experiences of the person in question. For this reason a qualitative method of study was chosen.

Within the broad framework of qualitative research, the specific method used was the descriptive-dialogic case study method (Edwards, 1991). In this method, the emphasis is on a faithful portrayal of the phenomenon being investigated, but at the same time expecting that it will embody and unveil general principles already known from previous research. The material is thus situated within existing theory, or it can be used to debate alternative perspectives. Thus, it can help to test specific theories, or to compare alternative theoretical perspectives. The foregoing implies that while this method emphasises that the phenomenon must be carefully described, there is also an active endeavour to conceptualise it within a framework that can articulate it. Edwards (1993: 20) explains:

"The researcher draws parallels and links with existing psychological theory without trying to achieve a systematic theoretical presentation. The aim is to demonstrate, that existing theoretical discourses, can be appropriated to furnish a fuller understanding of the material"

Elucidation is the key word regarding description, elucidating "that which" appears and "the how" of its appearing. This is the aim of the description. Smith (1983: 42) explains:

"The description provides me with a richer and more fleshed out portrait of the many profiles showing themselves which in the immediacy of the lived moment, I am unable to attend to thematically ... The meaning remains implicit, is allusive, is underplayed and needs to be brought forth into the clearing. This is the function of description".

The researcher should begin by describing phenomena, as they are, before establishing theories and hypotheses about them. Thus, the present study took as its point of departure a description of the patient's experience of loneliness as this unfolded in the therapeutic dialogue. Description requires one to articulate explicitly that which is lived implicitly, to find words for what may not be verbalised. The initial phase of the research is thus a description, in everyday language, of the event (experience), as narrated by the person (Ashworth, 1996; Wertz, 1985).

As the data emerged, through a dynamic psychotherapeutic process, in which the psychotherapeutic relationship and dialogue was the core, it was endeavoured, to the best of the therapist's ability, to suspend personal judgement and preconceptions regarding that which was described. This was, of course, not entirely possible. According to Kvale (1996), there is a continuum between description and interpretation. Interpretation is not something which occurs only in the final phases of the research process; it is already present during the initial phases. To understand something in order to describe it, means that one attaches meaning to it, and this implies that one interprets it.

The phenomena investigated in this study, namely loneliness and, associated with it, inauthentic and authentic living, had life in the psychotherapeutic situation, before any theoretical explanation for them was found. After this was described, was there an attempt to link it with existing theory. At this point, where theoretical interpretations were made, psychological words were put to that which emerged, in an effort to understand the patient's experience. This will be discussed in more detail below.

In the next paragraphs, a brief overview is given of the phenomenological method. The rationale for including this, is that Heidegger used a hermeneutic phenomenological method. However, the method used in the present study cannot be described as phenomenological



in the strict sense of the word. It is indicated in the following discussion how the method used differed from phenomenology.

In the preface to his book *Phenomenology of Perception*, Merleau-Ponty (1962) describes four characteristics of the phenomenological method. Giorgi (1994) uses the first three of these in his perspective on qualitative research methods, namely: it is descriptive; it entails phenomenological reduction; and it is a search for essences. The fourth characteristic referred to by Merleau-Ponty is intentionality.

### **6.1.2 Description**

Phenomenology is a descriptive enterprise. A careful systematic description is given of that which is directly experienced. It is not an attempt to explain or analyse the experience and no consideration is given for the origin of it, or its causes. In such a description, the investigator must remain true to the facts as they are happening, always asking "how" rather than "why" (Kruger, 1988). In the case of this study, the initial phase of data analysis consisted of describing the experiences of the patient as it unfolded in the therapeutic relationship.

### **6.1.3 Phenomenological Reduction**

The aim of phenomenological research is an unbiased account. It is free of presuppositions and preconceptions, of the person's experience and life world. One therefore brackets all past knowledge or theories about the phenomenon under investigation (Ashworth, 1996; Edwards, 1993; Giorgi, 1997).

The phenomenological reduction relates to the researcher's ability to suspend 'knowing' based on prior knowledge. Giorgi (1994: 212) explains:

"The reduction means that one tries to bracket all past knowledge and theories about the phenomenon being researched that are relevant to the research question, and that one takes the phenomenon exactly as it presents itself without saying that it exists precisely as it presents itself; and after the analysis of the

data, as a human science researcher, one may posit that the phenomenon exists in the way it presented itself."

This characteristic of the phenomenological method did not apply in the present study. As will be indicated below, the data used consisted of extensive notes made over four years of psychotherapy with a patient. What the researcher said and did during the therapy sessions, and what she recorded, was of necessity influenced by her own view of what constitutes psychotherapy, developed through her training and experience. It is indeed doubtful whether one could bracket out all prior knowledge and theories, and remain truly faithful to the phenomenon under investigation. Reality does not exist as an object, separate from the researcher. The researcher co-constitutes reality and the latter is a reflection of the subjectivity of the researcher, including his past knowledge and theories.

However, during the initial phase of data analysis, the aim was to relate as accurately, and as true to the phenomena themselves as possible, what transpired in the course of the therapy. Rigorous efforts were made not to taint the data during this phase of analysis with preconceived notions based on the work of the authors whose work was used as framework for the study. It was hoped that this would leave room for new perspectives to come forward. It was only after this was done, that relevant constructs formulated by Heidegger, Binswanger, Buber and Winnicott were used to explicate the data. In this sense the method used differed from phenomenology in the strict sense of the word.

#### **6.1.4 Search for Essences**

The search for essences is the search for the most invariant meaning for the context. In other words, an attempt is made to determine the essential character of the experienced phenomenon. One method that could be used in phenomenological research in this regard is imaginative variation, through which the phenomenon is varied freely in all its possible forms. That which remains constant throughout the different variations, will be the essence of the phenomenon (Spiegelberg, 1971).

It would be more accurate if one does not use the word "essences" in the context of the present study. The study aimed at grasping the fundamental meanings of the patient's story and to do this, the researcher relied on pre-selected theoretical perspectives.

### **6.1.5 Intentionality**

Intentionality means directedness towards the world. Man is always consciously intended towards something, whether another object or another being. Man is forward-moving and goal directed. According to Merleau-Ponty there is a unity and reciprocal relation between man and world: "man is in the world, and only in the world does he know himself" (1962: xi) and "we are through and through compounded of relationships with the world" (1962: xiii). This also applies to the body, as Merleau-Ponty (1962: 40;127) explains: "Intentionality implies a crucial shift from the body as object to the body as experienced..... intentionalities connect us to the future and the past, thereby anchoring us to our environment". It is thus an ongoing dimension of our consciousness and is always in relation to that which is beyond.

Since every 'act' of consciousness is directed towards an object, psychological experiences cannot be seen as subjective, inner experiences which occur in the depths of a wordless, individual psyche. There is not first a psychological 'event' which is then directed towards the world. The psychological 'event' and the world exist as one. Psychological reality exists in the immediately given relationship with the world which constitutes the person.

The methodological implication of the foregoing is that, to get to know a psychological phenomenon, the person's world must be described. By describing the world, one gets to understand the phenomenon and thus also the person.

Intentionality, in the strict phenomenological sense, did not apply in the present study. The patient's life, as it was constituted in her relationship with other people and the physical world (including her body), formed the basic data. As a first step, this was explicated. However, in a subsequent phase of analysis, where the data was interpreted from a psychodynamic perspective, a different set of assumptions applied. The latter included the assumption that there are intrapsychic representations and processes, which might be influenced by the environment, but which also have an existence separate of the particular

context in which a person finds himself at a particular time. This is an essential, and probably irreconcilable, difference between object relations theory and the existential-phenomenological position.

## **6.2 THE RESEARCH METHOD**

The researcher's aim is to gain an in-depth understanding of the subject's experience, and to present it in such a manner that it can be communicated clearly to others (Edwards, 1993). This process consists of four stages: research conceptualisation; data collection; data reduction and data interpretation.

### **6.2.1 Research Conceptualisation**

According to Edwards (1993) research is guided by a research question or goal. The aim of this study is to describe how the experience of loneliness unfolds in the context of the psychotherapeutic dialogue, to become more accessible. Furthermore, the aim is to describe how this is related to moving from, an inauthentic/False way of being, to a more authentic/True way of being. This was done from two perspectives, namely Winnicott's object relations theory and an existential-phenomenological approach represented by Heidegger and Buber's philosophies.

### **6.2.2 Data Collection**

One long-term psychotherapy patient was studied. Extensive case notes of psychotherapy sessions with the patient, made over four years of ongoing psychotherapy, provided a rich raw data source. The conditions imperative for any psychotherapeutic alliance are thus implied. These are a non-judgmental, safe environment, free from bias and presuppositions. Within this environment the patient was able to relate her experiences, in her own words, as they evolved. Confidentiality was respected and before the study was initiated the patient's written permission, for the use of the relevant data from her case notes, was obtained.

### 6.2.3 Data Reduction

The raw data, in the form of transcripts, were read and re-read by the researcher, in order to familiarise herself with it. The data collected over such an extended period (four years), was comprehensive and clumsy and was therefore reduced to a more manageable form. This was done, by extracting and summarising that which was relevant to the aims of the study, as follows:

(i) History

A synopsis of the patient's history, as it unfolded in the psychotherapeutic sessions, was compiled. This was not narrated as it emerged through the therapeutic dialogue, but ordered in such a way as to give a chronological account of the patient's history.

(ii) The patient's narrative during therapy

A description of what the patient related during the therapy followed. The material was presented as phases in the therapy, based on the way in which the patient related to the therapist and her world. No interpretation, regarding the phenomena under investigation, was made at this stage. The patient's narrative was told, as it was revealed and experienced, in the psychotherapeutic alliance. This was done by way of an integrative synopsis.

An integrative synopsis "is a summary of the central thematic content of the material in a form that the researcher can work from" (Edwards, 1993: 16). The raw data, consisting of case notes, was integrated into a synopsis to make the data manageable. Where applicable the patient's and therapist's own words were used, but mostly it was given in the third person. As Edwards (1993: 17) says:

"The third person synopsis gives the researcher more leeway to edit the material and to render it in technical psychological language that the subject did not actually use ... emotions that are implicit in the interview material can be made explicit in the synopsis".

#### **6.2.4 Data Analysis and Interpretation**

The method used for data analysis and interpretation consisted of an integration of the methods described by Cassimjee (1998), Edwards (1993), Venter (1999) and Wertz (1985) and comprised the following:

(i) **Reading the Data**

The integrative synopsis of the psychotherapeutic sessions, over the four years, was read several times, in its entirety, in order to gain a holistic grasp on the material. This must be done according to Wertz (1985: 204) with: "Empathic immersement in the world of description". One cannot 'stand away' from the data, but must empathetically experience it.

(ii) **Data Analysis**

The material was then analysed, paragraph by paragraph, to identify meaning units in accordance with the aims of the study. This means that statements, related to that which one wants to achieve through the research, are identified in the data. These meaning units included, for example, events described by the patient, expressions she used, the way she related to others, and her way of entering into the therapeutic dialogue. Meaning units are not predetermined or given, but emerge in the interaction between the researcher and the data. To avoid passing over details and in so doing, leaving relevant meanings implicit, Wertz (1985) advises one to 'slow down and dwell' on the material.

