The Nature of Psychopathology

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In this chapter I wish to address the question of the nature of psychopathology. It might naturally be felt that we already know a great deal about psychopathology, and thus that such a chapter would be primarily a review and discussion of the literature. I will argue, however, that the most fundamental form of the question concerning the nature of psychopathology is rarely posed in the literature, that it is prevented from being posed by presuppositions inherent in standard theoretical approaches, and that, on those rare occasions when it has been addressed, it has received inadequate answers. Therefore the chapter will have more of the character of a conceptual explication and theoretical exegesis than it will of a review of the literature. The chapter is structural in two general parts: (1) a brief summary of standard approaches and their inadequacies; and (2) an explication and explanation of psychopathology as a manifestation of certain properties of experiential processes.

STANDARD APPROACHES

Typologies and Models

Discussions of psychopathology commonly consist of typologies of presumed <u>forms</u> of psychopathology. The focus is on descriptive and diagnostic criteria and on the usefulness of the resultant categories for research, bureaucratic record keeping, treatment planning, and so on. Such criterial considerations

may be approached within the still current (within psychology) myth of operational definitionalism (Bickhard, et al., 1985; Suppe, 1973; 1977), in which case the primary concerns will be with various forms of psychometric validity, with essentially no attention to the issues of the underlying ontology the basic nature, of the presumed categories. Alternatively, the typology of psychopathology may be generated within the framework of a personality theory, which personality theory may then implicitly or explicitly provide an underlying ontology for the categories.

What is common to the two typological approaches is that the categories of psychopathology are proposed as types of potential <u>dysfunctionality</u>, with no further attention given to the nature of those dysfunctionalities and, in particular, no attention given to the question of what it is that makes those dysfunctionalities <u>pathological</u>. The issue that I wish to raise here is not that the forms of psychopathology commonly described are not in fact pathological (that point might in fact be argued for some of the diagnostic categories, but that is not my current concern), but rather that their pathological nature is taken for granted (it is "obvious" from the descriptions that "this" constitutes a pathology) and that the fundamental nature of psychopathology is thus never examined and, correspondingly, never understood. In general, what <u>is</u> obvious about such categories is that they seem in varying degrees and in varying ways dysfunctional and that, since psychopathology per se is not examined, dysfunctionality and psychopathology are implicitly equated. As will be argued, this is deeply false.

Psychopathology as Rigidity

The equating of psychopathology and dysfunctionality is in effect an equating of psychopathology with ignorance and error. Ignorance and error are problems that inevitably confront everyone. They are unavoidable, and they inherently, by definition, produce dysfunctionality or reduced functionality. To equate psychopathology and dysfunctionality is to render all people inevitably pathological simply by virtue of their finiteness (finiteness makes ignorance and error), thus dysfunctionality, under this "analysis," into an existential certainty. This is a nugatory explication of psychopathology (it does not do the

work of differentiating anything from anything, since it applies to everyone) and is clearly not what anyone intends, but it is what the simple-minded equating of psychopathology and dysfunctionality entails.

A more careful approach to psychopathology might attempt to explicate it as a certain kind (or kinds) of dysfunctionality, leaving the dysfunctionalities of simple ignorance and error aside. This approach, however, raises exactly the question of what psychopathology is, other than, or in addition to, dysfunctionality. What is the differentiating characteristic? One superficially immediate answer would be that psychopathological dysfunctionality is more serious than simple ignorance or error. Unfortunately, however, "simple" ignorance or error can be fatal, and some neuroses may be merely restricting or discomforting. A distiction based on "seriousness of consequences" does not fare well. I will argue, in fact, that psychopathology is not a kind of dysfunctionality at all and, correspondingly, that its relationship to dysfunctionality is more complex than that of genus to species.

In particular, I would suggest that a valid explication of the notion of psychopathology is that psychopathology is constituted as <u>rigidity</u>. It is not being ignorant nor being in error that constitutes psychopathology; it is the persistence of such ignorance and error in the face of sometimes massive and repetitive dysfunctionality, and in spite of the potentially desperate efforts of intelligent, motivated, and creative individuals to change. The paradigmatic form of psychopathology is the individual who even understands the pattern of his or her dysfunctionality, but whose every attempt to change that pattern manages to perpetuate it. Ignorance and error that is correctable by simple feedback or information is not pathological (Bickhard and Ford, 1979). Psychopathology is the rigidity of some way of being in the world. (This notion of rigidity is broader than the important explication of "rigid character" in Shapiro, 1981.)

It should be noted that the explication of psychopathology as rigidity shifts the focus of the concept from a relational consideration to an intrinsic consideration. Dysfunctionality is inherently a relational concept: one is dysfunctional only in or with respect to particular environments or situations. Rigidity is an inherent property of a person's way of being: the

potentiality for, the openness to, change is present or absent independently of what happens to be the current situation or the current feedback that an individual is receiving. It would be possible within this explication for someone to instantiate an extremely rigid, thus pathological, way of being that happens to be in an environment in which that way of being is appropriate and adaptive, or functional. It would also be possible for someone to manifest a strong dysfunctionality by various external criteria, but for whom that way of being was a full and open choice based on nonintrinsically rigid values. This explication, in other words, splits the notion of psychopathology from that of social deviance and thus avoids the dangers of abuse, as well as relativism, inherent in that mode. In practice most of the instances of psychopathology that one encounters will also be instances of dysfunctionality, but that is not an inherent constraint in this explication.

