Jung and Kristeva: The Shadow of Auto-immune Disease, The Mask and the Mirror Between Self and Other

“And you shall not mistreat a stranger, nor shall you oppress him”
Exodus 22:20

Through the auto-immune illness the psyche/soma exposes fragility, the cracked and dissociated parts and unmet narcissistic needs. The body reflects the personality. Integration occurs through encountering the dissociations, despair and depression, self and other, ‘as if’ and real, the shadow and the stranger. We are ever more between cultures, straddling different ethnic, racial, political, geographical, and religious groups. The loss of meaning, prolonged longing and suffering, both conscious and unconscious, can contribute to autoimmune illness.

Our era of uncertainty reflects alienation from the body mirrored by the rise in autoimmune disease. As a metaphor and in the composite clinical example presented is a portrait psychologically and physically of unprocessed trauma and mourning, her feeling unloved, abandoned, emotionally paralyzed, displaced and the shadow interned in the body. Linking perspectives bridges the psychological and cultural shadows as Carl Jung and Julia Kristeva, French psychoanalyst, present concepts elucidating the defenses of the self and the self-division expressed through psyche and soma.

There is a stranger within us whom we do not know. As Jung refers to this, it is the shadow with its personal and collective aspects. As Julia Kristeva refers to this it is the foreigner. Both theorists speak about the outer as well as
the inner manifestations of split selves. Kristeva notes what is foreign to one self is actually part of oneself. This is similar to Jung’s idea that the shadow is comprised of the parts resisted, the others awaiting integration, the unconscious where empathy for self and other reside.

Trauma can divide leaving a wake of denial and suppression. This emerges in auto-immune diseases as the body like the psyche is a symbolic communicator. The differentiation between destructive cells and those able to self-protect become confused; like a narcissistic self-hatred arising from the lost connection to self. A pattern of body betrayal signifies the return of the repressed with its under-current of melancholia. Grief and memory reveal the internalized trauma indicating previously unmet narcissistic needs.

Jung stated, “The essential factor is the dissociation of the psyche and how to integrate the dissociation. . . .that a traumatic complex brings about dissociation…that the main therapeutic problem is not abreaction but how to integrate the dissociation…possesses the quality of psychic autonomy…to reintegrate the autonomous complex… by living the traumatic situation over again, once or repeatedly” (1966, pp. 130-132).

Jung addressed the dissociation originating from traumatic experiences showing up in the complex. Kristeva calls this the malady of the soul, the psychosomatic responses of the ‘as if’ personality. She names this the somatic return of an unsymbolized repressed object. What she calls the abject represents a breakdown and has to do with “what disturbs identity, system and order” (1982, p. 4).

Jung said unconscious contents lurk in the body. Each delineates the violation of the natural order that became hidden behind façades and illusions.
The psyche/soma connection and its psychological origins are explored here with a Middle Eastern ‘foreign’ woman living in the Western world, a woman with outer success but internally wracked by increasing self-despair. The dissociation between body and psyche apparent with the development of auto-immune disease opened a descent into the ashes, a nigredo at the core. This replicates the alchemical process that begins with a painful loss of bearings. This is the alchemical dissolution, a massa confusa in order to reform.

Rather than holding the tension between psyche and body, grief and memory, the auto-immune illness indicates the other within ignored, separated, as if a stranger, early wounds put into the shadows. Jung (1968, par. 93) paradoxically said, “The secret is that only that which can destroy itself is truly alive”.

In trauma situations Jungian analyst, Donald Kalshed (1996) described the archetypal defense as an over reacting psychic immune system. The psyche shatters. The defense, as traumatogenic as the original trauma, focuses on survival while attempts to grow and individuate seem dangerous. This protective mechanism preserves rather than permitting the fearful ego to be annihilated altogether. Another Jungian analyst, Michael Fordham said, “There is a need for defenses against what is not-self as essential to health… Directed against foreign bodies, ie. those coming from sources external to the self and internally as auto-immune reactions. [Fordham, explorations into the self, p. 167]

Auto-immunity reflects the fears and annihilation anxiety as the cells that were supposed to protect become defenses going aground. The autoimmune disease symbolizes folding in on itself; the instability of a self
that allows for no otherness and has become insulated and excluding. Jung stated: “It is just as if that particular complex had a body of its own (Jung 1935, par. 138) with a certain amount of its own physiology” (ibid., par. 149).

