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“A Vital Christian Presence in Social Work”

**THE SELF IN PSYCHOTHERAPY: PRACTICE, ETHICAL AND
FAITH ISSUES**

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The Self in Psychotherapy: practice, ethical and faith issues.

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Introduction

This reflection started with a comment made by a client that he “was not being true to [himself]”. The comment was both perceptive and engaging. He felt that not only was he not living up to the ideals he had set himself, but that his home and family life was almost a charade. To the world, including his wife and children, he was a hardworking professional man devoted to his immediate and extended family. There was a strong element of truth in the self he presented to the world; he was committed to his family. At the same time, he was deeply unhappy in the marriage and compulsively gambled to help him survive. Divorce for him was not an option: he was committed to family life. To live up to the ideal he set himself, he built an exterior, false façade of a self that was admired by family and friends; however, the cost of doing this was extensive, both psychologically and physically.

The physical cost was most immediately obvious: his physician had diagnosed him as having with Irritable Bowel Syndrome (IBS) that was stress related. There was an emotional cost arising from the dissonance of living out of a false self, pretending all was well when he was deeply unhappy in the marriage. Indeed, he was not being true to himself and was paying a price.

On reflection, this man is not unique. Quite a number of people who come to our family service agency have reached a point in life when the self they have constructed is no longer working. This self is reminiscent of the false self described by Donald Winnicott (1960). However, there is a significant difference. Winnicott’s interest was in “the way a False Self develops at the beginning, in the infant mother relationship and (more important) the way in which a False Self does not become a significant feature in normal development.” (1960, p.144) In contrast, this group of clients adopted a false self in adolescence or young adulthood. This self was once functional, but not any more.

To some degree or other, we all “try on” different selves, different identities and different personas as we seek to discover who we are in adolescence and young adulthood. Most of us, as we mature, discover and create a self that is more congruent with our ego ideal and circumstances. Others, for whatever reason, seem to get locked into a self that ceases to be congruent and, in time, does not work. The “not-working” can manifest itself in a number of ways, but the clients seeking help seemed to have some things in common.

Common Characteristics

Firstly, age is the most obvious commonality: usually the people coming with these questions are between 35 and 45 years old. The term “mid-life crisis” has been popularized to the degree that it is almost trivialized, but these clients were having a crisis in mid-life. The self they created and adopted as young adults was no longer working. They were smart enough to know it, or it had been pointed out to them.

Secondly, these clients reported difficulties in their personal relationships. Most of them were successful in the world of business or in their chosen career. They seemed to be able to manage that part of their lives well. They also seemed to perform well the public roles associated with being married and having a family (e.g., school, clubs, friends, church). Trouble lay in their intimate relationships, whether with spouse or children. These relationships were unsatisfactory, due to wide range of reasons including; infidelity, intimate partner abuse, substance abuse, chronic conflict, and difficulties with the children, especially in the teen years.

Thirdly, these clients frequently had physical symptoms, such as the IBS of the client described at the outset. The stress of living an empty, false self in one's intimate relationships can manifest itself either in the head or in the stomach. Clients will mention headaches and migraines, or they will talk about stomach aches, irritable bowel syndrome, etc. While it is essential for the client to get checked out physically, these symptoms may often point to an interior malaise.

Finally, in many cases a profound loss of identity is either happening or is imminent: the self that they have created is no longer working and will need to be shed. Thus, a person facing separation or divorce knows he/she will lose a huge part of his/her identity and life. Equally, for change to take hold in any troubled marriage, both partners will have to let go of scripts, roles and explanations that support the problematic relationship. Teenage children can be catalysts and will call on parents to let go of pretence and "be real". As one teen said to his parents, "if we're such a religious family, how come we fight so much?"

The client's observation that he was not being true to himself implies an intuitive understanding of the notion of what it is to be a self. However, that is a contested area both in philosophy and psychology. If we are to help clients find their true self and be true to that self, then we need to think clearly about what the term involves.

The Notion of Self: The Moral Dimension

The nature of the self and how it is constructed is the subject of much debate, both in philosophy and psychology. However, clients have a definite, if unclear, understanding that they are a self: a human who has agency in his or her life. They also know that they have different roles or subjectivities, given the wide range of relationships they sustain. At the same time, they intuit that there has to be some reasonably stable self, or self-identity, at the center of their being, in order that they may negotiate their different relationships.

