

Being and Becoming



Charles Ashbach

Dimensions of Psychotherapy, Dimensions of Experience

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About the Author

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Being and becoming

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INTRODUCTION

Psychology, as a study of the basic elements of human personality, evolved out of philosophy. For two thousand years, before the advent of psychoanalysis in the late nineteenth century, humanity's attempt to understand the human mind and imagination was centered totally within philosophical systems,

specifically, within metaphysics as that branch of philosophy focusing on the ultimate nature of reality. In the East, Buddhism emerged in India about 500 BC, and spread to China and Japan. In the West, the work of Greek philosophers, primarily Plato, led to the development of systems of thought which attempted to understand the basic nature and structures of existence. Two central concepts which emerged through these philosophic reflections were those of *being* and *becoming*. From the work of Plato (Buchanan 1948), through Kant

(Copleston 1994) and Schopenhauer (1969) and forward to the modern era with the work of Sartre (1974), these concepts have been developed as conceptual tools through which to contact and ponder the ultimate points of human existence.

The philosophic perspective which best embodies these concepts is that of Idealism (Routledge 2000). Idealism is that school of philosophy which holds that mind is the most basic reality and that the physical world is only an appearance or expression of mind.

Further, it maintains that there is a more basic, hidden reality behind mental and physical experience, e.g., Kant's 'things in themselves' (Copleston 1994: 213). In Plato, for example, the ultimate reality and source of value are 'forms', or 'ideas', which are the fundamental points of existence (Kraut 1992: 7). The object relations approach to the mind and personality can be seen as a manifestation of the Idealist view. Within object relations theory the ultimate points of psychic experience are the internal objects which are the

core and basis of the personality and through which the person derives the significance and meaning of their lives (Meltzer 1967). Like the shadows in Plato's metaphor of the cave (Kraut 1992), interpersonal experience is lived within the shadows cast by primary psychic objects and our experience of them.

Being (Routledge 2000) describes various aspects of human existence. First, it is the state of existence; second, one's fundamental or essential nature; and third, the fulfillment of

possibilities or essential completeness. It is also defined as nature, constitution and substance. These definitions reveal a broad and somewhat shifting definition of Being over the millennia. In this chapter we will be focusing on the third definition, i.e., Being as essential completeness, as a way to approach the concept of narcissism from a fresh perspective.

Becoming, on the other hand, is defined as the fact of coming into existence; a coming to be, or a passing into a state (Neufeldt 1997).

Essentially, it is a concept that describes the change and transformation of the manifestations of Being, through qualities, characteristics or forms.

We can think about Being and Becoming as operating in a figure-ground relationship. Being is the ‘ground’ of reality and Becoming is the ‘figure’ which is contained or realized within Being’s realm. The psychological correlates of these terms can be found to exist in psychoanalysis. Freud’s topographical

model clearly establishes a paradigm where there is a dimension of human experience which is timeless and unchanging. This dimension he calls the unconscious and ascribes the dynamic characteristics of primary process to it. Through language this dimension is connected and transformed into the conscious part of the mind which operates through secondary process, i.e., logic and rational modalities. Freud directly addresses the way in which the unconscious 'becomes' conscious, i.e., the symbolic function of the mind

which represents the ‘thing presentations’ which exist as the primary manifestations of the depth unconscious. The ‘becoming’ of the unconscious, the collision and integration of ego with unconscious phantasy, is the stuff of the conscious mind. Freud never uses the terms Being or Becoming in the philosophical sense. In the work of Bion (1970), there is a direct reference to Being through his concept of ‘O’, i.e., the ‘origin’ of the mind’s activity. To Bion, Being is the dimension beyond, i.e., transcendent,

unconsciousness. He further goes on to state (1970: 36) that transformations in Being, through ‘at-one-ment’ with the patient, are the central pathways for all therapeutic change

