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Changing Internal Representations of Self and Other: Philosophical Tools for the Attachment-Informed Psychotherapy with Perpetrators and Victims of Violence¹

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Abstract

Attachment research shows that the formation of unconscious, insecure representations of the self, the other, and the self-other relations is linked to perpetration and receipt of violence. Attachment-focused therapy aims to change these internal schemata to more secure, adaptive representations by therapeutic work addressed to senses, emotions, and behavior. The paper proposes a new approach to altering the self and other representations in offenders and victims: it involves intellectual reflection on self, will, action and responsibility informed by Augustine's views, facilitated by actual relational experience, and translated into a distinct self-soothing strategy. The reflective-experiential approach can complement existing methods of working with violent or traumatized individuals both within and outside an attachment theory framework. It consists in: identifying that a non-reflective nondistinction between self and behavior supports damaging self- and other- representations and interactions; proposing ways for clients to comprehend and consciously operate with the distinction between self and action.

Keywords

will; action; responsibility; violent offenders; the abused; emotion regulation

1 Representational models of self and other in attachment theory and a philosophical method to alter them in therapy

According to attachment theory and research, when individuals' inborn need to create an affectional bond with their caregivers is frustrated through the latter's negligence, absence, rejection, or abuse, they form insecure attachment styles or patterns of relational behavior, which put them at increased risk for both perpetration and receipt of violence, in childhood,

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youth and adulthood (Bowlby 1984; Levy and Orlans 2000; Fonagy et al. 1997; Dutton and White 2012; Buck et al. 2012; Allison et al. 2008; Ross and Pfäfflin 2004).

Underlying insecure and secure attachment styles are the history, nature and quality of individuals' interactions with their caretakers internalized in the form of representations of self and other or *internal working models* (Bowlby 1973, 1988). These mental models contain organized beliefs, evaluations and expectations about the self, significant others, the relations between them, and the world, which serve to predict, understand and appraise social situations. They guide individuals' attention to information present in the relational environment, their interpretation of others' behaviors and states of mind, their modes of interaction in close relationships, and anticipation of how these will work or how challenging relational episodes can be dealt with. Once formed and through repeated use the working models come to operate largely outside conscious awareness and are highly resistant to change: new information is assimilated, accommodated or distorted so as to fit these existing schemata, instead of internal models being revised in light of new information and experience (Bowlby 1979; Pietromonaco and Feldman Barrett 2000; Fraley and Shaver 2000; Tidwell et al. 1996).

In a landmark study, Bartholomew and Horowitz (1991) identified four adult attachment styles, one secure and three insecure, based on how the two underlying dimensions of working models, self-representations and other-representations, can be combined: secure (positive self-model, positive other-model), dismissing (positive self-model, negative other-model), fearful (negative self-model, negative other-model), and preoccupied (negative self-model, positive other-model). A negative self-model puts the individual at risk for both receipt and perpetration of relationship violence. For instance, a preoccupied individual with a negative self-model avoids self-hatred and the feeling of a defective self by seeking external validation from others and acting violently when not received. A dismissing individual with a positive self-representation can inflict or suffer violence when their self-regulating strategy of distancing themselves emotionally or physically from a close other is met with resistance and pursuit behavior, e.g. from a preoccupied partner. From an attachment perspective intimate relationship violence is very much a question of how these working models and resulting relating behaviors come together in the couple's relationship dynamics (Bartholomew et al. 2001; Allison et al. 2008; Sonkin and Dutton 2003; Stith et al. 2004; Kuijpers et al. 2010).

Attachment theory is concerned with close relationships, but by looking at violent behavior as a relational disorder has provided a useful framework for understanding and treating various forms of violence not perpetrated in close relationships, and which include children's aggressive and antisocial behavior (Bowlby 1984; Levy and Orlans 2000), youths' criminal acts (Fonagy et al. 1997; de Zulueta 2009), or adults' violent offenses, such as homicide, physical or sexual assault, robbery, arson, etc. (Pfäfflin and Adshead 2004; de Zulueta 2006a). Therapists who draw on attachment theory explore ways in which such forms of violence may be rooted in adverse attachment experiences and the resulted mental models of self and other that guide interpersonal and social behavior.

As insecure (positive or negative) models of self put the individual at risk for both perpetration and receipt of violence, the question is how to change through therapeutic intervention the self and other representations to more secure ones that would include positive beliefs and expectations about the self, the other, and their relations. Attachment-focused interventions heavily rely on providing the means for clients to experience a secure relationship through therapist's use of trust, empathy, support, or positive affect. Art- and body-therapy techniques, guided imagery, deconditioning or desensitization interventions, and role playing are also used to help clients learn to modulate emotion or develop alternative strategies of engaging relationships or coping with distressing interactions, and thereby update their internal self and other models to more positively secure ones.