Managing their various, troubled relationships is often the goal of our clients and they come to discuss their options. Exercising choice and implementing decisions highlights the philosopher Charles Taylor's point that the self always exists in a moral context. (1989, Ch. 2) Clients readily acknowledge that whether it is a decision about leaving a marriage, how to cope with divorce, addressing issues of abuse, or someone who is trying to find their way in life, there is a moral dimension to these questions.

Acknowledging that all of us can deceive ourselves, clients want to act ethically, but also in way that is true to who they are, or, more accurately, who they are becoming. They

seek more than a set of external, moral norms. Their morality needs to be formulated within the process of discovering and creating a new and truer self.

An abused woman who was making the hard decision to leave her partner made this moral dimension clear. In tears, she said. "I know leaving will be hard on the kids, and on him, but I have to be true to myself. It's not right that I stay in an abusive relationship, is it?" Even as she makes the decision, she is aware that where there is choice there is also ambiguity.

The Notion of the Self: Ambiguity

The term "self" is at the root of two other terms "selfish" and "selfless". The tension between the two, and the blurring of the lines between them, results in an inherent ambiguity when one talks about being true to oneself. At its best, being true to oneself can lead a person to live a life of self-sacrifice, generosity and service. Mother Teresa comes to mind as someone who in her mid thirties felt called to leave her Loreto convent and work with the poor of India. Being true to the self she felt called to be, led Mother Teresa to live a life of outstanding loving service.

On the other hand, we all know of people who justify selfish decisions and self-serving actions on the basis that they are being true to themselves. "Doing my thing", "Following my star, my career, my dream", can lead a person into very self-centered behavior. We humans have a seemingly limitless capacity to deceive ourselves. We can tell ourselves that we are acting altruistically when, in fact, we are being quite self-centered.

In some ways, the ambiguity inherent in being true to oneself is facilitated by elements of our present popular culture. There is a tendency to privilege choice in and of itself, with little reference to external norms. Of course, each of us has to take responsibility for our life choices; however, there seems to be a culture that says that as long as it is your choice, then that choice is beyond criticism. Choice in and of itself seems to be the only criterion for evaluation.

The Notion of the Self: Authenticity

Choosing to live authentically is one way of addressing the inherent moral ambiguity that comes with making a decision that is true to oneself. As Taylor (1991) points out, the ideal of authenticity was at the heart of the Enlightenment, where modern individualism has its roots. Taylor goes on to point out that the truly authentic self works to balance the tension of two poles, one internal and the other external.

The internal pole has three elements. The first element recognizes that the self is in some ways both created and discovered by the person. Taylor holds that there is an ontological dimension of the self which is common to all people. As he puts it, the context can change, but all cultures have to answer the same core questions. Taylor also recognizes that there is an historical dimension to the self that will color the questions that can be asked and how they can be answered. So, there is discovery, but also creativity.

The second element identifies that each person is unique, even in the midst of commonalities. Modern culture values and celebrates ordinary, domestic life. Whether it is in visual art, literature or even television, the subject is usually people in their quotidian lives. Therapy itself has the individual's unique life as the focus of the work.

Finally, there will often be an element of opposition present when a person makes the decision to try to be authentic and true to themselves. Even Mother Teresa had to move against her religious order and start her ministry to the poor. Clients who find themselves breaking out of a mould often experience opposition from the people who are closest to them.

The external pole is oriented outwards of the self. The first element here is that the authentic self is measured against a "horizon of significance". Taylor argues that the ideal of authenticity cannot be trivialized. The authentic individual has a horizon of significance (moral framework) that inspires a meaningful life. When Mother Teresa died, one cartoon showed a bent, old woman in a sari walking towards the Pearly Gates above which there was a banner with "Welcome Home" on it. Even the secular press could recognize a horizon of significance against which to measure this life.

The second element of the external pole is the notion that the self is created in dialogue. We all grow in a world of relationships where we discover and form our self in dialogue. This is true of the infant held in the gaze of the mother. It is true of the student who develops and grows in the dialogical relationship with a valued mentor. Taylor makes the point that even the hermit is in dialogue with God and the scriptures!