From a clinical point of view I am hypothesizing that the ego’s experience of Being is experienced within the person as the subjective sense of the self’s completion and fullness, i.e., a state of narcissistic fulfillment. The ego’s experience of Becoming, on the other hand, is felt as a gradual process associated with

learning, change and development. The experiential aspects of these two processes are fundamentally different. With states of narcissistic experience there is a coenesthetic sense of fullness and completion. That is, this experience registers from the inside of the body-self and radiates out and ‘up’ to the mind. It is basic, direct and intuitive and operates outside of time. With states of Becoming there is a sense of time and therefore of struggle and limitation (see also Johnson, Chapter 3, and Stadter, Chapter 2, in this volume). Growth and development

always occur as a result of absence and the frustration of needs. The organism is driven, as in Freud's drives, to alter its relationship to reality, both internal and external. The ego is the mechanism which guides the growth process but its efforts always occur within the 'gravitational influence' of the depth phantasies and structures of the unconscious. If we use Melanie Klein's (1946) formulations of her two basic positions, the paranoid-schizoid and the depressive, we would say that narcissistic distortions associated with the encounter of Being generally occur

in the paranoid-schizoid position, whereas encounters with Becoming and development occur within the depressive position.

The thesis of this chapter is that, since encounters with Being produce such radical narcissistic experiences, both negative and positive, they are easily distorted by the ego/self's defensive processes. The fullness of the self, during transitory states of blissful expansion, can form the basis for the self's perverse and addicted attempts to control experience in order

to stay fused with the wellspring of such euphoria. Pathological states of narcissism can then be said to be linked to the ego's attempt to control or possess the experience of the encounter with Being. States of false-self or perverse functioning would be a sign of the utilization of narcissism as a regressive and greedy attempt to avoid the pains of separation, limitation and vulnerability through a delusional fusion with the sensual manifestations of Being (Green 2001). The encounter with Being is also associated with the sense of ego

fragmentation or ‘ego death’ (Grof 1985: 46). Feelings of loss, sadness, dread or narcissistic injury can all occur when the ego encounters the vastness of Being as it surfaces through experience. Likewise, the ego is threatened by non-being which constantly stands alongside or behind the experience of Being. May states that anxiety, at its core, is the self’s experience of the threat of ‘imminent non-being’ (May *et al.* 1958: 50).

In this investigation I will use the work of Wilfred Bion to establish a

way to help us map the ego's encounter with Being. True encounter will produce states of authenticity and growth, i.e., development and transformation. False encounter will produce pathological states of inauthenticity, delusion, possessiveness, addiction and coercion resulting in extreme distortions in object relations and interpersonal functioning. Finally, I will attempt to describe the implications for treatment as these conditions affect both the transference and the countertransference.

BEING AND NARCISSISM: THE PROBLEM OF PERFECTION

We have already employed Freud's distinctions between primary and secondary process to make the connection between Being and Becoming. Primary process is an area of mind without the awareness of time, space or causality. It is ruled by desire and wish and utilizes objects in a plastic and fantastic fashion, as a medium for the accomplishment of its creative need to form its world. Secondary process is ruled by time, space and limitation. It is ruled by the

reality principle. These two modes of ‘reality’, in conjunction with the forces of the Life and Death instincts, were used by Freud to account for the vicissitudes of internal and external reality.

We must reflect on the dire consequences associated with the collision between primary and secondary process. Within primary process is a cluster of experiences which depict a world without limit or frustration, replete with satisfaction and gratification, filled with beauty

and omnipotent power. This realm, I believe, is the ego's representation of its encounter with Being. Grunberger (1971) relates this bedrock condition of fundamental narcissism to the child's actual experience and unconscious memory of the 'garden of Eden' which was the pre-natal realm of amniotic perfection. Whatever the source of the experience, there is, undeniably, a stratum within the core of the self that radiates a signal which beckons the human mind, calling it back to a place of perfection and total gratification. We use terms such as

‘heaven’, ‘nirvana’, ‘Shangri-La’ to represent this experience to the conscious mind. Terms such as ‘fixation’ and ‘regression’ have been used to refer to this sector of mind. Clinically, we know that states of drug and alcohol intoxication are ways to chemically induce such euphoric conditions which seem to mimic the fullness and merger of states of perfection.