Whether it is by client's learning a breathing or relaxation technique, or benefiting therapist's attunement, in almost all attachment-based interventions it is aimed to change the self and other representations through emotional-behavioral work, involving client's own behavior, the other's behavior (the therapist's), and the way the two (emotional) behaviors interact. Client's cognitive and procedural set of beliefs about the self and the other is not sought to be altered by any method involving conceptual understanding or reflection on the self as separate from the behavioral experience of it. The internal representations that underlie one's thoughts, feelings, and actions are thus built and restructured through behavior. Our caregivers' expressed behavior towards us, our emotional, instinctive response to it and the relational dynamics that these two kinds of behavior generated constructed our secure or insecure models of self and other. Thus, behavior (one's own or others') constructs the self, and determines how the self is experienced, represented and changed. If the other (the parent) behaves badly towards me (the child), then it means that I am bad and I have a worthless self. If the other (the therapist) behaves in a caring and considerate manner towards me (the client) it means that I am worthy of such behavior and I have a valuable self.

I want to suggest that the identification that takes place between one's self and one's own or other's behavior both helps create the mental models and hinders their revision from insecure and defective to more secure and positive models. I therefore propose a new, philosophically informed approach to changing clients' representational models of self and other, which relies on reflective-experiential work aimed at breaking the identification between self and behavior, between the client's self and the actions (offenses) inflicted on or suffered from others. The psychological term 'behavior' is more inclusive than the philosophical term 'action', as it also includes automatic, instinctive responses and not just voluntary, deliberate movements. This however only offers more reasons not to identify unconscious behaviors with the self. As I will explain, the distinction between self and action can only be effectively established from outside strictly psychological perspectives and here it is grounded in Augustine's metaphysics. Such as I introduce it, therapeutic work with it is not based on therapist's verbal explanations but on clients' assisted process of reflection where conceptual understanding is achieved, verified, and reinforced through the use of direct experience, relational interactions, and autobiographical contextualization. It is believed that verbal interpretations have no effect on the neurological and psychological substrata of the mental models (de Zulueta 2006b). This is because these largely unconscious models are acquired in the preverbal, sensory-motor period, and thus

attachment techniques heavily rely on nonverbal, sensory-emotional work. The reflective-experiential approach I propose does not conflict but is compatible with such work, and even includes elements of it in its experiential component. Clients are not given verbal interpretations; they are enabled to intellectually and experientially acquire a new framework for interpreting experience, based on 'experienced concepts'.

I suggest that assisting clients to intellectually comprehend and experientially verify and operate with the distinction between self and actions may not only enable them to alter their internal models towards more positively secure ones but may also confer the updated models a healthy stability. That is to say, they will be less likely to be revised according to the behavior of the self and others, being more autonomous, or not so behavior-dependent. Traumatic situations or repeated abuse are known to undermine one's secure, positive self and other models, changing them to insecure and negative models, and I think that by employing the self-action distinction victims of trauma and abuse can be provided with an important defense against the collapse of their inner and outer sense of security and goodness. And both victims and perpetrators of violence would be provided with a strategy of emotion or anxiety regulation in threatening or distressing conditions. The representational models of self and other would be more stable, positive and secure when they would not rely so much on behavior, either one's own or others.

Although different considerations are involved in the therapy of offenders and victims, I propose the self-action distinction as a tool useful in the treatment of both because it is aimed at promoting security, and at building their self. As I will present it, the distinction does not entail disconnection, but the establishing of appropriate relations between one's self and one's own and the other's actions, as well as between the other's self and their actions. Attachment theory stresses on the need of security, and the relational generation between the self, the self's and the other's behaviors, and patterns of receiving and giving violence. For this reason, and because I consider the relation between self and behavior to be foundational to the working models, I am proposing that the self-action distinction can be coherently integrated in attachment-informed therapy, as a complement to existing methods of working. However, this metaphysically-rooted distinction is conceptually new to current psychotherapeutic frameworks and independent of attachment assumptions, and therefore it can be usefully employed outside an attachment perspective as well, in therapeutic work with violent and/or traumatized individuals aimed at reconstructing their self and their capacity to regulate emotions and control actions.

As already evident, the philosophical-experiential approach is introduced with reference to existing literature in attachment (especially dealing with perpetrators and victims of intimate partner violence), but also relevant for its formulation is work in social psychology and forensic psychiatry that deals with the self-concept or self-portrait of adult offenders imprisoned for violent crimes (e.g. homicide, attack, domestic assault, rape, robbery, etc.). The new approach is aimed to be of use in the therapy of such clients.

Because conscious reflection is included in working with the self-action distinction, the clients who are more likely to effectively engage this work and make practical use of it are not offenders or victims with severe mental disorders, or persons not in control of their mind

and out of touch with reality. Domestic offenders and criminal offenders have been identified to have (with different prevalences) all types of attachment patterns (Sonkin and Dutton 2003; Ross and Pfäfflin 2004), and to benefit from cognitive treatments (Dutton 2003; Fox 1999). Cognitive work addressed to modifying unhelpful thoughts is also employed for child and adult trauma victims. As will become clear, my approach differs from cognitive-behavioral techniques; still, with regard to its applicability, it is reasonable to assume that the type of reflective work that I am proposing can be made accessible to clients with various attachment styles who are not severely mentally disordered, or else seriously impaired in their cognitive capacities, and who would otherwise be able to benefit cognitive interventions either within or outside an attachment-focused therapy.