As this paragraph by paragraph analysis is voluminous, it will not be included in the text. For the sake of clarity an example of how it was done will follow.

##### **Example: Paragraph One**

The patient filled the room with words, talking incessantly about her relationship with her mother and brother. Her facial expressions were exaggerated and she smiled a great deal. This was incongruent to the rage and hatred the therapist felt coming from the patient. She seemed unaware of her own feelings as tale after tale unfolded, describing her mother and

brother's behaviour. No interpretation was made and the therapist held these feelings for the patient.

Meaning units: The patient could not tolerate silence. To cover up her feelings she used words, exaggerated facial expressions, and a descriptive way of relating. She focused on describing her relationship with her mother and brother.

The meaning units identified were then integrated into themes. This involved a process of determining the meaning of the units, and comparing them to identify their similarities and differences. Meaning units which seemed to belong together, were grouped together. During this stage, one had to return to the initial script where the units were identified, and the themes were revised and extended where necessary. The themes were then summarised in a descriptive form.

Venter (1999) cites two criteria for placing information (units) into themes, namely internal homogeneity and external heterogeneity. In internal homogeneity one looks at the extent to which the units placed into themes are related to each other. External heterogeneity refers to the extent of the differences between themes. One is thus attentive to the internal consistency of themes on the one hand, and the distinction of the themes on the other hand.

The themes were then read through again and where necessary, units were rearranged, grouped together, or placed under existing or new themes. The next step was to reflect on the emerging themes.

### (iii) Reflection

These salient themes were then reflected on, in order to gain understanding of how the phenomenon presented itself and what its meaning was for the patient. This is done through verification, modification and reformulation in order not to lose contact with the patient's experience. "Therefore the researcher must constantly return to the original description with his reflective statements in order to verify, modify or negate his newly emerging reflections" (Wertz, 1985: 211). These descriptions were given in general psychological language.

During this process, the relationships between the themes were examined to establish a deeper understanding of the patient's experience of loneliness. In order to identify the relatedness, the meaning of particular events provide a stepping stone for comprehending a more general meaning. To proceed from particular, to general meanings, specific phenomena can be 'lined up' according to their similarities. From this, follows an observation, that certain groups of phenomena cluster around cores, which form nodes in a network of relationships. These configurations of phenomena which belong together, are comparable to a good Gestalt. Following from this, one searches for the common pattern, which they all share to varying degrees. By investigating these common patterns, which run through particular instances, one becomes aware of the more basic, general meaning which they embody (Spiegelberg, 1971).

In the case of the present study, the experiences which the patient spoke about, the way she behaved and interacted with the therapist, and the expressions she used, were examined to identify the cores or nodes in her narrative. These were encountered in different contexts, and compared with one another, in an effort determine whether they have a common meaning.

An example can illustrate this: At the beginning of the therapy, the patient talked incessantly, in a descriptive manner, about her relationship with her mother and brother. The patient time and again "forced" the therapist to fill any silent moment by commenting, or making an interpretation. As soon as the therapist addressed this, the patient moved to an intellectual level, where the therapy "stagnated" for many weeks.

A common theme, running through these particular episodes, relates to the patient's use of language: talking incessantly, talking in a descriptive manner, and talking in an intellectual manner. Talking, without emotional involvement, depicts contact which is distant and stagnated. Therefore, the contact is incomplete and does not evolve in mutuality, it reflects loneliness.



(iv) **Conceptualisation**

A conceptualisation of the patient's experience of loneliness followed. The integrated salient themes identified during the analysis, were now linked to the relevant concepts of Winnicott, Heidegger, Binswanger and Buber in an effort to describe how the patient related to the therapist, and to her world, according to these views. Here the language used was specific to the language used by Winnicott, Heidegger, Binswanger and Buber.

Finally, an integrated synopsis of the unfolding of the experience of loneliness, and the emergence of a True more authentic self was given.

(v) **Evaluation**

During this final stage an evaluation was made as to whether the above steps adequately answer to the aim of the study. An evaluation was made as to whether the method allowed for better understanding of the patient's movement towards encountering her loneliness and her true self.

### **6.3 CONCLUSION**

In summary, the method used in this study was described in this chapter. A qualitative method, namely a descriptive-dialogic case study, was used.

The method one uses in research is intrinsically linked to the paradigmatic framework from which one works. As indicated above, there are certain aspects of the existential and phenomenological approaches, which are inherently different from the view of man which underpins object relations theory. These differences may be so deeply rooted that it could be impossible to integrate the two approaches on a methodological level. It seems, that they could at best be seen, as two ways of investigating reality, asking different questions, from different perspectives, and thus explicating different aspects of human existence.

In the following chapter the case study will be discussed.

## **CHAPTER 7**

### **CASE STUDY**

#### **7.1 INTRODUCTION**

This chapter will focus on the case in question based on the patient's case notes recorded over a period of four years. The aim of this study is to describe how the patient's experience of loneliness unfolded in the psychotherapeutic process. The study will not evaluate the impact of psychotherapy based on any specific theoretical orientation.

The format of the data's presentation will be as follows: the patient's history will be given in the form of a summarised, chronological account. Thereafter, an integrative synopsis of the psychotherapeutic process will follow. Emphasis will be on data which will give an overall and comprehensive view of how her loneliness unfolded. As psychotherapy is a lived experience it is difficult to verbalise that which is not seen and heard, but only lived. However, the way in which the patient related to the psychotherapist, and to her world, will be used as baseline, and will be presented in three phases.

#### **7.2 HISTORY**

Mrs. A is a 30 year old business executive in the field of information technology. She is the youngest child in a family of three children, her two older siblings are both boys. Mrs. A is married with no children.

The patient has been in therapy for a period of four years. She presented with severe anxiety and frequent panic attacks. This affected her day to day functioning and her health. The patient found it difficult to cope with interpersonal relationships on both a personal, and work related level. She was frequently suffering from physical discomfort in the form of 'flu', gastro-enteritis and other ailments.

The patient's earliest memories were not easily accessible. However, she was aware, from the age of five, that her mother did not approve of her. She was not pretty in the conventional "little girl" sense. She still finds it quite confusing that the family photo albums do not have a single picture of her before the age of three.

Mrs. A described her mother as critical, punitive, cold, unaffectionate and demanding. Her mother demanded instant obedience and the patient found it very difficult not to comply as she would then be labelled lazy, selfish, or ungrateful. Whenever Mrs. A displeased her mother, her mother would punish her by ignoring her for extended periods.

Her mother described her as greedy. When she demanded attention her mother experienced her as too needy and she would be told to "go away" and amuse herself. She came to the conclusion that needing her mother's attention was unacceptable, and this led to feelings of being "inappropriate" when she wanted closeness. She constantly feared that she will do something wrong. Her anxiety and panic attacks manifested in social situations where there is "no escape". She fears that she will do something inappropriate such as "sick" on an aeroplane, or by behaving incorrectly when she is having dinner at a restaurant. She fears that she will be scrutinised and not be able to escape.

According to Mrs. A her mother spoilt any important occasions for her. She viewed birthdays, for example, with trepidation. The idea of a birthday party would excite her, but she would be disappointed time and again by her mother's reaction to her behaviour. Any spontaneity was met with disapproval by her mother.

Furthermore, her mother became extremely agitated if Mrs. A was ill. She felt that her mother was ashamed of her when there was something physically wrong with her. Her mother found all physical functions, for example, the sound of chewing at the table, going to the toilet, and menstruation, as shameful. Even currently it is impossible for the patient to ask her mother whether she breast fed her children. Thinking about addressing this issue with her mother makes her extremely uncomfortable.

Minimal physical contact and affection was shown in the family. The only person she received some warmth from was her father, although she was aware that he could not

protect her against her mother. Her father seemed to be as controlled by her mother as she was. Any closeness she had with him, had a secretive quality about it, almost as if it had to happen 'behind the mother's back'.

Her mother covertly, and sometimes overtly, showed her disdain for her husband. She saw him as an inadequate provider, and resented the fact that she had to teach for most of her life in order to supplement the income to the home.

As a child Mrs. A hated receiving dolls as presents. During the course of therapy she often described her rage at receiving these and how she would destroy them. She preferred the company of boys and joined in her brothers games, although they bullied her. She wanted to do what the boys did, as this seemed preferable to being a girl. For the rest of the time she read and lived in a fantasy world of "The Famous Five " and "The Secret Seven".

The patient has strong feelings on gender issues, and she often describes herself as genderless. Her reaction to female roles prescribed to by society is vehement. As a child she refused to wear dresses, and would only do so occasionally, to please her father. Her mother kept on pushing her into doing "the right thing" for a girl. She rebelled against this in a passive way, for example by refusing to wear feminine clothes. She recalls an occasion when her mother bought her a 'pretty' dress. This dress is still hanging in her cupboard. She has never worn it. She also refused to change her surname on marriage.

As a teenager she excelled academically and on the sports field. Her mother "owned" these achievements and would tell all her friends at her book club. The patient, however, did not experience this as approval. It was seen as a payback for all the sacrifices which her parents had to make for her. At home her younger brother's envy of her academic achievements caused him to bully her mercilessly, verbally, as well as physically. Her parents reinforced this by condoning her brother's behaviour. They never attended any of her school's prize giving functions where she was the recipient of many awards. This negation of her achievements still has a profound influence on the patient's image of herself.

Mrs. A never felt a sense of belonging to her peer group. On the sports field she was aggressive, which made her a good player, but did not make her popular with her peers, and according to her, they were scared of her. The patient always refers to herself as being "grumpy" for as long as she can remember.

Mrs. A attended university, and continued to achieve academically. At this stage she went into a destructive relationship (destructive for her) in which she wanted to 'act out' her femininity. She wanted to feel desirable as a woman, as well as being wanted and needed, by somebody else. This made her needy and dependent on her partner which he could not tolerate. Feelings of worthlessness ensued, and she questioned her own femininity. Mrs. A terminated the relationship. After this she felt worthless, not good enough as a woman, and betrayed.

A severe depression followed and she withdrew from society. She left the city and found a menial job on a farm. Her parents made no secret of their dismay and disapproval of her behaviour. During this time she had an intimate relationship with a fellow worker. Although he could not meet her needs intellectually, he was emotionally supportive. This relationship was terminated when she returned to the city.

When Mrs. A got married she chose a man that was easy going, emotionally giving, but not a provider. This elicited severe criticism from her parents, as they saw him as inadequate and not pro-active. She found her parent's criticism difficult to deal with, as it often had a detrimental effect on her relationship with her husband. She claimed that she often saw her husband through her mother's eyes. Her marriage resulted in feelings of abandonment by her family, after her father told her that she is no longer "her maiden name", but is now an A.

Mrs. A is a high achiever in the work place. She works with computer data bases and enjoys her work when she is left to plan and develop new systems. She does, however, find personal relations in her working environment, threatening and anxiety provoking.

The patient was previously in therapy. She found it helpful and worked through the anger she felt towards her brother. However, she terminated her therapy because she felt that the therapist avoided addressing issues concerning her mother.

