



Published: September 30, 2022

Citation: Crayton E. Rowe, 2022. Further Understanding the Undifferentiated Selfobject: Key To The Treatment of Disorders, Medical Research Archives, [online] 10(9). <https://doi.org/10.18103/mra.v10i9.3111>

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DOI
<https://doi.org/10.18103/mra.v10i9.3111>

ISSN: 2375-1924

RESEARCH ARTICLE

Further Understanding the Undifferentiated Selfobject: Key to the Treatment of Disorders

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(This paper was presented at the conference of the American Association of Psychoanalysis in Clinical Social Work, A Time to Think, A Time to Act, on Friday, November 5, 2021 in Philadelphia, Pennsylvania).

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ABSTRACT

It is proposed that the undifferentiated selfobject is the key to understanding the formation and treatment of disorders that are characterized by preoccupations with destructive thoughts and actions. By destructive I am referring to preoccupations that can be harmful to oneself. They include but not limited to major depressive disorders, bipolar affective disorders, obsessive-compulsive disorders, obsessive-compulsive personality disorders, paranoid personality disorders, eating disorders, and impulsive disorders. This paper emphasizes how therapists can be attuned to the undifferentiated selfobject needs of their patients and develop a treatment of disorders that is based on understanding these needs.

Keywords: Self Object, Undifferentiated Self Object, Disorder, Delinking

The Aim and Scope

The aim and scope of this paper is to further the understanding of the undifferentiated selfobject that I earlier introduced after becoming aware of this selfobject need in the treatment of severely emotionally traumatized adults and children. It focuses on the critical importance that this selfobject plays in the understanding and treatment of disorders. The undifferentiated selfobject is the fundamental experience of knowing that there will be ongoing, unknown, and non-specific happenings that will occur throughout life that will be surprising, challenging, uplifting, and self-enhancing no matter the positive or negative nature of our current circumstances (Rowe, 2005, 2010, 2013, 2021). The undifferentiated selfobject is an extension of Heinz Kohut's conceptualizations of selfobjects and follows Kohut's belief that there are selfobject transferences yet to be discovered (Kohut, 1971, 1977, 1984). It can be considered a selfobject as it provides cohesion and vitality to the self (Lichtenberg, et al., 1992, 1996). It can be considered a new classification of selfobject as it has developmental significance throughout life (Kohut, 1984). It is undifferentiated as it is a motivating force that is not specific to any particular aspect of development. Unlike mirror, idealizing, and twinship selfobjects that require caretakers to provide functions of recognition, caring and understanding for the development of these selfobjects, the undifferentiated selfobject does not require a provider and operates independently from objects. It can be considered an inborn programmed experience of knowing that there is more to discover. The infant's spontaneous and enthusiastic search for novelty is commonly observed and clearly shown in research films of crawling infants by The Child Study Group of the New York Institute for Psychoanalytic Self Psychology (2006). This fundamental discovery experience is the motivating force throughout life for the development of mirror needs in seeking greater recognition, idealizing needs in envisioning better ways of life, and twinship needs in seeking more compatible like-minded relationships.

This paper calls into question the accepted diagnostic attempts to explain disorders as discrete psychological entities as outlined in diagnostic manuals such as the DSM.

This paper takes the position that disorders are symbolic configurations formed from

expressions of core traumatic experiences of what can be considered not existing or disappearance that occurred as a result of early disruptions of the infant's enthusiasm in discovering newness from the unknown that includes but not limited to a multiplicity of visual, psychological, and physical experiences. Since infants have not developed symbolization, they have not developed a concept of self or cause and effect. They are experiencing without recognizing that it is they as individuals who are experiencing. Therefore, experiencing is more of a general awareness of feeling alive. Disruptions of this fundamental discovery experience can be considered moments of disappearances of feeling alive and are necessarily traumatic. Perhaps we can come close to what these moments of disappearance would be like if we imagine looking into a mirror and seeing nothing.