2 Distinctions between self, will, and action in Augustine

A first step in advancing the new method of working is to make the distinction between self and action understandable to therapists so that they could then introduce it to clients in adapted therapeutic ways. Such as I am proposing it here, as a metaphysically-grounded therapeutic tool, the distinction is inspired by a particular view of Augustine's that is well summarized in the statement: "Hate the vice and love the human being." (*oderit vitium, amet hominem, civ.* 14.6; see also *gr. et pecc. or.* 1.20; *c. Faust.* 19.24).² Augustine saw this as the correct and 'healing' attitude towards wrongdoers, one that would recognize the ontological goodness of human nature in any individual beyond their moral faults, which need to be sanctioned and opposed.³

For Augustine this is a distinction between that which one does (an action) and that which one is (a substance). Substances are things that exist in themselves or have independent ontological status. Thus, for example, if "you ask what father Abraham is, you are answered: a human. You are answered with [the name of] his substance." (*Quaeris quid sit pater Abraham; respondetur: homo; substantia eius respondetur. en. Ps.* 68.1.5). In contrast, "To do and to suffer are not substances" (*Facere autem et pati non est substantia, vera rel.* 39). Actions only exist as relations between substances, which are ontologically always good, meaning that they are good by the very fact that they are what they are. As human beings, individuals are never identical with the moral quality of their acts, whether good or bad (*vera rel.* 26; *conf.* 7.18; *gr. et pecc. or.* 1.20). It is relevant that by using the word 'vice' (*vitium*) here and in other similar statements Augustine suggests that he has in mind not only some occasional, accidental or atypical wrong act but also habitual wrongdoing, and that even in this case, when one's ingrained bad habits are challenging one's freedom to do otherwise, and are acted out independently or in spite of reason, these persons are not to be identified with what they do, and instead recognized as being something more than just their bad, faulty actions (See *civ.* 12.3; *lib. arb.* 3.38; *ep.* 153.3; *gr. et pecc. or.* 2.46).

²For references to Augustine the CAG-online resource was used (Corpus Augustinianum Gissense, a C. Mayer editum). The translations are mine. His works are cited according to the abbreviations used by the *Augustinus-Lexikon*, though 'u' was replaced with 'v' where appropriate.

³Vice (*vitium*) is sometimes replaced in similar arguments with fault (*culpa*), injustice (*iniquitas*), bad works (*operae malae*), bad morals (*mali mores*), or sins (*peccata*) – *c. Faust.* 19.24; *en. Ps.* 68.1.5; *ep.* 153.3, *ep. Io. tr.* 7.11; *an. quant.* 78; *gr. et pecc. or.* 2.46. Also, Augustine uses 'vice' as a generic term for that which corrupts or ontologically deprives nature. See *vera rel.* 37; *civ.* 12.3; *lib. arb.* 3.38.

The internal working models also bypass rational control, and help generate faulty patterns of relating that result in recurrent misguided, and/or violent actions. In my view, their very formation is supported by an instinctive judgment that establishes a two-leveled non-distinction between someone else's behavior and the self who received that behavior (the other is treating me badly, therefore I am bad), and/or the self who produced that behavior (the other is treating me badly, therefore he/she is bad). Looking also from outside an attachment framework, I find this identification to be at work (in various forms and degrees) both in adult victims of abuse/trauma and violent offenders: the victim reacts to the harm suffered by identifying the offender with the offense, and/or by identifying his or her own worth as human being with the offender's action; the offender identifies the victim or/and himself with his own (unworthy, loathsome) actions. In these processes one's self collapses into one's own or the other's action, with the paradoxical result that the self's identification with the action substantializes the action and desubstantializes the self: the self thus loses its ontological independence, and is experienced as non-agentive and acted-upon by that action (see Pârvan 2013). Taking Augustine's ontological principle of distinction between self and action his view could be extended so as to apply to how one should treat not only the offending other but also oneself, in relation to the other's and one's own actions, whether one is a victim or an offender. A therapist taking this view would point to both such clients that they cannot be reduced to any one or any sum of their or anybody else's actions, and as such their 'self' is and can be further enabled to judge and choose how to respond to their and others' actions.

