

THE EXPERIENCE OF
RELATIONALLY EMBEDDED INDIVIDUALITY
AND THE
ANALYTIC ATTITUDE OF *AFFECT-RESPECT* THAT FOSTERS IT

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...a move from dependence (symbiosis) to independence (autonomy) in the psychological sphere is no more possible, let alone desirable, than a corresponding move from a life dependent on oxygen to a life independent of it in the biological sphere.

Kohut (1984, p. 47)

Introduction: My essential thesis today is that an existentially informed, rigorously relational, affect-focused psychoanalytic attitude towards the patient's subjective experience facilitates development of an important aspect of his/her sense of individuality. This aspect consists in a sense of personal distinctiveness that reflects the patient's unique embeddedness in --versus independence from-- relationships with others. I call this a sense of *relationally embedded individuality*. Specifically, I consider how Intersubjective-systems theory --an existential, relational, affect theory-- cultivates in the analyst a clinical attitude of affect-respect (Maduro, 2013) that, in turn, facilitates the patient's development of a sense of this relationally contextualized individuality.

What is Relationally Embedded Individuality? Let us begin by delineating the experiential domain of so-called *relationally embedded individuality*. First, it refers to a dimension of self-experience, namely, a sense of *distinctiveness* to self that derives from the relational contexts within which the experience of self takes form. Now, this

dimension of distinctive selfhood, or individuality, is best understood if we look at it with an existentially informed eye. One such view is achieved by integrating philosophical contextualism --my version of which is more or less grounded in Heidegger (1927)-- with the psychoanalytic contextualism of Intersubjective-systems theory so as to illuminate how a person's sense of individuality can be enriched, and rendered more distinctive, when s/he emotionally owns his/her embeddedness in his/her relational world. Developmentally, for example, this relational world is embodied by his/her world of caregivers and caregiver personality structures.

The integration of philosophical and psychoanalytic contextualism that I have in mind occurs along two dimensions: first is the *phenomenological* dimension, which entails a concern with illuminating and seeing organizations of experience, and second is the *explanatory* dimension, which entails a concern with explaining and understanding such experiential organizations in terms of the contexts in which they have taken form. With respect to each dimension, both existential philosophy and Intersubjective-systems theory ascribe special importance to emotion or affect.

Affective experience is important to both disciplines first because it is *disclosive*. By "disclosive" I refer to the way a person's emotional experience, especially its central organizing structures, reveal, render visible, or disclose something important to introspectively and empathically inquisitive eyes --whether the eyes of self or other, philosopher or the psychoanalyst. In Intersubjective-systems theory, the individual person's affectivity discloses the subjective structures that emerge from, and are the legacies of, lived experience in his/her relational world. Although perhaps hyperbolic,

the person's entire life experience with others, especially repeated experiences of important-others' attunement or mal-attunement to his/her affect, is arguably encoded, and in turn disclosed, in the so-called structures of his/her emotional world.

And in my version of existential philosophy --again, more or less grounded in Heidegger (1927)-- affectivity is the primordial avenue through which the human kind of being --understood as inextricably embedded in its world, as captured in the hyphenated term "*Being-in-the-world*"-- is disclosed to itself (Stolorow 2011, p. 136, italics added). In Heidegger (1927), for example, it is "[t]hrough *mood* [that] humans gain access to their world, to themselves and to their relations with others in the world...." (Elkholy, 2008, p. 4, italics added). Thus, just as the personal subjective structures deriving from a person's highly particular experiences with others organize and disclose themselves in his/her affective life, so too do the universal structures of the person's *being-in-the-world* organize and disclose themselves in his/her affective life (Heidegger, 1927; Elkholy, 2008; Stolorow, 2011).

A second importance to affect in both my existential philosophy and Intersubjective-systems theory lies in the understanding that non-evasive, genuine ownership of affect leads to ownership of multiple dimensions of the person's existence and personhood. For Heidegger, for example, affect ownership leads to ownership of one's *being-toward-death* (Heidegger, 1927) and one's particular *being-in-the-world* as a whole (Stolorow, personal communication, February 2015), or "authentic existence" (Heidegger, 1927). For Intersubjective-systems theory, affect ownership entails integration of one's affectivity as "mine" (Stolorow, 2010), where personal

ownership or *mineness* is a crucial dimension of self-experience (Socarides & Stolorow, 1984/85; Orange, Atwood & Stolorow, 1997). In short, affect ownership has developmental import with respect to genuine ownership in both ontology and psychology.

