

MULTIPLES

ON THE CONTEMPORARY POLITICS OF SUBJECTIVITY

AN ELUSIVE SUBJECT

Subjectivity is a central concept in post-seventeenth-century Western thought. Stories about subjectivity concern a crucial figure in the modern West—the subject. This subject must do an enormous amount of work. It plays essential roles in philosophy and politics. In philosophy the subject grounds, represents, or generates knowledge and our accounts of it. In politics it grounds the possibility of freedom—freedom from determination and domination, freedom to be self-determining and sovereign.

Considering the weight the modern subject bears, it is not surprising that a central debate in contemporary Western political discourse concerns the nature of subjectivity and its possible relations to emancipatory action. Contemporary critics have undermined the plausibility and desirability of many modern Western theories of subjectivity. These include rational, empirical, instrumental, and *transcendental ones*. Each grew out of and reflects particular historical projects, practices, and pressures that have either been exhausted or are no longer useful to us. Crises of representation, interpretation, knowledge, power, and legitimacy intensify as old ways of understanding subjectivity are thrown into doubt. It is increasingly evident that their credibility has required repression or denial of many other, interrelated aspects of subjectivity.

Many theorists argue that the decentered/postmodernist forms of subjectivity some critics advocate as replacements for older ones cannot exercise the agency required for liberatory political activity.¹ Are the claims of Enlightenment philosophers from Kant to Habermas correct? Does emancipatory action—and the very idea and hope of emancipation—depend upon the development of a unitary self capable of autonomy and undetermined self-reflection?² Can there be forms of subjectivity that are simultaneously fluid, multicentered, and effective

in the “outer” worlds of political life and social relations? Could multicentered and overdetermined subjects recognize relations of domination and struggle to overcome them?

I believe a unitary self is unnecessary, impossible, and a dangerous illusion. Only multiple subjects can invent ways to struggle against domination that will not merely recreate it. In the process of therapy, in relations with others, and in political life we encounter many difficulties when subjectivity becomes subject to one normative standard, solidifies into rigid structures, or lacks the capacity to flow readily between different aspects of itself. While we might want to foreground a mode of subjectivity for certain purposes, problems arise when we decide in advance that what we should be or find is *one* definitive quality. No singular form can be sufficient as a regulative ideal or as a prescription for human maturity or the essential human capacity.³

I will argue below that it is possible to imagine subjectivities whose desires for multiplicity can impel them toward emancipatory action. These subjectivities would be fluid rather than solid, contextual rather than universal, and process oriented rather than topographical.⁴ Emancipatory theories and practices require mechanics of fluids in which subjectivity is conceived as processes rather than as a fixed atemporal entity locatable in a homogeneous, abstract time and space. In discourses about subjectivity the term “the self” will be superseded by discussions of “subjects.” The term “subject(s)” more adequately expresses the simultaneously determined, multiple, and agentic qualities of subjectivity.

To clear spaces for such discussions, I will deconstruct some of the prominent misconceptions about subjectivity. We can at least be clearer about what subjectivity is not. Some approaches to it are likely to prove particularly unproductive. Our imaginations too often are imprisoned by an inability to think about subjectivity as multiplicities that are neither fixed nor fragmented. Often theorists posit an apparently dichotomous choice between two ideas of subjectivity. Subjectivity is depicted either as a coherent entity or as formerly solid ones that have (or should) now splinter into fragments. These ideas are actually mirror images of and dependent on each other. We can develop more adequate accounts of subjectivity if it is conceived as heterogeneous and incomplete processes.

Psychic “structures” are constituted by the interweaving of many heterogeneous experiences and capacities. These include complex clusters of capabilities, modes of processing, altering and retaining experience, and foci of affect, somatic effects, and transformation of process into various kinds of language, fan-

tasy, delusion, defenses, thought, and modes of relating to self and others. Subjectivity also has its own forms of and relations to time. Subjective time is highly variable in its range and intensity. Subjectivity can dwell in many moments of time simultaneously or move relatively freely through past, present, and (projected) future experiences (its own experience, and to some extent, that of others).

The processes of subjectivity are overdetermined and contextual. They interact with, partially determine, and are partially determined by many other equally complicated processes include somatic, political, familial, and gendered ones. Temporary coherence into seemingly solid characteristics or structures is only one of subjectivity's many possible expressions. When enough threads are webbed together, a solid entity may appear to form. Yet the fluidity of the threads and the web itself remains. What felt solid and real may subsequently separate and reform.