Structural Models of Psychopathology

The association of rigidity with psychopathology has certainly been noted before, and it has a feel of obviousness once pointed out, but it is rarely given the emphasis, the explicatory essentialness, that I am proposing for it. Within the majority of current approaches to the nature of the person there are good reasons for this: the person is conceived of as being essentially structural in nature, and structures are intrinsically rigid. Rigidity is part of the meaning of what it is to be a structure, thus rigidity needs no independent explanation or explanatory model. If, for example, a certain form of psychopathology is presumed to be constituted as a particular structure of introjected object fragments and corresponding fragments of the self, then the persistence, the rigidity, of that structure needs no independent explanation: such a structure _is_ the person, and structures are intrinsically rigid.

The fundamental question from such a perspective, in fact, is not the question of rigidity; it is the problem of change: if a person is intrinsically structural, thus intrinsically rigid, then how does change (to a new, presumably less dysfunctional structure) ever occur (Gendlin, 1970)? Note that if persons are intrinsically structural, then they are intrinsically rigid, and psychopathology must be equated with certain forms

of dysfunctionality, since the property of (structural) rigidity, per se, is common to everyone. The goal of therapy in such a perspective is to change a more dysfunctional structure into a less dysfunctional structure, but if the person is ontologically structural, then there is no intrinsic process by which that change can occur. At best, the process by which an individual can and does expand his or her way of living, by which an individual can overcome rigid dysfunctions, remains utterly mysterious, with correspondingly little or no guidance to the therapist in how to nurture and encourage that process. At worst, there is no way for that structure, that person, to change itself-- there is no <u>process</u> in the model. Any change must be the result of an external intervention from the beneficent therapist. Structural models allow at most a state change model: If such and such is the current state, then creating XYZ conditions will yield a change from that (structural) state to this other (structural) state. (Note that this is the basic logical form of "treatment strategies.") Structural models can define change, as a change in structure, and they can conceivably give recipes for externally induced medical-model interventions, but they cannot explain, cannot aid, self change. Without a process model of the nature of the person, they cannot accommodate the phenomena of personal growth, and therefore cannot guide the therapist with respect to it.

However, with a process model of the nature of the person, (with a fundamental conception of persons as being in process and in development, as being continually and intrinsically growing and developing from at least birth onward), the basic question shifts from one of how could <u>change</u> possibly occur to one of how could <u>rigidity</u> possibly occur. Rigidity is intrinsic to the nature of the person within a structural perspective, and thus needs no independent explanation, but (the potentiality for) change is intrinsic to the person within a process perspective, and thus rigidity does need an explanation. Furthermore, if the ontology of person is fundamentally one of a self-organizing open system, the rigidity not only needs explanation, it is intrinsically a blockage of, a violation of, that ontology--it is intrinsically pathological. Within a structural view, therapy consists of the induction of change; within a process view, therapy consists of the freeing from rigidity.

Process versus Structural Models

Once the problem of rigidity is recognized as a distinct issue in its own right, it becomes a powerful question to bring to bear on proffered models of personality and psychopathology. With respect to a purported explication of psychopathology, the basic question is: "How and why does the purported psychopathological structure or pattern stay that way?" That is, "How and why is it rigid?". Any model that explicitly or implicitly responds to such a question by referring to the structural character of the "disorder" is engaged in question begging. Structures are intrinsically rigid, so a question of how and why such and such a condition remains rigid is in effect a question concerning the justification for modeling it in a structural form in the first place. Structures simply presuppose rigidity they do not explicate nor explain it. So to answer that a condition is rigid because it is structural is in effect to answer that it is rigid because it is rigid--the basic question has not been addressed.

Structural models may sound as if they at least address the general issue of pathological rigidity, but most often they simply provide some version of the nature of dysfunctionality, with the property of rigidity implicit in the structural character of the model. Psychopathology as the filtering of information, from the environment or from the purported "unconscious," provides a common category of examples. Something akin to such filtering certainly does seem to occur, at least in some cases, but the fundamental modeling question is how such a filtering process could maintain itself, how it could persist, how it could be rigid. There is no answer except the implicit allusion to the structural nature of the model. For this type of model there is even a deep logical problem concerning the fact that any meaningful filtering must involve knowledge of what something is, in order to know whether or not to filter it, but such knowledge is precisely what the filtering was presumed to be preventing. If the person, per se, is presumed to be doing the filtering, then we have the paradox of someone continuing to be successful in lying to himself or herself. If a separate homunculus, that is, a censor, is invented to "solve" this problem (the censor "knows" and can filter therapies, but the person is thereby prevented from knowing), then we are already in the realm of structural models. The censoring agent is

somehow structurally different from the person agent, and in any case, the logical problem simply recurs in the form of a metafiltering, a metacensoring, of the activities of the censor (resistance). The censor may be filtering from the person, but what prevents the person from discovering, from learning about, the activities of the censor? What makes such filtering rigid? What filters the filtering? The problem simply iterates and initiates an infinite regress. Whatever role informational filtering may or may not have in psychopathology, it cannot constitute the fundamental ground of psychopathology because it cannot in itself explain the core phenomenon of rigidity. It cannot explain why people don't self-organize, learn, their way out of such filtering as a result of the postulated dysfunctionalities of that filtering.