If the initial traumatic moments of disappearance go beyond the tolerance of the infant, they can remain as core traumatic experiences (Cohen & Shaver, 2004; Shore, 2001; Watt, 2003) and as implicit memories which act as warnings of repetitions of the interference of the discovery process that occurred at times of enthusiasm and freedom of discovery and resulted in the disappearance of the discovery process. The threat of the of the traumatic interference, that took place during the infant's positive moments of freedom and enthusiasm in the act of discovering, redirects the needed self sustaining experience of discovery away from positive moments of discovery that are vulnerable to interference and loss of the discovery process to the core traumatic experience of disappearance that is not vulnerable to disappearance because it is the focus of discovery. This redirection results in preserving the discovery process.

Disorders can be considered symbolic configurations formed from expressions of the discovery of disappearance to preserve the discovery process. For example, disorders such as depression, suicidal thinking, self mutilation, attention deficits, and eating disorders major depressive disorders, bipolar affective disorders, obsessive-compulsive disorders, obsessive-compulsive personality disorders, paranoid personality disorders, eating disorders, and impulsive disorders all preserve the discovery process through discovering disappearance. The experience of disappearance can be seen as disordered

patients continually shift to new considerations that then disappear from attention by the patient for new considerations that disappear for new considerations that disappear and so on.

Delinking from the Discovery of Disappearance

Delinking of the undifferentiated selfobject discovery experiences from the experience of disappearance allows the patient to consider positive experiences once again. Disorders fade. However, for delinking to take place, the psychotherapist must appreciate the undifferentiated selfobject discovery process even though the discovery may be negative. The patient is only trying to preserve the undifferentiated experience of discovery and prevent the earlier loss of the discovery experience. Analytic focus on the patient's behavior necessarily stops the discovery and threatens the loss of the discovery process. It can be pointed out that the psychotherapist will not exacerbate the patient's behavior by appreciating the discovery. In time when the patient realizes the psychotherapist is not a threat to losing the discovery experience, the patient will spontaneously shift the discovery to positive considerations and disorders greatly diminish and positive considerations emerge. As the patient feels less threatened with the loss of the discovery process, the mind is willing to risk discovering positive considerations perhaps to fulfill development needs that have been thwarted by the discovery focus on disappearance. Details of successful treatment are exemplified by Rowe in working with a suicidal patient (2010), multidisordered patient (2014), obsessive-compulsive patient (2020).

I am offering a personal example of my childhood where the variety of psychotic like symptoms were formed from the undifferentiated selfobject discovery experience of disappearance. I would like to emphasize that disorders are only symbolic configurations formed from expressions of the undifferentiated selfobject discovery of disappearance.

Delinking occurred as my playmate did not interfere with my expressions that I understood at the time as her not being bothered by me. As this shift took place, mirror needs emerged, and disorders faded. I was almost four when I saw her early one morning. I was sitting in my favorite spot behind Nan's and Dappa's boarding house where I lived with my mother and father. She was walking down a dirt road