Relevant for how the 'self' needs to be understood when working with the distinction between what one is and what one does is that, in formulating it, Augustine does not use the word 'self' (or its Latin approximations⁴), but 'human being' (*homo*). Augustine answers with the name of the substance not just the question about what one is but also the question of *who* one is: "And I turned myself to myself and I said to me: 'Who are you?' And I replied: a human." (*Et direxi me ad me et dixi mihi: 'Tu quis es?'. Et respondi: 'Homo'; conf. 10.9*). One's ontological constitution as human being, albeit not self-constructed as one's moral constitution, is foundational and thus no less personal to the individual. Augustine regards as most intimate to himself that which belongs to all humans, whether it is the human substance, or its structural components (e.g. mind, will, memory, etc.).⁵ I think it useful for both therapists and clients to accept and work with such a notion of self that encompasses a foundational, ontological dimension, acknowledged as personal, as it is in it that clients' ability to do otherwise may lie. Considered in its ontologically good components, the self is not reduced to its psychological or moral functioning, and thus, to being *just* damaged or defective.

Thinking with Augustine, if one is to be valued regardless of one's acts, in virtue of their quality of being a self, it is because there exists a dimension of the self beyond the moral

⁴Cavadini (2007) pointed out that there is no equivalent in Latin for the English term 'self', and what is usually translated by 'self' from Augustine's works are words, phrases, or notions like *ego* (I), *mihi* (to me), *me* (me, myself), *ego ipse* (I myself), *homo interior* (interior human) or *ego interior* (interior I).

⁵The interior I (*ego interior*) or what Augustine identifies as being truly himself is, for instance, the mind; not his mind, but *the mind*. Thus: 'It is I who remembers, I, the mind (*ego sum, qui memini, ego animus; conf. 10.25*; see also 10.9), or 'Great is the power of memory... and this is the mind, and this I myself am. What am I then, my God? What nature am I?' (*Magna vis est memoriae... et hoc animus est, et hoc ego ipse sum. Quid ergo sum, deus meus? Quae natura sum? conf. 10.26*).

one. The same is true about the will. As a capacity, the will is part of human ontological structure, which consists in to be-to know-to will (*esse-nosse-velle*, *conf.* 13.12). It is an uncompelled internal “movement towards something” (*motus ad aliquid*, *duab. an.* 14; 16-17), and can be put to morally-neutral uses: for instance, when one wants to know if he exists (*lib. arb.* 1.25). When put to morally bad uses, in wrong choices and actions, the will loses ontological coherence and order but remains still good (to some degree) in that which makes it what it is: its vitiating can only confirm its goodness by nature, since defects can only exist in good things damaged by them (*c. adv. leg.* 1.7; *civ.* 14.13; 12.1; 12.9). That is why a will that chooses badly is a ‘defective will’ (*civ.* 12.6-9), and its defect cannot be removed by removing the will altogether (as one would a bad entity), but instead by healing it, so as to free it from ‘vice’, or its bad functioning (*civ.* 14.11). That is also why the will cannot be reduced to its (moral and psychological) malfunction, even though it may be ‘trapped’ in it. Since a vitiated will is *contra naturam* or opposes nature (*civ.* 14.13; 14.11; *lib. arb.* 3.48), it means that even when the will renders itself incapable to function properly and can only be restored to proper functioning with external, formative aid (*c. Fort.* 22), the will is not *just* or entirely damaged, or else it would cease to exist completely (*c. Iul.* 1.42; *c. adv. leg.* 1.7).

When used to enable clients to acknowledge a dimension of their self that is not entirely personal but is essential to their self, I believe Augustine’s views can have clinical value and help build clients’ positive self-beliefs, self-assessments and expectations about self in relation to others. If a faulty, morally wrong action springs from a (defective) will which expresses itself by that which it lacks, then attention can be drawn to the capacity of willing, as a good resource that can be reached into and further formed (Pârvan 2014). A morally good action, thought Augustine, springs from a will which overcomes malfunctioning (becomes effective) by aid received from an external will with which is enabled to collaborate (God’s will, expressed as grace; *c. ep. Pel.* 1.36; *spir. et litt.* 5; s. 169.13). Regarding such actions, attention can be drawn to the will’s quality of being formed and properly operative by *cooperation* with the other’s will. If clients understand both their self and their will as not identical with particular or habitual acts of choice, or the actions brought about by these choices, then they are encouraged to avoid letting themselves be captive of and defined by faulty actions, and to seek to form a will to act appropriately in collaboration with the therapist, as well as others, outside the therapeutic setting. Moreover, working with Augustine’s views does not leave room for disclaiming responsibility for choices and actions: if individuals experience their will as not fully their own either because effective or defective, they still remain responsible, whether for engaging the cooperation that made *their* efficient and appropriate willing (and acting) possible, or for failing to assume such formative, relational work or having generated/supported the internal deficiency.