Herself an outsider, Kristeva expressed sensitivity to the marginalized and oppressed. The unaccepted or abject as Kristeva described has been repulsed and the past unmourned grief and loneliness expressed physically. “Autoimmunity is an illness that affects the ‘self,’ the self as an ‘autos’ that is at once biological, psychological, political and philosophical. Autoimmune disease refers to a seemingly ‘self-inflicted’ physiological illness where a body’s immune defenses – that supposedly protect an organism from harm – turns on and against its own constitutive elements to paradoxically, and suicidally destroy its self through the very act of defending its self” (Derrida, 2005, 123).

Psychic trauma occurs when reality overwhelms with a brutality and speed that exceeds the capacity to experience. The word traumatic is from the Greek referring to a piercing of the skin, a breaking of the bodily envelope. Trauma is the story of a wound that cries out, that addresses us in the attempt to tell a reality that is not otherwise available. Trauma breaks through the protecting shield and overwhelms existing defenses against anxiety in a form that also provides confirmation of those deepest anxieties.

Like with this woman the internal and external emotions are presenting material that she formerly could not decode. What remains untranslatable resides as a foreign body and in her psychic reality. The trauma is now making her feel alien to herself. Defenses of the self, parts of
her personality are mistaken as not-self elements and then attacked leading to the self-destruction in the auto-immune disease. (Kalshed, 1996, p. 101)

Kristeva describes the feeling of falling into pieces that may be caused either by drive-related nonintegraton impeding the cohesion of the self, or by a disintegration accompanied by anxieties and provoking schizoid splitting. Disintegration of the self is a thanatic reaction to a threat that is itself thanatic. (1992, p. 18) Kristeva noted that analysis is a journey into the strangeness of the other and also oneself. (Kristeva, 1994, p. 182)

This woman describes feeling a self that is other than what she knew. In a dream she relates, “I am lost. I find myself on a street with many openings. People on the street do not help. Where do I belong? I wander around increasingly disorganized. Where is the path? I am so upset and panicky. I remind myself that things will work out. It seems I have to go up and down some stairs. This seems familiar. Yes, now I remember I was here before. But this time I have to find the exit”. The dream illustrates the delays, hesitations and the questions that arise without a sense of cohesion. It denotes a feeling of being rudderless, without guidance, direction or connection. However, the dream ends with determination to find the way out.

She represents the predicaments of many in the 21st century, the dislocation, alienation and internal divisions. These are the personal, cultural and historical processes that appear in clinical practice. (Singer and Kimbles, 2004, p. 201) She expresses a gap or lack within, an open wound, a blow to the heart. Her traumatic memories were lurking, commanding enormous energy to maintain the self-deception and denial of emotional needs. Victims of trauma are left to pick up the pieces of a blown apart self and reassemble
them. One of the major casualties of this disintegration is the capacity to think. (Cavalli, 2012, p. 597)

“The more extreme traumatically engendered condition is that in which any capacity to represent self-experience is ruptured: a state of paralysis in which even the blank impress is lost within a void” (Connolly, 2011, p. 5). The traumas of this woman were suffered as an adult but most probably replicated events in childhood that were disremembered. She described childhood with a mother poorly attuned to her, unable to empathize accurately with her internal experiences. Although favored by her father for her mind, for this reason she was envied and beaten by her brother. Alone and telling no one, the feelings were stored in the body and psyche as unassimilated material, compensated by the intellect. Nothing really goes away but there comes a time when the old defenses become unbearable, unchanging and no longer controllable (Singer and Kimbles, 2004, p. 85) as illustrated through the eruption of auto-immune disease.

To comprehend the psychological includes exploring differences, lack of belonging, loneliness and the sense of isolation. (Singer and Kimbles, 2004, p. 125] For this woman, a shadow was cast, covering the repressed vulnerabilities and wounds. Her unconscious memories formed an estranged and melancholic language in her body that now was a crucible for mourning. In instances where the ability to distinguish self from other are impaired, attempts at self-protection may create the painful and damaging conditions that the immune system attempts to avoid in the first place. Illness marks the instability of a secure, safe, immune self, as the body becomes a battleground. Jung commented, “The spirit is the life of the body
seen from within, and the body the outward manifestation of the life of the spirit--the two being really one" 1970, par. 195).

In a dream she is up high and eating a zebra with knife and fork. Others are around and watching. She is upset in the dream because zebra are showy and cannot easily hide. They are black and white and she wants to be grey. Perhaps that is why she needs to eat the zebra. She has to regain self-definition that became lost in inertia and exhaustion, weight gain, inability to go to yoga and general lack of interest. Also, zebra are not native to her country or to the USA, nor are they eaten so she is ingesting the unknown and unusual. The rift in the constitution of her identity, like the black and white of the zebra, marks the separations between internal persecuting critics and a disappearing, ghost-like self. In the dream she is too high up. She became afraid to drive and lacks confidence with others, feelings she did not experience previously. She felt guilt and shame, disallowing self-acceptance or love. Gradually, her body went off.