toward my favorite spot. She looked taller and older than I was. When she got close, I saw the sweetest face I ever saw. She was smiling. I had to look away fast because I was beginning to feel weak and sleepy. I felt too weak to stand up and go back to my room. I made like I was playing with the dirt and didn't see her. I took a little twig that was lying near me, and poked it in the ground making a circle like I knew what I was doing. Maybe she would go away, but she didn't. She was standing over me and talking. She had a happy sweet voice, and I couldn't help listening. I thought of humming as a way of not hearing her, but having been taught to listen and look at the person who was talking, I looked at her and made sounds like "unhuh" and "huh" like I was listening. After trying to be polite, I went back to my made up dirt game. I thought she wouldn't like it, but she did and sat down next to me and reached for my twig. She squirmed closer and ducked her head under my arm so she could reach further. Her hair covered my face and made a yellow light in my eyes. I dropped the twig so I could put both hands on the ground so I wouldn't fall backwards. I was sure that she was a little angel that had come to me as proof that my prayers would be answered. My mother had taught me: "If I should die before I wake, I pray my soul to take." Thinking of a heavenly place helped me calm my fears and help me hid me in different rooms of Nan's and Dappa's boarding house when my father came home drunk, and I had to hide from him. I felt for the ground behind me. I was surprised that both hands touched at the same time and stopped me from falling flat on my back and show that I was a weak baby. The little angel took my dropping the twig as being a present to her because she smiled and looked into my eyes for a long time and said: "Thanks, you're nice." I couldn't answer her as her shiny blue eyes and sweet face stopped up my voice. I had to look away. My arms started to tremble, and I went backward on my elbows. Again, she said: "Thanks." She must have thought that I was trying to make room for her to get the twig because she smiled and reached over me and picked it up and made circles in the dirt like I did. My elbows were feeling shaky, and I wanted to fall flat. I couldn't try to be strong anymore. I couldn't care anymore if she found out I was weak baby. I let myself fall flat. In a happy sweet voice she said: "Watch!" She took

my hands and helped me sit up. I was surprised that she was not bothered that I was a weak baby. She pointed the twig to a small dirt mound and said: "That's a doodlebug home." I didn't know what she meant as I never heard of a doodlebug home. I thought that she was telling me a secret of a magical world. My mother had just taken me to see Snow White and the Seven Dwarfs, and I saw a magical forest and birds and animals that lived in houses and talked with each other. She smiled and said in a happy sweet voice that a doodlebug was a little worm that lived in a hole in the ground and you could pull it out with a piece of grass if you say "Doodlebug, doodlebug, come out, come out your house is on fire." She picked a piece of grass and poked it in the doodlebug hole and said the magical words. The grass began moving, and with a quick pinch she pulled the grass out with a little worm holding on. She put the worm back in the hole and jumped to her feet and ran back to the dirt road. I could only see her for a little bit because she disappeared behind a lot of thick honeysuckle bushes. I didn't want to follow her because I thought she wanted to leave, and my time with her was over. I kept thinking about her sweet smile. I kept thinking about her happy sweet voice and shiny blue eyes. I kept thinking that when I couldn't be strong anymore and fell flat on my back, it didn't bother her. It didn't bother her when she helped me sit up to show me the doodlebug home.

I thought that if I could remember her sweet smile and voice and shiny blue eyes, I wouldn't be alone with my nighttime monsters that lived in the walls, and I could go to go to sleep. I thought of the little twig that would help me remember her. I ran to the spot where she had laid it. There it was next to the doodlebug home. I would keep it forever. I would take it to my room right now and hide it in a secret place. I had to hide it because my mother was scared of dirt, and she would throw it in the pile of house garbage that was burned every week in the back yard. I put the little twig in my pocket and ran to the wooden stairs that went to my room. There were a lot of stairs, and they were really high. They went straight up. The trick was to pull myself up the stairs on my hands and knees and then slide down the stairs. Nan showed me this trick more than once. Side by side we would go up and down the twelve board stairs. Like a piece of ground that looks hard but sinks when you step on it, the boards

always wobbled and made us scared that we would fall off.

I was feeling strong with my little twig, and I wanted to try to climb the stairs standing up. I put my right foot on the stair, but my left leg was too short to touch the ground. I tried to bounce on my right foot to see I could push myself high enough to put my left foot on the step to stand up. Instead of standing up, I fell backward on the ground hard. My neck hurt, but I jumped up because I was afraid that my little angel saw me fall. I didn't want to look because I was afraid that I would see her. So I closed my eyes, and then I opened them a little bit and peeked at the honeysuckle vines where I saw her last. I didn't see her. Our time together was saved.

