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Going Out Of Your Mind: The Growth of Self Through Subject-Object Differentiation

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Abstract
This study assessed the current level of subject-object differentiation according to Robert Kegan’s theory of development of individuals by using the subject-object interview (Kegan, 1982; Lahey, L., Souvaine, E., Kegan, R., Goodman, R., & Felix, S., 1988). In addition to an assessment of subject-object development, the events that are perceived to be salient to the participants regarding what spurred their development were assessed as well. Ten participants were interviewed. Individuals were between the ages of 25 and 63 and all indicated their ethnicity as European American/European. Eight females and two males participated in the study. The findings of this study suggest that a combination of both crisis and support facilitate self growth. Additionally, the results indicate that individuals at differing levels of development perceive and experience support differently. Implications of these finds are discussed as they relate to current developmental theories, psychoanalytic theories, and the practice of psychotherapy.
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TABLE OF CONTENTS

Page

ABSTRACT ........................................................................................................ ii

ACKNOWLEDGMENTS .................................................................................. iii

INTRODUCTION ......................................................................................... 1

   Subject-Object Theory ........................................................................ 2

   Stage of Consciousness .................................................................. 6

   Movement Through Development .............................................. 11

   Subject-Object Interview .......................................................... 12

   The Present Study ....................................................................... 13

Method .................................................................................................... 13

   Participants.................................................................................. 13

   Measures ................................................................................. 13

   Procedure ............................................................................... 14

   Qualitative Analysis .................................................................. 14

Results .................................................................................................... 15

Discussion ............................................................................................. 23

   Crisis, Support, and Growth Through Development .................. 24

   Therapeutic Implications and Psychoanalytic Contributions ....... 32

   Conclusion................................................................................. 36

REFERENCES .......................................................................................... 38

APPENDICES

   A.  DEMOGRAPHIC QUESTIONNAIRE ............................................. 40

   B.  SUBJECT-OBJECT INTERVIEW ............................................. 41
C. LIFE EVENT QUESTION.......................................................... 42
D. INFORMED CONSENT .......................................................... 43
THE GROWTH OF SELF

Going Out of Your Mind: The Growth of Self through Subject-Object Differentiation

Perhaps as old as humanity itself is the interest in what it is to be human. Philosophers, novelist, poets, and scientist have all grappled with this question: What makes us who we are? The field of psychology is a contender in this pursuit as well. From Freud on, thinkers have attempted to trace and describe the development of personhood, of personality, the ways and whys of how people are in the world. This knowledge is useful not only because it contributes to our general understanding of human functioning but with it comes the ability to intervene when people are having trouble; it is relevant to anyone who assists others in shaping their minds, from educators to clinical psychologists.

Many theories of personality development have been posited: Freud’s psychosexual stages, Erickson’s psychosocial stages, Object Relations ideas proposed by winnicott and others, as well as contributions from the schools of Ego and Self psychology. Almost all describe ways in which people filter out or attend to the outside world or environment; or in other words, the ways in which people construct their experience and make meaning out of it. Some theories suggest this activity is only a part of one’s personality, others suggest it is the very ground of personality (Kegan, 1982).

Robert Kegan (1979; 1982; 1994) has proposed a theory of personality development that is grand in scale. He proposes a new metapsychology, the aim of which is to at once attend to the observations of psychoanalytic theories regarding affect and personality functioning, cognitive theories related to the process of thought and its development, and phenomenological perspectives that focus on subjective
experience. It is not an integration of theories; rather, it suggests what the foundation might be that gives rise to them. It does not counter much of what previous theorists have observed; rather, it is an elegant description of what might be prior to them. This powerful assertion warrants these ideas consideration alone. At the very least, Kegan’s ideas provoke a different way of viewing the activity of being human; beyond that, it is possible that these ideas touch on a deep truth of what it is to be human and that the scope of their affects will be far reaching from how psychologists conceptualize personality to clinical practice.

**Subject-object Theory**

Kegan (1982) suggests that the very activity of being human is making meaning. And it is this process that is personality, not mental structures or entities. He terms his ideas regarding how this process happens and unfolds over the lifespan as ‘constructive developmental’ (‘constructive’ refers to a person’s active participation in shaping his or her perception of the environment and ‘developmental’ refers to how this process changes over time). The essence of this process is the way in which an organism differentiates itself from its environment; the way in which people construct the boundary separating ‘I’ from ‘you’, self from other, and subject from object. Subject refers to what a person is embedded in, that which is unobservable, the lens through which one sees but one cannot see the lens itself. Object refers to what one can ‘hold’ and observe, reflect upon, and be aware of. This process of differentiation is the activity of evolution, of assimilation and accommodation, of adaptation, to which all organisms, biologically speaking, are involved in.
Kegan (1979;1982) uses a Piagetian framework when describing this process of evolution, which has largely been neglected in personality theory and clinical practice. Piaget described a series of stages in how a child’s logical thought life evolves. The progression of these stages has been observed to unfold in a uniform way throughout childhood with surprising regularity. These stages determine how the child perceives and organize the world and these patterns of perception and organization are observed as children progress through Piaget’s stages. Biological studies have shown that over the course of a species’ evolution there are long periods of stability punctuated by periods of instability, change, and growth; the same is true of Piaget’s stages. They can be described as an evolutionary truce; at once an achievement and constraint, in order to find equilibrium between one’s self and one’s environment. This is neither a maturationalist position nor environmentalist position; Piaget describes a conversation that is taking place between biology and environment.

This process of growth is one of decentration (or recentration); what once was the subject or center of a child’s experience ‘moves over’ to become object and a new center, or subject, is formed. What was formerly the foundation of one’s experience is relativized and, not left behind, but, eventually reintegrated into a new foundation. The preoperational child cannot tell that there is the same amount of water in two different shaped containers because he is his perceptions; however his perceptions may change, that is how the world is at that moment. The concrete operational child can understand that it is the same amount of water in two different shaped containers despite differing water levels because her perceptions have ‘moved over’ to become object. The child
knows that changing perceptions does not necessarily mean a changing world; she has perceptions but is not had by them.

Piaget’s theory describes the processes of assimilation and accommodation (Kegan, 1982). Assimilation refers to the process by which information is altered to fit or be congruent with the current system. Accommodation refers to the process by which the system is altered due to its inability to account for incoming information. Organisms are confronted with the increasing complexity of their environments and people are no different. Assimilation and accommodation are the basic strategies employed to cope with and organize these complexities.

Kegan (1979;1982) describes Piaget’s ideas as an intellectual Trojan horse. Typically Piaget’s theory is viewed only in terms of cognitive development. Kegan, however, suggests that, perhaps Piaget stumbled upon something deeper. Perhaps the point of everything that Piaget discovered is not simply about cognitive development but about the very act of subject-object differentiation, about the constructive meaning making activity that all humans engage in. If this were true, that the activity of the mind is negotiating between subject-object balances throughout a person’s life, then this activity underlies not only the areas that Piaget described, but others as well: personality formation and emotional experience. Thus Kegan’s constructive developmental position can also be considered Neo-Piagetian.