The ego’s encounter with reality, limitation, ignorance and suffering are all refutations of this experience/wish

of total gratification or pure Being. The pain of growth, the vulnerability associated with learning, and the disappointments characteristic of separate existence all become assaults on the self's sense of its own integrity and of the omnipotent underpinning which form the core of the human identity. Being itself cannot be known directly, but our experience of Being is known directly and passionately through emotional and intuitive pathways. It is this expanded sense of existence which is associated with

narcissistic states of omnipotence and grandiosity.

Becoming is known through the limited tools of the conscious mind—reality testing, induction, hypothesis testing—and ultimately through the admission of error and limit. The friction associated with Becoming makes it easy to identify. Being, on the other hand, is so difficult to encounter because it works through a double invisibility. The first invisibility is that of the narcissistic factor which silently attaches itself to the needs of the self

and the pressures of the instincts so as to maintain the expansion and wellbeing of the self. This is seen in the way that sexuality is used by narcissism to maintain self-esteem, as opposed to reproduction. The second form of invisibility is the way in which Being attaches itself to the narcissistic factor. Being is the state-of-existence which stands silently behind the self's yearnings for fulfillment and realization. To consciously encounter Being thus requires a special act of attention and imagination.

I want to expand Bion's (1970) ideas on Being and 'O' since his work is fundamental in thinking about Being in the clinical encounter. While accepting the work of Klein, he suggested that the unconscious was structured as an instrument to encounter and transform the very foundation of the human mind which he named 'O', as in 'origin'. Here's what he says about O:

I shall use the sign O to denote that which is the ultimate reality represented by terms such as ultimate reality, absolute truth, the godhead, the infinite, the thing-in-itself. O does not fall in the domain of knowledge

or learning save incidentally; it can be 'become', but it cannot be 'known'. It is darkness and formlessness but it enters the domain of K [knowledge] when it has evolved to a point where it can be known, through knowledge gained by experience, and formulated in terms derived from sensuous experience; its existence is conjectured phenomenologically.

(Bion 1970: 26)

He went on to say that the analyst must focus his attention on O, the unknown and unknowable, and further stated that the psychoanalytic vertex is O. This recommendation of Bion's is a call for the therapist to stop seeking 'knowledge' as a way of controlling

experience and to enter into an empathic contact with the Being of the patient through an encounter with one's own Being as revealed and represented in the experience of the countertransference. He recommends renouncing 'memory and desire' (Bion 1970: 33) in order to make contact with O. The therapist must strive toward a state in which the desire to possess mental and emotional experience is renounced in favor of the openness of the self to the uncertainty and evanescence of the therapy process. Our therapeutic Becoming,

once grounded in the immediacy of the moment, enables us to encounter the shadow of Being as it is cast upon our person. It should be noted that for Freud and Bion the dream is the most direct access humans have to the shadow of Being as it is cast across psychic experience. This explains why the dream has such a pre-eminent place in psychic work.

If we follow Bion's theory of mental development as represented in his grid (Grindberg *et al.* 1993: 55) we

might understand the following trajectory:

Being (unknown and unknowable) →
unconsciousness →
representations/realizations → pre-
consciousness → consciousness.

A clinical example may help to illuminate my paradigm. Mr X, a successful architect, continually acted to undo the impact of the therapy process on his self-idealization. He would eagerly ‘accept’ interpretations and then subsequently reject them by acting-out his hostility and resentment through attacks on his wife. The

essence of his attack was a scornful and condescending judgment and criticism of her using a variety of petty observations, always couched in his multisyllabic and arcane way of speaking. The patient was in three-times-a-week therapy with me and my feelings of frustration, anger, impotence and confusion were the countertransference signals that a perverse form of relationship had developed within the therapy. In spite of what looked like a cooperative and productive partnership, I too began to feel like his wife: mocked, useless and

humiliated. My narcissism had been inflated through the projective identification of his own grandiose self-experience onto the surface of our work and through the evocation of my own narcissistic strivings. This experience was realized in a pseudo-intimate mode re-enacting the false self experience with his mother: if he would pretend to be the perfect son she would pretend to love him. The feeling of working hard and seeming to achieve important insights appealed to my sense of self-esteem.