It started getting cloudy. I saw sunlight shining through two little clouds that made a face with pieces of blue sky that looked like eyes. Maybe it was my little angel who had gone back to heaven where she lived. I thought that her smiling at me could be forever if I were in heaven with her. I wondered if she would smile at me if she saw all of all of my baby weakness. I had to show her all of my baby weakness to see if she wouldn't be bothered by me.

I made big circles above my head with one hand and then made big circles with the other hand. I opened my mouth wide and rolled my tongue side to side and in and out of my mouth and made slurping sounds with my tongue. I kept on doing this until I was tired and couldn't move my arms and make sounds. I looked up at the clouds to see if the little angel saw all of my baby weakness. I saw some pieces of blue like before that looked like eyes. They stayed for a long time like when my little angel looked at me with her shiny blue eyes for a long time. I was sure that she was not bothered by me. I could be with her in heaven. Before I could die and go to heaven, I would have to say my prayer that my mother taught me. I closed my eyes and said my prayer. I thought that I had a falling feeling that was different from going to sleep. Maybe this was dying. I waited. I wasn't moving, but I knew that I was still living because I felt cold. My arms and legs began to shake. My neck and shoulders began to shake. I rolled to my side and tried to stand, but I was shaking too much. It didn't matter because I could be with my little angel in heaven. It didn't matter that my hands and feet were cold, and I couldn't move them. It didn't matter that I was hearing Nan calling: "Big Boy, where are you? You

didn't come in for lunch!" It didn't matter that I saw her looking for me under the trees in front of me. It didn't matter that Nan saw me and was running fast toward me shouting that I would get pneumonia without my coat. It didn't matter that she yelled for Dappa to help her. It didn't matter that Dappa yelled back that he was coming. There was a better place, and the time in this world would go away.

Nan's held my wrists. Her fingers felt warm. She asked me to pull. I pulled, and I sat straight up. She wrapped the jacket she was wearing around my shoulders. She lifted me into her arms and ran with me to the front of the house where there were no stairs to climb. I heard a clump clump sound, and I was sure that it was Dappa coming to the door. When he came out, Nan pushed me into his arms and said she was going upstairs to the bathroom and run some hot water in the tub because I was freezing. Dappa carried me up stairs and sat me on the side of the tub. Nan touched the water and said it was just right. She told me to take my shoes and clothes off and get in the water. Dappa said he would get my pajamas from my room. Nan left with him. I was still shaking, but I took my clothes and shoes off. The water felt warm like Nan's fingers when she held my wrists. I felt sleepy. Dappa came back with my pajamas and told me to get out of the tub. He gave me a towel to dry off. He told me to put on my pajamas. He held my hand and took me to a room with a big bed. There was a tall wooden clock that reached the ceiling behind my pillow. It was like a strong wooden soldier who had lived forever in this world. One big hand made a clicking sound as it moved around and around in a circle. It was like a sword that warned the monsters to keep away. I started to feel sleepy again, but I suddenly sat up fast as I forgot that I put my little twig in my pocket. It was there. I looked at it for a long time. I remembered my little angel's happy sweet voice and shiny blue eyes. I remembered that she looked at me for a long time and was not bothered by me. She was not bothered by me when I showed her all of my weakness when I was lying on the ground. I felt a happy feeling as I thought that my Nan was like my little angel. She was not bothered by me and wanted to teach me how to climb the stairs. I thought Dappa reminded me of my little angel. I thought he wasn't bothered by me. He wanted to teach me things like my little angel. He gave me a wooden cut out he made of a picture of

Popeye the Sailor Man with a corncob pipe in his mouth. Dappa made Popeye as tall as I was. He showed me how to push the board on the saw blade and how to paint.