Another common attempt at explicating psychopathology does have a process character, but it also does not ultimately succeed in solving the basic problem of rigidity. This is the attempted explication of psychopathology in terms of self-fulfilling prophecy (e.g., Wachtel, 1973). The basic idea is that an individual acts in the world in accordance with certain generically incorrect or incomplete expectations and assumptions concerning himself or herself or the world, and that those actions induce reactions from other people that fulfill those expectations and confirm those assumptions. Again, this certainly occurs, but the phenomenon is never perfect; there are variations in people's reactions; there are exceptions to the expectations; and the question remains of why and how the individual doesn't differentiate the underlying expectations and assumptions in accordance with such feedback. Why doesn't the individual learn when those assumptions are likely to be appropriate and when not? Why doesn't he or she learn the way right out of the dysfunctionality? Why is the self-fulfilling cycle itself rigid? There is no answer within a structuralist framework.

A PROCESS MODEL OF PSYCHOPATHOLOGICAL RIGIDITY

The first step in the development of a process model of psychopathology has already been taken: the explication of psychopathology as rigidity. The next is to explain how such rigidity could occur, and that will be addressed in two parts: first, a functional account of how rigidity is possible and,

second, a process account of how such a functional property could be instantiated. There, then, follows a discussion of some additional ontological and functional characteristics of psychopathology as it is generally found in the individual.

Rigidity as Autoprotectiveness

The fundamental nature of the problem of rigidity is to explain how some particular way of being maintains itself, how it manages not to process change. If the answer is in terms of some other process that protects the given process from change, then the question simply reverts to that second process--what keeps it rigid? Such derivative rigidity does certainly occur (in fact, such derivatively rigid distortions of functioning constitute most presented pathology), but foundational rigidity cannot be explained in such a form on pain of infinite regress. Somehow, the rigidity of a foundationally pathological way of being in the world must be explicable in terms of that way of being itself. Somehow the way of being must intrinsically prevent its own change, must be autoprotective.

The issue here is not that the pathological way of being is unchangeable, but rather that it is deeply impeded from changing itself. For it to be unchangeable would be for it to be rigidly structural in the worst sense, and by definition no therapeutic intervention would be possible. For it to be unable to change itself entails that whatever would change it is prevented by it. A pathological way of being must prevent, must forbid, precisely those forms of self-examination, problem solving, or whatever would be required to change that way of being. It must protect itself against the discovery of its implicit error or limitation. A psychopathological way of being is so by virtue of being rigid, and it is rigid by virtue of being autoprotective.

Characteristics of Autoprotective Processes

Autoprotectiveness, then, is a functional explication of rigidity, and thus of psychopathology, but in itself that does not explain how autoprotectiveness could occur. What form would the experiential activities of a human being have, to have this property of autoprotective rigidity?

What must be the process in order for autoprotectiveness to occur?

The general form of the analysis of the autoprotective process will not be to present a process model and then show that it manifests autoprotectiveness. At best, that would simply show that autoprotectiveness is possible at the process level; it would provide a minimal sufficiency analysis of the autoprotectiveness of a process but would not reveal any necessary features of an autoprotective process. The analysis, accordingly, will focus on the properties that a process must have in order for it to manifest the functional property of autoprotectiveness. There will be two general parts to such an analysis: the first will concern itself with those process properties that are necessary to autoprotectiveness by virtue of being constitutive of it; the second will concern those properties that are necessary further manifestations of it.

Centrality

Centrality is a congnitive aspect of any autoprotective process. It is constitutively essential to autoprotectiveness, in that any process that is not central in the required sense cannot be autoprotective. The basic intuition of centrality is that any process that is subordinate in some sense to some other process will thereby be subject to evaluation and change from the perspective of that superordinate process--and will therefore not be autoprotective. By definition, the subordinate process cannot prevent the superordinate process from examining and potentially changing the nature of the subordinate process or of the superordinate-subordinate relationship. Centrality means that there is no superordinate process, no superordinate way of being, from which the given process can be examined and changed.

There are two basic senses of this superordinate relationship, and two corresponding aspects of centrality. The first is a functional centrality in the sense that the autoprotective process cannot be functionally subordinate to, cannot be a subroutine for, or a means toward, some other process. When means are not serving their ends well, they will tend to be changed, and thus not autoprotective. When change in such a case does not occur, then we must ask, "Why is this dysfunctionality persistent, rigid?" and we are back to the case of a derivative rigidity. An autoprotective process, then, cannot be functionally subordinate; conversely, it must be

functionally central.

Functional means-ends relationships are a dominant way of thinking about human beings in this culture, but a much more fundamental characteristic of persons is epistemic reflexivity. An autoprotective way of being in the world must not only be functionally central, it must also be epistemically central. The critical point here is that we not only have goals that make use of their goals, processes that make use of other processes, but in the above functional sense we also have goals and processes that are _about_ other goals and processes, that reflect on them, goals and processes that have an epistemic, a knowing, relationahip with other goals and processes. The subordinate relationship here is not one of instrumental means to an end, but rather one of an epistemically instantiating or satisfying object (or process or condition or property or way of being). The superordinate _knows_ the subordinate, and the subordinate epistemically satisfies or fails to satisfy various criteria of the superordinate. Such an internal epistemic relationship is not commonly acknowledged or examined in psychology, but its reality cannot be denied (it is, for example, the foundation of developmental stages, of the knowledge of logical necessity, of higher reaches of human potentiality, etc.; Bickhard, 1978; Campbell and Bickhard, 1986). Such internally epistemic goals are generally called _values_. An autoprotective stance in the world, then, must be both functionally and epistemically central. In being epistemically central, it must involve the most central, the most deeply implicit, values of the person--the values that constitute the person, that are lived, not just espoused, by that person.