The feelings of impotence and falseness within my countertransference experience showed me that I had experienced a concordant identification (Racker 1968) with the patient. By means of his projective identifications he was able to evoke within me the representation of his striving, adaptive child self and he became identified with the haughty, grandiose and unapproachable mother. He and his brother attended four of the most prestigious universities in the country. The mother always communicated her

feeling of being trapped in middle-class surroundings with middle-class intellects. She had a dictionary, on a pedestal, right by the dining room table and would stop dinner any time a word of interest emerged in the evening conversation. She would not only look up the 'precise' meaning but would also expound on the etymology of the word. She essentially made words a fetish: objects to be used to give the impression of power and authority but actually lacking their true symbolic function. My patient had an incredible amount of information but

woefully inadequate wisdom about the nature of his situation.

The work has focused on revealing the nature and impact of his grandiose sense of self-idealization. His self-esteem is traumatized when he meets up with the falseness and artifice of his social self. I believe this experience is the clinical manifestation of meeting up with his Being. As it is encountered it collides with false images of himself stored within his ego-ideal and the clash produces shame, and the impulse to counter-attack. When the impulse

toward truth is in the ascendancy he also responds with a sense of guilt and a movement toward integration which brings forth a sense of grief and mourning. The mourning concerns the giving up of lost ideal images of himself which were deployed as defenses against the gaping sense of inadequacy and insignificance. The working through process is an on-going oscillation of resistance against and surrender to the truth of himself, which is to say, to his Being.

Let me offer a metaphor to further develop my thesis. Assume you are walking along a beach and you see a paper cup washed up on the shore. It is filled with the waters of the ocean as the tide comes in. Now let's assume further that the cup is a permeable membrane holding the water within it and yet at the same time connecting the cup to the sea. I would say that this cup is the ego-self and the membrane is the gradient unconscious/preconscious aspect of mind that links the human psyche to the waters closest to the beach.

Perhaps we'll consider this to be the surf that breaks upon the shore. These waters I would call unconsciousness. Beyond the surf is the great ocean of Being. Becoming occurs within the cup and Being is communicated, somehow, through the membrane of the cup.

This membrane also processes signals from the cup itself and monitors its structure and is in touch with the process of the cup's deterioration. Within the meager boundaries of the cup are contained a

mere 16 oz. of seawater and yet there is a link and connection to the infinite immensity of the oceans of the world, and to all the life, forces, and dynamics contained within them. This metaphor might then help us to represent the burden of human narcissism. The self is able to experience its connection to the vastness of Being but is continually forced to operate within the limited boundaries of the conscious mind, and the needful, anxious and mortal body which acts as its container.

For my metaphor to work we must assume that the ocean develops, at the tip of the waves which wash upon the shore, a layer of consciousness which enables it to know the land. The land in our metaphor is both the demands of external reality and the material Otherness beyond the scope of the self's omnipotence.

Narcissistically damaged individuals, like Mr X, suffer from traumatic states of separation from the mother. Owing perhaps to the mother's depression or her own narcissistic

depletion, the child has too much or too little maternal fusion or has inconsistent fusion experiences. In Mr X's case, his mother was a very depressed woman who suffered the catastrophe of her first-born child being born with cerebral palsy. The shadow of this event cast itself across the rest of her life as a compulsion to drive her two healthy sons to perform at the highest levels possible. The necessary experience of fusion provides the bedrock for the self's sense of security and faith in reality. Since this 'sense' is lost to

narcissistically damaged individuals there is the compulsive attempt to 'hijack' the object, to make it its own and to bypass the dangers of separation and contingency.