A third, and for my purposes herein, final importance to affect in both my existential philosophy and Intersubjective-systems theory consists in the conviction that non-evasive, genuine ownership of existentially disclosive affect --especially certain anxiety, sorrow, vulnerability, and powerlessness-- individualizes both existence (Heidegger, 1927) and the experience of self (Stolorow, 2010). In owning one's affectivity --structured as it is by both one's *being-in-the-world* and one's personal life experiences with important-others-- one claims as *mine* something that is profoundly distinctive to, and individualizing of, oneself, namely, one's constitutive contextuality. Affect ownership individualizes *being-in-the-world* as well as emotional experiences of selfhood.

In this three-level way, an integrated existential-psychoanalytic theory and therapy of affectivity wherein both the universal structures of the person's *being-in-the-world*, as encoded and disclosed in his/her affect, as well as the life-specific organizing principles that derive from his/her relationships with others, as also encoded and disclosed in his/her affect, pave a royal road to the patient's self-experience of *mineness* and *individualizing distinctiveness*.

As I will discuss below, the more the analyst's therapeutic attitudes reflect respect for affect as *disclosive* of both his/her patient's *being-in-the-world* and his/her lived

experience in constitutive human relationships, the more his/her patient's sense of self is apt to blossom with enriching experiences of its relationally derived distinctiveness --that is, distinctiveness or individuality that discloses the patients's inextricable embeddedness in his/her world of other. Analytic affect respect entails a perspective from which the patient's relationally embedded phenomenology or emotional experiencing --its universal and particular organizing principles and their experiential products-- is seen as epistemological and therapeutic royalty.

An Existentially Informed Take on Individuality. Let's discuss more closely the parallels between the phenomenologies of ownership and individuality in my existential philosophical and Intersubjective-systems theory perspectives. Heidegger (1927), for example, vividly illuminated a critical ontological nexus between authentic ownership of one's existence, and the affectivity that discloses it, and personal distinctiveness or individualized existence. For Heidegger, authentic existing entails the person's non-evasive *ownership* of the finitude that is constitutive of *his/her* being. Perhaps the most central feature of a human being's finitude, for Heidegger, is its temporal finitude, as indicated in his/her notion of *being-toward-death*. This feature of finitude is disclosed and felt in the angst, or existential anxiety, that derives from the certain temporal finitude of one's existence and yet the uncertainty as to when one's finitude will call. Thus

authentic existence consists in non-evasive ownership of one's *being-toward-death* and the angst that discloses it.¹

The nexus between ownership of such angst, on one hand, and individualized existence, on the other, is grounded in Heidegger's understanding that a person's death is inalienable and exclusively his/hers. Ownership of it inherently individualizes and singularizes him/her because the person's dying is only and distinctively his/hers. He writes:

No one can take [another's] dying away from him.... By its very essence, death is in every case mine.... Mineness ... [is] ontologically constitutive for death (Stolorow, 2009, p. 8, quoting Heidegger, 1927, p. 284).

Recently, Stolorow (2010) expanded and further relationalized Heidegger's notion of authentic existence by showing that ownership of one's *being-toward-death* necessarily entails non-evasive ownership of not just the angst expressive of his/her own un-sharable death (which was Heidegger's focus), but also of the grief that reflects the finitude of his/her connections to the loved-others in his/her life. Stolorow (2009) writes:

Authentic being-toward-death entails owning up not only to one's own finitude but also to the finitude of all those with whom we are deeply connected.... [A]uthentic being-toward-death always includes being-toward-loss as a central constituent. Just as we are 'always dying already' (Heidegger 1927, p. 298), so too are we always already grieving (p. 10).

¹ Heidegger's (1927) description of existential angst does not match what we psychoanalysts see and describe as clinical anxiety. Instead it bears a striking resemblance to what, in the psychoanalytic literature, are designated as trauma states.

In turn, with respect to the nexus between ontological ownership and the lived experience of individuality, Stolorow contends that ownership of existentially disclosive anxiety *and* grief is central to development of enriched feelings of distinctive selfhood (Stolorow 2010). Owning the anxiety of existential self-loss, *and* the grief for loss of the others in one's life, enriches a person's individuality with a sense of his/her constitutive relationality --for example, the sense of his/her selfhood as inherently and continuously defined and contoured by his/her bonds with loved-ones.

