

Comment to Stephen Seligman

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A conceptual line of thought that emerges in Winnicott and is developed by Stern and his Infant research, is now a concept with a broader application covering all life's stages, through the work of Seligman.

This new perspective may perhaps be defined as a 'psychoanalysis of relationships and the intersubjective field'. Could Antonino Ferro's Theory of Field also be placed within this clinical and theoretical line of thought (Ferro, 2002)? If so we need to go back to the conceptualization of the Barangers (1961-62), *i.e.* the concept of 'bipersonal field'. This concept which was put forward to explain the complex phenomena of the psychoanalytic session (the indissoluble link between transference and counter-transference) underwent further development in the conceptualization introduced by Ogden of the 'analytic third'.

In field theory, dynamism is exalted to the point that each term is defined in relation to the others in continuous and mutual referencing. This is a real intersubjective revolution.

What is the connection between this modern psychoanalysis which considers vitality and movement to be a fundamental part of interpersonal relationships, and neuroscientific developments?

In an article by Gallese, Migone and Eagle (Gallese *et al.*, 2006) mirror neurons are defined as the neurophysiological basis of intersubjectivity. The authors argue that individuals have an innate and preprogrammed ability to internalize, incorporate, assimilate, imitate, etc., the state of another person, and it is mirror neurons that bring this about. However, in order to achieve its full expression, this predisposition needs to be complemented by suitable caregiver behavior which reflects the other, interacting with them in a coherent or predictable way. The quality of the relationship with the caregiver is therefore of extraordinary importance.

Can mirror neuron theory provide the neurobiological basis for affective

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tuning? Gallese in particular speaks of 'embodied simulation' to define that process of automatic, unconscious and pre-reflective reproduction of the mental states of the other, which are understood because they are shared at the neural level (Gallese, 2007).

Imitation and attunement: is the analyst like the parent in creating a 'new' psychic structure? This seems to be particularly true if we understand as affective attunement that process of sharing affective states that characterizes the mother-child relationship, but also the relationship between the patient and the therapist.

Tuning can therefore have therapeutic value as it re-molds the events experienced by the patient and shifts attention to what is behind the behavior.

Crucial elements in recognition seem to be dissonance and desire, within processes that are intrapsychic, interpersonal and dynamic.

Patients, as well as infants, learn the very nature of understanding by transforming their experience into another format experienced by another person.

Dissonance and tension thus become fundamental, and Kohlberg's theory (Lisa Kuhmerker *et al.*, 1995) could be taken up in this regard, according to which interpersonal dissonance is necessary to reach new levels of cooperation and organization.

Forms of vitality in childhood and in analysis: in Stern's work, forms of vitality (Stern 2011) refer to a specific way of acting with the body and in the body. They concern the intensity of gestures and subjective perception, i.e., how much strength I feel that I am putting into this action in this exchange with the world. This way of observing the other can help the therapist grasp the energetic aspect, the subjective value of the action which may otherwise, for those who see it from outside, be lost. It is, therefore, as if the therapist has to listen more to the intensity with which something is said rather than the content of the message, to be interested in emotion and affection, in tone and volume, and in the density with which communication permeates the relationship. Then comes the semantic meaning, what the words mean and what the gestures, the posture, timbre, rhythm, and emphasis have conveyed and amply / concisely expressed.

When entering into a relationship with other people, we intuitively evaluate their emotions and moods, their state of health and disease on the basis of the vitality that is expressed through movement. The movement that takes place in a very short span of time is also central to vitality (and here we can probably improve on the description of Seligman's own concept of 'moving forms').

Responsiveness, containment (Bionian), mirroring (Winnicottian) and affective attunement (Stern) as the architects of change in psychotherapy.

Change therefore takes place in the moments of encounter through modifications of the 'ways of being with', that is, change is a result of the therapeutic relationship itself. Something new is created in the relationship that

changes the intersubjective environment. Past experience is recontextualized in the present, so that the patient comes to operate with a different mental scenario, which produces new behaviors and new experiences in the present and in the future.

It seems fundamental for therapists to keep in mind the concept of bidirectionality and the intersubjective field in which therapists work together with their patients. The field that is created is always determined by the mutual influence of the subjects in interaction and dynamically constructed through specific emotional attunements.

The therapist's work thus becomes an opportunity and a method for recognizing the patient's pre-reflective unconscious through the analysis of the ways in which he organizes life experiences, models himself in usual patterns, and structures the analytical relationship according to recurring themes, and images of self and others rigidly defined on the basis of previously preformed meanings.

A new psychoanalytic line for therapists: it is of the utmost importance that therapists construct shared and more effective therapeutic narratives, which are freer and therefore more creative than the classic psychoanalytic theory of reference. By this we mean 'co-constructions' of stories, aimed at promoting patients' *hypseity* (possibility of being) rather than their *sameness* (being aprioristic).

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Conflict of interest: the authors declare no potential conflict of interests.

Ethics approval and consent to participate: the manuscript does not contain any elements that would allow the recognition of the patient.

Received for publication: 19 March 2020.

Accepted for publication: 19 March 2020.

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Ricerca Psicoanalitica 2020; XXXI:274
doi:10.4081/rp.2020.274

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