The mother, which is to say the concrete experience of her body and its phantasied insides, becomes the matrix of Being to the child. The primary object becomes a psychological lens through which the shadow of Being might be encountered. Mr X found relationship with the mother an unattainable challenge. The only path

left was therefore identification with the ‘imagined’ mother, i.e., the mother who will fulfill his deepest needs, completely. It is this object, projectively created and aggressively transformed into the ideal, that forms the core of the narcissistic personality and stands as the manifestation of (false) Being. But since this object has been ‘created’ and not discovered, that is, it is a fiction produced by the self, there can be no security and no true peace. The self is forever aware, in its own depth unconscious, that the true object which holds Being and love at

its core, is missing. It is this central unconscious knowledge, of absence, that powers the relentless activity and searching of such individuals. These individuals are compulsive, insecure, demanding and resentful. They suffer from envy, generally unconsciously, because they begrudge the goodness of the object in the face of the trauma which has created a 'basic fault' (Balint 1979) in their sense of themselves. They seek to 'conquer' the object and through a displacement and projection they frequently conquer aspects of the world. But tragically

they are driven, like Oedipus or Icarus, to overreach their mark. Their life is characterized by the use of obsessional mechanisms, manic defenses and acting out, as well as addictions and perversions of every stripe to protect the self from acknowledging the awful truth of their own sense of weakness, brokenness, separateness, and need.

The other form in which these damaged individuals seek to hijack Being is through a schizoid withdrawal into nothingness. They seek to rid themselves of any and all excitation as

a means to merge, in a backwards form, with the source of all Being. They do not conquer the sea, they silently sneak into it.

BECOMING

Now what about the dimensions of Becoming? Becoming, because it occurs within the non-manic ego-self always operates against a backdrop of fear, anxiety and uncertainty. The ‘cup’ can never know what will wash up on the shore the very next moment. It can never be sure how long its structure will hold together. Belief in

an object beyond the self, provides the basis for faith in the face of mortality. Becoming, in the shadow of both the limits of time and the limitlessness of Being, is perhaps the only way in which true transformation can occur. The actuality of the self, opens up to that which is beyond the self and in that paradoxical moment a condition of limited transcendence occurs. It cannot be possessed or controlled.

The self in a mode of authenticity would be operating within Klein's depressive position. The aspirations

toward immortality and Being are acknowledged and owned. The object is valued in and for itself, not as a means of false transcendence. The work of Becoming occurs within time and yet the links to Being allow for the emergence of timeless truth, beauty, insight or understanding. The paradoxical nature of Becoming reveals itself through the deepening of the self's reliance on the object for genuine contact and growth. Introjective identification with the external object replaces projective identification of an internal self-object.

Becoming is known through the sweat of encounter with limitation. Such discoveries lead to insight and change but not to the total transcendence sought in the flight into false, narcissistic Being. This moment of true Becoming is manifested most commonly during creative endeavors where time falls away as we struggle with a problem. The self grows through its increased linkages with the unconscious. We use 'our' minds and imaginations but the outcome produced actually occurs as an element from another realm which is not

‘ours’. Under such conditions of work and inspiration, narcissistic self-idealization ultimately gives way to creative growth of the self, to whatever measure is possible.

A NOTE ON DREAMS AND BEING

Freud (1900) and Meltzer (1963) each have used dreams to depict a pathway through which the deepest strata of the self become available to the conscious mind. The oceanic realm of Being can only be approached by the shadows it casts across personal

unconsciousness and this shadow, according to Bion, is the essence of the dream. For the twenty-five hundred years since the writing of *Oedipus Rex* there seems to have been no appreciable increase in the unconscious's openness to being penetrated by the conscious mind. Dreams today are no less mysterious and symbolic. While we have only recently evolved scientific means to probe the unconscious, through the instrument of psychoanalysis, the protective veil that the self drapes across the unconscious has not become

more transparent. This may be the evolutionary evidence which supports the idea that the human being needs unconsciousness in order to be able to stay in touch with the deepest sources of the self which I am proposing is the encounter with Being.