This process that gives rise to mental structures, only to have them reconstructed by this same process is the generator of both thought and feeling (Kegan, Noam, Rogers, 1982). This process that is the motion of cognitive development is then the same process that is the motion of intrapsychic and interpersonal development. The
term object not only applies to things ‘out there’ (containers of water or people) but also internal experiences that people do not identify as constituting who they are (impulses, perceptions, emotions). The balance of subject and object, which changes as people develop, is the balance between what is ‘me’ and ‘not me’, both regarding actual other people, parts of the internal worlds of other people, and parts of internal experiences that people experience as ‘not me’. It is this ever changing dance that can be considered the ground of personality development (Kegan, 1979; 1982).

The psychoanalytic schools of Ego psychology, Object Relations, and Self psychology can all be thought of as describing parts of the subject-object differentiation process (Kegan, 1982). Ego psychology, broadly speaking, refers to the activity of managing reality. It can be considered both as a defensive and adaptive activity, the primary function of which is to reduce anxiety and enable optimal functioning in relation to the environment one finds oneself in; or from a constructive developmental position, it is active in constructing reality (or making meaning) in the best possible way given the environment and the capabilities of one’s mind currently. Object Relations theorists suggest that that there is an innate drive to connect with others in and of itself, rather than seeking an object to gratify an internal need. Thus Ego activity is fundamentally object relating (Kegan, 1979).

In the same way the Piaget’s stages describe decentralization and the ‘moving over’ of subject to object in a cognitive way, Kegan’s stages unveil a similar process happening in a person’s intrapsychic and interpersonal life (Kegan, 1982). It is this process that underlies our emotions and structures the way in which we think. Piaget’s conceptions of assimilation and accommodation apply as well. Assimilation is what
psychoanalytic theorists term ‘defense’. Some view this concept as pejorative; thinking it implies people are intentionally obstinate or naïve. The defensive mechanisms, however, are the very structures that make a system a system, maintaining the evolutionary truce that was hard fought and finally won and achieved. Yet, they are also a limit and constraint. Without assimilative or defensive processes people would never find security or stability; with overly rigid defenses or inadequate defenses to cope with the current demands of a given environment they become a liability. It then becomes time for a new process to occur: accommodation. The adaptive growth that is accommodation has a companion as well: pain. Accommodation involves the upheaval of the very presuppositions one has been living life by. It is literally the loss of a part of one’s self that brings fear, anxiety, and uncertainty. This process, when expanded to include the entirety of one’s being, becomes not a cold, clinical process, but one of hope and doubt, joy and sorrow, finding and losing, and growth and pain; it is being human.

Stages of Consciousness

Kegan (1979;1982; 1994), like Piaget, views development as a process through several definable stages. He describes 5 ego stages that are qualitatively different subject-object differentiation truces or meaning making systems that people experience throughout the lifespan that shape both the ways in which people think and feel. Emotion is the phenomenological experience of this process and these truces.

Included with the 5 stages is a stage 0 or the incorporative self (Kegan, 1982). This describes the world of a newborn child. It is an objectless world, where everything is taken as an extension of the infant. The baby has not yet gained object permanence so once something is out of sight, it is out of existence. It is a totally assimilative
position; there is no other, or object, or world, only self. As the infant emerges from this total embeddedness, and has experiences that require others to fulfill the child’s needs, an object world develops, usually within the first 18 months. It is the first accommodation, an effort to resolve the discrepancy inherent in the meaning making system of the child and the environment.

**Stage 1- The Impulsive Self.**

As the child realizes that his or her reflexes are amenable to manipulation (choosing to alleviate hunger or waste) they become object. The new subject is how one coordinates these reflexes through perceptions and impulses, typically around the second year of age. This stage is characterized by emotional lability; the child is subject to his or her perceptions (Piaget’s preoperational stage) and impulses. Children at this age have little impulse control because they are embeddedness in them. Not expressing an impulse or a perception would be tantamount to denying who one is, at this stage of development. Also, only one impulse or perception can be held or experienced at a time (because there is no self to mediate them yet), preventing the experience of ambivalence and making internal conflict intolerable, the result of which manifests itself in a characteristic tantrum.

**Stage 2- The Imperial Self.**

The concrete operational child, around 5-7 years old, begins to conserve the physical world, that is: it is not the mountain that becomes larger or smaller as the viewing distance changes, only one’s perception of it does. Perceptions and impulses become the object of this stage and just as the physical world is conserved so does the self. No longer is the child subject to and constituted by ever changing impulses. There
is now an enduring self that remains constant through these changes. A self concept emerges, an enduring disposition, and the child is not vulnerable to the random happenings of the environment and her interactions with it. Now the child has power and control over his impulses, which brings with it a sense of stability and freedom. It is this integrity that the child attempts to preserve, preventing subjugation from with out, in an effort to ensure the child’s wishes or needs are met. These enduring needs and wishes, not their content but the act of having them, are the new subjectivity. The preservation of these needs is achieved through manipulating and controlling others to ensure that they are met and in order to avoid the negative consequence of not getting what one wants.

The boundary of this truce is its conceptualization of others and notably the absence of guilt. The person in this stage projects his embeddedness in her needs on others and views others as need fulfilling creatures just as herself, with possibly competing needs. The concern, however, is not on how her actions will affect the other, it is on how the other’s actions will affect her. Guilt is not experienced when lying or betraying others, only anxiety. People who are in this stage do not have the ability to internalize, or imaginatively hold, another’s point of view and integrate or direct their own needs with this internalized point of view in mind. The lack of a shared reality makes this balance imperial.

**Stage 3- The Interpersonal Self.**

The emergence from the Imperial self involves transitioning from ‘being one’s needs’ to ‘having needs’ and the ability to coordinate these needs with others’. This is commonly called mutuality or reciprocity. This occurs when a person is able to do just
what the Imperial person could not, hold another’s perspective or internalize others. With this comes the recognition of subjectivity and inner feeling states as one’s needs become subordinate and objectified. Feelings, at this stage, are co-constructed using the others point of view; the self becomes conversational. It no longer must manipulate and be vigilant to discern what others are thinking, this process has moved from external to internal. The new self that is now constructed is embedded in relationships or shared reality. Relationships are viewed as the source of one’s feelings; it is this fusion (two becoming one) that constitutes the self.

This balance is not intimate, for there are no selves to share. Its limit is the lack of a self to mediate the realities it shares; the self is these realities. People in this stage may find it difficult to engage and mediate between two conflicting relational systems, or shared realities, that they are a part of. Damaging a relationship is damage to the self. Anger is an enemy of this truce, as it is assumed that it will break the self-generative bond with the other.

Stage 4- The Institutional Self.

The integration of the parts of the self that were thought of to reside in the other during the interpersonal stage, back into a functioning, whole self system marks the emergence of the Institutional self. Similar to the previous stages, the former subject becomes object. For this stage: ‘I am my relationships’ becomes ‘I have relationships’. The emotional conflicts that were formerly co-constructed are now owned under a psychic institution or system. The institutional person recognizes that he is self-authored, according to an internal organization for which the other is not responsible for generating. The self is now the administrator of this organization and can now regulate
how one interacts with others based on this system, which is the new subject. The person in this balance does not seek to maintain relationships at all costs (for the self is no longer co-constructed) but seeks to maintain a smoothly running institution. The self is not captive to shared realities; its emotional life becomes more internally controlled and regulated. This does not mean, however, that relationships are lost during this truce; the creation of an integrated system allows one to find others, not require them for the self’s construction.

