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THE DISSOCIATION-ASSOCIATION CONTINUUM

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INTRODUCTION

The phenomenon of dissociation has been so closely linked with repression that there is a tendency to overlook the two-directional[2] aspect of this fragmentation process. The fragmentation can occur *from* central awareness to the unconscious, or it can surge from the unconscious *toward* central awareness. The speed, patterning, threshold, intensity and duration of the fragmentation from and toward central awareness are some of the variables that contribute to the complexity of the transition.

Clinically, it has been observed that levels of awareness are in a more or less constant state of flux and, even at a given level in the same person, there occur variations in the extent of peripheral awareness as well as in the depth of perception.

When Freud expanded the Cartesian dualism into a topographical concept of conscious/unconscious, he postulated that "repression proceeds from the ego, which . . . does not wish to be a party to an instinct cathexis originating in the id. Through repression the ego accomplishes the exclusion from consciousness of the idea which was the carrier of the unwelcome impulse." He further stated, "Repression takes place in two distinct situations, namely, when an unwelcome instinctual impulse is aroused by external perception, and when the impulse arises internally without such provocation" (1).

He then emphasized that the theory of repression became the foundation stone of our understanding of the neuroses (2). Thus, by definition, repression refers specifically to opposing undesirable instinctual demands.

In recent years, the input/output concept has become an increasingly used paradigm for experimental and clinical work in human behavior. Miller and his group have reported on their studies of input overload with the various adjustive fragmentation processes that can occur before the breakdown of any given system (7). Hebb and others have opened a whole new field of investigation in studying the many aspects of fragmentation that occur when sensory input is experimentally altered and reduced (3). When Magoun described the inhibiting and facilitating roles of the ascending reticular system in controlling the spinomotor outflow, a new era opened in neurophysiology (6). His co-worker Lindsley has proposed that such seemingly diverse phenomena as sensory deprivation, sensory distortion and sensory overload have *one* regulatory process, the reticular formation. And he conceives of it as a regulator and monitor for incoming and outgoing messages, adjusting to its surges as well as to its gradual shifts in levels of excitation, thus functioning as part of the learning process as well as facilitating the elementary perceptual processes (4).

In a sense, this is an open invitation for clinicians to re-examine their hypothesis and "stretch" when possible in the direction of this opportunity for coordinating observable human behavior with neurophysiological concepts. In this connection, L. L. Whyte has recently stated that the next development in psychoanalytic conceptions will be in terms of biological coordination

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[2] Actually a multi-directional non-linear concept in a three-dimensional sense would convey my thesis more accurately, but for exposition purposes in this paper the two-dimensional concept serves adequately.

with the differentiated aspects of the "unity of the mind." He feels that "it is unlikely that the human mind can comprehend its own states of coordination merely by attention to its awareness, or even inferences therefrom, without the aid of guiding principles of organic order gained from the objective study of the organisms" (8, p. 180). Whereas Freud focused his attention on *conflict* in the psyche, the next development will, Whyte predicts, be in the direction of *order* in the organism illustrated in the human mind. Or, to put it another way, "What is the source and character of organic coordination?" (8)

This thesis then is in the service of reordering clinical thinking toward a meeting ground with the neurophysiologist.

CLASSIFICATION

From an operational point of view this continuum concept of dissociation-association can be divided into three categories, each of which subdivides into input and output, making a total of six distinct yet overlapping types (Figure 1), as follows:

IA) Selective Inattention (Repression): This includes any fragmentation process that serves to defend against anxiety and fear (or undesirable instinctual demands): *e.g.*, amnesia, neurotic and psychotic dissociations, inspirational experiences.

IB) Expressive Implementation of the Dissociated: This category is also in the service of fear and anxiety, but its main function is to reinforce and consolidate that which has already been dissociated or repressed: *e.g.*, tics, dreams, awakening from sleep, phobias, the compulsive triad observable in the post-hypnotic suggestion.

IIA) Marginal Awareness: Anxiety is not prominent here. During the automatic scanning that goes on constantly, various stimuli are perceived outside of central awareness: *e.g.*, subliminal perception, impact of all afferent exteroceptive and enteroceptive stimuli.