IMPLICATIONS FOR TREATMENT

Racker (1968) observes that the deepest motivation that drives most individuals to become therapists rests upon the internal experience of having damaged primary objects in our

childhood. The therapy process is then, for the therapist, a way to repair or resuscitate damaged or dead objects. This vital undertaking for the sense of personal goodness and worth of the therapist is tied up with the feeling of having cared for and improved the lot of the patient. This internal pressure is source of all therapeutic ambition and likely to be the place where narcissistic factors in the therapist begin to affect the clarity and function of the therapeutic relationship. The Becoming of the therapeutic process, a condition filled with uncertainty, doubt

and confusion, can so burden the narcissistic sector of the therapist's personality that we strive after positive outcomes rather than allowing the Being of both patient and therapist to emerge in the container of the relationship. As noted earlier, it is here that Bion's admonition against 'memory and desire' comes into focus. If we 'possess' knowledge rather than receive it through the mystery of Being we are in danger of imposing a false experience on the true and actual complexity of Being and Becoming. All such behavior leads to an 'as if'

mode of relatedness wherein patients cannot be themselves as we strive to be someone other than the limited and vulnerable people we actually are.

Being, in the depressive position, is discovered through the process of Becoming rather than through the merger with the ideal objects of phantasy which are possessed by the self and which are established as alternatives to actual Being. Being is essentially Other and can only be encountered through introjective identification. That is, as Other it must

be imported into the self. The use of projective identification creates a sense of ‘false Being’ wherein the self has projected its own idealized contents onto the Other and has mistaken the now confused, narcissistic self-object as an actual external Other.

In my dealings with Mr X, I fell prey to some disturbance in my self-esteem. It might have been my hunger for his seeming respect for my mind or my method. It may have been associated with his increase of sessions so that his economic contributions to

my wellbeing may have begun to play a part. Whatever the actual circumstances that brought about the sense of blockage or deadness, the end-product became a relationship where deeply aggressive and destructive forces were covered over by a veneer of agreement, enthusiasm and respect that pointed to a perverse form of therapeutic relationship. By staying true to my sense of deadness in the sessions we were able to understand how we had begun to re-enact the false relationship between him and his mother where his

‘acceptance’ of her wisdom and knowledge protected him from the unsettling hatred and rage that he felt about her grandiose estimate of her mind and its accomplishments.

As noted earlier, Bion says the only way to authentically encounter the O of the patient is through a process he terms ‘at-one-ment’ (Bion 1970: 43). Note it is the hyphenated version of the word atonement. At-one-ment means a connection beneath ‘knowing’ which leads to O which will subsequently produce the experience

of K, knowledge in a more conscious mode. This deeper mode of encountering self, patient and relationship becomes a paradigm for a fundamental therapeutic connection. He further observes (1970: 55) that at-one-ment should be the clinical basis for all interpretations as this stance is less likely to produce envy and more likely to lead to an experience of shared learning and development.

Bion advises that we must never promote a therapeutic relationship which obscures the radical aloneness

of both therapist and patient. We are required to carry the burden of our separate existence and not to overcome it with the collusive comfort of a ‘cozy’ relationship. Envy is the essential reaction of the cup that seeks to be equal to the sea. We must be aware of this reaction in both us and the patient. It is predicated upon the sense of personal injury and lack and is fueled by a hopelessness that there can ever be a satisfying connection between the cup and the sea. It is the basis for the negative therapeutic reaction, for therapeutic impasse and

ultimately for the sense of depressive dread that is the ultimate experience of false Being.

Bion drolly noted: ‘Of all the hateful possibilities, growth and maturation are feared and detested most frequently’ (1970: 35). Perhaps by applying the concepts of Being and Becoming as we’ve examined them the practicing clinician might be aided in understanding the enormous forces associated with growth and development. On the one hand is the beckoning experience of totality,

fullness and perfection that is the shadow of Being announced through states of narcissistic plenitude. This is continually frustrated by the burdens of Becoming and the danger of non-being.

On the other hand is the suffering and travail of Becoming with its limited victories and partial understandings always opening the self up to the next challenge and the next encounter with ignorance, fear and the unknown.

Of course, for those who persist in the process of Becoming there is the reward of moments when Being is accessed and there is the experience of radical transformation and genuine, but limited transcendence. These moments provide us with a sense of aliveness, truth and beauty which comes from the arduous efforts of Becoming. Hopefully the framework of Being and Becoming as presented here might help us sustain the rigors of containment without the grasping after a false sense of knowledge or

transcendence, for ourselves or our patients.

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