Kristeva (1994, p. 271) calls this a lost mirage of the past, in its wake leaving absence, ennui and self-loathing. She (1992, p.12-13) describes melancholia, a noncommunicable grief about the sadness, aloneness and a sense of offness with others. Kristeva noted the effect of the other as the catalyst for the return of repressed otherness or the abject, the human part in the self that was ascribed with disgust. In Jungian thought this is comparable to recognizing and accepting the shadow.

In therapy, this woman phrases it as being controlled by a part of her personality that feels strange. She tried to maintain a façade to hide the increasing desperation, ineffectiveness, inertness and malaise. (Kristeva,
1992, p. 17) describes psychoanalysis as an apprenticeship in living beyond despair. It offers not a manic defense, but rather receptivity and a way of endowing despair with meaning. She says abjection is where one is at the border of the condition as a living being. And, it is the sickness at one’s own body. (Kristeva, 1982, p. 3)

This woman’s somatic symptoms were speaking a distress that was early silenced. Writing the adult traumatic events had fueled her as she recounted the tortures endured through political activism. French psychoanalyst Andre Green said, “the work of writing presupposes a wound and a loss, a work of mourning, of which the text is the transformation” (1986, p. 322). She wrote out her social and cultural experiences, transforming the private events into public reflection, putting into words the unbearable nature of an event and the unbearable nature of its survival.

And now this woman, formerly in love with words and the mind had lost her intellect as she struggled to even speak. Jung cautioned about one-sidedness, “We should not pretend to understand the world only by the intellect; we apprehend it just as much by feeling. Therefore, the judgment of the intellect is, at best, only the half of truth, and must, if it be honest, also come to an understanding of its inadequacy” (1960, par. 628).

Transcendent Function

“The psyche accomplishes its transformation through the creation of symbols which are capable of bringing together opposing aspects of the self” (Solomon, 1998, p. 227). In an example of linking the unfamiliar with the familiar, the connection with now and then, the interconnectedness of transference and countertransference, one day this woman noticed a tree in
the yard of my office, reminiscent of her homeland. This and other symbols appeared to fill in the connections she was missing or perhaps beginning to regain to the self. “The symbolic capacity signifies the possibility for integration and the symbolic life through the holding together of the opposites and the creation thereby of a third thing” (Solomon, 2007, p. 159). This is the transcendent function accessing the unconscious and conscious relationships and seeking to repair the splits and cracks in the personality. Jung stated, “the confrontation of the two positions, [the opposites], generates a tension charged with energy and creates a living, third thing… a movement out of the suspension between opposites… a quality of conjoined opposites. So long as these are kept apart—naturally for the purpose of avoiding conflict—they do not function and remain inert” (1960, p. 90).

The self becomes conscious of itself in relation to another (Mattoon, 1985, p. 131). Yet, therapists can lack awareness of what other systemic social traumas mean in respect to their own concepts of individual trauma. Theory can be used as a defense to assume recognition or slot the information of the client into something familiar to them. The therapeutic encounter puts us face to face with vulnerability and difference as well as similarities. Replicating the fear and us-them feelings like in auto-immunity, this woman questioned in therapy if she would be met with denigration or misunderstanding due to her Middle Eastern background. This anticipated inclusion/exclusion divide paralleled the intrapersonal estrangement and sense of otherness in the psychological and physical realms.

Both therapist and client were in the shadows, attempting to open the subjective material and find the expressive symbols. Both are witness to the bad objects resurrected as layer after layer of the emotions around the
neglected feelings became unwrapped. Psychologically and culturally the injury in separation from country, home and loved ones was addressed in dreams, relationships and the psychological treatment.

   She registered feeling ‘foreign’, displaced, disparaged and set apart. This is like the hidden personality parts that were held in shame. The aim is not to eliminate otherness, but to integrate through the tension in the opposites. The Jungian perspective supports soul repair through addressing the multi-cultural psyche. “Change occurs only perilously…there are positive forces that seek to move the psyche into the future, there are powerful retrograde forces that seek to prevent such movement. These…often create the experience of a shared area of tumult and turmoil that requires engagement from both parties in the analytic consulting room” (Solomon, 2007, p. 142).