The constraint of this stage is that the system is self-perpetuating, maintained for its own sake. Therefore it is inherently ideological. The self is this system, its rules and operations are not questioned, for this is precisely what the institutional person cannot do; he cannot bring his system before a greater truth or principle to justify the system itself.

**Stage 5- The Interindividual Self.**

When one’s organization is derived from her meaning and her meaning is not derived from her organization, she can be said to be in the interindividual stage. The organization or system becomes object during this balance; there is a self which the organization can be brought before and considered. The self is no longer the institution; the self stands apart with the ability mediate the institution. Because one’s organization is now perceived as relative and can be coordinated, the altering of behavior or ‘rules’ which govern the institution is acceptable and non-threatening to the self, as it was in the fourth stage. During stage 3 the source of emotional conflict is constructed as external, during stage 4 emotional conflict is internalized and recognized but not tolerable as it is a threat to the efficiency of the system (or self), stage 5 tolerates
emotional conflict by seeing and holding multiple internal ‘institutions’ that are the conflicts source. This breaking open, the loosening of the institution’s rigidity, creates the capacity to be intimate with one’s self. And from this new position the opportunity for intimacy with others is created for now there is a self to share. The institution’s existence is no longer ultimate; its revision is possible which allows one to ‘give one’s self up to another’ and to interact with the institutions of others. This is not the fusion of stage 3 but the commingling of separate, malleable selves that creates connection out of stage 4’s isolation.

**Movement Through Development**

Kegan provides a detailed and rich phenomenological portrait of the progression through his theory. Yet the actual process, beyond descriptive narratives of the stages and the appeal to biology, is largely a mystery. Little is known regarding what allows people to progress through these stages, what stimulates such growth, and what determines if a situation or event is the right ‘kind’ of event to promote development (Pfaffenberger, 2005).

It is widely assumed that the increasing complexity of life stimulates developmental growth (Kegan 1994; Kunnen & Bosma, 2000; O’Connor & Wolfe, 1991). As described earlier, this involves the processes of assimilation (defense), accommodation, or withdrawal. As discrepancies mount between ones current form of meaning making and one’s current environment, only several options remain for the individual in order to account for the increasing anomalies. This however is a general statement about the process of growth. What specifically are the anomalies and what causes them to be anomalies in the first place?
O’Connor and Wolf (1991) provide a framework for the process that stimulates growth, the fulcrum of which is crisis combined with increasing anxiety. They also add that the scope of transition, or how much of one’s life is affected by an event, is a factor as well (they claim at least a moderate scope is required for growth). According to Kunnen & Bosma (2000), support is essential for growth but environments with high support often lead to longer periods of transition. They go on to state that stagnated growth can occur with a higher frequency of problems in many areas of one’s life and the optimal growth occurs with a significant rate of moderate difficulties.

However what is left unexplained is why so few adults reach higher stages of development according to certain theories (Pfaffengerber, 2005). There are various trajectories that a developmental path of a person can take. Different circumstances can be imagined in which a person has found a relatively stable environment which rarely facilitates growth or perhaps a person faces crises but habitually withdrawals, again, preventing growth (Kunnen & Bosma, 2000). The specifics of what mediates this process, how dispositional characteristics of people or familial history interact to create these trajectories has eluded explication.

**The Subject-Object Interview**

The subject-object interview was created to assess the stages developed by Kegan (Lahey, Souvaine, Kegan, Goodman, Felix, 1988). By assessing salient, affective events experienced by the interviewee it is assumed that their developmental level can be discerned by attending to how he or she constructs and describes the boundary between self and other. The specific stages are assessed by the interview as well as transitional periods that are experienced between the full stages.
The Present Study

This study will assess the current level of subject-object differentiation of individuals by using the subject-object interview. Preliminary research indicates that one half to two thirds of adults have yet to reach a full stage 4 consciousnesses, the institutional stage (Kegan, 1994). In addition to an assessment of subject-object development, the events that are perceived to be salient to the participants regarding what spurred their development will be assessed as well. Ideally, having assessed both the level of development and these self-reported significant events, insight will be gained as to what specifically facilitates growth, how it occurs, and what environments support it.

Method

Participants

Participants were 10 graduate students and members of the community. Participants were selected using a sample of convenience. An incentive was be offered to the participants in the form of a five dollar gift card to a coffee shop. Study participants were be at least 18 years of age with no further cutoff.

Measures

All study participants completed three measures, a demographic questionnaire, Kegan’s Subject-Object Interview, and a series of questions designed by the author of the study that address factors potentially involved in promoting movement between stages. Each are detailed below.
Demographics (See Appendix A).

Study participants will provide demographic information including age, gender, occupation, and ethnicity.

Kegan’s Subject-Object Interview (See Appendix B).

The Kegan Subject-Object Interview is a semi-structured interview assessing the level of stage progression according to Kegan’s subject-object theory (Kegan, 1979; Lahey, Souvaine, Kegan, Goodman, Felix, 1988).

Original Questions (See Appendix C).

During the interview, questions will be incorporated to assess any significant life events that are perceived by the participant to have contributed to their ego development. Furthermore, perceived support felt during significant life events (both in terms of number of supporting figures and perceived amount of global support felt) and severity of life events experienced will be assessed on a 7-point Likert scale.

Procedure

The data was gathered using an interview format and a short demographic questionnaire. The interview was approximately two hours in length and recorded for transcription purposes. Participants were presented with and asked to sign a statement of consent informing them of the nature of the study and their rights as participants. When possible, the participants completed the demographic questionnaire prior to the interview.

Qualitative analyses

Recorded interviews were assessed using the protocols to identify the current stage of subject-object differentiation. Significant life events (i.e., those that are
deemed by the participant as contributing to their ego development) were also assessed during the interview. Consistent responses across participants and themes in the qualitative nature of these responses were determined.

**Results**

The present study contained eight females and two males, between the ages of 25 and 63. Nine participants identified themselves as European American and one identified as a French citizen living in the United States. After analysis of the subject-object interview, 7 were found to be in transition between stages three and four, one was found to be in fully in stage four, and one was found to be in transition between stages four and five.

According to Subject-Object theory an individual may be found to be fully in a give stage (i.e. stage 3) or transitioning between stages. The nomenclature describing each possible combination is as follows, starting from one stage and progressing to the next: X, X(Y), X/Y, Y/X, Y(X), Y (i.e. stage 3, 3(4), 3/4, etc.). An individual found to be functioning fully within a given stage can be assumed to perceive him or her self and others in terms of the values and inherent logic of that stage. During transitional periods, an individual will exhibit characteristics of two stages operating simultaneously with varying emphasis depending on the developmental progression between the two stages. An X(Y) transitional balance suggests that stage X is dominant and that an individual utilizes characteristics of stage Y primarily to support the operation of stage X. An X/Y transitional balance suggests that the two stages are operating and although stage X continues to be dominant, the individual is beginning to reach beyond this stage and utilize the psycho-logic pertaining to stage Y in and of itself. A Y/X transitional
balance suggests that, in contrast to the previous transitional periods, stage Y is beginning to predominate in the way an individual views him or her self and others, but ‘slips back’ into stage X functioning. Finally, a Y(X) transitional balance suggests that an individual is consistently using the psycho-logic of stage Y in her or his dealings with the world but is consciously wary of, and struggles against, falling back into stage X functioning.