Being a philosopher, Taylor does not explicitly discuss how a person becomes an authentic self. He gives us a map; however, that is different from learning to drive! For we need to turn to the psychologists and particularly the English psychoanalyst Donald Winnicott.

The True Self in Therapy: Letting Go of the False Self

The first step in the process of discovering and creating a true self is to identify and shed the false self. Consider the man whose wife is leaving him, and she has custody of their children. His false self has been shaped by his childhood experience of having been abandoned by his father and his vow that his children would never suffer as he did. This is a very powerful statement; it could be felt as very intimidating (he's an abusive man); it is a very fixed, rigid position. Working with the man, it helped to adopt Winnicott's position that the false self was a defense and the man worked to identify the vulnerable self that was being defended.

In this instance the true, vulnerable self was the man who saw himself replicating the actions of his father. His true self was the wounded, abandoned boy who grieves the loss of his father. When he got in touch with that grief and loss, he began to feel empathy for his children. He was able to weep for himself and also to weep for his children. When he did this he started the process of discovering his true, vulnerable self. There was also a creative aspect to the work as he made choices to respond to the needs of his children. He had started the work, but it was painful and led the client into difficult material.

Working with this kind of painful material requires motivation. For some, the motivation might be external: a marriage is breaking up, child protection services are involved, or family relationships are problematic. For others, the motivation is more internally generated and the person has come to recognize that things have to change. No matter why the person is coming for service, the starting point is the realization that the false self is no longer working. If they can accept that they need “Plan B”, that can be enough to start the work.

Each therapist will have his/her own way on helping a client let go of the false self, and this can come up in discussion; the man mentioned above was helped by an Internalized Other Interview.¹ Often somatic complaints are an entry point and a sign that the present functioning is not working as well as it might. As mentioned earlier, if questioned, many of these clients speak of stomach difficulties or headaches. While prudence demands that any physical causes be checked out, stress will often go to either the stomach or the head.

Having made sure that the person has been thoroughly checked by their physician, Gendlin’s (1982) focusing can be a good entry point. For those of you who are unfamiliar with this technique, it is a way of getting in touch with how one is feeling, and understanding what is at the heart of that feeling. The defensive, false self protects the client from experiencing the troubling feelings, but at a cost. Focusing can be very helpful in “introducing” the client to their unacknowledged feelings.

For example, a man who was determined to have a perfect family in spite of his son’s substance abuse discovered when he started to do focusing that he had a well of rage buried deep within. At the heart of that rage was a belief that he was being taken for granted. So, first he was enraged at his son, next at his family of origin, and, finally, at himself for being so angry. This insight was a great first step. Next he had to decide what to do about all that anger, the wellspring of his false self.

Not every client is prepared or ready to do the work of facing his/her false self. It can be painful work and clients have a right to self-determination. However, a decision to avoid facing the false self can raise ethical issue for the therapist who is being asked to help the client be more comfortable with the false self, to use Richard Rohr’s phrase (2003). For example, a man complains that he was cut out of his father’s will. He does not want to look at why this might have been so and his role in it, nor does he want to address the grief caused by being disinherited. Instead, he uses sessions to vent his anger at his siblings, whom he blames. Is it appropriate to keep this client in therapy week after week, month after month? Is it a good stewardship of agency resources? Is this what non-directive therapy calls for? These are ethical considerations that are worth discussing.

¹ For examples of the use of Thom’s Internalized Other Interview with abusive men see, August Scott, Tod (2008). Narrative Therapy: Group Manuals for Men Who Have Perpetrated Abuse. Truro, N.S.: The Bridge Institute.

The True Self in Therapy: Discovering and Creating the True Self

Alongside the work of shedding the false self is the challenge of discovering and creating the true self. As in the case of the abusive man mentioned above, discovering the wounded and abandoned true self is only part of the journey. He had to decide to respond differently and create a non-abusive true self. As one client put it, "I've learned a lot about myself, and I like the person I've become." So, there is an element of discovery, but also an element of creativity. And, this is the work that the client has to do themselves, to some degree on their own.