THE MODERN SUBJECT IN CONTEXT

The development of modern physics in the seventeenth century had a doubly disruptive effect on people's understanding of subjectivity and the universe. Science contributed to the dislodging of the religious world view in which God was seen as the cause and guarantor of order and revelation and faith as privileged sources of knowledge. Modern physics also confronted people with the problem of determinism. A new order was posited in which the physical universe is determined by objective and impersonal laws of nature. While expanding the possibilities of human power, this view also generated profound problems for people's understandings of themselves. Is there anything human that is not determined? How can belief in freedom and free will be sustained? Descartes provides one response to this quandary: split mind and body and define mind as incorporeal and hence not subject to physical determinism. The mind operates according to its own principles, which are accessible through self-study and the unique methods appropriate to it (thought).⁵

Kant provides a further move in rescuing a (relatively) free subjectivity. In his account, objective knowledge of the world or thought about it is dependent upon reason. Philosophy is the master discourse, the queen of the sciences. Through its study of reason, philosophy can tell us what makes knowledge possible, what kinds of knowledge exist, and how to adjudicate between rival truth claims.

Even if the mind's intrinsic categories limit our ability to acquire knowledge of the world, critical reason can understand its categories, taxonomy, and capabilities.⁶ Epistemology becomes the cardinal field within philosophy. Through its rigors, the mind can be analyzed and disciplined and the validity of its truth claims assessed. Proper procedures ensure that eventually error will be identified and corrected, and objective truth will emerge.

The possibility that truthful knowledge can be generated through an objective mind is essential for the success of Enlightenment political projects. Kant and other Enlightenment philosophers hoped to solve the problem of authority by grounding it in reason. They believed there is no natural form of authority. Thus, its exercise must be justified and its legitimacy established. Since subjects are naturally free and independent, they must be sovereign. Subjects can be sovereign only if they are self-governing; the laws they obey must be ones they give to themselves. Rational authority requires a subject who is fully able to exercise a reason that can recognize the existence and compelling nature of such laws. Rational subjects will agree to be bound by rules that accord with their reason.

Since the universe is predictable and ordered by natural law, it must be possible to find such rational rules. There must be a set of truthful propositions, discoverable by reason, that can govern our behavior. Such rules will be objective—neutral and equally binding on all. Only under these conditions can authority be other than domination.

This set of propositions constitutes part of a metanarrative of Enlightenment.⁷ This metanarrative requires a certain form of subject—an undetermined one, who can be the discoverer of truth. It requires a particular view of reality—rational, orderly, and accessible to and through our thought. It also requires a particular view of freedom and law. The subject can be simultaneously sovereign and subject through obedience to its own rational laws. Rule by rational law necessarily excludes domination.

TROUBLED SUBJECTS

In the modern West, being a self and subjectivity are inseparable. Subjectivity in other cultures might be constituted through kinship or one's relationship to God or the natural world. Modern understandings of subjectivity are rooted in the idea of self we adopt. Two views of the self have been dominant in post-

seventeenth-century Western cultures. One is the Cartesian idea of the self as an ahistoric, solid, indwelling entity that grounds the possibility of rational thought. In turn the self is accessible and transparent to such thought. The defining characteristic of this self is its ability to engage in abstract rational thought, including thought about its own thought. Such thought is said to be undetermined by the empirical, social, or bodily experiences of the thinker.⁸ The second idea is the Humean-empirical one. This self and its knowledge are derived from sense experience. Any adequate account of subjectivity and thought must therefore be rendered in terms that can be expressed in, referred to, or tested by intersubjectively transmissible empirical experience.⁹

Neither view of the self is very compelling. Twentieth-century theories of language and the constitution of sense experience have rendered the classic rationalist and empiricist philosophies obsolete.¹⁰ Contemporary discourses such as psychoanalysis, feminism, and postmodernism propose and require alternate ideas of subjectivity.

The psychoanalytic tenet of the existence of unconscious processes calls into question the possibility of the clear boundaries between mind and body that both rationalism and empiricism require. According to psychoanalysts such as Freud and Lacan, the subject is always internally divided. Her actions are unavoidably affected by forces outside conscious awareness and control.¹¹ The idea that the self can have transparent access to and be the master of its own processes is no longer tenable.