It is useful to pause here for a methodological clarification. In exploring Augustine’s ideas for their potential to be clinically relevant, I am presenting first my interpretation of them, and then the form in which I think they can be best used in therapeutic contexts. Elements in his theories that cannot be integrated in secular therapeutic work are not given prominence but they are considered in the way in which I propose that his theories can inform such work. For example, the external aid that forms one’s will and enables it to perform good

actions is in Augustine the divine grace, and not the will of a psychotherapist. But the principle of Augustine's theory is retained in saying that the will can act appropriately with formative help from an external will with which it is enabled to collaborate; in addition, when come from the therapist, the external aid is given similarly to grace, irrespective of merits. This entails no claim that therapist's aid is *just as* God's, as understood by Augustine. Also, the emphasis put on the will's responsibility for willing and acting when cooperating with an external will does not contradict Augustine, as he did not think that grace exempts the will from being responsible for what it wills or how it acts (*en. Ps.* 102.5-6; *s.* 169.13; *ep.* 157.10; *spir. et litt.* 52). The important point to make, however, is that to identify what elements in Augustine's views can be used to generate new therapeutic ways of working and how is a task different to that of interpretation, and inherently not bound to a full and rigid retention of the examined views.

In existing therapeutic approaches, Augustine's way of thinking about self and action in metaphysical terms has not been yet considered. Therapeutic theories (just like attachment) often emphasize the overlap or reciprocal implication between self and behavior, and support and work with it instead of challenging it. For instance, from a psychoanalytic object relation approach, violent offenders or antisocial clients can be prompted to take responsibility by means of recognition that "what one does is what one is", and by therapist's "objective hate" or "object-related hatred" towards the client (Grand 2002, 147-170; Winnicott 1975, 194-203). Or, a cognitive behavioral therapy such as acceptance and commitment therapy seeks to prevent the self from identification with its psychological contents, e.g. thoughts, feelings, beliefs, etc. (Hayes et al. 2012), precisely because the reciprocal causation (if not identification) between self and behavior is recognized, and not challenged: a rigid self (identified with its contents) brings about rigid behavior and vice-versa.

It is my view that the self-action overlap cannot in fact be challenged from within a purely psychological framework, because in psychological terms the self is non-distinguishable from behavior: who one is translates into what one does or is done-to. In order to establish convincingly and coherently the break between self and action as well as the appropriate connection between them one needs to incorporate a perspective from outside psychology and ethics. Augustine's views on self (the individual) as human substance, will as a structural component of it, and actions as relations between substances and not self-existent entities offer a metaphysical perspective wherefrom the self is seen as responsible for actions without ever being ontologically identical with them (whether these are rigid or flexible, good or bad). A narrative therapy technique supported by a psychosocial discourse seeks to separate client's identity from their problems by externalizing and objectifying the latter as separate entities, so that client's identity would not be absorbed in socially constructed diagnostic labels (Combs and Freedman 2012). Augustine offers something different: one's *ontological* identity is distinguished from *behavior* by excluding the objectification of the latter on *metaphysical* grounds, and thereby also establishing self's relation of responsibility for behaviors, which do not exist as separate objects, but are generated by the self.

A challenging task in the therapy with both offenders and victims is to enable them to own their faulty, self-defeating, damaging or self-damaging choices and actions. I think that this

process can be facilitated by working with Augustine's distinction between self and action, because the metaphysical view underlying it enables individuals to affirm themselves as being more than their actions in the very process of taking responsibility for them, and thereby to find themselves supported internally but also externally (given will's relational mode of operating) to choose different, constructive actions. I also think that Augustine's views can be more usefully worked with in clinical contexts than other contemporary philosophical construals of agency and responsibility.

3 Responsibility for non-deliberate actions and externalized agency

Both in philosophy and psychotherapy the question of agency is intimately connected with that of responsibility and in both fields there is a dominant tendency to merge them into just one question: if one is an agent, then one is responsible for one's acts; if not an agent, then not responsible. In general terms, an agent is one with the ability to choose, want, initiate, and perform behavior and movements which are at least to some degree controlled, or one with the power to cause intentional actions. If we look at how contemporary philosophy of action conceives of agency we find that it is reason-dependent: one is an agent only as a rational author, and without deliberate reasons for acting there is no action, even if there is caused movement (O'Connor and Sandis 2010; Korsgaard 2008; Lowe 2008; Mele 1997). If we adopt this intellectualist view on agency in therapeutic contexts, then most of the violent and criminal offenders, including those regarded as being moved to behave violently by their unconscious, insecure internal working models cannot be considered agents and consequently held responsible for their violent deeds. These deeds are often not the result of careful consideration of rational reasons for acting, rather they are performed in a state of anger arousal, or else, dissociation, where they disconnect themselves from their acts and attribute their agency to an external cause acting upon and through them.

Forensic psychotherapy and attachment research bring evidence that many violent offenses are done as a result of emotion dysregulation that builds up to a fit of rage. Doing something in a fit of anger is one of philosophers' typical examples for a non-agential, non-voluntary act; moreover, it is also considered that a "state of terror... or utter panic" can extinguish the capacity for behavioral control (Pickard 2015). Seen with such philosophical lens the violent act is thus accomplished by and through two non-agents. As such, it could not be considered an action any more than leaves being caused to fly by the wind counts as one.