Clients may be all too ready to hear their therapist's opinions and view about who they are or might be. To succumb to the temptation and give advice can result in one of two poor outcomes. In the better case scenario, the client will listen to the advice, but make up his or her own mind and drop out of therapy. It is more worrisome when a transference occurs: the client seeks to please the therapist (as he/she did with the parent). The result is that a new, false self is created. Truly, discovering and creating the true self is the client's work.

While this is primarily the client's work, as Taylor points out (1991) the self is created and discovered in dialogue. Certainly, the client will talk with the therapist, but that conversation is then continued outside the therapy session. The client is wise to talk with trusted others, enriching the conversation. The client will benefit from practices such as meditation and focusing. These are forms of dialogue with self and with God that deepen the conversation. This rich material is then brought into the next therapy session and the process continues. In that context, some form of spiritual reading can be very helpful and enrich the internal dialogue.

Spiritual reading is a very wide term. What feeds one person's soul will say nothing to another. Encourage client to discover spiritual reading by visiting their local bookstore and spending time in the Spiritual, Self Help and Personal Growth sections. Over time, clients will learn what enriches and sustains them. Recommendations from the therapist can be helpful, but the client needs to take leadership in this, as in other areas.

Accessing their spirituality in whatever way helps the clients discover or recover new dimensions of their self. It can help in articulating values and ideals that were tacit or unidentified. In supporting clients in this work we are working with them to identify their horizons of significance, the "background of intelligibility" that Taylor believes we need if we are to be authentically human in our choices. (1991, p. 37) Again, we cannot give clients our horizons of significance; they need to articulate their own. At the same time, if a client's horizon of significance differs markedly from ours, or those of our agency, then there may be a situation where working with that client becomes problematical. This may something we raise in our discussion.

Supporting the person to do the work can be much more active than it sounds. Using Taylor's model, clients are engaged in a work of creativity and discovery as they forge a unique self. The new self can face opposition for two reasons. On one hand, family, colleagues and friends may resist the changes the client is making: there can be pressure to revert to the older, false self with which others have become comfortable. On the other hand, there can be an oppositional element in the quest for authenticity. Living with truly authentic people can be uncomfortable. When opposition arises, our

work can be critical in supporting the client as they seek to exercise an emerging true self in their interpersonal relationships.

The True Self: An On-going Journey

Supporting the client to do the work of discovering and creating the true self does not mean that there will be a single, true self that emerges as a finished product. Each person has multiple selves, multiple roles, and multiple subjectivities. However, in the mature, true self a core self-identity has been discovered and created. That core self-identity exercises a centripetal function that helps integrate the various selves, roles and subjectivities, to some degree at least.

This true self is not something static and rigid; rather this is a beginning of a different way of being in the world. A reflective, true self is always in process, always growing and always changing. It is the start of an on-going journey, which, if well launched, will not require continuous therapy. Every person needs friends, mentors, spouses against whom he/she can bounce ideas and explore options. This type of self requires a certain life experience and maturity, and is usually, though not necessarily, done in mid life.

This work also has a profoundly spiritual aspect. Thomas Merton holds that the false self cannot be known by God and that only a true self can enter the profoundly unitive relationship with God. (1962, p. 34) For some, the loss of the false self will appear to be work akin to the Dark Night of the Senses described by St. John of the Cross. Merton, writing in that tradition, also held that a true self is a “no self”, in that there is no ego involved, no pretensions, nothing that gets in the way of the person being totally filled with God.

While acknowledging the spiritual dimension of this work, there is a risk of putting a spiritual Band Aid on a psychological problem. Traditionally, it is said that grace builds on nature. Respecting that wisdom, clients need to do their psychological work as a sound basis for their spirituality. As already indicated, letting go of the false self is prerequisite work. Being conscious of the risk of transference and counter transference, therapists are careful not to impose their own spirituality on the client. There is the risk that this would lead to the client developing a spiritual, false self.

In Conclusion

The mystery of what it is to be an authentic human being is beyond the scope of one model or one paper. All want to be true to themselves, both clients and therapists. This paper has tried to tease out one model that might guide that journey; it is intended as a launching pad for discussion rather than a final destination.

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