Postmodernists insist that subjectivity is a discursive effect, not a transcendental, ahistoric, and unchanging objective status, entity, or state. These theorists have begun to delineate the political genealogies of subjectivity and how its “nature” is constituted and transformed over time.¹² They also insist concepts of subjectivity operate as regulative ideals within historically delimited contexts. Such ideals can never be neutral or universally true and binding. They cannot be understood as the result of “value free” scientific or rational/philosophical thought. Rather, such ideals are the product of complex knowledge/power networks. These networks generate interdependent categories of subjective experience such as health/pathology that underwrite and legitimate therapeutic and punitive social interventions.

For example, “normal” acquires meaning only in and through its function as the (apparent) opposite of deviant. Such categories function to create and justify social organization and exclusion. They also serve as the rationale for creating

new groups of “experts” whose function is to sort people into the relevant groups. Only these experts can develop appropriate treatments for the deviants or protect the healthy from them. If such categories are successfully established the experts can perpetuate their client groups and their power.

Feminist concepts of gender have many implications for concepts of subjectivity.¹³ Feminists tend to argue that our thinking about and practices of gender are historical artifacts. Gender is an effect of complex, historically variable sets of social relations in and through which heterogeneous persons are socially organized as members of one and only one of an exclusionary and (so far) unequal pair—man and woman. Masculine and feminine identities are not determined by a pre-given, unchangeable biological substratum. They are created by and reflect structures of power, language, and social practices and our struggles with and against these structures. While it may seem that there are only two genders, this is not the case. There are many highly variable and particular determinants and experiences of “being a woman” (or man). Gender itself interacts with and is partially constituted by other social relations such as race.

Although gendering is a heterogeneous and often contradictory experience, it profoundly shapes and determines subjectivity. There are no genderless persons in contemporary Western cultures. Attention to gendering reveals the delusory character of self-determining, individualistic, and autonomous ideas of subjectivity. Gender is one of the conditions of possibility of modern subjectivity. It is intrinsic both to (apparently) abstract notions and individual experiences of subjectivity.

Gendering is an integral part of the process of becoming and being an individual subject. One becomes a boy or a girl, not a person.¹⁴ The meanings of gender for and as oneself cannot be completely idiosyncratic. Vocabularies and social practices already exist through which (gendered) subjectivity is constituted and by which one makes sense of it to oneself. Since gendering is such a complex and overdetermined process, it is not possible to be conscious of all its determinants, effects, and consequences. Even if this was possible, one cannot simply choose to opt out of such arrangements. However complicated one’s own subjectivity may be, gender is a major category of social organization. We must work and have relationships with other persons. To do so, our gendered selves must be made to fit with and be intelligible to other, equally determined persons. One will be inserted into preexisting, gendered social locations and practices.

IMPEDIMENTS TO THINKING SUBJECTS IN PROCESS

Despite their many contributions to the undermining of unitary or fixed notions of subjectivity, psychoanalysts and postmodernists retain or replicate aspects of these subjectivities within their own discourses.¹⁵ Each discourse impedes as well as contributes to development of more fluid accounts of subjectivity. Each highlights some aspects of subjectivity while obscuring or denying others. Each discourse tries to order the heterogeneous components of subjectivity within one master narrative or category. It would be more fruitful to treat contradictory elements of subjectivity as evidence for its multiplicity. We will need multiple stories in a variety of styles to appreciate its complexity.

In conceptualizing subjectivity, it is difficult to avoid replicating the mind/body split that is so prevalent in modern Western culture. One of its current manifestations is particularly harmful to an understanding of subjectivity. Nature or biology is split and treated as intrinsically other than culture, discourse, or the person.

Perhaps there is something about our bodily experience that predisposes us to assign either a false concreteness or abstraction to subjectivity. Bodies themselves can be understood as intersections of complex processes. How people think about, categorize, and analyze bodies change radically over time and vary even within one culture.¹⁶ From another perspective, however, our bodies seem subject to a pre-given, linear set of events that we ultimately cannot alter: birth, maturity, childbirth (for some women), aging, death. Sometimes this sequence is altered, as when someone dies young or a woman miscarries. Then we tend to feel the “natural order” has been violated. This feeling confirms the “normality” of the “usual” order of things.