I (Maduro, 2011) have made the further existential claim --arguably extending Heidegger (1927) and Stolorow (2010)-- that authentic existence is deepened by ownership of a related feature of one's *being-in-the-world*, namely, the facet of one's embeddedness in others that is determined completely outside of one's will or control. I (2011) have called this feature of human existence one's *thrownness-into-others*, and claim that it is encoded and disclosed in the affectivity of what might be called intersubjective-vulnerability (see also Orange, 2009). Ownership of such intersubjective-vulnerability --including, for example, powerlessness within the limits of our ability to influence, protect and help those we love, or to evoke love from those we love and thereby avert heartbreak-- also contributes to authentic and individualized existence. In short, I have contended (ibid), the person's non-evasive ownership of his/her inextricable and deterministic embeddedness in other, as disclosed in intersubjective-vulnerability (cf. Orange, 2009), facilitates development of yet another aspect of existential distinctiveness or individuality.

With respect to the person's aforementioned deterministic embeddedness in other, Heidegger (1927) addresses the human being's deliverance into its finite time and world --including his/her world-of-others-- in his concept of "thrownness." He (Heidegger 1927, pp. 329 – 330, emphasis added) writes:

As ... something that has been thrown, [human being] has been brought into its "there," but not of its own accord.... This "not" belongs to the existential meaning of "thrownness."

Stolorow (2007, p. 53, end-note 6) expands as follows:

By the term thrownness Heidegger designates our already having been delivered over to a situatedness ("facticity") and kind of Being that are not of our choosing or under our control.

Additionally, and in more concrete terms, Orange (2009) writes:

Phenomenological philosophers tell us that we find ourselves in the worlds we inhabit. We are born --thrown, they say-- into worlds of family culture, race, and class that we do not choose... into families that are more or less stable and relationally capable. We are always already situated.

Again, I draw special attention here to a particular aspect of existential *thrownness*, namely, the person's thrownness into human relationships, especially the deliverance of the person's subjectivity into intersubjective systems of child-caregiver attunement and mal-attunement that structure and organize it in ways over which the person has little or no control, especially as infant or child.

In so doing, again, I contend that the person's ownership of his/her deterministic deliverance into the affective arms of caregivers and other important human beings in his/

her life, in part through ownership of the intersubjective-vulnerability² that emotionally discloses this deliverance, yields peculiarly enriched experiences of individuality, namely, relationally embedded individuality.

My claim is corroborated by our own psychoanalytic phenomenology. How? Because existential *thrownness-into-other* manifests in the familiar psychoanalytic developmental, phenomenological, and therapeutic finding that caregiving human relationships --including especially those of early life and psychoanalytic treatment-- constitute the central and often most determinative contexts into which a person's emotional life is delivered. A person's emotional life, including experiences of ownership and individuality, takes form, emerges, is felt or not felt, transforms, or fails to transform --as the case may be-- within the relational contexts or systems co-constituted by him/her and his/her caregivers (Mitchell, 1988; Stolorow, 2007).³ Thus, I am contending that the person's emotional ownership of this existentially thick relational contextuality --

² The affectivity of intersubjective-vulnerability includes all emotions springing from the person's attachment to and love of other, and sense of being loved by other, or not. It thus includes states of powerlessness to influence or protect others as we might sometimes wish, interdependency, and heartbreak-anxiety, among others.

³ Mitchell (1988) captured this relational psychoanalytic conviction succinctly: "Desire [*and I might say, more generally, all affect*] is experienced always in the context of relatedness, and it is that context which defines its meaning.... Mind is composed of relational configurations.... Experience is understood as structured through interactions...." (pp. 3 – 4, bracketed text mine).

focusing here on the intersubjective-vulnerability that emotionally discloses such contextuality-- leads to expansive feelings of self as distinctively constituted by other.⁴

So let us now look at a specific clinical context in which a person feels the intersubjective-vulnerability that encodes and discloses his/her *thrownness-into-other*. Imagine the young 11 year old girl, Esther, and her mother whose mutual love forms a psychological field of seamlessly interdependent attachment, joy and expansiveness, interrupted from time to time over their eleven years together only by separations and other disruptions that evoke Esther's anxiety and sadness. By virtue of this relatively seamless and emotionally rich love-bond, Esther has laid the foundations of a firmly consolidated sense of self, including self-other differentiation. When, however, the mother dies suddenly of ovarian cancer, this mother-daughter world of love suffers a shattering blow. Esther reacts implicitly not only with the heartbreak of motherloss, but with a chaos and anxiety that corresponds to the tearing away of a piece of her existential and psychological context, a devastating collapse within her relational world.