My psychotic like expressions of the undifferentiated self object that were accepted by my playmate by not being bothered allowed me to delink from the discovery of disappearance and allow for the discovery of positive experiences not only with my little angel but with Dappa and Nan and with others throughout my life. When I moved to my uncle's family farm with my mother and father, I was able to enjoy my aunt teaching me to read and my grandmother teaching me how to care for the farm animals. I was able to enjoy my uncle praising my intelligence and showing me his Phi Beta Kappa key that he said I would achieve when I went to college. I did achieve the Phi Beta Kappa key primarily as an avenue to maintain my positive childhood undifferentiated selfobject discovery experience with him.

Reconstructions of the early life of disordered adult patients point to continuous early disruptions of fundamental discovery experiences that led to discovering disappearance through behavior that is labeled disorders. As with me, the effects of early disruptions of discovery experiences through having to hide from my father, cannot be overlooked as a source of directing my need to discover disappearance as seen in my psychotic like behavior.

Caretakers with the best intentions to care for their infants can interrupt their infants' discoveries in a variety of ways. If caretakers are influenced by current views of child development that emphasize the role of the mother as the primary initiator and director of the baby's attention and actions and as regulator of the baby's affects, they are likely not to emphasize the importance of their infants' explorations and interrupt their discovery process. They would likely be concerned about providing stimulation and interrupt the discovery process by redirecting their infants' attention to their own voice, facial expressions, and toys. Infants may also be interrupted if their prolonged interest in looking or playing is upsetting or bothersome. With the lack of emphasis on appreciating the discovery process, it follows that mothers may not recognize that infants stimulate themselves through discovering and are capable of communicating their upset when they need to be comforted. Caretakers

who are alert to their infants' need for discovery quickly learn that their infants are self stimulating through their intense involvement in discovering all aspects of their surround without need for interfering redirection. These interruptions in the infant's need to discover may not seem important as the babies may smile and seem content with the redirection of their discoveries, but they have suffered a loss of what they were experiencing before. Each interruption has the effect of shutting down the discovery process and with it the loss of the needed undifferentiated selfobject sustaining experience of discovery. It may be upsetting to realize that the need to discover for infants under 12 months takes precedence over all including the mother's presence. This observation is in keeping with research.

In their initial study, Brooks and Meltzoff (2002) focused on determining whether or not 12-, 14-, and 18-month-old infants understood the object directedness or referential value of adult attentive movements. A later study (Brooks and Meltzoff, 2003) with 9-month-old infants was also undertaken. In both studies an adult turned to look at the groups with no verbal or emotional cues. The adult turned to one group with eyes open and to the other group with eyes closed. In the 2002 study, with older infants, the infants in all groups selectively turned to the adult when the eyes were open. Therefore, the infants did not respond simply to the head-turning movement of the adult. The 2003 study, with 9-month-old infants, showed, however, that the children did not turn selectively to the adult. Rather, they turned regardless of whether the adult's eyes were open or closed. It was considered that the younger infants were governed by the adult's gross head movements and did not take into account whether or not the adult was actually looking at them.

It can be inferred that the connection with an object through the adult gaze was not a paramount developmental need at 9 months. Rather, the experience of the obvious gross head movement of the adult was the novel attraction. The novel attraction for the 12-14-and 18-month-olds was the open eyes. This research, which recognizes the attraction to the adult's gaze, also sheds some light on the onset of the developmental mirror needs as postulated by Kohut (1971, 1977, and 1984) for being recognized by an adult that may be in place by 12 months.

It goes without saying that interruptions are necessary at times when infants have to be redirected for purposes of ministrations whether it is for their safety in preventing injury or establishing necessary schedules for sleeping, eating and learning.