However, we never encounter a person without a body or discursive practices without embodied practitioners. Embodiment is simultaneously somatic, psychic, and discursive. Researchers may try to understand “the brain” purely in somatic or chemical-electrical terms. They soon discover to their chagrin that the “ghost in the machine problem” (e.g., the subjective qualities of mind) will not stop haunting them.¹⁷

Therapists may also replicate the dysfunctional effects of the mind/body splits and individualism still prevalent in white middle-class American culture. It is just as difficult for therapists as anyone else in our culture to resist collusion with its dominant beliefs, even if some of these harm our patients. We may not subject such ideas to the same critical analysis that other aspects of their thinking receive. Like many other members of their cultures, for example, some of my

patients believe that dependency is weakness. A strong enough will should be able to triumph over any problem. Diseases that affect mood are treated differently than those that affect “the body.” Moods are seen as a (disembodied) mind phenomena. Hence they are subjective and should be subjectively controllable. Somehow the body is not the self, and one is not responsible for its illnesses in the same way. This kind of Cartesian individualism makes it difficult to develop adequate accounts of certain forms of human suffering. There may be no particular reason or meaning for why one person rather than another should have a mental disorder. At the same time, it could happen to anyone, despite their will or intelligence.

It is important to do justice to social, discursive, psychodynamic, or interpersonal aspects of illness, but this should not entail the exclusion of somatic ones. The brain can malfunction like any other part of the body and have profound effects on one’s subjectivity. Whatever the mix of biosocial determinants may be, when an affective illness like depression is in full force, it can become the dominant aspect of subjectivity. We may deconstruct the genealogies of categories such as mental illness, alter the meanings we assign to them, or seek through research to improve their treatment. Nonetheless, they may continue to force us to pay attention to them at times and in ways we and our patients would not choose. Such states may at least temporarily have a high degree of independence from our interpretative activities or discursive relations.

Psychoanalysts from Freud on have seemed to feel the need to develop teleological narratives of subjectivity. These narratives begin with the premise that there is a unitary substance (or potential) present from the beginning. Given “good enough” environmental conditions, this substance will unfold in definite, innate stages toward its “natural” end or purpose (adult maturity/health). If deviance from this descriptive-prescriptive narrative erupts, we work backwards from the present to discover where things went wrong. We even create diagnostic categories that define illnesses by the defective stage.¹⁸

This approach obviously assumes that individual humans all share an essence with a common developmental pattern. This pattern is or should be rational, sequential, purposive, and additive. Naturalizing and universalizing this developmental history obscures its fictive qualities and prescriptive purposes. The posited end becomes a given whose political and ethical components disappear behind the supposed neutrality or scientific nature of the “description.”

The construction of such stories and norms also reveals psychoanalysts’ dependence on and complicity with the metanarrative of Enlightenment. Order and purpose are privileged over and at the expense of multiplicity, randomness,

and contingency. (Unconscious?) complicity in this metanarrative exposes psychotherapists to the risk of participating in the disciplinary and normalizing practices that pervade this society without evaluating the ethical consequences of such participation.

Postmodernists stress the importance of discursive practices in the constitution of subjectivity. They claim these practices can take on objective, thinglike qualities that act as important constraints against as well as enablers of further discourses. Yet the same writers tend to ignore or deny the potentially empowering, limiting, constraining, and partially autonomous effects of our psychosomatic processes.

Even if we stress the discursive construction of “nature” and human “being,” it does not follow that nothing exists except our constructions. We may choose to believe that nothing else exists for us. Therefore either nothing else really exists, or its potential existence is irrelevant. However, this is a rather narcissistic and grandiose view of our powers and importance. Extradiscursive phenomena and experience can both empower and limit our constructs. Postmodernists produce curiously attenuated accounts of human practices when they ignore affects and somatic processes. In these accounts people never seem to be born, have attachments to others, feel, fantasize, or die.

Postmodernists insist on the play of differences, on the irreducible multiplicities constituting past and present existence. This celebration of difference can mask the hegemony in postmodernism of a singular category—discourse (or textuality). No singular category can do justice to the vast and highly differentiated variety of processes in and through which subjectivity can be constituted and expressed. An implicit privileging of language, speech, and writing circulates through this one. Many aspects of subjectivity and its practices are denied, obscured, or marginalized. Discourse is a particularly inapt synonym for practices (for example, ballet or breastfeeding) which are predominantly affective, sensuous, visual, tactile, or kinetic. These qualities are important in the constitution and expression of subjectivities.

SUBJECTIVITY IS NOT LANGUAGE IDLING

Postmodernists and feminists are correct to criticize any unitary approach to subjectivity and to expose the historically constituted character of all ideas about

“human nature.” They are also correct to insist that all such notions are necessarily prescriptive and to question the purposes of those who would constitute such norms. In contemporary Western society such norms reflect and function within knowledge/power systems. The modern state exercises its power and gains legitimacy partially by defining and then tending to the health/illness of the “body politic.”

