

Anxiety states and early relational trauma

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Marcus West, *Into the darkest places: early relational trauma and borderline states of mind*, Routledge, New York 2016

In his book, *Into the Darkest Places* Marcus West's delivers an extensive, in-depth analysis of the impact of early relational trauma on the psyche. West's comprehensive and nuanced approach offers a unique perspective as he artfully weaves together multiple analytic, relational and trauma theories presenting both analysis and critique of each. West presents a broad clinical picture of what he refers to as "*borderline states of mind*." In doing so, he avoids the common tendency to reduce trauma survivors to a singular list of symptoms, which can be felt as stigmatizing and pejorative. Instead, West focuses on the telos as he offers a multiplicity of descriptions of how a trauma complex presents clinically, allowing for distinction and individuality, while simultaneously presenting commonalities. West makes use of numerous detailed clinical narratives to portray his experience as he enters and works with these psychic states.

West's book begins with an in-depth description of ways in which early relational trauma directs the developing personality. Early relational trauma overwhelms an undeveloped ego, whereby the individual may lack the language necessary to verbalize or comprehend the experience, which can result in an alienation from what West refers to as the "core self," leaving the individual with a sense of hopelessness and defeat. The experience of trauma becomes the center of identity, around which all else revolves. I often find that in these individuals there is a sense of themselves that is not easily articulated. West writes "they feel flawed, wrong, cursed...The individual will often feel that there is a void at the core of their identity" (4-5). This experience often constellates as an overpowering and generalized anxiety. Such anxiety often cannot be placed on anything in particular and expresses itself in many forms, both psychologically and somatically.

According to West, a person with borderline personality organization “struggles with life and often feels tortured by it, as they are not able to progress or to feel good about any of the progressions they do make” (14). West’s expansive clinical picture of borderline states of mind is rightfully placed within the context of the trauma that has been experienced. Rather than pathologizing, where the individual can feel blamed for their reactions, West sees symptoms as normal responses to what occurred, which I find to be an important distinction in clinical work. When a trauma survivor can develop a level of consciousness of this distinction, this can lessen anxiety around being “crazy” or “difficult,” instead allowing them to be seen and to see themselves without judgement. West successfully detaches the individual from reductive labeling, which often serves to blame the individual for their own self-destruction (victim-blaming), instead stressing the telos, understanding the fuller picture of the individual in context of their trauma.

What is most striking about West’s book is the thorough way in which he integrates numerous concepts and ideas from attachment, trauma, and analytic theories in order to deepen the understanding of the trauma complex and these borderline states. He uses the thoughts and ideas of many, showing how they build upon one another, are in conflict with each other, or complement each other, adding his own critique and perspective on the work. This is extraordinarily useful, and important. Although the foundation of my own clinical perspective is Jungian, I find it helpful to utilize multiple methodologies, particularly with trauma, which is complex, complexed, and multifaceted, requiring a depth and breadth of reflection, thought, and viewpoints.

West fleshes out the clinical picture, exploring the wide range of clinical reaction and response in the individual. While there are typical commonalities amongst trauma survivors, I have found there to be vast diversity: the individual personality is more than just a list of symptoms, and the manner in which the personality forms around the particular trauma varies significantly. West applies this knowledge to describe how typical instinctual defenses in response to trauma (he uses fight/flight/freeze/collapse, although there are

variations of these four) relate to common responses to trauma within the complex (narcissistic, borderline, hysteric, schizoid, and obsessional personality organizations). I found that his establishment of the connections between these defenses and personality organizations was poignant, and that it deepened the clinical understanding of these places, and of what is happening in the psyche, again looking at the telos rather than the symptom. I appreciated the recognition that, although there does tend to be a dominant system, all of these defensive systems and personality organizations can be constellated within the psyche to varying degrees and in various ways.

In my own consulting room, I experience borderline states of mind as a continuum, where at times these places are a predominant defense the individual has some consciousness of and ability to reflect upon, and at other times they seem to encase the entire personality with no insight or reflective awareness, and everywhere in between. West's model speaks to this diversity and range of reaction, where the individual can be seen and witnessed and understood, rather than labeled and stigmatized, as often occurs within this clinical population

The second half of West's book provides in-depth description of work with borderline states of mind and of the analytic experience of entering into the darkest places. Interestingly, West uses the myth of Orpheus as a metaphor for such analytic experience to amplify what is occurring clinically. In this context, he emphasizes the importance of being able to work within the transference and counter-transference, as early relational trauma is continually re-experienced within relationships, including the analytic one. The analytic container offers a unique environment in which to work through this. West stresses the need for the analytic stance, to resist enactments, defensiveness, and identification with the projections of the analysand, both positive and negative. This work can be excruciating, constellating anxiety on both sides of the couch. West rightfully stresses the importance of the analyst's knowledge their own psyche: in order to delve into the darkest places of another, one must be conscious of the darkness within him- or herself.

West believes in the importance of staying with what the person is bringing, and of being able to put it into words (and, I would add, images, particularly with non-verbal material). This requires an attunement to what is happening within the context of the relationship. West states “the analytic relationship is built upon both analyst and patient being able to remain true to their separate selves and their primitive responses. It is a relationship that is built on this ‘realness,’ and as it engenders the deepest respect of and appreciation for the other” (221). The individual needs to be seen, and know they are being seen, as these feelings of attachment and connection are part of what was ruptured as a result of the trauma.

One of West’s strongest arguments in the book was his interpretation of how the therapeutic use of reassurance often does not work, using the image of a colander, where validation, care, and reassurances of the analyst slip right through unable to be held. These reassuring interpretations often backfire, and are rejected, and the analysand then feels the further shame of not being able to take in what the analyst has to offer. West offers an alternative to reassurance where the inability to hold the validation is processed, and what is looked at is the “language of the defeated ego” where the wound is seen and witnessed. Often, I find that if one is able to sit with a person in their overwhelming anxiety, that anxiety can feel witnessed and seen, and the individual can see it themselves and start to challenge the grasp of the complex. It is a slow re-construction of the dominant personality. West states “ego-functioning cannot be repaired until the uncontained traumatic affective-somatic element is contained through lived understanding” (215).

West’s clinical examples and descriptions of the work are detailed, comprehensive, relatable, and moving, but I found myself wanting some additional foray into the archetypal layer, to unpack the role of the numinous in working with the trauma complex. In my work, I have found that the use of dreams, fantasy, and sand-play to open up the mytho-poetic realm heightens the felt experience of the complex, providing an experience that can aid in the containment of the work. Often I find that the client experiences an overpowering

anxiety when entering this work, and that identifying an image to describe the felt experience enables the analysand to process this material. Such containment can help to lower the anxiety the person is experiencing, allowing them to settle into the work; it allows for some separation from the emotional experience, while simultaneously allowing connection to it. Early in the book, West mentions the song *Blackbird*, referring to the lyrics as a symbol of the possibility for the “broken wings to learn to fly.” The experience of the symbol can provide the possibility for transformation, enabling the analysand to connect with the cut off parts of the self, and to re-connect (or connect for the first time) with a more authentic center.

Into the Darkest Places presents a vast study of the impact of early relational trauma, providing an enormous amount of material, clinical examples and integration of a multiplicity of theories. West brilliantly unpacks and describes ideas and contributions of others and adds his own thoughtful reflections, introspections, and clinical expertise. I found myself at times wanting more depth than breadth, particularly in his discussions of specific clinical issues, each of which could easily be a separate book. That said, I believe West’s book to be an indispensable and vital tome for those who work with early relational trauma.

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