I want to propose a different perspective, according to which violent individuals are in most cases agents, even when they are moved to act by their internal representations of self and other, but they use their agency as though it would not be their own, or as though it would be external to them without actually being so. To some extent I find useful Harry Frankfurt's notion that there can be such a thing as a non-voluntary action, when that action is performed under the guidance of intentional behavior or movements. It may not be the addict's will to take the drug, but the behaviors he performs to inject it are necessarily intentional and guided (Frankfurt 1988, 69-79). This can be useful when one thinks of the perpetrator of violence as having to intend and guide each of the movements that constitute the violent action he performs. However, Frankfurt's point is that the guidance may operate even against or independent of one's will, as an action may be caused by external causes

alone (e.g. the cases of addiction or obsessional beliefs), and to me this is precisely what needs be contested in clinical contexts for effective treatment to be made possible. It is hard for clients to be held responsible, assume responsibility and reclaim control over behavior when the will which moves their behavior is recognized both by themselves and therapists as not their own, or in Frankfurt's terms (1988, 159-176), as imposed on them by external forces.

Unlike Augustine's way of thinking about external forces (God's grace) acting upon the will which remains active and agentive under such forces, Frankfurt's take (1988, 58-68) is that external forces (disclaimed desires or mental movements) immobilize the will and render it passive, which allows for and legitimizes "moral evasion". Of course, and this point is in fact crucial, what Frankfurt calls forces *external* to the owned will, Augustine would deem as internal and defective volitional forces. Consequently, the latter's viewpoint leaves no room for moral evasion. Theoretically, it is still challenging to think from within Augustine's framework, where the moving principle of a voluntary, morally wrong action is a defective will, which operates through what it lacks rather than what makes the will be what it is. Notwithstanding, on the practical level of therapeutic intervention I find Augustine's view to be more helpful than Frankfurt's insofar as it holds that without the exercise of will (however divided and internally conflicting; *civ.* 12.7; *conf.* 8.21) no action would be performed at all (*retr.* 1.15.3), whether the will is rational and thus an effective cause, or not rational (not reason-informed) and thus a defective cause (*civ.* 12.6-8; *lib. arb.* 3.52).

Augustine, just as Aristotle, considered that an action is voluntary even when the causing will is not in accordance with reason or not a rational will. Acts done in anger are voluntary even though not deliberate or done by choice, thought Aristotle (*Nic. Eth.* 5.8, 1135b 5-10). To Frankfurt (1988, 58-68), a person possessed by anger is moved to act by a will which is not quite his own, and by regretting his inability to control the anger he can legitimately disclaim it. Psychologists would instead say that the anger expressed is always one's own, and if one is unable to control it, it is precisely because the anger is disowned or unprocessed, and thus un-regulated. My own view is that the anger expresses one's own will, and therefore the angered person acts as an agent, whether they perform a will recognized as their own or a disowned will.

If I think that the will with which I want and which causes me to act is not produced internally, but is externally caused, and not chosen, then it is easy for me to disclaim responsibility for both the will and the resulted action, something quite common amongst offenders. But the will which brings about the action cannot properly be disclaimed, as it is not the disowned will alone that causes the action. Perhaps the actor has no knowledge that the harming will is his own, but he nonetheless guides his behavior, is aware of the guidance and of its harmful effect, and perhaps even of the fact that he is enacting what he takes to be an external will, but he could still form an owned will to stop the guided behavior, and he acts as an agent if he does not do it just as he would if he did do it. In this sense, there exists no fully disowned will, as externalized wills are not enacted through external or separate organisms with their own volitional processes. Thinking through Augustine's framework, the experience of will as external does not indicate that the will is external, or rendered passive by external forces; it simply indicates that the will is defective, and a defective will

is still a functioning will, which belongs to someone, and not no one. To let oneself be moved to act by an externalized will is still a use of will, and, however defective it may be, the will never fails completely in performing an action, because the action is made possible through the will. Because the will can express itself or be enacted without deliberation, I believe that rational control or awareness and volitional control or intentional assent can work separately, and it is the latter that makes one an agent and responsible for one's actions.

The child co-creates her mental models of self and other intentionally, even though not deliberately (i.e. by way of rational consideration). The internal models develop in the child's interaction with caregivers, and thus are not something that just happens *to* children. As Levy and Orlans (2000, 6-7) pointed out, attachment "is not something that parents do to their children", is a mutual regulatory system, where child and parent influence each other. If so, then by performing certain behaviors and not others the child acts, although without rational awareness and control of her relational agency and her action. Later in adulthood one is responsible for maintaining or revising the unconscious models of self and other that prompt them to action (Bowlby 1988).