The following will summarize the developmental level of each participant as well as what each participant perceived as facilitating their development and how they experience support from others.

**Subject 1**

Subject 1 identified as a 27 year old female and was found to be in a 4/3 transitional stage. She spoke in terms of her own values, feelings, opinions, and ideas, indicating that she maintain them apart from the approval or encouragement of others, suggesting a stage four orientation. However, when discussing conflicts with significant others she described being unsure of how to maintain her own values which were different from those important to her and assumed she would be responsible for the emotional pain she may cause others by acting on her own value, suggesting a stage 3 orientation. Her predominate perspective appeared to be that of stage 4, however she seemed to ‘slip back’ into stage 3 ways of relating in certain situations.

She indicated that divorcing her husband contributed to her viewing her self and others in a different way. Previously she stated she was conflict avoidant and did not have a sense of self apart from her relationship. She also stated her involvement in therapy contributed to her growth. She stated that therapy and divorce allowed her to
realize she ‘didn’t need anyone to validate (her) life.’ She stated that divorce was the ‘pivot’ of her worldview and stated that, on a scale of intensity from 1-7 (1 being not intense, 7 being most intense), its intensity was a 7. She said that the combined affect of these experiences was ‘self-awareness.’ She described having 3 ‘very supportive people’ along with 20 or so others as ‘back up’ during this time, adding that, on a scale of perceived support from 1-7 (1 being not supportive, 7 being most supportive), she experienced them as a 7. She reported feeling supported when others ‘Listened, asked questions that helped to clarify (her) feelings, and accepted and validated her experience.’

**Subject 2**

Subject 2 identified as a 32 year old female and was found to be in a 2(3) transitional stage. Subject 2 tended to view others as objects to be dealt with or overcome in order to meet her needs consistent with a stage 2 orientation. She stated that she valued knowing what other’s where thinking in order to know how she should act in order to be successful. She also assumed others were intentionally attempting to prevent her from reaching her goals. She disclosed these feelings in relation to being on academic probation within her educational program. However, she consistently maintained an outward orientation, feeling impinged on and manipulated, with little awareness of her own contributions to her situation, saying other were ‘out to destroy (her).’ She showed a minimal ability to conceptualize the mind of others and discern what they may be thinking and feeling without being explicitly told. When she did exhibit this ability it was utilized to ensure her own needs were met, suggesting the use of stage 3 perspective to bolster stage 2 operations. She stated that she had never felt or thought about herself
or others in a different way than she does now. She said that she felt support from her mother and father, and indicated the level of support a 6 out of 7. She reported feeling support though a ‘hug’ or verbal encouragement.

**Subject 3**

Subject 3 identified as a 26 year old female and was found to be in a 4(3) transitional stage. She spoke consistently about achieving her own goal, valuing her independence, and desire to be self-motivated. She spoke of resenting the need to ‘take care’ of a previous boyfriend and desiring him to be more self-motivated, indicating the presence of stage 4 thinking and feeling. She also spoke about valuing the affirmation of others in her pursuits, in order to confirm or approve of her own desires, most likely the vestiges of the stage 3 system used to support her emerging stage 4 orientation.

She indicated the ending of her relationship with her previous boyfriend as a turning point in the way she viewed herself and others. She stated that she ‘wondered if (she) was good enough’ as a consequence and spoke about feeling lost and needing to ‘find herself.’ She stated that the intensity of this event was a 6 out of 7. She stated that the main way she feels support is by supporting herself by going to the gym or by being introspective. She stated that found observing her own functioning as well as others’ helpful in understanding her own relational patterns. She also said that she feels supported by 3 or 4 close friends when they encourage or affirm her.

**Subject 4**

Subject 4 identified as a 28 year old male and was found to be in stage 3. He tended to have a self-concept organized around those he felt responsible for. He spoke of
choosing his career as a way to maintain a connection to his family. He said he feared losing that connection due to the security and consistency that it provided him. He explained his decisions and values in relational terms, valuing the approval and support of his family, placing him within a stage 3 orientation. He stated that he had not experienced anything overly challenging or impactful in his life that would change the way he viewed himself and others.

He considered most supported by his family, rating their support a 6 out of 7. He said he felt most supported by being able to ‘vent’, being ‘listened to’, and by ‘someone doing what is best for (him).’ When asked how his parents know what he needs he replied, ‘I have no idea…magic?’ He added he knows he is an adult because he wishes he was ‘a kid.’

Subject 5

Subject 5 identified as a 27 year old female and was found to be in a 4/3 transitional stage. She spoke about her attempts to be self-directed and viewing her work as evidence of her worth and value. Some of her responses indicated her desire to avoid being pulled into relationships that she would perceive as oppressive and wishing to function independently, suggesting the presence of a stage 4 perspective. However, at times she would discuss her desire to act in ways that would gain her approval from others or alternatively fear their rejection, suggest the presence of stage 3 operations as well.

She stated that going to college changed the way she viewed herself and others, saying the intensity of the experience was a 6 out of 7. She said that losing the innate support of her family not only caused her to value connection with others but also
caused her to become introspective due to the amount of time that she was alone. She said she felt supported by 15 people during this time. She indicated ‘availability, accessibility, and validation’ as supportive as well as ‘listening.’

**Subject 6**

Subject 6 identified as a 26 year old female and was found to be in a 4(3) transitional stage. She spoke of her own values regarding where she would like to live and the activities she enjoyed doing. She also discussed being aware of her own emotional experience and citing this as the determining factor in her chosen values. Her preference for independent functioning suggests stage 4 operations. She also expressed feeling guilty about and responsible for her and her husband's living situation. She expressed wishing she had more connections with others but said she felt conflicted regard being close with others who were different from her. She also said she did not ‘like when (she) hurt others.’ Her guilt and her hesitancy regarding connection with others suggest the operation of stage 3 functioning along with her attempt to avoid being in stage 3 attachments.

She said she could not remember a time when she thought differently. She stated that she felt supported by her husband, saying her perceived support was a 6 out of 7. She described feeling supported by receiving honest feedback ‘in order to know what the problem is to deal with it.’

**Subject 7**

Subject 7 identified as a 23 year old female and was found to be in a 4/3 transitional stage. She indicated her desire to live independently, particularly financially so, so as to not need to rely on others. She spoke of her values concerning her career and hobbies
as well, suggesting stage 4 functioning. She also stated her need for connection and feelings of loneliness in its absence, but added that she sometimes felt getting to know others as ‘work,’ possibly indicating her slipping back into stage 3 functioning while stage 4 operations are becoming more dominant.