A corollary of this epistemic centrality with respect to values is that an autoprotective stance in the world must be central to a person's sense of self. A _person_ is an entire way of being in the world; a self is the "core" of that way of being. There have been and still are many differing attempts at explicating that intuition of the self as "core," but I suggest that a fundamental aspect of the self is that it is the core in precisely the epistemic sense explicated above. One's _self_ is precisely one's understanding of oneself, one's epistemic relationship to oneself. If the superficial circularity of this is troublesome, then it can be rendered more precisely, if somewhat more cumbersomely, as follows; A person's _self_ is that person's reflective understanding, is that person's

internal organization of epistemic relationships, is that person's relationship to his or her highest epistemic level (core) values.

Autoprotectiveness, then, must involve a person's central sense of values about the self. Autoprotectiveness must be constituted at that central level of experiential process.

Terror

Centrality is a cognitive constitutive necessity for autoprotectiveness; terror is a roughly equivalent motivational necessity. The argument here concerns the nature of the "prevention of examination and change" that constitutes autoprotectiveness: centrality ensures that there is no _current_ perspective from which the way of being could be changed; terror is what prevents such a higher-order perspective from _becoming_. To simply not have a current higher-order perspective on one's current way of being is a kind of incompleteness that is inevitable for everyone. It is a version of finiteness--one cannot have a higher-order perspective on one's current highest level. So, although centrality is necessary for autoprotectiveness, centrality itself must answer the question of rigidity: How can a central way of being be autoprotective? How can it "protect" its centrality? How can it prevent the development of a higher perspective?

Since there is no current higher order perspective, the issue is _precisely_ the prevention of the development of one. A functionally central part of a self organizing system (a highest-level goal or end at the top of a hierarchy of means and ends) will control interactions of the system with the environment without itself being controlled by a still higher level: by hypothesis, there is no current higher level. But any such functionally central part of the system will have been constructed by the self organizing processes of the system and will be subject to change or may be superseded by further constructions of that self organizing process. Functional centrality is not at all the same thing as "self organizational centrality." The problem is to determine the properties of processes that can guide, and potentially misguide, self organization in a sense similar to that in which functional centrality guides interaction with the environment.

Functionally central parts of a system _can_ guide learning, but only with respect to parts of the system that are subordinate to those central parts

(the functionally central parts determine what counts as success and failure for the subordinate parts). They do not guide learning for themselves, however, and thus cannot protect their own centrality. Some sort of process is required that can guide the construction of even functionally central parts of the system.

Emotions have the required properties. Emotions clearly participate in the guidance of environmental interactions, but they also participate in the guidance of learning and development, of self-organization, including that of functionally central parts of the system. The additional key property of emotions in this regard is that emotions, among other things, not only provide heuristics for self-organization (as well as for interaction), but also provide heuristics that can guide "away from" as well as "toward." Experienced failures of even functionally central activities can invoke self-organization, and there is a sense in which the implicit success conditions for correcting those activities can be said to indirectly guide that self-organization, but these implicit guidances of unrepresented success conditions of functional centrality cannot guide <u>away</u> from anything. (Explicit learning heuristics can guide both toward and away, but these cannot be functionally central; they are intrinsically subordinate to the categorizations of problem types for which heuristics have been developed.) Negative emotions, however, can both guide self-organization and guide <u>away</u>, thus potentially participating in an autoprotective organization of processes, guiding away from what would be required for change. Negative emotions begin to capture the necessary self-organizational "centrality." With central values involving deep negative emotional aspects, we find a confluence of functional centrality, epistemic or reflective centrality, and self-organizational "centrality."

Autoprotectiveness requires avoidance not only at the level of interactive process, but also at the level of metaprocess, at the level of self-organization. Emotions have the necessary character to provide both, and it is thus emotions that must provide the motivational aspect of autoprotectiveness. Emotions yielding motivations to avoid are negative emotions, and thus an autoprotective stance involves negative emotions in the core central values concerning the self. Such negative emotions can involve disgust, contempt, dread, anger, and so on, but the most primitive

negative emotions include distress, anxiety, and fear, with the extremes of panic and terror. I will use the word "terror" as a generic term for the primitive emotional motivation underlying autoprotectiveness, although all available terms seem to say both too much and too little for what is needed here. (That is, too much in that they are all construed in terms of fully explicit adult versions--the autoprotective emotion will in general be neither adult nor explicit--and too little in that they do not capture well the "core of one's being" sense of the autoprotective emotion--in that respect "dread" is a useful word, but its connotations are both too adult and too passive.) Autoprotectiveness, then, is constituted as a central terror at the center of, and concerning, one's being, one's self. Autoprotectiveness is a (cognitively) central (emotional) terror. Centrality and terror jointly constitute autoprotectiveness. Autoprotectiveness processes, however, will necessarily manifest a number of additional characteristics, some of which will be examined at this point.

Self Confirming

One important necessary manifestation of autoprotective rigidity is that the underlying terror will tend to elicit confirmations of that terror from others. That is, psychopathology will have a tendency to be engaged in cycles of self-fulfilling prophecy. These cycles, however, will not constitute the rigidity, but will rather be a manifestation of it, and will not be invariably present, but will rather be a tendency that is sometimes manifested.