## **7.3 INTEGRATIVE SYNOPSIS OF THE PSYCHOTHERAPEUTIC PROCESS**

The raw data of four years of psychotherapy will be presented as a integrative synopsis. For the sake of clarity, it will be dealt with in phases according to the patient's primary way of entering into the therapeutic dialogue.

### **7.3.1 Phase One**

The patient filled the room with words, talking incessantly about her relationship with her mother and brother. Her facial expressions were exaggerated and she smiled a great deal. This was incongruent with the rage and hatred the therapist felt coming from the patient. She seemed unaware of her own feelings, as tale after tale unfolded, of her mother's and brother's behaviour. No interpretation was made and the therapist 'held' these feelings for the patient.

She explained that as an adult she could understand her mother and her frustrations. She said it seemed as if her mother felt 'cheated' by life. According to her, her teaching career, and her family, occupied all her time, which resulted in her own needs not being met. She complained that she could not actualise her dreams, which she had to forfeit because of her family. Mrs. A realised that, although her mother paid lip service to the fact that her husband was the head of the home, it was her mother who made the decisions. However, as soon as Mrs. A felt like her mother's child, and thought of her as mother, it would make her angry. The therapist made a comment about the difficulty of coping with these contradictory emotions.

The patient continued to relate how her mother would be ashamed of her when she had an accident or hurt herself. Her mother felt that it made her (the mother) look bad, therefore she had to be punished for shaming her mother. When this happened she , "just cringed and felt like a rabbit caught in a light". The therapist reflected that it seemed to have been a frightening experience. She reflected on how, in the present, when she felt ill, she expected to be punished, that somehow it was her fault that she felt ill.

During this stage her relationship with her brother was discussed. She felt that her brother hated her and that he was envious of her academic achievements which he could not match. Because of this, he would bully her mercilessly. He would, for example, call her a 'fat pig' in front of his friends which humiliated her. Instead of reprimanding him, her parents would condone his behaviour. She felt that by the very fact that they never protected her against his attacks, they were covertly colluding with him, and this left her feeling vulnerable. The therapist wondered how this must have felt.

The patient then explained that, she would often, after an incident like this, vent her anger on other things, for example her pet rat, which she would smack. The therapist commented that this seemed to be the only safe way to show her anger. Mrs. A cried often at this stage but the tears did not seem to be tears of sadness, but rather having the function of disguising her rage and hatred.

The patient could not tolerate being alone. She became angry when her husband went away and left her at home. Although she felt selfish, she would usually coerce him to change his plans, and stay with her. After declarations like these, the patient often asked for reassurance from the therapist. This resulted in the therapist becoming overactive in the sessions, assuring her that her feelings are valid or making some interpretation on the material. She would then immediately reject the reassurance, and ignored everything the therapist said. She made it clear to the therapist that she saw her only as a 'brain' and not as a person. The therapist felt this to be aggressive and dismissive of her, but realised that at this stage she could only 'hold' these feelings without interpreting them. The patient still 'filled the room with words'.

The therapist pointed out to the patient that she is incapable of tolerating silence which made her angry. She asked the therapist what therapy was for, if not for talking; "What is silence worth". The therapist still felt not 'seen'. The thought occurred to the therapist that if the patient should "see" her as a person she might become "mother" and that she will then try and destroy the therapist, this was not interpreted at this stage.

The therapist became aware of her own feelings of helplessness and frustration. She felt as if the patient was pushing the therapist to let her down, to fail her, or to 'act out' on her dismissive behaviour towards the therapist.

This continued for months during which therapist and patient could gradually work on these issues. She became disgruntled and angry at little things. She often spoke of her "grumpiness" (the word grumpiness was in evidence from the start of therapy). When she was feeling fragile she accused the therapist of not being able to stay with her feelings. She would question the therapist's ability to understand what she saying. Any intervention by the therapist would make her extremely uncomfortable and she would immediately move into what she calls the "adult mode". She would speak in a descriptive manner and, in so doing, exclude the therapist from the interaction.

The patient accused the therapist of wanting too much from her. The patient claimed that she felt her feelings were separate from her functioning self, almost as if they belonged to someone else. She wanted the therapist to accept this, and to realise that these feelings scared her. She confronted the therapist with the fact that she had to leave the consulting room with "all these feelings while you move on to your next patient." On interpreting that she wanted to be the therapist favourite, or only child, as she often longed to be at home, she was visibly taken aback but did not comment. During the sessions following this, the therapist often felt that the patient was looking at her speculatively, almost as if she was trying to reassess the therapist.

Outside the consulting room the patient was now able to set limits in her relationship with her mother. She could distinguish her own thoughts and feelings from those of her mother's. She allowed herself to question her rigidly held belief in the "rules", that is, that one must achieve, must comply. She also questioned her own critical behaviour towards others. She came to the realisation that many of these thoughts did not belong to her, that it was her mother's voice she was hearing.

The patient could now allow for more genuine expression of feelings and she likened the process to the layers of an onion. She was removing layer after layer to get to core of the feelings. This process frustrated her as she felt that every time she left the consulting room



she had to put some of the layers back, because of her fear of becoming emotionally inappropriate at work. The patient dealt with this feeling of being overwhelmed, by giving herself permission to take some time off work. In this way she allowed some space for her emotional life. She became demanding of her husband, he must understand her, be with her, and do for her. She felt he was not emotionally supportive enough, and this made her angry.

Although her anxiety had decreased considerably, it still impaired her functioning to a certain extent. She would experience mild panic attacks under circumstances when she felt scrutinised, and this made her fearful to do presentations, or to assert herself at work with colleagues.

The therapy vacillated between what she called the "child and adult mode". As soon as a session became too emotionally laden, she would revert to her superficial way of relating, talking incessantly. The therapist felt that the patient always had to 'bring' something to the therapy, as she would then be seen as the 'good' compliant patient. She expressed the wish for wanting more from her mother, and that she is not satisfied with what she is getting from her. The therapist wondered whether she also wanted more from the therapeutic relationship.

During the next sessions the patient brought many dreams into the consulting room. These related to her husband and apparent sexual issues. The dreams consisted of her having a flirtation with another man while her husband was watching. These flirtations made her feel that someone thought of her as worthwhile. The therapist wondered at this time whether these flirtations had to do with the therapeutic relationship. The dreams then intensified and the patient brought the following dream to therapy. She was in her bedroom at home in bed having sexual intercourse with her husband. Her mother came in and sat on the bed talking to them. When her mother realised what was happening, she immediately rejected Mrs. A. The patient cringed and tried to get her mother to forgive her. Her mother just left and she felt shamed. The therapist wondered whether she felt that her mother would not forgive her, if she realised that she was having a close relationship with somebody else (the therapist). This brought her fears of her mother's reaction to her being in therapy to the fore. She related how scathing and disdainful her mother was of anyone who needed to seek help.

According to the patient, she was vehement in her criticism of anyone being depressed or anxious. She explained: "she says it is a lot of nonsense and an excuse to not cope". The therapist replied that it seemed as if her mother could really spoil things for her and that the fear of her mother's reaction was hampering her in her ability to enter fully into the therapeutic relationship.

The patient conceded that the fear of her mother's reaction did interfere with the therapeutic relationship. She still filled the room with words and was unable to tolerate any silence. She would time and time again, 'force' the therapist to fill any silent moment, and the therapist became overactive in the therapy feeling pressurised into commenting, or into an interpretation. As soon as the therapist addressed this the patient moved to an intellectual level where the therapy "stagnated" for many weeks. Eventually this was addressed and the patient could admit to herself that her emotions are frightening to her, and may be just as frightening to the therapist. The fear of her own destructiveness evolved and for the first time she experienced the hatred and rage she felt towards her mother.

### **7.3.2 Phase two**

The patient cried often during her sessions. With a great deal of sadness she mourned for the relationship with her mother, which she will never be able to experience in the way she longs for. She related how she felt when she saw a mother bird protecting her babies in the nest, or a plover taking on a large machine to protect its young. This made her immensely sad, and she spoke freely about her feelings of having nobody to protect her.

The patient referred to her success at work and how she could not enjoy the rewards this offered. She lived in continual fear of being 'caught out'. That others would realise that she is not as competent as she seemed to be. This resulted in a need for constant reassurance of her worth. She continued by relating the anger she felt against people not hearing her and not following the rules. She was sensitive to others, and felt they had to respond in the 'right way', that is, follow the rules. She spoke of a colleague who was of immense value to her and she could always use him as a 'sounding board'. The therapist wondered whether perhaps she felt that the therapist was somehow amiss in her ability to hear her. "Maybe this person has to help us in the consulting room because I am not capable enough". The

patient admitted to the fear she felt. Should she 'give' the therapist her emotions the therapist would, like her mother, not tolerate them and abandon her. After this incident she was able to confront the therapist directly.

Mrs. A accused the therapist of "skirting around important issues". The therapist admitted that she might have been remiss at times, being unsure of the patient's readiness to explore certain issues. The patient relaxed visibly and said that she herself might have been hesitant on certain issues. In confronting the therapist in this way, there seemed to be more trust and a belief in the therapist's ability to tolerate her 'difficult to bear feelings'.

The following sessions centered around the patient's issues on gender, feminine roles forced onto her and the feeding of babies. In exploring these issues she related how she often felt genderless. She viewed her coping, functioning self as laden with more male attributes than female: "females are soft and clingy and needy." This is how she experienced her emotional self. The therapist wondered if in recognising her female, or as she described it, her emotional self she will have to recognise her dependency and neediness. She strongly denied that she is needy or dependent and said that: "vulnerability and strength are just illusions."

Mrs. A changed the subject back to babies and how they repulsed her. She felt that: "babies are like leeches, they suck you dry and leave you with nothing." She then related a dream in which her mother was breast feeding her father, and she, the patient, had to watch. Her mother became very angry, as her mother wanted to be fed herself, but her father had to be fed. The mother then proceeded to ignore both of them, and started feeding herself. The therapist reflected as to whether this is how she always felt, namely, that somebody else's needs must take preference. In answer to this she angrily related how her husband can do what he likes while she must go out to work. How her mother is taking a creative writing course which she, the patient, wanted to do, but now she cannot because her mother spoilt it for her.

In the sessions following the patient became very agitated and confused saying in one breath that she found babies repulsive, they take over your body and leave you with nothing and in the next sentence proclaiming her envy of babies and what they have. The therapist

wondered if she found her own neediness repulsive while at the same time wanting to be held and cared for. The patient could not tolerate this, and kept on talking without pause in the same vein, venting her confusion about these issues. Eventually she came to the realisation that she always wants more, that she never feels satisfied with what she is getting. The therapist wondered if, by wanting too much, she felt she would be destructive. Fearing that she will suck the therapist dry and that the therapist will then have to abandon her to save herself. The patient just nodded and the session ended there.

Interestingly, when the patient came for her next session she was dressed in a more feminine manner than ever before. She told the therapist, with some pride, that she went shopping for clothes which were more feminine, and that she enjoyed the experience of wearing them.

### **7.3.3 Phase three**

For several session the patient seemed more at ease and perhaps the therapist and patient both went through a fairly restful period for a couple of sessions. The theme of the session once again became work related, although she would, now and again, refer to the issue of babies and dolls. She described her reaction to her friends with babies and their breast feeding them. Although this still made her uncomfortable, it seemed that she could tolerate it, without her previously strong negative reaction.