She indicated the ending of a long term relationship as precipitating a shift in her view of herself and others. She said that having viewed her mother in abusive relationships and her not wanting ‘to be a push over’ contributed to her no longer wanting to make her boyfriend’s happiness paramount, saying she began to value her own happiness more. She stated the intensity of the break up was a 6 or 7 out of 7. She stated that she felt supported by approximately 100 people during this time due to her being in a sorority and that this perceived support was a 6 out of 7. She said she feels support by others when they ‘value (her) happiness, tell (her) they love (her), tell (her) to take care of herself, and believe in (her).

Subject 8
Subject 8 identified as a 25 year old female and was found to be in a 4/3 transitional stage. She discussed valuing her own self-efficiency and independence. She reported exploring her own interests and hobbies based on her own personal judgments and appraising her worth according to her own estimation, indicating a stage 4 outlook. She also discussed her fear of others’ judgments about her, questioned her ability to function autonomously, and said it was ‘sad’ that her self-worth was dependant on others at times. This suggests a slipping back into a waning stage 3 view of herself and others, evidenced by her emerging ability to observe and take perspective on these views.
She stated that divorcing her husband influenced a shift in her orientation toward herself and others. She stated that discontinuing her anxiolytic medication, realizing she was unhappy in her marriage, beginning therapy, and not wanting to be dependant like her mother contributed to her shift in thinking and desire to 'build her own identity.' She stated the intensity of this time was a 6 out of 7. She reported during this time feeling supported by 6 people and she felt their supportiveness was a 7 out of 7. She said that she experiences support when others 'listen and ask about (her),' by 'others being genuinely interesting in (her),' and when they 'accept what (she) has to say and are interested in (her).'

**Subject 9**

Subject 9 identified as a 63 year old female and was found to be in a 4/5 transitional stage. She discussed primarily a conflict with a co-worker focusing her own angry reaction. She articulated her self-determined values and the 'code' by which she lives and how her co-worker differs from her. This ability suggests a fully functioning stage 4 perspective. She also discussed her emerging sense that there may be 'other parts' of her that are reacting to her co-worker, causing her to feel threatened and angry. She also discussed her desire to have connections with others that provide the opportunity for sharing and acceptance. Her ability to be aware of 'other parts' or additional systems operating within her, influencing her affect and behavior, as well as the desire for mutual relationships based on vulnerability suggests the emergence of stage 5 operations.

She stated that a shift in her perspective regarding herself and others occurred when she turned 60 and became acutely aware of her own mortality. She stated that
thinking about death helped her recognize her ‘self’s limitations.’ She stated the intensity of this realization was a 6 out of 7. She stated that she mostly supports herself, although indicated that her sister was helpful to her at times. She stated that she would value more support from others and would experience support as ‘not advice or help but hearing and sharing the experiences of others.’

**Subject 10**

Subject 10 identified as a 28 year old male and was found to be in stage 4 stage. He discussed his personal values and views, mainly from a global and political perspective. He rarely mentioned relationships influencing his functioning and spoke of his relationship with his wife as ‘complementary’. He added he feels shame when he does not meet his own ideals. This seems to indicate a fully functioning stage 4 perspective. He stated that he has always had these perspectives and has been self-directed, not relying on others for support.

**Discussion**

The responses of those who participated in this study shed light on the complex notion that people continue to evolve throughout their lifespan in their affective experience of self and other. This data has relevance not only to our general knowledge regarding human development but also can be used to inform those in the mental health professions of their clients’ experience, their primary struggles, and how they may be reached. The following will consider Kegan’s developmental theory and its implications regarding the participants, what these implications may mean, how Kegan’s theory and his findings relate to contemporary psychoanalytic ideas, and the how these findings may inform the practice of psychotherapy.
Crisis, Support, and Growth Through Development

Kegan’s subject-object theory is primarily a theory regarding psychological boundaries: those that people maintain between themselves and others, as well as the internal boundaries that they use to divide their sense of self. The evolution through these stages can be considered the movement of these boundaries and a re-organization in the way in which a person perceives him or her self and others. Kegan suggests that the psychological emphasis of each stage, and consequently the organizing factor in the psychological motivation of a person, alternates between the desire to achieve and maintain autonomous, independent functioning and the desire to achieve and maintain a connected, communal existence with others. Thus a pattern emerges as one moves through these stages, oscillating between these two poles.

This dialectic extends Mahler’s stages of infant separation and individuation into adulthood, suggesting that people have conflicting desires of relatedness and separateness that are continually renegotiated (Mitchell & Black, 1995). This also mirrors Blatt and Shichman’s (1983) assertion that personality styles and disturbances appear to gather around these two polarities, such as those exhibiting anaclitic depression whose concerns center around the lack of connection with others and those with introjective depression who are troubled by punitive self-views.

Seven of the participants were found to be in or between stages 3 and 4 of Kegan’s subject-object theory. This is consistent with Kegan’s previous work suggesting that most adults reside in a stage 3 evolutionary balance between self and other. Perhaps the main boundary distinction between stages 3 and 4 is how emotional responsibility is viewed and the psychological processes that are used to maintain these
boundaries. The organizing principle for those in stage 3 is that of connection with others and its consistency; for those in stage 4 it is the integrity of their self-authored system and its independent functioning. The emergence of the desire to be autonomous with its attendant fear and anxiety regarding the loss of connection, which amounts to the loss of one’s identity in stage 3, is the psychological space where most of those interviewed found themselves.

The majority of the seven participants cited experiencing the dissolution of a significant relationship as the main precipitant in their evolution to further stages of development. They all perceived these events and time periods associated with them as painful and intense. In the journey from stage 3, which involves the utilization of others to construct one’s identity, to stage 4, which revolves around self-definition, this commonality is an understandable phenomenon. Simply put: the loss of a relationship in some ways forced a new way of thinking in these participants, a new way of constructing their identity was required. The cause of the felt dissatisfaction differed according to the individual histories of each participants: some began to view their relationships as those similar to parental relationships that they resented or viewed unfavorably, others noticed that they felt negative emotions more than positive emotions, for some leaving home for college caused feelings of great loneliness, and one discontinued psychotropic medication which may have contributed to her having more intense feelings about her relationship. However, they all experienced a crisis, which had no immediate solution according to their current perception of themselves and others.
Yet the fact that these participants experienced a relational crisis does not necessarily account for their solutions to be found in developing further. Why did they not retreat from their anxiety by forming a new relationship, which would have been more familiar then beginning to explore unknown ways to perceive the world? What kept them from using other psychological defenses or ways to dissociate from their anxiety, such as substance use? Perhaps a contributing factor in what allowed these individuals to begin to accommodate their new experiences rather then simply assimilate them into older ways of functioning was their experience of well-timed and appropriate support.

Just as there was a similar perceived catalyst which provoked stage transition so too was there a similar process in which those along the continuum from stage 3 to stage 4 experienced support. Those who maintained stage 3 operations tended to feel supported when others validated their experience and feelings, encouraged them, expressed their concern about them, or showed them affection. In general, a feeling of solidarity from others allowed people who were operating from a stage 3 perspective to feel most supported. As a stage 4 meaning began to emerge the participants began to value feedback about themselves in addition the above mentioned supportive behaviors. Participants with an emerging or dominant stage 4 viewpoint experienced self-awareness facilitated by others as important and meaningful to their feeling of support. This self-awareness was gained in several ways according to the participants including attending therapy, desiring others to question them about their emotions and motives, or observing the functioning of others and applying it to themselves.