Similarly, gender systems operate to normalize standards of femininity and masculinity that are necessary for the replication of gender-based relations of domination. All women and most men fail to meet these standards, but we fail in different ways and degrees. Many women and men lack class, race, heterosexual, or other privileges necessary to (almost) meet the stipulated standard for their gender. Relations of domination *among* women (and among men) are reinforced by these standards and our varying allegiances to them.

What follows from the claim that subjectivity is not unitary, fixed, homogeneous, or teleological? It does *not* follow that subjectivity is an empty or outmoded category that we can happily discard along with other modern hangups. To make such a claim would be to privilege one view of subjectivity; if it is not that, it is nothing. It also does not follow that we can make no claims about what we believe to be better or worse ways of being a person. We cannot fall back on reassuring, universal standards to justify our beliefs. However, we can, do, and must make judgments about how to be with and treat ourselves and others (since one aspect of subjectivity is intersubjectivity).

As theorists and political actors, we orient ourselves in part by at least implicit notions of what it means to be subjects in our inner and outer worlds. As reflective beings, we seek ways to understand, practice, and improve our particular subjectivity. As persons in relations to others, we attempt to comprehend subjectivities other than our own. Without such comprehension any form of prediction, cooperation, and/or control is extremely difficult to effect. Perhaps in some future reality we would not continue to do these things. However, in the near term, I cannot foresee what could replace such practices. Furthermore, it is not clear to me why we should abolish them; although the need for improvements in the ways we do them is compelling.

Attempts to develop a unitary, linear, prescriptive, or universally true narrative of the development and nature of “the self” will fail. We can, however, develop phenomenologies of different ways of organizing subjectivities. These phenomenologies can help us to assess some of the benefits and limitations of

various modes of subjectivity and the practices that are required to generate and sustain them. These benefits and limitations are always context specific. We must also specify and defend these as our norms.

Experiences with my patients are part of the reason I have come to advocate multiple, fluid subjectivities. I will discuss two ways in which people's subjectivity can be ordered—schizoid and borderline—and the processes and dilemmas that pervade such modes of subjectivity. The categories “schizoid” and “borderline” are constructs. They are created and employed to order and make sense out of a heterogeneous set of phenomena. Like all such categories, they serve as a shorthand by which persons engaged in similar practices can communicate with each other. Like all categories also, they have consequences that exceed the intentions of and elude their creators. The existence of the categories, but not necessarily the phenomena, is totally dependent upon these persons, their practices, and the context in which they operate.

The dilemmas of schizoid and borderline persons can contribute to our understanding of subjectivity and its vicissitudes. Many of the debates about subjectivity implicitly assume less extreme forms of one or the other as a danger or a possible norm. The schizoid form is an exaggeration of a kind of subjectivity currently valued in the West. The instrumental, split subject who can adapt behavior to achieve predetermined ends while appearing to be an authentic person who is also genuinely concerned for the welfare of others does well in many segments of the postmodern world. The capacity to split reason and feeling, attachment and destruction is highly useful in certain occupations, for example, managing large corporations, designing “smart bombs,” or defending dangerous chemical plants.

Postmodernists' critique of reason sometimes presupposes that rationality's only possible locus or consequence is a schizoid Cartesian subject. They celebrate the fragmentation of subjectivity or an egoless experience of the sublime, pleasure, or the Other as alternatives to this oppressive subject.¹⁹ Postmodernist accounts of decentered subjectivity can obscure the need for moments of ruthless organization and the ability to separate fantasy and consensual reality. Fragmentation may be pleasurable in moments of ecstasy or aesthetic experience. However, while I advocate decentered forms of subjectivity, I do not think fragmentation is the only desirable or plausible alternative to a false sense of unity. Fragmentation also entails many risks. In many contexts it is inappropriate, useless, or harmful. People can achieve coherence or long-term stability without claiming or constructing a (false or true) solid core self. Lacking an abil-

ity to sustain coherence, one slides into the endless terror, emptiness, desolate loneliness, and fear of annihilation that pervade borderline subjectivity.

PHENOMENOLOGIES OF TROUBLE

Thinking rationally does not necessitate a schizoid split, any more than having intense emotions requires borderline fragmentation. Neither form of subjectivity can make use of the multiplicity of subjective processes that are available to others. Each is an excessively imperfect attempt to solve problems many humans share—how to manage the multiplicity that different contexts require, how to feel and think (especially simultaneously) without destroying ourselves and others.