   The psychological bridges culture and time creating the links for self and other in the analytic relationship. As the personality seeks self-regulation, the analytic process collects the dissociated fragments and brings them into relationship. Jung commented about the propensity of the psyche to heal through dialectical procedures. “A psychological theory…must base itself on opposition; for without this it could only re-establish a neurotically unbalanced psyche. There is no balance, no system of self-regulation, without opposition” (Jung, 1972, par. 92).

   Kristeva refers to the notion of alienation, or splitting off, of the self that comes about as the result of the repression of feelings. She comments (Kristeva, 1994, p. 267) that the secret and unknown wound can drive one to wander. She says that when instinct turns self-destructive, the ego, from early in life, lacks cohesion and falls into bits (1994, p. 19). This woman wrote in her journal: “This morning I once again glanced over what I had
written a few years ago and it made me shiver. Something in this piece terrifies me. I feel it may open up some venues to the discovery of my own self-selves”.

The division from within is based on the psyche’s rigid defenses that were deemed necessary early in life for protecting the self from dissolution (Solomon, 1998, p. 229). A sacrifice would have to be made to give up her omnipotent self-reliance. Kristeva said, “And when we flee from or struggle against the foreigner, we are fighting our unconscious” (1994, p. 191). This idea is preceded by Jung, who recognized that the shadow, the parts that we cast off as unwanted in order to fit into this world, is actually the Other (Stevens, 1990). As Jung said, “we carry our past with us, to wit, the primitive and inferior man with his desires and emotions, and it is only with an enormous effort that we can detach ourselves from this burden…we invariably have to deal with a considerably intensified shadow. And if such a person wants to be cured it is necessary to find a way in which his conscious personality and his shadow can live together. (“Answer to Job” (1969, p.1). Further he said, “The body is very often the personification of this shadow of the ego” (Jung, 1970, p. 23).

Clandestine traumatic knowledge not only haunts, but also strikes back and shatters the protective fictions of infallibility. This woman had been absent to her emotional and physical self with sole focus on the mind. Now, subsumed with destructive, obsessive drives and self-persecutory impulses she described self-attacks with food and the oppressive weight of mindless watching television, often without motive to live. She dreamt of a child dying whom she is trying to save and cannot. Unable to revive herself, she verbalized an impoverishment of soul.
Negating and rejecting parts of herself, she becomes unseen and encounters a sense of strangeness. Kristeva speaks about the notion of the stranger, the foreigner, outsider or person who feels alien in a society not their own—as well as the notion of strangeness within the self, or a person's deep sense of being. She suggests (1994, p. 3) that we touch this otherness, escape its hatred and burden though accepting the differences it implies. Another symbol occurs as this woman notices a tree in the yard outside the therapy office and describes one branch reaching out and leaning on the other but it is not burdened as the connection gives support.

This oblique comment was about the analytical relationship showing a corrective experience, a kind of repair to the broken connections. In relation to this, Jungian analyst Jean Knox discusses the reflective function in the analytic process. She says being an analyst requires us constantly to focus on the subjective, to fine-tune to the intuitive, poetic, symbolic narrative that emerges in an analytic session (2004, p13). This requires the therapist’s capacity to resonate with the multiple and sometimes contradictory threads of the patient's narrative in the co-construction of a symbolic space. The analyst's constant search for unconscious meaning in the patient's communications is an agent of change. Jung contended both parties in analytic work are changed as self and other unite in this many fold process (1933, p. 49). From an ill-functioning self that learned to destroy integration can occur through bridging self and other, ‘as if’ and real, the shadow and the stranger. This includes the formerly untouched, unacceptable and unknown within both therapist and client.

The process of individuation challenges bringing with it chaos, uncertainty and anxiety. Working with the shadow brings engagement with the foreign, the repressed and the projected material that formerly separated
self from other. “Relationship to the self is at once relationship to our fellow man, and no one can be related to the latter until he is related to himself” (Jung, 1966, par. 445).

“that to approach the stranger
is to invite the unexpected, release a new force

O let the genie out of the bottle,

It is to start a train of events…” The Cocktail Party by T.S. Eliot

“In many cases in psychiatry, the patient who comes to us has a story that is not told, and which as a rule no one knows of. To my mind, therapy only really begins after the investigation of that wholly personal story. It is the patient's secret, the rock against which he is shattered. If I know his secret story, I have a key to the treatment. The doctor's task is to find out how to gain that knowledge . . . In therapy the problem is always the whole person, never the symptom alone” (Jung, MDR,p. 116).
References