This adheres to the idea that as people move from stage 3 to stage 4 constructions of meaning, their self-authorship and self-directed motivation and
functioning becomes the axis around which their identity revolves. This shift in perspective allows the operation of a self-authored system that is thought to be shared in the stage 3 world to become disembedded from the other, which frees oneself to be viewed as self-authored apart from an other. This is the transition from what was once subjective to its becoming objective. Along with this shift in meaning making in the participants, new forms of interactions are experienced as support due to the emergence of new vistas of psychological experience that were formerly unobservable and did not require acknowledgement or overt support.

During the transitional balances between stages 3 and 4, participants exhibited further variation on how they utilized support. In addition to the solidarity/feedback distinction between stages 3 and 4, participants who seemed to be in the midst of transition used support to maintain the different stage perspectives present in their functioning. The participants who were emerging into a more dominant stage 4 world used the kind of support valued in the stage 3 world to facilitate their growth into stage 4. Participants in this transition seemed to gain the ability to begin to value their own wishes, desires, and functioning when given permission to do so by others. Statements from others such as ‘I value your own happiness’ or ‘I encourage you do to what you would like’ allowed those in the middle of the stage 3/stage 4 transition to begin to separate from the merged world of stage 3 into the independent world of stage 4. Conversely, participants having more dominant stage 4 functioning used the feedback and the satisfaction of autonomy to defend against falling back into stage 3 functioning. The implications that this information has for psychotherapy will subsequently be discussed.
Although most participants were found to be within the stage 3 and stage 4 balances, two participants were found to be on either side of this continuum. One participant was found to be in the 2(3) transitional balance. At the time of the interview she was highly distressed over the possibility of losing her academic standing. She viewed others as objects to either facilitate or prevent her from gaining her needs and desires. She showed a minimal ability to internalize the perspective of others and use this internalization as a constituent of her identity. Simply put, the way others felt generally did not matter to her. She tended to be hypervigilant about others, assuming that others were punitive and out to potentially frustrate her. Furthermore, when she did feel attacked she could not conceive of a reason for such an attack. The support she valued was non-verbal, such as a hug. When she did accept verbal support she wanted feedback about what she should or should not be doing in order to avoid the punishment of others. The support she valued seemed to center around her need to know when others thought she was ‘good’ or ‘bad.’ She was unable to recall a time when she thought or felt differently about herself or others.

Another participant was found to be in the 4/5 transitional balance. She had a well developed sense of her own identity apart from others. She did not indicate the need for her functioning to be justified or otherwise influenced by others. She valued others in as much as they could provide her feedback about her self and the possibility to improve her own functioning; perhaps they could shed some insight on how to make her own system run smoother so to speak. However, when she spoke about a conflict she was having with someone at her place of work she spoke of the limits of her own self-governed system, as her system seemed to be unable to provide her with an
answer on how to solve the conflict. She spoke of herself in terms of the ‘adult me’ but also discussed the possibility of the ‘child me’ which may be influencing her feelings in regards to the conflict. She was able to take some perspective on her own functioning and recognize that it was not absolute and that perhaps there were alternate ‘self-systems’ running simultaneously. She said that her realization of her own mortality when she turn 60 years old allowed to her more freely think about her own functioning. Perhaps because she realized that, by definition, her functioning was mutable, at the very least because of her own mortality, she was able to feel less anxiety about questioning her current system of functioning. She said that she mainly supported her self, consistent with that of stage 4 functioning. However, she also said that she was beginning to desire connection with others more. The kind of support she said she longed for was that of simply sharing hers and others’ experience; to know that she was not alone. This emerging desire marks the interindividual stage, where one desires to share with an other without fearing the loss of personal identity through either stage 3 anxiety related to abandonment or stage 4 anxiety related to coerced merger.

The preceding has detailed the journey that the participants are undergoing as they move through Kegan’s developmental stages. Most discussed the crises that they had experience while on this journey, as well as the support that they experienced as helpful. However, several did not report any distressing events that they recalled. This typically corresponded with a person being closer to stage 3 orientations or lower. This raises the question: What causes an individual to remain stagnant in his or her development? This study, although not completely putting to rest the question, illuminates several clues related to the growth or lack thereof, of people. As stated
previously, those who appeared to be in transitional balances appear to have not only experienced a crisis, or a self-perceived traumatic event; they also discussed the presence of support, and its usefulness.

The accounts of those interviewed appear to support the generally held assumption that in order for development to occur there must be some thing (and event, a relationship, a feeling, etc.) that challenges, stands in contrast to, a person’s previously held way of operating. If no such event occurs, if the person’s environment is so accommodating and hospitable, what would be the motivation to disturb this equilibrium? When however, a person does experience crisis, there seem to be three paths for a person to take. The crisis may be so overwhelming that the person internally disintegrates (presumably into psychosis) because no apparent solution arises to resolve the discrepancy between his or her functioning and the encountered difficulty. Alternatively the person may resolve the crisis in terms of his or her current evolutionary truce (Piaget’s ‘assimilation’ and the psychoanalytic idea of ‘resistance’) or retreat into dissociative defense, such as substance use. Finally, an individual may reconstruct themselves, or literally develop a new way to cope with the crisis, which was previously unavailable to him or her (Piaget’s accommodation). It is difficult to know if those who could not recall a specific event that changed their thinking, indeed experienced no such event or if they did experience a crisis but resolved it in a way that maintained their current functioning, at which point the ‘crisis’ would not be experienced as a crisis.

Perhaps part of what influences how one utilizes crisis is the support that a person receives in the midst of the crisis. As outlined above, there seems to be specific forms of support that are most helpful to people given a particular stage of development.
An attendant question arises in regards to support at this point: Do certain kinds of support inhibit growth? If a person experiencing a crisis at stage 3 only received the merger/solidarity type support he or she would value most would this not simply maintain their embeddedness in stage 3, as it appears to have done with several participants?

An integral ingredient to the growth of an individual may be a combination of ‘stage appropriate support’ along with support valued by those in latter stages of development, with the transitional types of support mentioned above. This support may act as an escalator, carrying and assisting an individual to reach higher stages of development. This idea is similar to that of Vygotsky’s ‘zone of proximal development.’ When this mixture of support is combined with a personal crisis, this may allow for the moving forward, instead of the retreating back, that facilitates development.

This information has immediate relevance to those in the mental health professions, for this is a professional body that many people turn to when they are in developmental upheaval and experiencing a potentially growth-inducing crisis. This, of course, offers a different account of ‘mental illnesses’ and what interventions are best used to treat them. The implication of Kegan’s theory, and within the broader psychoanalytic tradition, is that the difficulties experienced by people entering into psychotherapy are not discrete mental disturbances, whose symptoms can be treated and the subsequent illness eradicated. Kegan suggests the difficulties experienced by individuals are likely due to the pain associated with the evolution of personal meaning construction. The emotional pain experienced is the result of the feeling of losing oneself or more accurately the self that is known and the anxiety related to the
uncertainty about being able to find a subsequent ground for one’s identity; the experience is that of quite literally going out of one’s mind.