Both forms of subjectivity exemplify some of the dangers and costs of the lack of fluidity. Schizoid subjectivity is unnecessarily rigid and compartmentalized. Borderline subjectivity is so fragmented and inconstant that fluidity cannot cohere into usable shapes or meanings. Schizoid and borderline persons suffer a common difficulty. Neither can experience *simultaneously* the *distinctiveness* of different aspects of subjectivity and their *mutuality*. They cannot experience how each aspect interacts and intersects with and is mutually determined by but differentiated from the others.

I. Schizoid Compartments

Schizoid is defined here as Winnicott and other object relations theorists use it.²⁰ Schizoid subjectivity tends to be organized so that feeling is divorced from thought and psychic and somatic experiences are isolated. Modes of experience and dimensions of a subject's history are encapsulated and rigidly separated from others. Breaches of internal barriers are often accompanied by intense anxiety. Interactions with schizoid persons often leave one with a sense of hollowness and emptiness. There seems to be a shell lacking a human inhabitant.

People develop such subjectivity for many reasons. Part of the story involves the dynamics of particular family systems. In some families, the boundaries between adult and child are too unclear. Parents may abuse their children emotionally or physically, neglect them, or be too intrusive. Any of these behaviors can impede the development of children's private fantasy worlds. Lacking the

security of adult control (and adults in control of themselves and appropriately attentive to others) children find fantasy frightening and impulses dangerous. Inner and outer become too confused and unbounded; each cannot exist in its own appropriate way. *Lacking a reliable adult who could set and respect appropriate limits, a child attempts to establish boundaries for herself. To lose control takes on threatening, crazy connotations.*

In defense, children may seek to control their own feelings and impulses totally. Especially in girls and women this may take the form of "being good." Being good means attending to other people's needs. *One should not expect people to recognize and attend to one's own needs or to appreciate the aspects of subjectivity that require independence from or resistance to others. Soon it can become difficult to tell the difference between dangerous acting on impulse and any feelings. It is safer to suppress or split off many of them. One can no longer feel the difference between a self-regarding selfishness and a reckless and potentially harmful disregard for the needs of others.*

The schizoid person's childhood experiences are ruthlessly repressed along with aspects of fantasy, healthy selfishness, anger, aggression, and the pain of abandonment. The isolation of many aspects of one's past means childlike ways of understanding the world cannot be moderated or balanced by adult ones. Their emergence into conscious awareness is often experienced as alien and dangerous. This isolation also cuts off access to certain kinds of playfulness and an erotic pleasure in life. *The absence of goals and responsibilities is frightening. Vacations and weekends can be burdens. Without access to inner resources, they are literally empty time. Intimate relations with others are difficult, because trust and dependence expose one to possible abuse or the return of split-off feelings. Schizoid people can attend to others very well, but although they yearn to be cared for, they will not allow others to attend to them.*

2. Borderline Disequilibrium

Borderline persons are notable for the intensity and isolation of affect states. Affective experience fluctuates from one absolute state to another (for example, rage to despair). Relations with other persons are also absolute and encapsulated. Other persons and relations with them can be all good or all bad. Similarly, feelings about oneself tend to fluctuate wildly. Experiences with oth-

ers do not moderate preexisting fantasies about the world. Such experiences are reworked so they become either more of the same or an absolute unassimilatable difference.²¹

Unlike the schizoid person's carefully closed and barricaded compartments, *borderline subjectivity is marked by a somewhat unpredictable whirl of fragments. A schizoid person comes to feel imprisoned within an excessively rigid equilibrium. Certain aspects of subjectivity cannot be reached and fluidity between and within subjective processes is blocked off. On the other hand, a borderline person experiences a profound sense of disequilibrium.*

Each fragment has its own emotions, fantasies, thoughts, and intra- and inter-subjective modes of relating. Transitions between one fragment and another are difficult. Sometimes one predominates *so intensely and absolutely* that the others feel in danger of being permanently eclipsed. This constant emotional vertigo means that no fragment can be appreciated or enjoyed. Any stable moment of rest and continuity feels tenuous and insecure. Lacking secure moments of constancy, the particularity of the different aspects of subjectivity and the interconnections between them tend to be lost. *Fluidity is frightening. It cannot be distinguished from the beginning of an uncontrollable slide into a complete dissolution or annihilation of subjectivity.*