She spoke of how she always hated dolls. How she never wanted a doll, but time and again, she would get one as a birthday present. Her disappointment in getting these was overwhelming. She felt she wanted to "smash their smug, dead faces with their blond hair and blue eyes". As she knew she would be punished if she did destroy them, she just gave them a hiding before she put them away never to be touched again. The issue of her own negative body image was dealt with here. The patient's femininity filled her with trepidation, as she sees herself as unattractive and slightly masculine. She is ashamed of her body, and cannot allow anyone to see it. The patient still kept the "room filled with words."

Once again the therapist confronted her with her inability to tolerate silence and the following occurred: the patient was silent for the first time without pressurising the therapist

to fill the silence. When she did break the silence she said: "I cannot be quiet, if I don't speak nobody sees me, if I don't speak I don't exist. It is my only way to be connected with people, it is the only way not to be lonely". Only through speech did she feel she was making contact with others and only through speech was she making contact with the therapist. Her despair in her loneliness dominated the session. She cried a great deal, however the tears now spoke of relief. The therapist and patient then explored her relationships and the way in which she experienced them. She came to the realisation that she did not really relate to people. That she was superficial in her relationships and they felt empty and meaningless to her.

The patient came to the following session very scared. She cried and said she does not know what is happening to her. Once again her fear of being shamed, being humiliated, her negative experience of her body, and herself, were threatening to overwhelm her. In anguish she exclaimed that nothing of her was acceptable, everything was disgusting only her mind was alright. She became angry with the therapist, accusing the therapist of wanting something from her which she cannot give. She claimed that she cannot tolerate intimacy, she cannot trust people, and so forth. This monologue carried on throughout the session, until she once more started crying, and said that she is feeling so lost, and so incredibly lonely. The therapist felt a strong appeal from the patient to reassure her, to tell her that she will survive. The therapist resisted this, and allowed the patient to experience her despair, without interference.

During the next sessions this feeling of being lonely and lost was explored. The patient came to the realisation that she cannot accept caring, that should she accept caring, she will be exposed and vulnerable. This brought about an awareness of what she refers to as "my secret self." A self which she could not allow to be seen as it was too fragile, according to her, to withstand any scrutiny. She described it as the hopeful, fantasy side of herself which needs to be kept apart from the rest of the world. It is very precious to her and can be destroyed by others, and should it be destroyed, there will be nothing.

Shortly after this she related the story of the little vulture to the therapist. The story goes as follows: a little vulture felt very bewildered by the fact that everybody said vultures are bad and ugly. Why can't they be good and proud? The little vulture knew he had to go and seek

for the truth and set about his wanderings asking all the animals he met, what the truth was. He finally met an owl who told him that when a vulture is flying it is as beautiful as it is supposed to be. The patient needed no interpretation of this story. She cried out in despair "Why did my mother never think of me as being pretty and good? Why did she think of me as an unfortunate looking child?"

The patient now became increasingly involved in the therapeutic relationship, wanting reassurance. When the therapist mentioned that she needs holding and caring she "almost jumped out of her skin." After a period of silence she could tell the therapist how it made her feel when those words were used. This enabled an exploration of her feelings of vulnerability and her fear of abandonment and rejection. She explained how everything seems to be a "big fight" for her, even to accept from others, for example the therapist and her husband. She did however concede that she did need others emotionally. When the therapist wondered at how she was experiencing this feeling of needing others the patient got very angry. "How dare you call me needy, my mother called me needy when all I wanted was caring, warmth, attention and love. She is not even able to accept caring and love from me."

When her anger subsided the patient became very sad. She implored the therapist to explain why it is that even when she is so good at delaying gratification, that it was not good enough. She remembered how she waited for her mother to finish marking her papers so that she could spend some time with her. But even after she waited so patiently her mother would send her away and accuse her of needing too much attention. She felt that perhaps the therapist would find her too needy. There was such a sense of hopelessness and longing in the room that the therapist had tears in her eyes.

The therapy now reached a stage where the patient could see her disconnectedness from others in the light of her loneliness as a child. She realised that her need to hide and protect her inner self was her only way to survive, but at great cost to herself. She could now acknowledge her longing for closeness, to be held and cared for. Her relationship with her husband improved and she could allow him to care for her, without fear that he will expect a "pay back."

The therapist commented on this 'healthy inner self' which can allow for some spontaneity. The patient's immediate reaction was to reject this. The therapist asked whether she was maybe scared of being left (termination of therapy) and therefore she cannot allow for this healthy side to be seen. The patient agreed that she is still scared of rejection but could actually say to the therapist that she is not greedy, and that she will decide for her self how much feed she wants and needs. The therapist commented on this ability to actually 'take' from the therapeutic process, and on the patient's realisation that she can actually be part of the decision of when to terminate.

As therapy progressed the patient expressed her feeling of longing, loneliness and isolation through the means of story telling. The themes of her stories centered around "ugly" animals, for example, a warthog and a vulture. Mrs. A realised that her stories related to her loneliness and longing for meaningful relationships and her search for a self. However, she found it exiting to use them to give expression to everything which previously had to stay hidden and unsaid. She found "words" for what she was feeling.

Mrs. A became more in touch with her world as is illustrated by the following: "Sunday morning I was sitting in bed, the sun streaming through the windows and P (her husband) brought me some tea. He was so caring. The cats were lying around and P and I shared a closeness I could not believe possible. I felt so content and realised that I can enjoy moments like this".

In conclusion: the patient was a lonely child, not accepted by her mother, brother, or peers. Her only saving grace was her father with whom she shared some warmth. She was criticised for who she was, from an early age, for example, her appearance and her behaviour. She developed a negative view of her abilities and her body, and all spontaneity was stifled. In an environment, where there was no protection from important others, she had to hide behind a facade of "grumpiness". Her real feelings of anger, sadness, and longing could not be expressed and she came to view them as inappropriate. The only way she could relate to others was on an intellectual level, as her intelligence was the only part of her which did not "let her down." The result was severe anxiety and panic attacks, in an attempt to keep her despairing loneliness at bay.

The following chapter will focus on the analysis on the interpretation of the data.



## **CHAPTER 8**

### **DATA ANALYSIS AND INTERPRETATION**

#### **8.1 INTRODUCTION**

A paragraph by paragraph analysis of the integrative synopsis was done. Salient themes which emerged from this, will be highlighted by means of an interpretative synopsis under various headings, and this will be done in general psychological language. The patient's history will be used to explicate, where necessary. The themes will be given as statements, although the researcher is fully aware that different meanings could be attached to the content if they are looked at from a different theoretical perspective. However, the description of the themes will be in accordance with how it was experienced in the consulting room. The themes will be presented in terms of the three phases of the therapy.

The relevant themes will then be linked to the views of Winnicott, Heidegger, and Buber. The language used in these formulations of the patient's life-world, will be specific to these views.

#### **8.2 EMERGING THEMES**

##### **8.2.1 Phase One**

###### **Female role:**

The patient intellectualised her feelings about women and the roles enforced on them. If she looked at her mother as a woman, she could understand and accept her mother's discontentment; however, she had difficulty to accept the way her mother treated her as her child. She thus had to separate, the concept women, from the concept of mother, in order to cope with her mother.

**Mother-child relationship:**

Her relationship with her mother was destructive in her development. The relationship was distant, lacking in warmth, leaving the patient feeling vulnerable and unprotected. When she did not comply, her punishment would be her mother's withdrawal from her. There was no space in this relationship to allow her feelings of anger or love towards her mother, to be expressed.

Not only could her mother not love her, she could also not accept love from the patient. Her own feelings towards her mother were incongruent with what one is supposed to feel for one's mother. Therefore she found it difficult to express the anger she felt.

**Father-child relationship:**

Her relationship with her father constituted the only closeness she experienced. However, she was also shamed by this closeness, as it had a 'secretiveness' about it which made her feel that it was inappropriate. Her father could not protect her against others in her environment. Furthermore, she felt abandoned by him when she married.

**Brother-sister relationship:**

Her brother's envy of her achievements was destructive. It left her vulnerable, as her parents did not protect her against his onslaught.

**Relationship with Husband:**

During this phase she felt that her husband was not emotionally supportive enough on the one hand, and on the other she found it difficult to accept care from him. In considering her history and the destructiveness of her first intimate relationship, it can be postulated that she felt insecure in her relationship with her husband. As a result she wanted to control and manipulate him.

**Anxiety under the gaze of others:**

Other's scrutiny was anxiety provoking for the patient. Whenever her mother was angry with her, the patient found her mother's gaze terrifying. She explained that she "just cringed and felt like a rabbit caught in a light." This was exacerbated by the fear of doing something inappropriate. She also expressed the fear that her 'secret self' would not be able to

withstand scrutiny, as it is too fragile. This led to panic attacks whenever she felt that there was no escape from the other's 'gaze', for example being in a aeroplane or restaurant or giving presentations.

**Inability to tolerate silence:**

The patient could not tolerate silence. She talked incessantly and would pressurise the therapist to fill any silent moment.

**Distancing of the self from affective experience:**

The patient distanced herself from her affective experience. She used words, exaggerated facial expressions, and a descriptive or intellectual way of narrating her story, as means to achieve this. For example, her own feelings of rage and hatred towards her mother were incongruent with the feelings one is supposed to have towards one's mother. She was unable to verbalise her anger and euphemistically referred to it as "grumpiness." She functioned on an intellectual level, but could not allow an emotional life.

During the latter part of this phase she brought dreams into the consulting room and, although this was still distancing herself from her affective experience, she could get closer to what she was feeling.

**A gradual unfolding of subjective emotions:**

Whereas the patient initially distanced herself from her affective experience, she now came to realise that her emotions were frightening to her, and she was therefore unable to express them. She was unsure of what the consequences would be.

**Feeling unprotected:**

The patient had to distance herself from the concept of 'mother', as this is linked to nurturing and caring which she did not receive. She felt unprotected by the very person who should protect her, leaving her vulnerable. She also felt that her father could not protect her against her mother and brother.

**Inability to be alone:**

The patient could not tolerate being alone. She always had to have someone with her, usually her husband.

**Relationship with therapist:**

The patient could not allow herself to see the therapist as a person, only as something she could relate to intellectually, only as a 'brain'. At the end of this phase the patient was more aware of the therapist, and could contemplate the effect of her emotions on the therapist.

**8.2.2 Phase two**

**Sadness and mourning:**

The patient could mourn the 'loss' of her mother, and experience her longing for a fulfilling relationship with her.

**Feeling unprotected:**

Intense feelings of being unprotected was evident. Her referral to the immense sadness she felt when seeing a mother bird protecting its young, is an example of this.

**Achievements:**

Since childhood she was successful, academically and on the sports field. As an adult she achieved in the work place.

However, she could not 'own' any achievement. Nothing made her feel worthy, praise and acknowledgement brought a certain measure of feeling worthwhile, but it was fleeting and she could not hold on to it.

**Trust:**

The patient could slowly begin to trust the therapist and believe in her ability to tolerate her 'difficult to bear' feelings.