The terror concerning the self may have the form of a terror concerning who or what I am, or what I might be, or what I might become, but, in any of these cases it will strongly constrain the way in which I present myself to others. (Most examples will be given in the first person because the coherence that is being illustrated and invoked is an experiential, meaningful coherence.) I will develop many ways of being with others to hide what I fear may be so, to compensate for it, to try to escape it, and so on. A terror concerning myself is a terror concerning some sense of inadequacy, actual or potential, as a human being. It is a terror concerning some sense of actual or threatened failure to live up to full human status. It is a terror concerning my worth to others with respect to my own deepest values. Such a terror will severely

constrain and distort my presentations of self throughout my life.

But such constrained presentations of self, such distorted ways of being, <u>presuppose</u> precisely the inadequacies that I fear the most. Only with respect to such inadequacies would I engaged in such inadequate ways of being with others. My compensations and cover-ups thus implicitly communicate to others precisely what I want most desperately to hide, and define me to others in precisely those ways that I most fear to be defined. Others, in turn, will tend to pick up on these implicit self-definitions and respond "appropriately" to them, confirming my terror.

Such an interpersonal process are sometimes manifested in day-to-day interactions, but will be most likely to occur in deeper intimate relationships, in which more of the person is intrinsically involved, and thus the threat of exposure of what I fear is that much greater. Also, the confirming response from the other is not always as certain nor as clear as it would be in the pure self-fulfilling prophecy case. The other will have his or her own idiosyncracies, strengths and weaknesses, fears and sensitivities, and so on, but the distortions of the pathological individual's way of being are inherently not as fulfilling to others as if those distortions were not present, and the almost inevitable negative reactions of some form to those distortions will be experienced as confirming the fundamental sense of inadequacy.

Autoprotectiveness presents my being as precisely what I fear I might be (or am) and thus tends to elicit "appropriate" confirming responses from others.

Self-Affirming

Distortions in an individual's way of being will not only tend to elicit negative reactions from others, thus seemingly confirming the underlying terror, but they will also tend to result in an even more fundamental form of reflexive support for that terror. The distortions of my way of being are potentially as available to me as they are to others. My being so kind to women, for example, so as to compensate for my felt terror of being fundamentally weak and pathetic, is something that I "know" for the weak and pathetic attempt to be humanly attractive that it "really" is. My way of being presupposes my terror and thus affirms its truth. After all, only someone who was truly inadequate would go about with all of the

distortions and compensations and avoidances that I find in myself. Autoprotectiveness as a way of being affirms precisely what I am terrified I might become or already be.

Self-Constituting
    Autoprotectiveness is not only self-confirming and self-affirming, it is most fundamentally self-constituting. It not only indicates via others' and my own reactions that I am what I fear, it constitutes me precisely as what I fear. The terror of inadequacy distorts and constrains my construction of myself, distorts the development of my self, perhaps, from, early childhood. The terror of inadequacy, the sense of awfulness about myself, distorts not only the way I present myself, but also who I have come to be. The presuppositions of my being who I am are precisely what I most fear. Only someone who is in fact what I am terrified of being can in fact be as I am. Autoprotectiveness constitutes me as what I am terrified I might be (or am). My attempts at coping with a central terror of inadequacy and weakness have constituted me as a person of distortions, compensations, and avoidances; and those distortions, compensations, and avoidances at the center of my life and living <u>are</u> weakness and inadequacy--a weak and inadequate person <u>is</u> one who lives such a not fully human existence.
    The realization of these points, especially the last, in therapy can be truly terrifying, in very much an explicit, adult sense. To acknowledge, examine, and explore them is to acknowledge, examine, and explore the truth of my worst terrors about my being. It is to contradict the entirety of the self that I have constructed in order to avoid and compensate for that terror of inadequacy. It feels like losing that self, annihilating the way of being that I am, for it is to give up on the struggle against the terror that I have formed myself around. It is to face the felt certainty of the devastating human inadequacy. It is to ultimately acknowledge my basic failure to <u>be</u> a human being. Such an examination is extremely difficult, in both a cognitive and a motivational sense, yet only by such a process can those terrors, and concomitant distortions, be transcended. Only by giving up the struggle against the terror can the rigidity of that struggle be overcome, but the struggle cannot be transcended without directly confronting its felt truth and the senses in which it is <u>in</u> <u>fact</u> true. Only by giving up that struggle

can the rigidity be overcome, but only by understanding that struggle can it be given up. Only by understanding what it is that I am doing that constitutes that struggle (phenomenologically, experientially doing, doing in terms of interpretations of meanings and values, "certainly" doing, not merely behaviorally doing) do I have the choice to do something different, and thus step outside of the struggle. The near impossibility of that confrontation is precisely constitutive of autoprotective rigidity.