Philosophers tell us that selves are agents, by which they mean *rational* agents (Lowe 2008, Korsgaard 2008). When selves are 'possessed' by passions or moved to act by a will not recognized as their own, or else are passive channels through which desires and impulses get acted out, they are not agents (Frankfurt 1988, Korsgaard 2008). In one way or another, when reason fails, there is no agent. Relying on Augustine, I want to propose a view that may work more usefully to precipitate therapeutic change and elicit responsibility: even when the will is faulty, there is an agent, one who uses a deficient or conflicting will, sometimes just so as to let oneself be used by a disowned will, experienced as external, in order to perform certain behaviors and not others. This is relevant for victims of violence too (especially the traumatized), who can behave as though they would be mere places where events happen to occur, and hold on to the position of 'being done-to', thereby disowning their agency, and enacting what they take to be an external agency, outside their control; the responsibility they could and should assume in their process of healing, in order to move forward is thus avoided. Responsibility for failures of will in violent individuals could be stimulated if they learn that this does not entail to accept that their will is entirely defective in its constitution, or that their self, who enacts it, is thus, and that therefore their self and will could generate different behaviors with appropriate aid (Pârvan 2014).

4 The self-action distinction as a philosophical tool for emotion regulation

An emphasis on responsibility is helpful because offenders imprisoned for violent acts tend to externalize blame (attributing it to others), or else justify their actions as not blameworthy and even good or righteous albeit aggressive. They do not hold violent self-concepts, protest against being categorized as 'violent criminals', offer self-narratives where the self is morally decent and victimized or/and constructed as 'violent' by external factors: the others' actions, as they happened in the near or distant past (e.g. abuses suffered in childhood), mental illnesses, addictions, social or relational circumstances, all of which constrain or justify them in acting aggressively. Thus, even in their episode of violence they are not to

blame because their violent behavior is not agentive, or is external to their self, or externally provoked, such that the person behind the violent act is good, or the act is not really an offense. If they do claim their actions as their own they perceive themselves constrained to reiterate them in order to preserve the self: not doing them entails not knowing who they are anymore (Presser 2004; Fox 1999; Toch 1993; Gilligan 1996). Looking at relationship violence through an attachment perspective, perpetrators were found to focus on the other and the relationship, and not on themselves, and to identify external causes for their emotional discomfort (fear, anger, or anxiety) and aggressive behavior: the other and the other's action, presumed to be intentionally harmful towards them (Sonkin and Dutton 2003; Dutton 2003).

Both such violent offenders and sometimes the therapeutic treatment they are engaged in aim at constructing their selves as moral or as 'new', non-violent selves. But the overlap between self and action endorsed both by clients and therapists hinders this process: violent offenders affirm their self as moral by fleeing responsibility for violent acts and therapists are treating them as violent selves so that they would take responsibility for violent acts. Given the shared understanding that the self's identity is given by the quality of its actions, offenders aim to protect and salvage the self by disconnecting it from violent acts.

The self's need for protection is at the core of attachment theory: all types of attachment anxiety are fundamentally self related. The infant is in radical need of protection and care from others, and if it does not receive it, then it is put in danger. But the sense that one is in danger comes to be associated with a value judgment: if one did not receive the necessary protection from others it is because one was not worthy of it. A not worthy self is always in danger, threatened by the others' (non-caring) actions and reduced to the nonworthy actions of others, and for both these reasons predisposed to violent behavior (in self-defense and self-preservation), or to behavior likely to elicit violence in others (in the self's misguided pursuit for acquiring or claiming worth and security).

I suggest that assisting persons in therapy to consciously understand and work with the distinction between self and action would help them to: protect the self (against insecurity, instability, diminution), control (impulsive, violent, or self-destructive) behavior, take proper responsibility for their actions and the construction of their self. This is relevant for victims too, who sometimes engage in morally reprehensible acts in order to survive the violent encounter, and then take responsibility precisely by identifying self with actions and consequently punishing themselves for what they did, as well as for what they suffered (Grand 2002, 87-114).

It is easier to self-regulate and to start build a securely positive sense of self, when the self is not perceived as being in danger, or merging with the other's self or behavior. The distinction thus works against two major emotional-attitudinal conditions that elicit violent behavior: distrust and fear of others. Clear borders and friendly neighbors mean security. This in turn ensures a good balance between autonomy and dependence, which is something that all insecurely attached individuals (whether they come to be involved in violence or not) need to work on. Furthermore, as the self-action distinction enables its user not to perceive the other and the other's behavior as a threat to the self, the focus moves from controlling

the other and the other's actions (behavior employed both by violent and abused individuals) to controlling one's own actions and to a conscious possession of and reflection on the self.