As stated, these core traumatic experiences can remain as implicit memories and serve as warnings of repetitions of the disappearance of the patient's enthusiastic discoveries of the unknown will prevent further enthusiastic discoveries of the unknown which are vulnerable to disappearance and loss of the discovery process. To preserve the discovery process, the discovery is redirected to the disappearance itself. Aspects of disappearance occur as dreams of not being able to find people or items, helplessness, immobility, and sudden destruction. It should be noted that within these dreams of symbolic disappearance, there can be references to the infant's experience of the positive discoveries that disappeared. For example, dreams of physical immobility and helplessness can reference the spontaneity and freedom that disappeared. Similarly, dreams of destruction can reference the infant's experience of discovering of forms, texture, and substance that disappeared. The sine qua non outcome of treatment is the recovering of these early discoveries which remain as prototypical sources upon which positive future discoveries depend. The reparative effects of patients returning to a beginning developmental point in time have been underscored earlier by Balint (1979).

Over time as the undifferentiated selfobject experience finds expression through the undifferentiated selfobject discovery of disappearance, individuals become less caring about continuing to live. It is at this point that they may seek treatment. Once patients understand the importance of the undifferentiated selfobject need for discovery, and their discovery was taking place through the discovery of disappearance, the delinking from discovering disappearance to discovering positive considerations takes place. My little angel by not being bothered by me was a kind of non verbal interpretation that I was worthwhile even with my expressions of disappearance that was obvious in my isolation and not talking. As a result, delinking began to occur. My need for discovering disappearance diminished, and I began to discover positive experiences. Dappa's making Popeye for me and helping to paint and saw are examples of

discovering positive experiences. I have Popeye standing in my office today.

Treating disorders as entities in themselves to be eliminated will threaten the patient with the loss of discovery. An exacerbation of the disorders will inevitably occur as an effort to preserve the discovery.

When delinking takes place, patients begin to consider positive possibilities for their lives. Thwarted mirror needs for recognition that are marked by spontaneity, enthusiasm, and creative moments of expression, begin to emerge. Emerging mirror needs for recognition and understanding can be considered to be epic in quality in that they center on life and death issues that are informed by the early traumatic experiences. It is as if the early implicit memories of disappearance added an awareness and wisdom to what is meaningful in life much like the well known near death experiences of adults.

These shifts to the positive are not without anxiety and require ongoing analysis as they are associated to the implicit memory of the immobilizing trauma of disappearance that occurred during the early intense positive moments of discovery. For example, patients might think of advancing their job positions or pursuing new activities and then quickly demean their thoughts as being laughable and unrealistic.

It can be pointed out that the analysis of dreams are strengthening in that patients face aspects of their disappearance and as a result are less threatened by them. As patients face more fully the intensity of the symbolic representations of the catastrophic experience of disappearance in their dreams, aspects of the positive experiences that were eradicated become symbolically referenced as primary themes. For example, common themes are vivid color dreams of scenes of nature such as landscapes, wooded areas and freely flowing water. Freedom of movement is another common theme.

Brief Summary

Perhaps the greatest importance of this paper is alerting psychotherapists to a new understanding of disorders as an undifferentiated selfobject discovery problem where the infants early discoveries that are critical to development are shutdown by caretakers who reason that the infant's behavior needs attention and in some way directs the infant's attention to themselves. Even if the interference is not often, the child's natural discovery process of discovering newness with accompanying sensations is affected. If the interferences are often, it is likely the child will suffer an upsetting disappearance of the natural undifferentiated selfobject need for discovery of newness and turn to the discovery of the experience of disappearance to preserve the discovery experience. As stated earlier, the discovery of the experience of disappearance preserves the discovery process because it is the focus of the discovery. Experiencing disappearance is the only non-threatening discovery experience to preserve the discovery process as positive considerations are associated with the initial trauma of the patient experiencing the disappearance of all discoveries. It is hoped that this paper can shift the attention of the psychotherapist away from the patient's behavior, that will threaten the patient with the loss of the needed discovery, to the patient's success in discovering in general no matter the content of the new consideration. Even with delusional and hallucinating patients, it is the discovery of the of the new delusion or hallucination that has to be the focus of treatment and not the delusion or hallucination. With all disorders, once the patient is no longer threatened with the loss of discovery, the shift to discovering positive considerations will begin to take place.

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