⁴ As an affect theory, the intersubjective-systems framework specifically zeros in on the inter-affective system co-constituted by the person and his/her caregivers throughout the life-cycle. The character of this system vis a vis emotional attunement and mal-attunement, and the emotional convictions or principles produced by it, are understood to subsequently organize the person's experience of his/her affect (e.g., my expansiveness is injurious to loved-others; my pain is evidence of my loathsome self). Accordingly, one central therapeutic aim, from the intersubjective-systems perspective, is to investigate and illuminate the person's relationally-rooted convictions, expectations and attitudes about his/her own distinctive affectivity (Orange, Atwood, & Stolorow 1997, p. 80) and by extension about himself (Socarides & Stolorow 1984/85).

Essentially, caregiver attunement and/or mal-attunement to a person's distinctive affect produce convictions, expectations, attitudes and feelings-about-feelings (Jacobs, L., personal communication, 2005) which in turn determine whether those feelings can be borne, embraced, tolerated, or, in the alternative, must be dissociated. As such, these relationally-saturated organizing principles determine whether or not the person can and will subsequently own and live in his/her feelings as "mine."

In turn, caregiving relationships and their role in a person's ownership of his/her affect as mine, especially painful affect (see Stolorow & Atwood 1992), become constitutive of his/her sense of individuality. Why? Because they also shape whether s/he experiences his/her emotions as distinctive features of him/herself that are valid and worthy of a differentiated home in the world or, in the alternative, as invalid, unworthy and unwelcome aspects of him/herself that s/he dare not feel and live in as expressive of his/her distinctive personhood.

Unfortunately Esther's father had a long history of experiencing his own grief, heartbreaks, and anxieties as personal failures. In his early caregiving system, such painful feelings were equated by his parents with shameful personal defects. As a result, he responds to Esther with much attention, but it is emotionally cool and stoic. His attention to Esther in her motherloss is encoded with a thinly veiled paternal-message that heartbreak and collapsed-worldness are forms of weakness and to be hidden from others' judgmental eyes.

Esther comes to see the feelings disclosive of her motherloss and collapsed world --for example, her heartbreak and terror-- as disappointing to her father, and thus as threats to what remains of her relational world. She organizes them as failures to live up to the stoic, paternal-ideal "*Thou ought not feel thy reactive grief and vulnerability*" that she has accommodatively (Brandchaft, 2007) adopted as her own. As a result, feeling heartbreak and fear leads to depressed moods characterized by shame and attachment anxieties. To protect herself, Esther compulsively dissociates this range of affectivity and phobically avoids life-situations of love and loss --including emotionally intimate adult relationships, whether with friends or romantic and sexual partners-- that risk putting her in contact with it.

Years later, in her mid-thirties, Esther is in her first psychotherapeutic treatment with a female therapist, and she feels very fortunate to be enjoying and benefitting from this mutually close bond. However, as if Lady Fortune was in fact a cruel lady of misfortune, Esther's therapist dies of breast cancer eleven months into the treatment. This tragic loss evokes a crushing grief in Esther -- crushing in part because it repeats

her motherloss, and in part because it is experienced by Esther as again paternally offensive, dangerous, and profoundly isolating. An emotional portkey (Stolorow, 2007) is opened wide through which Esther's presently felt grief transports her emotionally to the shame- and conflict-saturated motherloss, heartbreak, and collapsed-worldness she had compliantly buried for decades.

Months after initiating a second, progressively successful psychoanalytic treatment with a male analyst, she comes into more direct experiential contact with the intense paternal shame and attachment anxiety she has "forever" felt in and around her motherloss and the its associated sorrow and anxiety. After a prolonged period of working through this shame resistance, she came into closer touch with the devastating impact on her life of her early loss of mother. It was as if un-buried or liberated (Brandchaft, 2007) to be seen and felt.