People are frightened by how much energy it takes to contain the centrifugal force of their fragments and "pass for" normal or feel at home anywhere. *Borderline people suffer from a profound sense of loneliness and emptiness, a black hole or nothingness inside. This black hole feels powerful enough to suck up all the fragments and annihilate them. It feels quite different from the hopelessness often experienced during a depression. Depression seems more like an almost alien state (analogous to the flu) that takes over and then passes. The void is experienced as highly personal, all-pervasive, and much more destructive to oneself and others.*

Borderline people are extremely sensitive to the relationship between themselves and others, including therapists. My patients would like me to understand their inner worlds well enough to help them name the various fragments and differentiate among them. Such differentiation is a necessary precondition for the development of stability in inner and outer worlds and a sense of perspective. If I am that close to them, they worry that I will either be sucked up by the void or be too solid and displace their own modes of subjectivity. Hence, our time together is itself fragmentary. It often shifts between moments of intense attune-

ment followed by frightened flight, clever stories to keep my attention, intense emotional pain and terror, anxious disclosure of valued ways they are different from me and others in which they long to have bits of me in their own ways. I receive frequent requests to sort out something in *their inner and outer worlds* or offer parental advice. Borderline patients want me to flow enough to stay in contact with them. A too-solid subjectivity would feel impossibly alien and unreachable. While I must be multiple, I cannot fragment. Then I could no longer help them stave off the subjective dissolution and annihilation that continually threaten their precarious balance.

FLUID SUBJECTIVITIES: SOME IMPLICATIONS FOR THEORIZING

The concept of fluid, multiple subjectivities has many implications for theorizing. First, theorists will try to keep in mind the multiple components of subjectivity. These include: temperament and orientations to the world; biological vulnerabilities and needs; capacities for abstract thought, work, and language; aggression; creativity; fantasy; meaning creation; and objectivity. *The intrasubjective and intersubjective relations among subjectivities are important as well.* The qualities and importance of these components within any subjectivity will vary over time. Vast variations across subjectivities will occur as well. These multiple determinants mean that we cannot construct a unitary theory of subjectivity.

We also cannot assume there are always reasons or explanations for what happens to us. *Such an assumption is only plausible as an act of faith grounded in contestable beliefs about the nature of being, history, reality, or God.*²² It is equally likely that there is much random, inexplicable nastiness in the world that affects individuals impersonally and unpredictably. While it may seem paradoxical, these are often comforting and empowering ideas. They encourage a less grandiose view of the extent of one's own powers and a more workable sense of responsibility. Attention to the limits of our powers is often desirable. It encourages us to attain a degree of detachment from the immediacy of affective experience or fantasy. Without such distance, it is difficult to enter empathically into the experiences of others or to respect their differences.

Subjectivity is so complex that we can never be certain what causes a person to be the way they are or to change. Hence, we will also need to be more circumspect in asserting the efficacy of any mode of treatment. We will not dis-

cover one correct technique that is the treatment of choice, the best form of psychotherapeutic relationship, or the "real work," even for one sort of illness. Therapy can accomplish a variety of tasks. Their value should be determined by the patient's need, not the therapist's commitments. Since humans are embodied social beings, both somatic and intersubjective interventions are often equally important aspects of treatment.

This need for flexibility and multiplicity in both patient and therapist can be seen quite clearly in the treatment of mood disorders such as depression. In a mood disorder such as depression, medication can alter the affective and somatic facets of experience. However, depression also has cognitive and intra- and intersubjective dimensions. While these may not change without attention to its affective and somatic aspects, they can develop into semiautonomous features of subjectivity. People begin to think and relate to themselves and others in distinct, depressed ways. *These will not necessarily disappear when the affective dimension changes.* Therapy can be quite helpful in making people aware of their ways of organizing subjectivity and of possibilities for changing them.

However, such work cannot occur when the person is overwhelmed by the affective and somatic effects of a mood disorder such as depression. *Attempting to do such work at this point may make the patient worse, exacerbating her already pervasive feelings of failure and incompetence.* Seeking reasons for the depression may result in the intensification of the patient's already overwhelming sense of guilt and inappropriate responsibility.

Therapy can make more dimensions of subjectivity available to people. It can encourage the development of the aspects of subjectivity that evoke and enjoy multiplicity. People can develop more tolerance for and appreciation of differences, ambiguity, and ambivalence. Therapy can also increase our ability to engage in appropriate self-protective behavior and to sustain an internal equilibrium within and against the constraints of the inner and outer worlds. *These aspects of subjectivity are not the superordinate I/ego of the ego psychologists.* They are instead a set of capacities that are so well practiced as to become almost automatic. However, other aspects of subjectivity sometimes must rebel against or interrogate these capacities. Automatic vigilance can be transformed into punitive compliance with unnecessary forms of authority.