To even approach such a confrontation can be exceedingly difficult. To focus on the central terror is to be distracted from my focus on the continuous struggle of compensation. This can seem pointless, in that my central inadequacy is simply my reality; it is what I have to live with, to accommodate to, to compensate for. It can be frightening, in that distraction from my compensations reduces their effectiveness, exposing my inadequacies of potential and rendering them even more real. It can be terrifying, in that it risks giving up the compensatory struggle altogether, which would be, as I anticipate it, to sink totally into my centrally terrifying inadequacy: I cannot conceive that my central terror is something that I am doing and can therefore do differently; it seems to me that it _is_ reality, and the only way I can conceive of losing it would be to fool myself, to dupe myself, concerning the reality of those inadequacies. In this way, the very conception of giving up on the compensatory struggle can feel like giving up on the self, giving up on serving the self in the best, the only, way that seems possible. It can feel like a giving up on myself and my life as worth serving with the efforts of my compensations. The only sense of worth and value and self respect that I do have, for example, may come from my sense of honesty and integrity in holding the values that I know I do not, and intrinsically cannot, fulfill or the "honesty" and "integrity" of castigating and deprecating myself, for those failures are themselves my only source of self-respect. In this way, the possibility of freeing myself can come to feel like a betrayal or abandonment of myself, so long as the sense of inadequacy is taken as an immutable given rather than as a consequence of my activity.

At still another level, the idea of transcending a central terror and thereby giving up on the derivative and compensatory struggles can simply seem incomprehensible, because those "compensations"

<u>are</u> the problems of living (for me). They
constitute my understanding of the boundaries and
the issues of life, at least for me if not for
others. They are what I want help with; I want to
be able to engage in them more effectively. To
"give up" on them makes no sense. In this version I
do not understand them as deriving from any central
terror at all, but rather as being immutably
definitive of my self and of the basic issues of
life and living.

<u>Self Double Bind</u>
    Autoprotectiveness is constituted most
fundamentally as a centrality of a terror concerning
the self. It also manifests the properties of being
self-confirming, self-affirming, and self-
constitutive. There are in addition a number of
other aspects of an autoprotective way of being,
some of which make connections with other
discussions of psychopathology.
    One important additional property of
autoprotectiveness is that it manifests the logical
property of being an internal, self-directed double
bind. "Double bind" is sometimes used in a loose
sense to refer to any contradictory imperatives or
expectations, but the intent here involves the
strict sense of "double bind" in which the <u>fact</u> of a
message or directive contradicts the <u>content</u> of the
message or directive.
    The autoprotective terror involves a directive
concerning the avoidance of whatever inadequacy the
terror is about, but that presumed inadequacy is an
inadequacy of the person holding the terror. The
terror is a directive to the individual to not
(fully) be his or her self, lest that terror-laden
inadequacy become realized and manifest. The
autoprotective stance, then, is constituted as a
directive to not be oneself, to not be who one
really is. But being who one is, is the only thing
that anyone can possibly do, and yet the
autoprotective directive itself is part of who the
rigid individual is. So being who one is, is in
part to be directing oneself not to be who he or she
is--a deep double bind concerning one's basic being.
    Double binds generally have the form of some
version of "be spontaneous" (be spontaneously happy,
or sensitive, or caring, or authoritative, etc.),
but this version is particularly virulent: being
spontaneously not spontaneous is being who you
really are! For to be spontaneously who you really
are is to sink fully into the inadequacy, while to
be not spontaneous in your evasions, distortions,

and compensations, is to fail in your struggle against that inadequacy. Double binds as usually considered are also social in nature, while this one is intrinsically intrapersonal. Interpersonal or intrapersonal, the only escape from a double bind is to transcend the framework within which it is posed. For the autoprotective double bind, that framework is constituted in the central self terror, and transcending it requires confronting it.

Self-Contradiction

The internal double bind of the autoprotective person is a self imperative not to be oneself. There is a converse of this, in that the rigid process _is_ _being_ exactly what it is denying of itself. That is, I deny my worth, my value, my legitimacy in my compensations, avoidances, cover-ups, apologies, and distortions. I affirm my lack of humanness in fleeing from myself, in my self-constitution, in my very living of my self-denial. But precisely in so affirming my lack of humanness, I affirm my legitimacy in declaring myself illegitimate, my value in judging myself worthless, my power in making myself weak. I must be of value in order that my judgment of valuelessness have any value; I must be powerful in order that my self-constitution and presentation as powerless have any power; I must be of worth in order that my deprecations of unworthiness have any worth. _Precisely_, my self-constitution as powerless, illegitimate, and valueless is itself an assertion, a presumption, a self-constitution as powerful, legitimate, and worthy.

When the autoprotective individual realizes that he is the one, or she is the one, who is making all these central terrors true, then the terrors are no longer experienced as an external truth about oneself, a given about one's being that must be "accepted" and to which one must be accommodated. Instead, they can come to be realized as something that one is doing, and therefore as, something that one can do differently. My being in the world as a weak and illegitimate being is instantiating its power and legitimacy precisely in those constitutions and affirmations. If I can come to understand the power that I am exercising in constituting my weakness, then I can have the freedom to choose to constitute myself differently. Such a realization is one powerful manner in which an individual can transcend an internal terror.

External Contradiction

My compensations, distortions, and evasions are _for_ myself, but they are in large part _to_ others. They are self-presentations, masks, to the world in an attempt to escape the consequences of my true inadequacies and live instead in terms of those desperate fakeries. They are attempts to induce the world to treat me as being adequate and human, to induce unawareness of, reassurances about, compensations for, and denials of my core failings. This is an externalization of the self contradiction. Such a way of being is a social living out of being so powerless as to have to ask others for my power, so empty of meaning as to have to ask others for my meaning, so illegitimate as to have to ask others for my legitimacy, and so on for my worth, my adequacy, my basic humanness. The implicit request in this aspect of rigidity already constitutes me as not being what I am requesting.