**Gender issues:**

The issue of gender was pertinent. She often felt genderless and could not allow herself to be seen as feminine. She fought hard against being put into the feminine role. According to her, the vulnerability of being feminine was equated with her emotional self, which she experienced as soft, clingy, and needy.

**Food:**

During this phase the patient started talking about feeding. She viewed the feeding of babies as repulsive and quite terrifying as babies "are like leeches, they suck you dry." She, however, also envied them the care they were getting. She also related a dream in which she watched her mother breast feeding her father, but her mother then proceeded to feed herself.

**Inappropriate needs:**

She felt her own needs to be inappropriate and other's needs must take preference. She experienced her own needs as destructive as she wanted too much and was seen as greedy.

**Relationship to therapist:**

During this phase the patient could begin to confront the therapist with how she experienced her and admit to the emotions this elicited. Her interaction with the therapist became more 'real' as she could express her anger and other feelings towards the therapist.

**8.2.3 Phase Three**

**Negative view of her own body:**

She saw the ideal as being blond and blue eyed, just as the doll she despised so much. This is how her mother would have wanted her to be; as she is, she is unacceptable. Her mother referred to her as an "unfortunate looking child." She herself could never nurture her dolls. Her only feeling towards them was aggression. These feelings of being unacceptable as a female were intensified by her first intimate relationship.

**Food:**

She now felt more at ease with the feeding of babies and could tolerate witnessing it, even if it still made her uncomfortable. This is linked to her own needs.

At the end of this phase she also related in a contented way how her husband brought her tea in bed, which she could accept as the caring it was meant to be, without the negative feeling that she was greedy.

**Own Needs:**

Her own needs became more apparent, but she still fought against feelings of needing warmth and caring from others. The knowledge that she actually craved closeness was terrifying.

**Loneliness:**

Her loneliness unfolded in this phase to where it could be verbalised and experienced. The patient could now experience her intense longing for a warm, fulfilling relationship with her mother and others. She could verbalise her despairing loneliness as a child, and as an adult.

**Interpersonal relations:**

The patient came to understand her disconnectedness from others. She realised that she feared intimacy, had difficulty in trusting others and was even more fearful of them rejecting her offerings to them.

**Relationship with Husband:**

The patient was now able to accept care from her husband, and was far less demanding of him.

**Inner secret self:**

The patient became aware of an inner self which had to be protected at all cost, as it is fragile, and it will not survive being seen. She could, however, through story telling allow for some communication from this inner self which she referred to as the "hopeful, fantasy side of herself".

### **Relationship to therapist:**

Although she trusted the therapist with her feelings, she was still fearful of being rejected if she showed her need for caring and dependency. She did, however, realise that even in her fragile state she had a shared participation in the therapeutic process.

## **8.3 INTEGRATION AND INTERPRETATION OF THEMES**

### **8.3.1 Introduction**

The patient's life-world, as described by her in therapy, will be discussed as seen from the views of Winnicott, Heidegger, Binswanger and Buber. The themes extrapolated during the various phases will be integrated. The unfolding of her loneliness and the emergence of her True/authentic self will be focal points. This will be integrated with how her way of entering into the therapeutic relationship changed during the various phases.

As there are no details regarding her history before the age of five, certain assumptions will be made regarding the environment in which she developed as an infant. These assumptions will be based on her remembered experience of her relations to important others, and their reaction to her.

### **8.3.2 The patient's functioning: Winnicott's concept of the development of the self**

According to Winnicott (1960/1984a) the most important factor in the development of the self is certain environmental provisions, which he termed a good-enough holding environment. The holding environment includes, firstly, the actual physical holding of the child and in unison with this the total management and care of the infant. If the environment impinges on the developing infant, its task of integration of the self will be encumbered (Winnicott, 1960/1984a, 1962/1984, 1971/1988). In the case of Mrs. A certain postulations can be made regarding the environment in which she developed.

As Mrs. A's 'story' unfolded in the psychotherapeutic process the following emerged:

The relation between psyche and soma: according to Winnicott (1950/1992, 1972/1996) one of the mother's tasks is to assist the child to establish a satisfactory working arrangement between the psyche and the soma. The physical part of the infant's care, for example, bathing, feeding and touching is designed to help the infant in this task. Mrs. A's mother reacted to all bodily functions with distaste. Furthermore, her mother rarely showed her any physical affection. One can assume that she reacted to the infant's physical needs in much the same way. Therefore the patient's holding environment seemed to have failed her and her integration into a 'unit self' was hampered. Mrs. A's dissociation from her body and her own femininity can be directly linked to this, leaving her with the feeling of being genderless.

Concomitant with this was her mother's destructive reaction to any physical illness or hurt. When the patient was ill or hurt her mother was ashamed of her and embarrassed. Therefore the patient could not, as a young child, be dependent and allow herself to regress when she was ill or hurt. She knew she could not trust the person who was supposed to protect her. All she experienced was her mother's shame and her concern of being seen as a not 'good-enough' mother.

The mother's mirroring function: according to Winnicott (1971/1988) the self recognises itself in the eyes and facial expression of the mother and in the mirror which comes to represent the mother's face. What did the patient, as an infant, see when she looked into her mother's face? It can be assumed that she saw the mother's own defences and her mother's negative feelings as far as the patient's physical appearance was concerned. She saw in the mother's face dislike, rather than love. It must have been devastating to the child to be unacceptable to the very person in whom she must trust to move towards integration. Her perception that she and also her needs are unacceptable, must have arisen from this. This has direct bearing on her anxiety under the gaze of another. She could not tolerate scrutiny for fear of being inappropriate. The patient described it as feeling like a rabbit caught in a light. She feared that her 'secret inner self' would be seen and destroyed. Furthermore, the patient saw herself in the mirror, which represents her mother's face, as unattractive and not feminine.

Winnicott (1967/1988) expands his view of the mother's mirroring function to encompass the mirror role of the whole family. He claims that a child derives benefit from being able to see



herself in the attitudes of individual members, or in the attitude of the family as a whole. Her mother's critical appraisal of her, and her brother's humiliation of her, must have had an overwhelming effect on the child. Furthermore, the only positive appraisal she received was from her father and this had a secretive quality about it. This left her sensitive to others and she always had to respond in the way which was demanded of her.

The mother's ability to tolerate the infant's aggression: Winnicott (1967/1988) claims that there is aggression before integration. Here aggression drives the infant to a not-me, which assists the infant in the process of integration and object relating. If aggression is lost at this stage, there is some degree of loss in the capacity to love. It can be assumed that her mother could not tolerate her aggression, and following on that, the patient's love and care when she reached the age of concern. Again, she was taught that any emotion other than those her mother wanted from her, was unacceptable and inappropriate. Furthermore, her mother could not allow her to use the mother as object. She could not tolerate the infant's destructive fantasies. If one considers the form of punishment the mother used, namely withdrawing from the patient, one can assume that the infant could not believe in the object's resilience to withstand its attacks. It left the infant devastated as it felt it had destroyed the object. She had to split off her affective self and related to the world on an intellectual level.

The patient's ability to tolerate silence: Winnicott (1958/1984) postulates that a patient's inability to tolerate silence is directly related to a fear of being alone. Here again the environmental provisions play an important role. An infant can only be alone in the non-demanding presence of another. The infant can allow itself to experience formlessness in comfortable solitude knowing that the ego-supportive mother is present. If the infant feels emotionally unprotected it will lead to an inability to tolerate being alone. This will directly affect how a person experiences loneliness. The impinging mother will instil in the child a fear of being alone as is the case with Mrs. A.

Emergence of a False Self: in view of the above it can be postulated that Mrs. A did not receive the environmental provisions necessary for the emergence of an integrated self. Her reaction to these environmental impingements led to incomplete integration of the self. She had to turn away from her mother and into herself for her to survive. It was necessary for her

to develop a False Self, which could precociously take over her self care. The False Self complied with the needs and demands of someone else, in order to save her from annihilation. Her 'grumpiness', as she calls it, is her reaction to these impingements.

As an older child, she lived in a fantasy world which, as Winnicott (1950/1992) claims, can be used to cope with an inner reality which is not integrated with external reality. It is an organised way to sustain the False Self.

Once the False Self is in place, intellect takes over, and the affective part of the self and its somatic underpinnings, go into hiding. Although functioning in the False Self leads to academic and occupational success, it is not healthy if the true self is atrophied and not acknowledged, whilst the person lives exclusively in the False Self. As with the patient these successes are often not owned, and she lives in fear of being 'caught out'.

The fact that she was unable to enter into fulfilling object relations can be seen as a result of her mother's inability to be non-impinging. It can be said that Mrs. A could only function when the False Self was in place, and that all her communication stemmed from the False Self. This is according to Winnicott (1963/1993) not true communication. It left her with an 'as if' feeling, living a life of unthinkable anxiety and dread, fearing that her 'secret inner self' will be found and destroyed.

The psychotherapeutic alliance: in the consulting room, during the initial phase of therapy, the patient related on an intellectual and superficial level. Her rigid False Self was firmly in place. She could not experience the therapist as a person, only as a "brain' to be used. She existed through 'doing' and there was no space for 'being'. Winnicott sees doing as male attributes and being as female (Erich, 1998). She was dissociated from her body and her affective self. The therapist had to be resilient against the patient's attacks on her and deny her own subjective self in order to facilitate a holding environment for the patient. The patient herself used her dream space in her attempt to integrate her inner reality with external reality.

During the second phase of therapy the patient's way of relating changed. She became more in touch with her affective self. The patient experienced her sadness and could mourn

the 'loss' of her mother's love, and her mother's inability to protect her. She could now use the therapist as object, and allowed her feelings toward the therapist to emerge. She recognised her own fear of being destructive towards the therapist and she felt concern. The therapeutic environment allowed for a transitional space in which the patient could move from solipsistic subjectivity to objective perception.

She slowly allowed the integration of her feminine self and her affective self emerged. Her fear for her "secret inner self" was pertinent, as she saw it as fragile and feared that it will be destroyed. However, she allowed for communication from her True Self, which facilitated the unfolding of her experience of loneliness. This had a profound effect on how she related in the therapy. The patient could now allow a measure of dependency on the therapist, while she partly regressed in her struggle towards integration. The latter meant integrating her 'inner self' with the self she presents to the world.

At the end of the last phase of therapy she could communicate from her True Self, inside and outside the consulting room. This alleviated her feelings of loneliness. Her creativity was allowed 'life' ,and she could allow herself moments of enjoyment.

### **8.3.3 The patient's being-in-the-world and relatedness: the thoughts of Heidegger, Buber and Binswanger**

Heidegger (1927/1980) says that for Dasein there is Being and Nothingness, and between these lie Dasein's possibilities. To live authentically, Dasein must have its possibilities attested. Dasein must make its own choices to take hold of its possible ways of being. Heidegger states that Dasein's primary concern is its own identity, and finding its own identity is the key to authenticity. Furthermore, Dasein is living-in and living-with, Dasein, without a world, and without others makes no sense.