The task of therapy cannot be the discovery (or construction) of a solid, unitary, pristine, and undistorted self lying somewhere deep down inside. The person could then be true to this self and use it to orient all actions, choices, and

relations in an uncontradictory way. If this is our definition, patients are bound to be disappointed and feel inadequate and defeated. Subjectivity is not an illusion, but the subject is a shifting and always changing intersection of complex, contradictory, and unfinished processes. Total access to or control over these processes is an illusion, for (among other reasons) the outer world will not provide the resources for us to discover all of them or the space to express them.

Theorists will also have to abandon the idea that we can develop one story that will make sense of all subjective experience. Even constructing multiple narratives and interpreting people's experience are only parts of any therapy. Their importance will vary with the person and over the course of treatment.²³ We will not find one root cause of all illness and health and hence have one grand theory that accounts for them all. Different aspects of subjectivity may require different modes of storytelling. In some kinds of stories intention and will may be relevant, in others they may not be.

Ideas like taking responsibility may vary in meaning and importance depending on which aspects of subjectivity and time we are discussing. For example, as a child someone might have been a helpless victim of abusive parents. As adults we may have to take responsibility for tending to the present consequences of such experiences. One can be simultaneously victimized and responsible; neither negates the other.

Similarly, we cannot assume that the developmental stories we create to make sense of childhood processes also explain adult experiences. There is no singular past waiting in a pristine state for our (re-)discovery. Experience is constantly reworked in conscious and unconscious ways as our cognitive and linguistic skills and intra- and intersubjective worlds and purposes change. Meanings of our experience are affected by and shift within different intra- or intersubjective contexts. The (temporary) content and endings of stories about our experience are partially determined by the questions we and others pose. They are also shaped by the interventions and effects of outer social structures and bodily changes that occur while we are (re-)constructing our narratives.

Dilemmas originally encountered in childhood (like separation-individuation) may persist within our subjective experience. However, as adults we generate and must confront new challenges for ourselves. These cannot be understood solely as a replication or higher level of or reparation for past problems or experiences. Indeed, we get into trouble when we do this. For example, in parenting

we may reexperience aspects of our own childhood dilemmas. For our children's sake, we have to find ways to be an adult for them that respond to their particular needs for a parent. Such responses require capacities for empathy, detachment, and appreciation of difference and a desire to foster the unique subjectivities of an Other. These are not notable features of childhood.

POLITICS OF SUBJECTIVITY

We also cannot use parent-child relations as a direct model for citizenship or political action. Citizenship and politics occur within radically different contexts. These contextual differences transform problems of power, authority, and responsibility.²⁴ Many aspects of political contexts existed before the persons who find themselves within them. We will also have to take into account the effects of these contexts and ongoing action in the world on the continuing constitution of our subjectivities. People are not enclosed, finite systems. Subjective development continues throughout the life cycle. Active political participation, for example, may stimulate the development of aspects of subjectivity that cannot exist outside it.

An analysis of different forms of subjectivity can, however, contribute to an understanding of some of their political consequences. Our notions of subjectivity and our choices among them do reflect and reinforce political and social forces. In this disrupted moment, the ability to tolerate and the will to encourage fluid and multiple forms of subjectivity are imperative and fully ethical positions. The unitary self is an effect of many kinds of relations of domination. It can only sustain its unity by splitting off or repressing other parts of its own and others' subjectivity.

Too much isolation of one dimension from others will have serious intra- and intersubjective effects. Such isolation can be achieved only by turning other aspects of subjectivity into dangerous and alien others requiring punitive control. Since these others are integrally related to the favored part, a hierarchical relation of domination must be established and maintained. Ambiguity and boundary-crossing are increasingly intolerable. Even if the initial motive for such isolation was emancipatory, eventually its repressive consequences will be evident. The long-term costs of such a strategy will outweigh its immediate gains. To

retain control, the dominating part must establish perpetually uneasy and insecure relations of mastery over its lesser "others." The creation of presents and futures more congruent with feminist, psychoanalytic, or postmodernist ethics will require the sustained efforts of multiple subjectivities. Only multiple and fluid subjects can develop a strong enough aversion to domination to struggle against its always present and endlessly seductive temptations.