**Therapeutic Implications and Psychoanalytic Contributions**

Kegan’s theory suggests that this evolution of meaning construction, expressed in the movement through his proposed stages, is the ground of personality functioning; that given the right environment, individuals would move naturally through these stages. His theory of clinical practice logically follows from this presupposition and is largely humanistic and Rogerian in nature. He suggests that if a therapist supports the person who is constructor of meaning as opposed to supporting the meaning that has been constructed, then growth can potentially occur. This amounts to providing the mixture of both stage specific support as mentioned above as well as offering an opportunity to the person that is evolving to experience new ways of constructing their world. Although making intuitive sense, both due to his general ideas about development and the findings of this study, he does not specifically explain how one, as a therapist, offers new ways of constructing an individual’s experience. However, the picture one congers is that of a therapist affirming the client according to their needs at any given stage of development while not fully identifying with the particular stage a client is in. For example, knowing that those in stage 3 will desire to merge with others, a therapist will maintain the frame of therapy, such as consistencies involving the time of the session, and not allow him or herself to be pulled by the fusion needs of those in stage 3 by shifting time boundaries. Presumably challenging the client by suggest that there may be other ways of constructing their experience is important to Kegan’s view of therapy
as well, but the ways in which a therapist might accomplish this are not specifically addressed.

When considering Kegan’s theoretical ideas in conjunction with psychoanalytic perspectives on human functioning and the findings of this study, several implications and further questions emerge regarding how one might utilize this information in both clinical practice and as well as integrate Kegan’s insights into the existing body of personality theory. Perhaps the most consistent theme in Kegan’s developmental theory is that of its biological determination as an evolutionary process in which conflicts are mainly experienced between the organism and its environment. This omits a widely accepted tenant in psychoanalytic province: namely the existence of intrapsychic conflict due to motivated unconscious functioning. Kegan suggests that if a therapist allows the client to evolve in a ‘correct’ supportive environment they will naturally develop and that the main impediment to this evolution is a person’s passive and expected anxiety related to the loss of a prior way of constructing meaning. He does not address the possibility of active unconscious opposition to developing new meaning-making systems.

Secondly, Kegan does not discuss the possibility of regression. He accounts of the existence of two meaning-making systems operating at once within a person and speaks of integrating older systems into a new organization, but does not address the occurrence or operations of reverting back to an older way of constructing meaning when under duress or when relating to different people. He seems to take the stance of once arrived at a stage, so shall a person stay. In recalling the participant who was found to be at a stage 2(3) transitional organization, it could be that this is simply her
level of development thus far. But it may also be that she is currently experiencing an intense crisis related to her academic future, which is causing her to regress to a former way of meaning construction. If fluidity between stages is the case, Kegan’s theory (and the job of the treating clinician) becomes much more complicated; moving from a question of simply understanding what stage a person is in and providing the correct support to understanding what stage the person is in during a particular time, in relation to a given situation, and with whom.

Finally, Kegan does not discuss the ways in which ego boundaries are defended, how this might differ from stage to stage, and how these defenses come into being. Further questions beyond the scope of this study but related to this area are as follows and are worth broaching. Of particular usefulness would be the correlation of styles of defense and Kegan’s developmental stages. This seems to overlap with Kernberg’s developmental continuum consisting of psychotic, borderline, and neurotic levels of functioning. Just as overall character styles are presumed to exist in each of these developmental levels only coping with differing core anxiety, would Kegan’s theory have a similar structure related to character? Do character patterns maintain through his stages only differing in the core development achievement which the person is endeavoring to overcome? Or do Kernberg’s levels correspond to Kegan’s stages? Do those exhibiting borderline conflicts maintain a stage 3 orientation, for instance?

Furthermore, it seems that the overall defensive strategies of stage 3 are projective operations in need of an other and those in stage 4 utilize more intrapsychic means of defense such as isolation of affect, intellectualization, undoing, and so on. Is identifying common defensive operations a valid way to begin to assess Kegan’s
stages? George Vaillant (1977) discusses the development and maturing of ego defenses over time, suggesting mature defenses allow one to cope with distressing internal affective experience in such a way that allows for closeness with others along with the expression of these affects. Is Kegan’s progression through his stages the maturing of defenses?

Although Kegan discusses his theory in terms of object relating, that evolution through his stages is a continual renegotiation in how one relates to others, he does not address the internal object relations that people may carry in them, which influence this process. How does stage change impact internal object relations? And is it these internal object relations that must change in order to achieve stage change?

These are several questions that add complexity to the elegant simplicity of Kegan’s theory for not only its consideration and integration with other ideas concerning human development but also what clinicians may consider when working with a client. However, Kegan’s theory and this study offer a tremendous gift to therapists: a more complete understanding of the phenomenology of people. Kegan’s ideas may not sufficiently address where a person’s defensive styles come from, if stage progression is invariant, or how stage expression may look different according to different personality styles or internal object relations, but he does detail the subjective human experience as we struggle to construct meaning for ourselves in the world.

In contemporary psychoanalytic theory and practice it is widely held that it is the shared relationship, the intersubjectivity of the therapist and client, which is the motive power of psychotherapy (Mitchell, 1997). Psychoanalytic theory provides additional ideas about what may be useful for a people entering this relationship. It provides a
framework to consider a person’s internal representations of others and him or herself, the ways in which people protect themselves from distressing affect, and how they attempt to maintain their personal identity. But along with this theoretical knowledge which is, in reality, simply a way to organize experience, Kegan provides another way to organize the experience of the client. Lawrence Josephs (1992) discusses ‘entering the world’ of the client, and Kegan’s theory allows for this entrance.

Conclusion

This study demonstrated that there are specific ways to enter the world of specific people at specific levels of development. Those in stage 2 require support in such a way that allows the other’s internal world to be known. Individuals in stage 3 require a merged experience with others and validation which protects connection. People in stage 4 require support that is seen as respect for their self-authored system as well as feedback facilitating self-awareness. Those in stage 5 desire to be seen and accepted while allowing for the possibility for a flexible existence in which they can explore their multiple self-systems. This study also demonstrates that self-awareness, insight, appeared to be an important facet of an individual’s development as they progress into stages 4 and 5. Therapists might use this information to consider the kind of support needed from a client and what support might be helpful in their emergence into new ways of meaning construction. It also suggests that crisis, discrepancy, and challenge are an integral part of the developmental process. In keeping with the intersubjective account of the therapeutic relationship, this suggests that not only should a therapist offer his or her perspective on the client’s experience, but offer the client his or her own inevitably different experience of the client (self-disclosing
countertransference). It is this sharing that, although possibly creating a crisis in the therapeutic relationship, may also invite the client to experience the opportunity for developmental growth in the presence of the useful support indicated above. Ultimately a person at stage 5 could be considered a fully functioning non-defensive person with the willingness to discover the self in different shades and themes and not feel threatened by these possibly conflicting internal constructions of self-meaning. It is possible that people defend against different anxiety provoking self-experiences as we develop. But perhaps most simply, Kegan's developmental stages and the ideas contained in theories related to the intersubjectivity between people describe the increasing ability to tolerate the reauthoring of one's self. The openness to the dance between defense and discovery may be what truly marks the achievement of stage 5 meaning making and the ability to achieve intimacy with others. It is this dance that clients ask the therapist to engage in.