Within these therapeutic processes she was able to see, feel, and own her intersubjective-vulnerabilities in various forms, and in respect of different caregiver relationships. First, when she got in direct touch with her motherloss and its heartbreak she felt a sadness and existential angst about the vulnerability and powerlessness implicit in her mother-child bond, and saw clearly how terribly shattered her young emotional life had been by her mother's death. Second, she saw and felt a sadness and horror at the damaging derailment of her development occasioned upon her by her father's shame, his humiliations of her heartbreak and terror, and the poisonous meanings she consequently and accommodatively ascribed to her emotional reactions to profound loss. Third, she felt an existential powerlessness in the face of her father's personality organization and

emotional limitations, namely, its deterministic and injurious influence on the formation of her own emotional world and sense of self. Fourth, she felt the vulnerability of confusions arising from the way her father's damaging humiliations coexisted with his paternal love. Fifth, she felt profound sadness about the impact of her dissociations and evasions on her intimate relationships and life, and the losses of possibility for loving bonds over a decades-long period --prior to her psychotherapeutic treatments-- during which such self-protective measures were necessary. Sixth, she felt tremendous anticipatory anxiety when, thanks to her two analyses, she dared to express to others her non-accommodative feelings and perceptions, and to experience them not as alienating personal failures, but as understandable and important. Seventh, she felt safety and gratitude when she felt her analysts were emotionally present, understanding and allies in her liberation from her otherwise debasing paternal shame. And eighth, she felt anxieties for herself and for her analysts whenever the term or fact of cancer appeared on her life-stage, since she knew well what cancer can do to the human body and to those she loves.

Esther's ownership of all these experiences of existentially thick intersubjective-vulnerability --variously disclosing her existential and emotional embeddedness in maternal love and loss, paternal attachment and malattunement, and the intersubjective systems of her psychoanalytic treatments-- contributed, in turn, to her sense of distinctive selfhood as a self-embedded-in-impactful-relationship-with-other. She felt a sense of self as distinctive by virtue of the blessings and traumas of her interconnections with important others, most notably mother, father, and psychoanalysts.

Analytic Attitudes that Facilitate or Obstruct Ownership of One's

Thrownness-Into-Other. I submit that the analyst's specific forms of attunement acquire the most poignant mutative transference significance when part and parcel of a larger, deep-running analytic attitude of affect-respect (see Maduro, 2013). To refresh your recollections, one feature of this attitude --discussed early in this article-- entails the analyst's profound respect for affect or emotion as *disclosive* of both the universal structures of existence (including one's *being-toward-death-&-loss* and *thrownness-into-others*) and the particular structures of one's lived intersubjective experiences (the relationally derived organizing principles that derive from lived, personal experience). The second and third features of this attitude entail the analyst's respect for the clinical finding that it is through the person's ownership of his/her affectivity --including existentially disclosive angst, grief, and intersubjective-vulnerability-- that s/he comes to own his/her existence and his/her subjective life not only as "mine", but as distinctive to, and individualizing of, him or herself. From this existentially informed Intersubjective-systems perspective, the multifaceted attitude of affect-respect consists in a complex, arguably interdisciplinary respect for affectivity as profoundly contextual (Heidegger, 1927; Stolorow, 2007) and the royal road to therapeutic understanding and transformation in the patient.

Included in this attitude of affect-respect is an motivational maxim or inclination for the analyst to move toward his/her own and others' affectivity: in it, the analyst's therapeutic activity is characterized by interest in and willingness to approach, candidly view, and "dwell" (Stolorow, 2014) in those of his/her own and his/her patients' affects,

most notably for us today the existentially revelatory intersubjective-vulnerability associated with the person's *thrownness-into-other*. It is in the relational process of dwelling that the patient stands to own his/her affect, including such vulnerability as "mine" and as distinctive to whom s/he experiences him/herself to be as a person.

As a form of inquiry, dwelling is conducted with an attitude of fallibilism (Orange, 2009) and openness to self-critical analytic reflection as one who is also involved and implicated in the experiences investigated. That is, each of such activities is done with a keen psychoanalytic eye and receptivity to the particular ways the patient's emotions are constitutively organized by the analytic relationship.

Specifically, therapeutic attunement to the patient's distinctive experiences of his/her *thrownness-into-other* -- his/her vulnerability to the rather deterministic influence of the caretakers into whose arms his/her development has been delivered-- facilitates the patient's ownership of them as *mine*. In turn, such attunement facilitates his/her experiencing such vulnerabilities as valid and important manifestations of himself as *thrown-into*, and individualized by, these caretaking-others, and their emotional characters.