External Double Bind

Simultaneously, This way of being imposes a double bind on the other, in that I am asking him or her to accept me, to judge me, to declare me to be adequate and fully human, and yet the acknowledgment that I _need_ such acceptance, judgment, or declaration is an acknowledgement that I am _not_ adequate or fully human. I put the other in a position of either failing to respond to my request or of contradicting that response in the very act of responding.

External Power

The rigid personality is forbidden from being fully himself or herself. The central "truth" about the rigid personality is that it is fundamentally inadequate to cope with the foundational human issues of worth, meaning, purpose, and so on. The rigid individual cannot survive these issues alone, so he or she must depend on some other power to be able to live with them, must rely on some "not-self" way of being to be strong enough to avoid their threat. The avoidances, compensations, and distortions constitute the person's reliance upon such an external power for living. More basically, those avoidances, compensations, and distortions constitute that individual's sense of a felt "non-self" way of being that is more powerful, capable, worthy, attractive, and meaningful than one is oneself. In this sense, autoprotectiveness intrinsically involves a reliance upon an external "non-self" power for living (E. Becker, 1973). Its

implicitly involves a "deal" with life that an external power be so right, powerful, good, or whatever is required that one can "succeed" in life by virtue of holding fast to that power, of living up to that deal, even though one's self, per se, is unworthy and inadequate.

Lack of Courage

The terror of one's inadequacy, the double binding self-directive not to be oneself, the sometimes desperate reliance upon an external power, all constitute a terror of being oneself, of even acknowledging oneself. They all constitute a lack of courage for living, a lack of courage in the face of the seemingly overwhelming problems of life with respect to that which is fundamentally inadequate (A. Adler, 1964; M. Bickhard and B. Ford, 1976; 1979).

Cosmic Loneliness

An autoprotective central terror is a sense of the inadequacy of my deepest being to fulfill my own most central values and senses of the meaning of living. It is a kind of void, an emptiness, in the center of my being. It is this void that makes me less than fully human. It is this void that I seek to fill with others, or to hide from others, or to compensate for in being with others. The central inadequacy is a central emptiness, a differentness, a less-than-oneness from "everyone else," from all the full human beings in the world.

Such a central void is a sense of the barrenness of my being. It is an aloneness, an isolation from meaningfulness and fulfillment. There is an intrinsic loneliness in this feeling, in that by definition no one could possibly want to make true contact with me in that barrenness, no one could genuinely accept that emptiness and inadequacy. But there is an even deeper aloneness, and a consequent cosmic loneliness, in that full human beings do not <u>have</u> such a void. There is not only no one who would be with me in my emptiness; there is no one (fully human) with whom I share the experience, the awfulness, of that emptiness. I am cosmically alone in my very aloneness. I am cosmically lonely in my barren loneliness.

It is this deep sense of emptiness and "unwholeness" as a human being that H. Kohut and object relations theorists seem to be exploring (Eagle, 1984; Greenberg and Mitchell, 1983). H. Guntrip's example of the woman who dreamed that she "opened a locked steel drawer and inside was a tiny

naked baby with wide open expressionless eyes, staring at nothing" (1973, p. 152) is a deep expression of such a core barren isolation. If the model that I am presenting is correct, however, then such a core terror is central to <u>all</u> psychopathology, not just to particular schizoid or borderline types of psychopathology. Such a view seems to be partially emerging in the psychoanalytic literature, though it is far from consensual (Eagle, 1984).

<u>Finitude</u>
A central sense of inadequacy, of terror concerning the self in facing living, is a sense of finitude in the face of the infinite demands of life. One's finitude in confrontation with the intrinsically infinite demands for omniscience and omnipotence in living, the demands for never failing in being a full human, in being an ethical being, in being worthy, in making the best decisions in one's life, in being strong enough, or attractive enough, or tough enough, is a finitude that guarantees inadequacy. A finite being cannot know enough, cannot do enough, cannot understand enough, cannot consider enough, to fulfill such infinite values and their demands. Finitude is a fundamental existential aspect of being human, and, therefore, so is inadequacy in the face of infinite life demands.

The inadequacy of finitude is a basic truth in any central terror, but it is this existentially certain finitude that grounds the sense of barrenness, of less than humanness, of aloneness. It is a sense of finitude that seems to separate me from all others, that degrades me below humanity. It is in this finitude that I feel most alone, and cosmically alone in having a being that is finite.

Finitude, however, is an aspect of being for <u>everyone</u>. It is most deeply in my finitude that I feel most different from, most separated from, most inadequate with respect to others, and yet it is precisely in my finitude that I am most like everyone else, that I am potentially most sharing with others, that I am least alone. It is in owning the weakness of my finitude that I am most strong, in accepting the illegitimacy of my finitude that I am most legitimate, in acknowledging the unworthiness of my finitude that I am most worthy, and in embracing the intrinsic inadequacy for human contact of my finitude that I am most human, most a full human being, most together with all humanity. The deepest fundamental fact of an autoprotective

central terror, the intrinsic finitude of human existence, is simultaneously the truth that transcends the terror.

The Elite

The full human beings in the world may be everyone else besides me; or they may be only some special elite, who do (in my eyes) live up to my, to the central, values (an elite that I fail to be a full member of); or that elite may be formed of people with some special powers of judgment concerning those values. If I meet a member of my elite in this sense, I may have an intense need for acceptance, for affirmation, by such a person. I may need to be accepted into the membership of those who are cool, or cultured, or tough, or smart, or intellectual, or "together," or popular, or "deep," or who never let anyone get the better of them, or whatever, or I may need to be accepted as a man by a woman, or as a woman by a man, or as a parent by my children, or as worthy by a hero or mentor, and so on. More deeply, I may live in abject terror of rejection, by that person, which would confirm all of my most horrible fears about myself. I become a supplicant. I may even find myself bound to the terror of possible rejection by someone I don't even like or respect, as long as in some sense I have given them a power of judgment with respect to my central being.