#### **Inauthentic way of Being**

According to Heidegger (1927/1980), authenticity and inauthenticity, are fundamental characteristics of the Being of Dasein, that is, the ontological structure of existence. The manner in which Heidegger uses these terms, does not relate to the factual lives of individuals. However, it was argued in Chapter 5, that the ontological structure of Dasein is

a precondition for these fundamental characteristics to manifest at a factual level. It belongs to the ontological structure of Dasein that it is also ontic. As Dreyfus (1992) states, the one is an account of the basic structure of the other. One can thus describe how authenticity and inauthenticity manifested in the life of Mrs. A, but with full realisation of the transition from an ontological to an ontic discourse, inherent in such a description.

Mrs. A's way of being-in-the-world was inauthentic. She was unable to find her own identity, as her environment would not allow for it. She was 'thrown' into a bleak environment where achievements carried the day. Therefore, she was just a placeholder as the 'one who achieves'. She could not 'own' these achievements as she only saw them as 'payback' to her parents. As there was no protection in her environment she could not trust important others in her world. This made it impossible for her to explore her possibilities. She could not define herself for herself as she had to comply to the demands and needs of others.

Mrs. A was firmly placed in her world through what Heidegger (1927/1980) calls competitiveness, publicness, averageness, and adaptation. According to him one cannot find one's own identity by the above. Competitiveness sets one apart from others. She had to be competitive in order to survive, her only worth being in her academic achievements and her career. Publicness suppresses the exceptional in order to promote a well-rounded personality. She lived in constant fear of doing something inappropriate. Mrs. A was seldom allowed spontaneity or creativity. Her environment suppressed that which made her special. Averageness is what one does to fit in with others. She had no choice but to fit in, to not fit in would have meant punishment. Her own uniqueness of selfhood was diffused and lost. Adaptation suggests that one does as if one has no choice. Mrs. A had no choice as a child but to conform and comply to that which was expected and demanded of her, without the ability to challenge it. Through her compliance and her work she was absorbed in the world of object. She could not tolerate 'the others' gaze', as she feared that they will see her inner self and in so doing destroy her. Therefore, she had no room to explore her possibilities. This exacerbated the patient's feelings of loneliness.

Buber (1958) claimed all real living is meeting: this presupposes mutuality in relationships in which one is confirmed as the unique person one is. Mrs.A did not experience herself as being confirmed. Her relationships were controlled and manipulated, whether by her or by

those she was in relation with. Her inborn Thou was met with adversity, which left her no choice, but to live in the world of the 'It'. She objectifies others and herself, seeing herself only as the one who achieves (payback to her parents). The only place where she was fairly comfortable was in her work. It can be postulated that she has, as Buber (1958/1965) says, abdicated before the world of It. The only place she felt worthwhile was in her relationship with modern technology.

According to Heidegger (1927/1980), man must find his own truth in isolation. Mrs. A felt merged with her mother and she depended on others' perceptions of her to define her for herself. This hampered her in her ability to live more authentically. Buber (1958/1965) concurs when he states that for true communion with another, one must be separate from them, only then is there the possibility of an I-Thou relation.

Similar to Binswanger's (1944/1958, 1946/1958) view, that the cohesion of the world-regions may become lost, Buber (1958/1965) describes disintegration as characteristic of the world of It. In the case of Mrs. A, there is a split between herself and others, herself and nature, herself and her own psyche and body. She is not at home in the world, and not at home in herself and her own body.

### **Temporality**

Ontologically, the temporality of Being involves the future, past and present. For Heidegger, *existence* refers to the future, *facticity* to the past and *fallenness* to the present. Behaviour and choices, in the present, are related to how the future is seen, and are also related to the past. Dasein's past happens out of its future, the past is in the present, which is the way it is appearing now. Thus, whilst the past belongs irretrievably to the events of an earlier time, it can still be present-at-hand now (Heidegger, 1927/1980).

On an ontic-anthropological level, the foregoing view of Heidegger implies that a person's view of the future reflects his view of the past. If his past seems chaotic, his future will be inaccessible, because, as Van den Berg (1972) claims, an accessible future means a well ordered past. Also in the case study reported here, the patient's past was in chaos and her future closed off to her, so the present was meaningless and fraught with anxiety. Her main way of being was frenzied activity and doing. Through her work she was absorbed in the

world of object. According to Binswanger (1944/1958), an existence which does not run into the expanse of the future, which is caught in a bare, empty present, and ruled by the past, is deprived of authenticity.

### **Mood**

According to Heidegger (1927/1980), Dasein finds itself in a particular fundamental situation, the meaning of which can be determined by interpreting its prevailing mood. Mood is an existential way in which Dasein is its 'there'. This oneness of mood and world is reflected, on an ontic-anthropological level, in Binswanger's (1946/1958) views. According to him, to understand feeling or mood, one must understand how the existence that has the mood, or is in it, is in-the-world. In other words, the person's world-design must be understood.

Mrs. A's pervasive mood was one of anxiety, feeling that there were no choices open to her, that her possibilities were closed off. This is similar to Binswanger's view that anxiety arises when the world has become constricted. "The emptier, more simplified, and more constricted the world-design to which an existence has committed itself, the sooner will anxiety appear, and the more severe it will be" (Binswanger, 1946/1958:205).

### **Bodiliness**

According to Heidegger (1927/1980) Dasein is embodied, it lives in its world through its body. The body is inconspicuous and lies in the background of Dasein's doings and thus man is centered in his relationship to the world.

Binswanger (1944/1958) uses Heidegger's (1927/1980) ontological insight regarding thrownness to gain understanding of particular, factual modes of Being-in-the-world. He regards being of a certain gender, as part of one's thrownness. Although people may rebel against their 'fate', for example being a woman, it is not possible to escape from it and efforts to break through it, and thereby opposing existence in general, only results in its reassertion. Mrs. A often felt genderless, she could not allow herself to be seen as feminine and fought against being put into the feminine role. However, the more she fought against this, the more inescapable her bodiliness as a female became.

The patient, by negating her own femininity, was not firmly placed in her body. She viewed her body as alien to herself and her only way of relating was with her intellect. Since one relates to one's world through one's body, she became distanced from her world.

### **Being-with-others**

For Heidegger (1927/1980), Dasein is being-with-others, Being-in its world and Being with-oneself. To be with others becomes possible because Dasein is essentially *Mitsein*. *Mitsein* relates to the ontological structure of Dasein and is not an objective togetherness of individuals. At the same time, this being-with forms a precondition for distance between people. Being able to withdraw from others becomes possible only because of Dasein's very nature of being-with [see, in a related context, Preller's (1977) comment that loneliness can only occur in the context of *Mitsein*].

The very fact that Mrs. A lived inauthentically made it difficult for her to share her world with others. She disguised herself, distancing herself from her body and her affective experience. Mrs. A's rejection of her herself and her own body lead to an overwhelming sense of alienation and despairing loneliness. The only way she could counteract this, was through frenzied activity and a constant state of anxiety. In so doing she could not be with others in the sense of true communion. To be with another, one has to make yourself transparent. She could not have true communication with others as she was living in a false manner. The ability to really share one's world with another, depends on how far one has travelled on the road to authenticity. This inauthenticity and distance towards others exacerbated her striving for true connectedness with others. Being-with is so intricately linked with being-human, that it cannot be negated. Even if one purposefully tries to withdraw from others, being-with reasserts itself (Binswanger, 1944/1958).

### **Therapeutic alliance**

The therapeutic process allowed for the patient to attest her possible ways of being. Her past became more accessible and her future was opened up to her and in the present her mood and, concomitant with that, her perception of her world changed. According to Heidegger (1927/1980) one's mood can not be changed by cognitive understanding, it can only be changed through experiencing. Furthermore, there is always the possibility of speech in one's mood. Through experiencing her own affective self and her body, she could

verbalise what she felt. During the course of therapy her mood changed from overwhelming anxiety to loneliness. She became more transparent in the consulting room and outside. In doing so she could enter into a more lively, mutual acquaintanceship with others. The patient could be-in-the-world, be-with-another and be-with-herself as the last paragraph of the case study illustrates. Her communication in this paragraph gave one a sense of letting-be-ness which is a prerequisite for authentic living.

Furthermore, in the initial phase of therapy the patient objectified the therapist and related to her only in the I-It. In the I-It one is never totally present in one's meeting with the other (Buber, 1958/1965). This was evident in the therapeutic relationship. She could not allow herself to see the therapist as a person, but only as a 'brain' to be used. Once the patient allowed herself to experience and tolerate her affective self, she could allow for I-Thou moments. She disclosed herself to the therapist, in the realisation of her disconnectedness from others, and her despairing loneliness which she could verbalise.

#### **8.4 THE UNFOLDING OF LONELINESS**

To describe the unfolding of the patient's experience of her loneliness, and concomitant with this, the emergence of her True Self/authentic self, as a linear process will be unsound. During one phase of the psychotherapeutic process, certain issues may become the focal point. During the next phase the same issues can take a 'back seat' while something else becomes the point of focus. As therapy progresses the themes which emerge are re-visited. However, for the sake of clarity the various issues the patient had to address, before her loneliness became accessible to her, will be discussed as if they happened in sequence.

In the initial stages of therapy the patient related to the therapist on a superficial, intellectual level. It can be said that she communicated from the False Self, to use Winnicott's words. Heidegger would describe it as an inauthentic way of Being and according to Buber the relationship was an I-It relation. The patient was living in a state of anxiety, distancing herself from her world and others. Although her feelings of loneliness were intense she was 'unaware' of it.



The psychotherapeutic environment allowed for a space in which she could explore her feelings in safety. It was necessary for the patient to become aware of, examine, and come to terms with various aspects of her life, before she was able to experience her loneliness.

Initially her relationship with her mother was the most pertinent. It was imperative that she could express her anger at, and hatred for, her mother before she could come to the realisation that this is 'as good as it is going to get'. Once she acknowledged this she could mourn for the caring, loving, warm relationship which she yearned for, but never had.

Furthermore, she had to examine her feelings about her own body and her femininity and start the gradual acceptance of her gender. This allowed the patient to become aware of her own needs and longing for close relationships. She had to learn to accept from others in order to understand her own needs. She had to learn to listen to herself, in order for her to understand herself.

The patient slowly developed trust in the therapist and the psychotherapeutic process, which allowed her to experience her affective self. As soon as she experienced her rage and hatred, as well as her longing for closeness, she could 'make room' for her experiencing her loneliness. It enabled her to verbalise her intense feelings of loneliness as a result of her disconnectedness from others.

As she allowed the therapist to meet, with what she called, her 'secret inner self', her True Self emerged and she could live more authentically. Her relatedness to the therapist allowed for moments of I-Thou in which there was some mutuality.

A broad overview of the different paradigms and their relatedness to loneliness will be given in the next chapter.

## CHAPTER 9

### DISCUSSION

The aim of this study was to explore how the patient became aware of her loneliness. To enhance the understanding of the person in question and how she experienced her world, the thoughts of Winnicott as an object relations theorist, and Heidegger's fundamental ontology were used. In addition, the views of Buber and Binswanger were used to understand the factual experience of loneliness.

The question must, however, be asked whether these two paradigms can be used to explain the same phenomena and what value does it have for psychology. Both these views give meaning to, and understanding of, loneliness. However, in using and comparing these paradigms, one must be aware and acknowledge the differences between them.

The above views were discussed in detail in Chapters Three and Four and the divergence and convergence thereof were discussed in Chapter Five. Therefore, a broad overview will be given in conclusion.