IIB) Automatic Activity: This is predominantly for facilitating central concentration elsewhere: *e.g.*, inattention or forgetting necessary to establish focal attention, working at routine tasks while concentrating on something else.

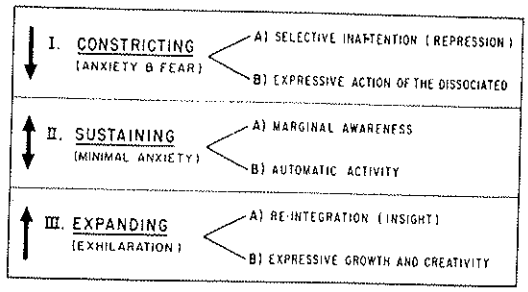

FIG. 1. The dissociation-association continuum.

IIIA) Expressive Uncovering with Re-integration (Insight): Here the dissociated fragments surge toward awareness and toward re-integration: *e.g.*, dreams, slips of speech, gestures, marginal thoughts, free associations.

IIIB) Expressive Growth: Here the dissociated experience is toward *new* concepts and actions: *e.g.*, spontaneity, growth, maturation, creativity.

Categories IA and IB are in the service of limiting anxitey and fear and are therefore characteristically constrictive. They also tend to be compulsive and rigid. Categories IIA and IIB are in the service of sustaining an already established adaptive level and typically manifest little or no evidence of anxiety. Categories IIIA and IIIB are in the service of re-integration, growth and development (associated with various degrees of anxiety) leading to a sense of well-being, exhilaration or euphoria. These are characteristically expansive, and are also frequently characterized by tractability, curiosity, and flexibility of response.

This two-directional view permits a more precise operational use of concepts pertaining to levels of consciousness.

OBJECTION TO THE REPRESSION THESIS

If we use the Repression concept only, then we imply that 1) dissociation is due to

libidinal and/or aggressive conflict exclusively, 2) that what emerges from the unconscious is necessarily chaotic, 3) the dissociated phenomena in the sustaining category (IIA and IIB) are to be interpreted as manifestations of conflict rather than coincidental attention elsewhere, and then 4) conceptually, we will have difficulties in allowing for growth and creative expressions as *new* emergent experiences.

While the dualistic Repression concept tends to make somewhat static an ever-changing dynamic process, this D-A Continuum concept is more dynamic in that it allows for a continuum of action, by acknowledging constant, characteristic changes going on all the time, with maximum awareness as a transitory experience occurring at various times. It also focuses on varying facets of the already existing multi-leveled unconscious complex.

Actually, the Repression phenomena *per se* are incorporated in this thesis in types IA, IB and IIIA.

VALUE OF THIS OPERATIONAL CONCEPT

The D-A formulation not only incorporates the phenomenon of Repression, but also allows for clinical identification of other manifestations of the ever-changing levels and dimensions of consciousness.

Further, this two-directional concept sharpens our sensitivity to the general nature of the Mainstream—or the operative belief system—from which or toward which the fragmentation process operates. If the Mainstream referred to is the Cosmos, then we can safely assume that all individual perception and action is fragmentary or dissociated in relation to the Cosmos. But if the Mainstream is not the Cosmos, but rather a more limited area encompassing man's immediate environment in relation to others, then various theories may be used as media for interpreting his exposure to that fragment of the universe.

If the theory happens to assume the form of psychological man as conceptualized by the libido theory, then percepts and actions can be identified as authentic or not authentic, associated or dissociated, by the criteria established within that conceptual framework. If, for example, the frame of reference for the main assumptions about a patient is social man as conceptualized by the social psychologists, then percepts and actions can be identified as authentic or not authentic, associated or dissociated, by the criteria established within that conceptual framework.

If the patient under study chooses to establish his own set of assumptions and beliefs as the main body for reference, then what is identified as authentic and associated will depend on the criteria he establishes for his belief system.

The task then is 1) to establish and clarify with the patient what is the nature of the "whole" so that fragments can be identified and 2) to determine the direction of the fragmentation process being observed. Is the direction toward disintegration, or toward integration, or toward growth and creativity?