It appears that growth happens in the presence of crisis and support, both of which can be facilitated and experienced in psychotherapy. The gaining of insight, the changing from subjective to objective, seems to indicate and also facilitate further stages of development. The stories of those who participated in this study attest to the struggle and pain of evolution but also to the hope of growth, connection, and peace. It is true these may be long, arduous journeys, but for therapist and client alike, they are shared and traveled by all. In the end perhaps all we are hoping to do is to better understand how to travel together and if this information guides our steps in such a way, it has served its purpose.
References


Appendix A

Demographic Questionnaire

Please respond to each of the following:

What is your age? ______

What is your gender? (Please select): _____ M _____ F

What is your occupation? ________________________________

What is your ethnicity? ________________________________
Appendix B
Subject-Object Interview

Participants will be presented with a series of 10 stimulus cards with the following topic labels:

1. Anger
2. Anxious / Nervous
3. Success
4. Strong stand / Conviction
5. Sad
6. Torn
7. Moved / Touched
8. Lost something
9. Change
10. Important to me

Participants will be asked to identify significant life events that correspond to the topics on the cards. The participant will write upon the appropriate card information pertaining to the life event that corresponds with card. The participant will be asked to recount in detail the events / cards that are most salient to them. The participant will be asked to describe their view of self and others as well as their affective experience in the most significant or salient events identified.

The resulting discussion will be a means to determine which stage of Kegan’s developmental theory the participant has achieved. This is done through analysis of the descriptive account of the significant events given by the participant.

During this interview, additional questions (presented in Appendix C) will be asked of all participants to determine significant life events that facilitated this developmental achievement.
Appendix C

Life Event Questions

(The following questions may be asked in any order that the interviewer deems appropriate to the interview situation)

Is there a time that you might have thought / felt differently about this situation than the way that you do currently?

What has happened between then and now that has possibly influenced the way that you think / feel about these kinds of situations?

Tell me about a time when you have drastically changed your thinking / feeling regarding situations such as this?

What do you think influenced this change?

How intense (either negative or positive) were these situations on a scale of 1 to 7 (7 being the most intense)?

Roughly, how many people did you consider supportive during that time?

Overall, on a scale from 1 to 7, how much support did you feel (7 being fully supported)?

According to your perception, what did these others do to make you feel supported?
Appendix D

Informed Consent Form

1. Study Title

GOING OUT OF YOUR MIND: THE GROWTH OF SELF THROUGH SUBJECT-OBJECT DIFFERENTIATION

2. Study Personnel

<table>
<thead>
<tr>
<th>Name</th>
<th>Principle Investigator</th>
<th>Faculty Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bryant K. Kilbourn, M.S.</td>
<td>Shawn Davis, Ph.D.</td>
<td>Pacific University</td>
</tr>
<tr>
<td>Pacific University</td>
<td>Pacific University</td>
<td>School of Professional Psychology</td>
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<tr>
<td>School of Professional Psychology</td>
<td></td>
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<tr>
<td><a href="mailto:bkillbourn@pacificu.edu">bkillbourn@pacificu.edu</a></td>
<td><a href="mailto:davissh@pacificu.edu">davissh@pacificu.edu</a></td>
<td></td>
</tr>
<tr>
<td>(517) 740-6564</td>
<td>(503) 352-7319</td>
<td></td>
</tr>
</tbody>
</table>

3. Study Location and Dates

The study in which you are invited to participate is anticipated to begin April 2010 and to be completed by December 2010. The data for this study will be collected at the Pacific University Health Professions Campus, suite 560.

4. Study Invitation and Purpose

You are invited to participate in a study about personal development and the factors that might spur this development.

This study is being conducted by Bryant Kilbourn, a student under the direction of Dr. Shawn Davis at Pacific University. This study will begin in April, 2010 and continue through December, 2010.

Please read this consent form carefully and ask any questions you may have before you agree to be in this study.

5. Study Materials and Procedures

As part of this study, you are asked to provide informed consent, complete a brief demographic questionnaire, engage in a semi-structured interview regarding your view of self and others, and respond to a brief series of survey questions.
You will be audio recorded during the interview session. If you do not wish to be recorded in this manner, you can stop your participation at any time. The audio recordings are for transcription purposes only. The recordings will be kept in a locked office within the Pacific University College of Health Professions and will be erased immediately once the transcription is complete. There will be no other use of these recordings, educational or otherwise.

6. Participant Characteristics and Exclusionary Criteria

Individuals at least 18 years of age are eligible to participate in this research study.

7. Anticipated Risks and Steps Taken to Avoid Them

The risks posed to you as a participant of this study are minimal. However, if you feel any discomfort for any reason, you are free to stop your participation at any time.

8. Anticipated Direct Benefits to Participants

There are no direct benefits to participating in this study.

9. Clinical Alternatives (i.e., alternative to the proposed procedure) that may be advantageous to participants

Not applicable.

10. Participant Payment

Not applicable.

11. Medical Care and Compensation In the Event of Accidental Injury

During your participation in this project it is important to understand that you are not a Pacific University clinic patient or client, nor will you be receiving complete mental or medical health care as a result of your participation in this study. If you are injured during your participation in this study and it is not due to negligence by Pacific University, the researchers, or any organization associated with the research, you should not expect to receive compensation or medical care from Pacific University, the researchers, or any organization associated with the study.

12. Adverse Event Reporting Plan

In the event you would like to report and adverse experience related to participating in this study, please contact the principal investigator’s research advisor, Dr. Shawn Davis, at the number listed on the first page. If you would rather, or if you are not satisfied with the response of Dr. Davis, please call the Pacific University’s Institutional Review Board, at (503) 352 – 2112 to discuss any concerns.

13. Promise of Privacy
Data obtained from your participation will be available only to the experimenters. If a publication or other educational use results from this study and case reports are presented, all identifying material will be substantially modified so that your identity will be safeguarded. Further, your results will be kept in a safe, double-locked office within the Pacific University School of Professional Psychology (Health Professions Campus, Room 560) to prohibit your results from being disclosed to anyone other than the principal investigator.

14. Voluntary Nature of the Study

Your decision whether or not to participate will not affect your current or future relations with Pacific University. If you decide to participate, you are free to not answer any question or withdraw at any time without prejudice or negative consequences.

15. Contacts and Questions

The researcher(s) will be happy to answer any questions you may have at any time during the course of the study. Complete contact information for the researchers is noted on the first page of this form. If the study in question is a student project, please contact the faculty advisor. If you are not satisfied with the answers you receive, please call Pacific University's Institutional Review Board, at (503) 352 – 2112 to discuss your questions or concerns further. All concerns and questions will be kept in confidence.

16. Statement of Consent

I have read and understand the above. All my questions have been answered. I am 18 years or older and give my consent to participate in this study. I have been offered a copy of this form to keep for my records.

By signing, I understand I will be taken to the study and that my continued participation in the survey denotes my consent. I can choose not to participate or to withdraw from participation at any time.

Participant Signature ________________________________ Date ____________

Investigator Signature ________________________________ Date ____________