Fragility

Affirmation from others can feel very good with respect to the central terror, but it can never satisfy. The very act of affirmation is a contradiction of the content of the affirmation. The response to the double bind that I impose on others (at least on members of my personal elite) is turned back on me in their response to it. Consequently, no affirmation does anything more than hold off the terror for a while. It doesn't constitute me any differently; it doesn't change the terror--it simply soothes it. Consequently, my fundamental sense of inadequacy and vulnerability remains.

Furthermore, any such reassurances that I do receive are invalidated because they are simply responses to my masks, my fakery, my pleadings, my compensations. They are not really about me; no one knows me enough for them to be truly about me. My desperation makes any positive judgment impossible to receive because it is always, at least potentially, an insincere, deluded, or pitying

response to that desperation itself (or its manifestations). Still further, any temporary reassurance that I do feel simply affirms that I am so weak and inadequate as to need such soothing.

Conversely, my fear of another's judgment of my inadequacy is ever present and overwhelming, for I "know" how true such a judgment would be. It would penetrate to the core of my being. I am deeply vigilant for such possible confirmations of my inadequacy. I am vigilant even for the absence of explicit reassurances and reaffirmations. Such an absence, even a short absence, can give me a deep anxiety that I have been "truly" seen and judged for my "true" inadequacy. So my need for reassurance may be constant and effectively unsatisfiable, and my awareness of that unsatisfiability can give me just one more affirmation and constitution of my inadequacy. My sense of well being, when and to the degree to which it is possible for me to have such a sense, is massively vulnerable and fragile.

Inauthenticity

When one's way of being in the world intrinsically denies and forbids one's way of being in the world, it is not possible for that being to be full and open and honest and genuinely spontaneous. To be self-contradicting is to be constrained and distorted. The self-imperative to be not oneself and the reliance on an external power are forms of fleeing from oneself, of denying oneself. An authentic openness and resoluteness of one's central self values and meanings is not possible for someone who is attempting to live an evasion, an annihilation, of that central self. The rigid personality cannot be authentic (C. B. Guignon, 1983; M. Heidegger, 1962; J. L. Mahta, 1976).

The concept of autoprotectiveness makes contact with a number of aspects of psychopathology discussed in the current literature. I have briefly indicated connections with self-fulfilling prophecies, Becker's external powers, deals with life, Alfred Adler's lack of courage, and the existentialist finitude and inauthenticity. Each of these could be given much more extensive elaboration and exemplification, and there are other possible connections as well. The general point that I would like to draw from these examples, however, can already be made: The connections are all with aspects of the _process_ of psychopathology. That is, autoprotectiveness has been argued to be the basic functional characteristic that

constitutes psychopathological processes as being, in fact, rigidly pathological. The general discussion has shown, in addition, that any autoprotective process will also manifest a number of other aspects of the psychopathological process that have been noted in the literature.

CONCLUSION

This chapter proposes the abandonment of the substance-structural ontology for human beings that is fundamental to standard discussions of psychopathology. One example of the rare exceptions to such standard presuppositions is R. Schafer (1976), although I have basic disagreements with the model he presents. In this chapter an experiential process ontology is proposed in which the fundamental conceptual problem shifts from how to cause change to how to free from rigidity. In an open process system rigidity requires an autoprotective process, which in turn can be instantiated only in the form of central self value terrors. Such a model of autoprotectiveness connects with a number of other process characteristics of psychopathology noted in the literature, such as self fulfilling prophecy, internal double binds, reliance on external powers, a lack of courage in living, and inauthenticity.

There are a number of further questions that this discussion immediately gives rise to that, because of space limitations, cannot be addressed here. For example, why is it that core terrors are rarely directly encountered in therapy? One reason is that therapy most commonly, and necessarily so, deals with distorted functioning in the world that is _derivative_ from core autoprotectivenesses rather than from core terrors per se. A second reason is that clients are only occasionally aware of their core terrors. This, of course, raises the question of what is the status of those core rigidities, with the obvious standard answer being that they are "unconscious." I argue that such an answer is deeply inadequate, and I propose an alternative model to account for truths about a person that are not phenomenologically available to that person. A second obviously pertinent question would be, "What are the implications of this model for therapy?" Again, there is not space for the reasoning or elaboration; the quick answers are that therapy is intrinsically relational (rather, than, for example, interpretational) and that therapy is

intrinsically ethical (rather than just being an activity to which ethics applies). I raise such questions at this point primarily to acknowledge their relevance and importance.   Any serious attempts at addressing them await later writings.

   There would seem to be at least two levels of implications involved in this chapter: one concerning the specific results with respect to psychopathology and psychotherapy, and the other concerning the importance and productivity of taking one's ontological assumptions and commitments seriously. Clearly, I urge both. But whatever the specific deficiencies of the analysis of psychopathology might be perceived to be, it seems more than clear that the general questions of rigidity and structures, and the even more general issues of ontological assumptions and commitments, require serious attention. With rare exceptions, they remain presupposed and unexamined.

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