In a clinical context, like Esther's, where psycho-pathology lay in her crushingly present maternally and paternally derived attachment anxieties, attunement to intersubjective-vulnerability occurred as a matter of course in attentive resistance analysis. For example, Esther and her second analyst dwelled together in the vulnerabilities entailed in her repetitive transference experiences wherein she anticipated the analyst's (maternal) vulnerability and abandonment, and (paternal) disappointment

and shaming rejection of her pain. Such attunement also occurred in attentive analysis of Esther's resistance to change (Brandchaft, 2007), wherein, for example, Esther felt the attachment and dissolution anxieties associated with her efforts to oppose her paternal, shame-soaked on her affect (Brandchaft, 2007). In each of these experiences of resistance, Esther experienced vulnerabilities deriving from her *thrownness into constitutive intersubjective systems over which she has limited control*. Analytic respect for this affect facilitated its integration as belonging and distinctive to Esther.

Of course, even in the analytic setting therapeutic attunement to experiences of intersubjective-vulnerability cannot be assured. Often the analyst is threatened by the implication that his/her patient's emotional well-being is embedded in the analyst's character --that the analyst is partially responsible for his/her patient's painful and sometimes unbearable emotional states.⁵ These are the times analysts become so-called Cartesians, and organize relational fields they co-constitute as if they look in from outside a cordon sanitaire --as if the patient and her emotional states are "isolated" from the analyst (Atwood & Stolorow, 1992). Worse, such frightened analysts can attempt to enforce the patient's compliance with these decontextualized perceptions, requiring him/her become blind to genuine intersubjectivity and instead see interaction between two radically separate minds.

In relational contexts like these that prohibit the patient's perceptions of caregivers, like the analyst, as pertinent relational context and, contemporaneously, require

⁵ Analysts, like most of us, are likely to be more receptive to being implicated in their patients' expansive emotional states since such states are more likely to interact harmoniously with such analysts' narcissism. That said, some analysts become disorganized by the patient's love of them.

narcissistically favorable decontextualizations (Maduro, 2008), the patient will develop the conviction that owning his/her distinctive perceptions and feelings about his/her *throwtness-into-others* --including his/her analyst-- as *mine* is invalid or dangerous. Defense against such invalidity or dangers will likely entail the patient disowning his/her views of, and feelings about, his/her analyst and analytic relationship, and his/her *throwtness into* them. As a result, his/her self-experience will become disembodied and unworlded in the transference. Naturally, any such decontextualizing relational context will obstruct the patient's sense of relationally embedded individuality --a particularly unfortunate outcome if it occurs within the relational field of a psychoanalysis.

In the end, it is the analyst's respect for, and dwelling with, the patient in his/her *throwtness-into-other*, perhaps particularly the vulnerabilities of his/her embeddedness in the utterly non-linear aspects of the transference-countertransference system that disclose this *throwtness*, that are most likely to facilitate the patient's ownership of, and individualization around, the contextuality of his/her existence and emotional life. An important phenomenological manifestation of such ownership and individualization is the experience of distinctively embedded selfhood, or *relationally embedded individuality*.

Concluding Remarks: There is a developmental value in owning the multidimensional relationality of one's *throwtness-into-other*, and the affects that disclose it, namely, the angst, existential grief, and intersubjective-vulnerability it evokes, the last of which has been the focus of this article. There is a value in coming to terms with and claiming as *mine* the relational fortunes and/or traumas into which one has been

delivered or thrown, and that thus belong to one's existence and selfhood. In this regard, Donna Orange (2009) writes of one's ability to find one's way "to a kind of personal acceptance [that] ... this is my life..." (p. 4, emphasis added by italics).

In turn, a person's non-evasive emotional ownership of his/her relational embeddedness transforms his/her sense of distinctive selfhood into feelings of self as distinctively constituted by its own relational history and present. It is transformed into what I have called relationally embedded individuality.⁶

It is, I contend, an attitude of respect for the affectivity disclosive of the patient's ontological and subjective embeddedness in other, namely, intersubjective-vulnerability, that fosters his/her integration of these feelings as "mine" and the enrichment of his/her feelings of individuality with a sense of its constitutive and profound relationality.

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⁶ Such experiences of ever relationally-situated individuality might include identification and even pride in those of one's caregivers' attunements to his/her distinctive affects that facilitated his/her sense of individuality. Alternatively, they might entail features of grief, resentment, or even horror that his/her caregivers' emotional limitations required him to become what they needed him to be, thereby undermining—maybe even poisoning-- his/her experience of his/her affectivity, his/her sense of self and world, and his/her life possibilities.

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