USES OF THIS THESIS

To illustrate the usefulness of this Continuum thesis, consider the following example. Recently a patient was reviewing a series of events and reflecting upon the nature of his actions. As he protested and attempted to deny the self-destructive implications of his participation, he raised his right index finger to the side of his head. Suddenly, he perceived the pointed finger as a gun to his head. His face flushed with anxiety, then with embarrassment. He then broke into laughter with a recognition of this unexpected moment of coalescence and insight that expanded his awareness. Following this he described a sense of relief, then of exhilaration (Type IIIA: Re-integration-Insight). However, if this gesture had occurred as part of a personal ritual to reinforce symbolically his effort to think, and if the gesture had been accompanied with a quality of mild surprise but not much

anxiety, and with an effort at quick accommodation and subsequent puzzlement, it would simply have been an attempt to cope with a marginal perception that was just at the threshold of awareness but not quite perceived (Type IIA: Marginal Awareness).

If the finger-to-head unit of behavior had been accompanied with anxiety and/or fear with transitory awareness of conflict and quick resolution, it would indicate repression and denial (Type IA: Selective Inattention-Repression).

To demonstrate further, the example of a person suddenly waking from sleep may be used. If it occurs during a dream experience which threatens the emergence of a repressed thought, then the sudden awakening is in the service of maintaining the status quo of that which is dissociated (Type IB: Expressive Action of the Dissociated). If this happens at a time when the body temperature is lowering because the blanket has fallen off, then the awakening is simply a corrective maneuver; the sleeper will replace the blanket to maintain body temperature, and be able to go back to sleep (Type IIB: Automatic Activity).

If, however, during sleep, when re-shuffling of thoughts can occur, a new idea or new perspective crystallizes and leads to a feeling of satisfaction, achievement, or even euphoria, the sudden awakening reflects an emergence of a new or creative idea that supercedes the need for sleep at that time (Type IIIB: Expressive Growth and Creativity).

> Dr. Otto Loewi has said that the core of his Nobel-Prize-winning theory of chemical transmission of the nerve impulse surged into his awareness during sleep one night in 1920. He awoke, jotted a few notes, then fell asleep again. The next day he was unable to decipher his notes. The following night, at 3:00 a.m., the idea suddenly returned and he awoke with a design for an experiment which included a recovery of an hypothesis that he had formulated and discarded seventeen years before. He went directly to his laboratory and performed a simple experiment which became the foundation of his theory. He later reflected that, had he considered it clearly in the daytime, he would undoubtedly have rejected the experiment, and observed that it was fortunate that he "did not think but acted" (5).

If, in analyzing the data, the Repression thesis alone is used as the referent, the patient referred to earlier would be unnecessarily burdened with expectations of deeper meaning of Types IIA or IIB, when actually the hand gesture and the sudden awakening are simply accommodating or corrective maneuvers to maintain the established functional state of the moment.

Similarly, if repression and conflict are assumed always to be factors in dissociated phenomena, then the occasions of expressive growth and creativity need to be subjected to deep psychopathological exploration when no pathological substrate exists in the first place. It is here that spontaneous human action can be "psychiatrized" into inaction.

Consider the implications of this in the transference-countertransference phenomenon. The patient can experience this iatrogenic interference as a reinforcement of arbitrary irrational parental control.

SUMMARY

This paper attempts to reformulate a perspective on the fragmentation-coalescence process that releases it from its almost exclusive subordination to the Dualistic Repression concept of the libido theory.

It allows for its operational usefulness outside of this framework as well, by conceptualizing operational categories of awareness on a continuum extending from 1) constricting, to 2) sustaining, to 3) expanding categories, each of which is subdivided into input and output aspects: constricting into IA—selective inattention (repression) and IB—expressive action of

the dissociated; sustaining into IIA—marginal awareness and IIB—automatic activity; and expanding into IIIA—re-integration (insight) and IIIB—expressive growth and creativity.

The formulation described enables greater flexibility in exploring alternative ways of understanding clinical data; and by this means veers away from the determinism that has enveloped much psychodynamic thinking and allows for greater use of the probabalistic, non-linear conceptualizations of modern day science.

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