Winnicott's views are presented in the form of a developmental theory. He sees human development in the light of the environmental provisions provided for the infant. Although he emphasises the interpersonal, and states that development is separate from instinctual processes, his theory includes and presupposes certain intrapsychic processes necessary for the development of an integrated well functioning human being. Winnicott postulated that the developmental history of the individual plays a causal role in his later functioning. In this regard, similar to other psychodynamic theories, his theory links with the positivistic approaches in psychology. Dilthey (cited in Van den Berg, 1964: 119) said "Die Natur erklären wir, das Seelenleben verstehen wir" – referring to the explanation of natural phenomena in causal terms, whereas in the humanities, the focus is on understanding phenomena.

Heidegger's and Buber's views, on the other hand, are philosophies and not developmental theories. They do not make any specific reference to human development, and do not allocate a causal role to the past. For Heidegger, the past meets the future in the present and although one might be 'thrown' into an environment, one can choose how to live one's possibilities. In contrast, Winnicott postulates that the person's potential is inherited, and in order to realise these potentials, certain environmental provisions are prerequisites. Whereas Winnicott formulates and uses theoretical constructs to explain behaviour, Heidegger is concerned with grasping the essence of existence through description and understanding. Binswanger recognises the role of a person's life-history, but for him this is used to understand the person's world-design.

Heidegger, Binswanger and Buber do not try to explain existence in terms of intrapsychic processes. Instead, Dasein, or a particular existence, must be understood in terms of the world in which he lives. Existence is always intended upon the world and man exists in this relationship-with-the-world. To use Heidegger's terms, man is 'Being-in' an environment (Umwelt) and 'Being-with' others (Mitwelt) and 'being-with-oneself' (Eigenwelt). This underlies all participation and engagement with one's world.

Furthermore, as Winnicott speaks of the psyche and the soma being in continual dialogue it leaves one with a feeling that the two can be differentiated. Is this not maybe residual dualism in the Cartesian tradition? On the other hand Heidegger, Buber and Binswanger are opposed to any dualism. For them there is no split between body and mind, and between subject and object. It is through one's body that one is in the world, perceives the world and makes sense of it.

For Winnicott, loneliness is a result of failures of one's environmental provisions during development. Heidegger and Buber see loneliness as an existential truth, man is inescapably lonely. However, this loneliness, interpreted in terms of Heidegger's ontology, is only possible because of Dasein's fundamental characteristic of being *Mitsein*. According to Binswanger, a person can distance himself from other people, and a particular world-region such as the *Eigenwelt* may become predominant at the expense of the *Mitwelt*. This can create loneliness, but being-with others is so fundamental to existence that even if one purposefully tries to withdraw from others, being-with reasserts itself. On an ontic-

anthropological level, the only way to alleviate loneliness is through meaningful relations with others and meaningful relations are only possible if one lives authentically. Winnicott sees the psychoanalytic alliance and holding environment, as a way of assisting a person with his self-integrating task. This will lead to the emergence of the True Self through which real communication, can follow and this will alleviate the person's loneliness.

The above emphasises the importance of finding words for one's affective experience in order to 'know' and live it. In the case in this study the patient could 'open up' her world and her affective experience, as soon as she was able to verbalise her despairing loneliness. Although this process can be looked at from the perspectives of object relations theory and the phenomenological and existential approaches, and although there are points of convergence between these perspectives, there are also fundamental paradigmatic differences between them which cannot be reconciled. These approaches should perhaps be seen as different ways of understanding reality, which ask different questions and highlight different aspects of reality. These cannot be integrated into a single conceptual framework. At most, they can be seen as two parallel lines which head in the same direction; they may have links between them, but do not merge.

## REFERENCES

- Ashworth, A. (1996). Presuppose nothing! the suspension of assumptions in phenomenological psychological methodology. *Journal of Phenomenological Psychology*, 27(1), 1-25.
- Barral, M.R. (1993). Self and other: communication and love. In K. Hoeller (Ed), *Merleau-Ponty and Psychology* (pp. 155-180). New Jersey: Humanities Press.
- Becker, E. (1974). The spectrum of loneliness. *Humanitas*, X(3), 237-246.
- Binswanger, L. (1944/1958). The case of Ellen West. An anthropological-clinical study (Trans). In R. May, E. Angel & H.F. Ellenberger (Eds.) (1958, *Existence. A new dimension in psychiatry and psychology*. New York: Simon & Schuster.
- Binswanger, L. (1944/1947/1963). Dream and Existence. (Trans). In J. Needleman (1963), *Being-in-the-world. Selected papers of Ludwig Binswanger*. New York: Basic Books.
- Binswanger, L. (1946/1958). The Existential Analysis school of thought (Trans). In R. May, E. Angel & H.F. Ellenberger (Eds.), *Existence. A new dimension in psychiatry and psychology*. New York: Simon & Schuster.
- Boss, M. (1994). *Existential Foundations of Medicine and Psychology*. S. Conway & A. Cleaves (Trans.). New Jersey: Jason Aronson Inc.
- Brice, C.W. (1984). Pathological modes of relating and therapeutic mutuality: A dialogue between Buber's existential relational theory and object relations theory. *Psychiatry*, 47, 109-118.
- Buber, M. (1958). *I and Thou* (2nd ed.). R.D. Smith (Trans). New York: Charles Scribner.
- Buber, M. (1965). Distance and Relation. In M. Friedman (Ed), *The Knowledge of Man: A Philosophy of the Interhuman* (pp. 59-69). New York: Harper-Ford Books.

Buhrman, M.V. (1984). *Living in two worlds. Communication between a White Therapist and Black Counterpart*. Cape town: Human & Rousseau.

Cassimjee, N. (1998). *The role of gender in black adolescent sexuality: an ecosystemic approach*. Unpublished master's dissertation, University of Pretoria.

Chessick, R.D. (1986). Heidegger for psychotherapists. *American Journal of Psychotherapy*, Vol xi(1), 83-95.

Corsini, R.J. (Ed) (1984). *Current Psychotherapies (3rd ed.)*. Illinois: Peacock.

Davison, G.C. & Neale, J.M. (1982). *Abnormal Psychology*. New York: John Wiley & Sons.

Denne, J.M. & Thompson, N.L. (1991). The experience of transition to meaning and purpose to life. *Journal of Phenomenological Psychology*, 22(2), 109-133.

Dreyfus, H.L. (1992). *Being-in-the-World. A commentary on Heidegger's Being and Time*. Cambridge: MIT Press.

Dreyfus, H.L. & Hall, H. (1995). *Heidegger: A Critical Reader*. Oxford: Blackwell.

Edwards, D.J.A. (1991). Duquesne phenomelological research method as a special class of case study research. In R. Van Vuuren (Ed.), *Dialogue Beyond Polemics* (pp. 53-70). Pretoria: HSRC.

Edwards, D.J.A. (1993). *The Phenomelological Case Study Method in Psychological Research*. Grahamstown: Rhodes University.

Edwards, D.J.A. (1993). *Guidlines for Conducting Clinical and Phenomenological Case Studies*. Grahamstown: Rhodes University.

Eigen, M. (1996). *Psychic Deadness*. New Jersey: Jason Aronson.

Ellenberger, H.F. (1958). A clinical introduction to psychiatric phenomenology and existential analysis. In R. May, E. Angel & H.F. Ellenberger (Eds.), *Existence. A new dimension in psychiatry and psychology*. New York: Simon & Schuster.

Erich, H.S. (1998). On loneliness, narcissism and intimacy. *The American Journal of Psychoanalysis*, 58(2), 135-157.

Frankl, V.E. (1993). *Life with Meaning*. California: Brooks Cole.

Friedman, M.S. (1960). *Martin Buber: A life of dialogue*. New York: Harper Torchbooks.

Friedman, M.S. (1985). *The Healing Dialogue in Psychotherapy*. New York: Jason Aronson.

Fromm, E. (1993). *The Art of Being*. London: Constable.

Fromm-Reichmann, F. (1959). Loneliness. *Psychiatry*, 22, 1-13.

Gaev, D.M. (1976). *The Psychology of Loneliness*. Chicago: Adams Press.

Gendlin, E.T. (1988). Befindlichkeit: Heidegger and the philosophy of psychology. In K. Hoeller (Ed). *Heidegger and Psychology* (pp. 43-71). New Jersey: Humanities Press.

Giorgi, A. (1983). Concerning the possibility of phenomenological psychological research. *Journal of Phenomenological Psychology*, 14(2), 129-164.

Giorgi, A (Ed) (1985). *Phenomenological and Psychological Research*. Pittsburg: Duquene University Press.

Giorgi, A. (1992). Description versus interpretation: Completing alternative strategies for qualitative research. *Journal of Phenomenological Psychology*, 23(2), 119-35.

Giorgi, A. (1994). A phenomenological perspective on certain qualitative research methods. *Journal of Phenomenological Psychology*, 25(2), 190-220.

Giorgi, A. (1997). The theory, practice and evaluation of the phenomenological method as qualitative research procedure. *Journal of Phenomenological Psychology*, 28(2), 235-260.

Goldman, D. (1993). *In One's Bones: The Clinical Genius of Winnicott*. New Jersey: Jason Aronson.

Gotz, I.L. (1974). Loneliness. *Humanitas*, X(3), 289-299.

Greenberg, J.R. & Mitchell, S.A. (1983). *Object Relations in Psychoanalytic Theory*. London: Harvard University Press.

Gunzburg, J.C. (1997). *Healing Through Meeting. Martin Buber's Conversational Approach to Psychotherapy*. London: Jessica Kingsley.

Heidegger, M. (1927/1980). *Being and Time*. J. Macquarrie & E. Robinson, (Trans). Oxford: Basil Blackwell.

Hoeller, K. (Ed). (1990). *Readings in Existential Psychology and Psychiatry*. Seattle: Review of Existential Psychology and Psychiatry.

Hoeller, K. (Ed) (1993). *Merleau-Ponty and Psychology*. New Jersey: Humanitas.

Hopkins, J. (1996). The dangers and deprivation of too-good mothering. *Journal of Child Psychotherapy*, 22(3), 407-422.

Hyckner, R.H. (1991). *Between Person and Person: Towards a Dialogical Psychotherapy*. New York: The Gestalt Journal.

Inwood, M. (1997). *Heidegger*. Oxford: Oxford Univ. Press.

Ivey, G. (1990). *An Introduction to Object Relations Theory*. Durban (University of Natal): Unpublished paper.



- Khan, M.M.R. (1975/1992). Introduction. In M.M.R. Khan (Ed), *D.W. Winnicott. Through Paediatrics to Psycho-Analysis: Collected Papers*. New York: Brunner/Mazel.
- Khan, M.M.R. (1986). The concept of cumulative trauma. In G. Kohon (Ed), *The British School of Psychoanalysis: The independent tradition*. London: Free Association Press.
- Klein, M. (1963). On a sense of loneliness. In R. Money-Kyrle (Ed), *Envy and Gratitude and Other Works* (pp. 300-313). New York: The Free Press.
- Kruger, D. (1988). *An Introduction to Phenomenological Psychology*. Cape Town: Juta .
- Kurtz, I. (1983). *Loneliness*. Oxford: Basil Blackwell.
- Kvale, S. (1996). *Interviews: an introduction to qualitative research interviewing*. London: Sage.
- Laing, R.D. (1974). *The Divided Self*. Middlesex: Penguin.
- Langer, M.M. (1989). *Merleau-Ponty's Phenomenology of Perception*. Tallahassee: Florida State University Press.
- Lanteri-Laura, G. (1968). *Fenomenologie en psichiatrie* (Trans). Utrecht: Aula-Boeken.
- Leiderman, P.H. (1969). Pathological loneliness: a psychodynamic interpretation. *International Psychiatry Clinics*, 6(2), 115-174.
- Leonard, V.W. (1989). A Heideggerian phenomenologic perspective on the concept of the person. *Advance Nursing Science*, 11(4), 40-55.
- Luijpen, W. (1969). *Nieuwe inleiding tot de existentielle fenomenologie* (3<sup>rd</sup> Ed.). Utrecht/Antwerpen: Uitgeverij Het Spectrum.

- Matthews, E. (1996). *Twentieth-Century French Philosophy*. New York: Oxford University Press.
- May, R., Angel, E. & Ellenberger, H.F. (Eds) (1958). *Existence*. New York: Basic Books.
- May, R. and Yalom, I. (1984). Existential Psychotherapy. (pp. 354-391). In R.J. Corsini (Ed), *Current Psychotherapies*. Illinois: Peacock.
- Merleau- Ponty, M. (1962). *Phenomenology of Perception*. New York: Humanities Press.
- Mijoskovic, B.L. (1979). *Loneliness in Philosophy, Psychology and Literature*. Netherlands: Van Gorcum & Comp.
- Miller, A. (1987). *The Drama of Being a Child*. London: Virago Press.
- Mills, J. (1997). The false Dasein: From Heidegger to Satre and psychoanalysis. *Journal of Phenomenological Psychology*, 28(1), 42-65.
- Moustakas, C.E. (1961). *Loneliness*. New Jersey: Prentice Hall.
- Moustakas, C.E. (1968). *Individuality and Encounter*. Cambridge: Howard Doyle.
- Moustakas, C.E. (1972). *Loneliness and Love*. New Jersey: Prentice Hall.
- Muller, A.D. (1967). Fenomenologie en psigologie. In A.M.T.Meyer, A.D.Muller & F.A. Maritz (Eds.), *Die fenomenologie. Sy werkwyse en metode* (pp. 71-121). Pretoria: Academica.
- Ogden, T.H. (1992). *The Matrix of the Mind*. London: Karnac Books.
- Ott, H. (1993). *Martin Heidegger: A Political Life*. A. Blunden (Trans.) London: Harper Collins.

Parkes, C.M. (1973). Separation anxiety: an aspect of the search for a lost object. In R.S. Weiss (Ed), *Loneliness: The Experience of Social and Emotional Isolation* (pp. 53-67). Cambridge, Mass.: MIT Press.

Parry, T.A. (1993). Without a net: preparations for postmodern living. In S. Friedman (Ed.), *New Language of Change*. (pp. 428-459). New York: Guilford Press.

Peplau, L & Perlman, D. (Eds) (1979). *Loneliness: A Sourcebook of Current Theory Research and Therapy*. New York: Wiley-Interscience.

Perry, S., Cooper, A.M. & Michels, R. (1987). The psychodynamic formulation: Its purpose, structure, and clinical application. *American Journal of Psychiatry*, 144(5), 543-550.

Pothoff, H.H. (1976). *Loneliness: Understanding and Dealing With It*. Nashville, Tenn.: Pantheon Press.

Preller, A.C.N. (1977). *Harry Stack Sullivan en die fenomenologiese psigiatrie*. Pretoria: Boekenhout Publishers.

Preller, A.C.N. (1991). Comparison of the concept of anxiety in the psychiatry of Harry Stack Sullivan with that of existential phenomenology. In R. Van Vuuren (Ed.), *Dialogue Beyond Polemics* (pp. 71-82.). Pretoria: HSRC.

Quinodoz, J. (1993). *The Taming of Solitude*. New York: Routledge.

Rogers, C. (1990). Ellen West and loneliness. In K. Hoeller (Ed), *Readings in Existential Psychology and Psychiatry*. (pp. 209-218). Seattle: Review of Existential Psychology and Psychiatry.

Rokach, A. (1987). Theoretical approaches to loneliness: from a univariate to a multidimensional experience. *Review of Existential Psychology and Psychiatry*, xix(2-3), 225-254.

Rolheisser, R. (1979). *The Loneliness Factor: Its Religious and Spiritual Meaning*. Denville, N.J.: Dimension Books.

Saddler, W.A. (1969). *Existence and Love*. New York: Charles Scribner's Sons.

Saddler, W.A. (1978). Dimensions in the problem of loneliness: Phenomenological approach to psychology. *Journal of Phenomenological Psychology*, 9(1&2), 157-187.

Saint-Exupery, de A. (1944/1995). *The Little Prince*. Hertfordshire: Wordsworth.

Schneider, K.J. & May, R. (1995). *The Psychology of Existence*. New York: McGraw-Hill Inc.

Scwab, G. (1974). *Gods and Heroes*. New York: Patheon Books.

Seligson. (1983). The presentation of loneliness as a separate diagnostic category and its disentanglement from depression. *Psychotherapy in Private Practice*, 1(3), 33-37.

Slochower, J.A. (1994). The evolution of object usage and the holding environment. *Contemporary Psychoanalysis*, 30(1), 135-151

Smith, D.L. (1983) Phenomenological psychotherapy: a why and a how. In G. Knowles & D.L. Smith *Dusquene Studies Phenomelological Psychology* (3) (pp. 32-48). Dusquene University Press.

Solomon, R.C. (1988). *Continental Philosophy Since 1750*. Oxford: Oxford University Press.

Spiegelberg, H. (1971). *The phenomenological movement. A historical introduction* (Vol. 2). Den Haag: Martinus Nijhoff.

Sullivan, H.S. (1953). *The Interpersonal Theory of Psychiatry*. New York: Norton & Co.

Van den Berg, J.H. (1949). Over het hallucineren. In J.H. Van den Berg, *De zuilen van het Panthéon* (pp. 123-137). Nijkerk: G.F. Callenbach N.V.

Van den Berg, J.H. (1953). Verantwoording. In J.H. Van den Berg & J. Linschoten (Eds), *Persoon en wereld. Bijdragen tot de phaenomenologische psychologie* (pp. 1-10). Utrecht: Erven J. Bijeveld.

Van den Berg, J.H. (1963). De schizophrene patiënt. Antropologische Overwegingen. In J.H. Van den Berg, *De zuilen van het Panthéon* (pp. 81-92). Nijkerk: G.F. Callenbach N.V.

Van den Berg, J.H. (1964). *De psychiatrische patient*. Nijkerk: G.F. Callenbach N.V.

Van den Berg, J.H. (1972). *A Different Existence*. Pittsburg: Duquesne University Press.

Van Vuuren, R. (Ed) (1991). *Dialogue Beyond Polemics*. Pretoria: HSRC Publishers.

Valle, R.S. & Halling, S. (1989). *Existential Phenomenological Perspectives in Psychology*. New York: Plenum Press.

Venter, M.J. (1999). *Outisme: 'n ekosistemiese perspektief op die moeder se ervaring en hantering van haar kind*. Unpublished masters' dissertation, University of Pretoria.

Weiss, R. (1973). *Loneliness: The Experience of Emotional and Social Isolation*. Cambridge, Mass.: MIT Press.

Wertz. (1985). From everyday to psychological description: analyzing the moments of qualitative data analysis. In A. Giorgi (Ed), *Phenomenological and Psychological Research*. Pittsburg: Duquene University Press.

Weston, M. (1994). *Kiekegaard*. London:Routledge.

Winnicott, D.W. (1958/1984). The capacity to be alone. In M.M.R. Khan (Ed), *The Maturation Processes and the Facilitating Environment* (pp. 29-36). Exeter: BPC Wheatons.

Winnicott, D.W. (1960/1984a). The theory of the parent-infant relationship. In M.M.R. Khan (Ed), *The Maturational Processes and the Facilitating Environment* (pp. 37-55). Exeter: BPC Wheatons.

Winnicott, D.W. (1960/1984b). Ego distortions in terms of the true and false self. In M.M.R. Khan (Ed), *The Maturational Processes and the Facilitating Environment* (pp. 140-152). Exeter: BPC Wheatons.

Winnicott, D.W. (1962/1984). Ego integration in child development. In M.M.R. Khan (Ed), *The Maturational Processes and the Facilitating Environment* (pp. 56-63). Exeter: BPC Wheatons.

Winnicott, D.W. (1963/1984a). From dependence to independence in the development of the individual. In M.M.R. Khan (Ed), *The Maturational Processes and the Facilitating Environment* (pp. 83-92). Exeter: BPC Wheatons.

Winnicott, D.W. (1963/1984b). The development of the capacity for concern. In M.M.R. Khan (Ed), *The maturational Processes and the Facilitating Environment* (pp. 73-82). Exeter: BPC Wheatons.

Winnicott, D.W. (1960/1986). Aggression, guilt and reparation. In C. Winnicott, R. Shepard & M. Davis (Eds), *Home is Where We Start From* (pp. 80-89). London: Penguin Books.

Winnicott, D.W. (1967/1986). The concept of a healthy individual. C. Winnicott, R. Shepard & M. Davis (Eds), *Home is Where We Start From* (pp. 21-38). London: Penguin Books.

Winnicott, D.W. (1964/1986). The concept of the false self. In C. Winnicott, R. Shepard & M. Davis (Eds), *Home is Where We Start From* (pp. 65-70). London: Penguin Books.

Winnicott, D.W. (1971/1988). *Playing and Reality*. London: Penguin Books.

Winnicott, D.W. (1945/1992). Primitive emotional development. In *Through Paediatrics to Psycho-Analysis* (pp. 145-156). New York: Brunner Manzel.

Winnicott, D.W. (1949/1992). Mind and its relation to the psyche-soma. In *Through Paediatrics to Psycho-Analysis* (pp. 243-254). New York: Brunner Manzel.

Winnicott, D.W. (1950/1992). Aggression in relation to emotional development. In *Through Paediatrics to Psycho-Analysis* (pp. 204-218). New York: Brunner Manzel.

Winnicott, D.W. (1951/1992). Transitional objects and transitional phenomena. In *Through Paediatrics to Psycho-Analysis* (pp. 229-242). New York: Brunner Manzel.

Winnicott, D.W. (1963/1993). Communicating and not communicating. In D. Goldman (Ed), *In One's Bones: The Clinical Genius of Winnicott* (pp. 25-38). New Jersey: Jason Aronson.

Winnicott, D.W. (1972/1996). Basis for self in body. In J.E. Groves (Ed), *Essential Papers on Short-term Dynamic Therapy* (pp. 516-525). New York: New York University Press.

Wolfe, L. (1978). Why some people can't love-Otto Kernberg interveiwed. *Psychology Today*, June, 55-59.

Wright, R. (1995). The evolution of despair. In *Time Magazine*, (August) 44-50.