The self-action distinction could thus be used as a therapeutic tool that would help restructure clients' representational models of self and other and complement existing methods in attachment-informed therapy. It differs significantly from these insofar as it aims at regulating emotions not by direct work with emotions or senses (relaxation techniques, attunement, empathy, caring therapeutic relationship), but by work involving intellectual understanding contextualized in clients' biographical experiences and facilitated through practical exercises and relational experience in therapy and outside it. Through a combination of verbal explanations and interventions and nonverbal, experiential work, therapists could help clients realize that their actions do not exist in the way they themselves exist; that in order to perform an action one needs to be something other than that action (its agent); that the self does not entirely consist nor is entirely expressed in the capacity of willing; that an enacted will is distinct from the will as a capacity in them, or from their self; that the will they enact is theirs, and they play a role in enacting it even when they do not know it to be theirs; that the self changes with its actions whereas completed actions cannot change; that the self is responsible for its own and not others' enacted defective wills, etc. To give a trivial example, the therapist could ask the client to move a chair from one part of the room to another. Through completing this simple task the client can acknowledge that his performed action does not exist in the way he himself exists, that the action does not persist in time and cannot be changed once completed, that although he was told to move the chair, the action is performed through his own will which he can experience as a capacity able to function separately from moral considerations, there to be used in ways that involve a degree of choice, and having an effect on the world when enacted; furthermore, he can experience himself as being more than the enacted will and the resulted action whilst responsible for both. Clients' conceptual acquisition is thus aided, deepen, and stabilized by complex experience, with bodily, nonverbal and relational components.

The therapist explains the self-action distinction and facilitates its comprehension through direct experience and interactions, which include clients' experience of how the therapist applies it by treating them as selves that are separate from but responsible for their actions. This involves valuing the clients regardless of their faulty acts, and is part not only of a general requirement of practice but also of what it means to provide clients with a nurturing and trusting therapeutic relationship which is the basis of all attachment interventions. Still, the approach proposed here is different because it is grounded in a metaphysics which explains *what* should be valued in clients and why, as well as why it is legitimate and helpful for a person to apply this principle in relation to oneself or the other, as a way of caring for oneself. The distinction between self and action thus works not merely as an ethical or technical principle, and is not restricted to a certain type of relation, experienced in therapy, or, by extension, to a caring relation with a close other. Just as attachment-based methods, this approach too seeks to help clients develop new patterns of relating and strategies of modulating emotion, only not primarily by enabling them to experience a caring relation with the other, but by equipping them with a conceptual, experientially-verified tool that enables them to establish appropriate relations between their self and their own or close and non-close others' actions.

Once the distinction is clearly and correctly grasped by clients through reflective-experiential work, a second step is to transform it in a technique of coping with anxiety, and managing and reducing intense emotions, such as anger and/or fear, which would thus be of help to both perpetrators and victims of violence. Much of the treatment of individuals with insecure attachments and internal models is based on enabling them to acquire and develop self-soothing strategies that would provide emotion regulation. Applied as a self-soothing technique the self-action distinction would be useful and unique because, in the way it works, the source of soothing is both internal and internalized, whereas in other available techniques the soothing source (a relationship, or an attachment figure) is just internalized.

For instance, Sonkin and Dutton (2003) believe that the experience of being understood and not judged by the therapist is itself soothing, and a way for clients to reinforce self-confidence, and feel reassured is to think of the therapist (as an internalized soothing voice) outside the session, in moments of attachment related anxiety. Like all other existing coping strategies employed in attachment-informed therapy, this one works by exposure to external action: whether the client is exposed to therapist's empathy or, say, attachment anxiety inducing factors (e.g. in deconditioning interventions based on therapist's physical or emotional closeness) he or she learns to self-regulate by appeal to one other, who can symbolically or actually play the role of a caring attachment figure. Just as dysregulation, regulation is acquired through the other and the other's action. Thus, the most one can do developmentally is to internalize this (benevolent) other, and its role and action upon one's self, and then turn to it when in distress (Mikulincer et al. 2003).

As a self-soothing strategy, the self-action distinction is meant to work without requiring support from a benevolent other (and its actions) against perceived or actual threats from a non-benevolent other (and its actions). The distinction can be translated in or associated with a short soothing statement to be used when the attachment related anxiety is activated: e.g. 'What the other is doing (to me) is not a reflection of what I am.' or 'If the other is acting badly/unworthily towards me it does not mean that he thinks I am bad/unworthy.' Many other variations on the theme of self-action distinction can be thought of and used in moments of anger/anxiety escalation, when the self feels threatened, as 'talk-down' statements that would diminish anger/anxiety and provide self-soothing. The same statements can protect the victim of violence, and in the same way: by facilitating self-regulation (in moments of fear or anxiety), and countering self-diminution (loss of selfworth). And, just as it is for victims, for perpetrators too the distinction is useful *during* the performance of the violent act, as it can not only prevent them from interpreting the other's behavior as a source of threat to the self, but it may help them stop acting in accordance with such interpretation even after they made it.

When the brief soothing statement is used in moments of emotional dysregulation the self-soothing actually comes from the self, and not from the symbolic figure of a caring other and their action on the self: e.g. therapist's internalized voice or attunement. What was previously internalized and is appealed to in the present is self's own soothing voice. This voice is created in therapy through the assisted and contextualized conscious reflection, experientially supported by nonverbal work and relational interactions with the therapist, by which the client adopts a view on the self as distinct from actions. This view becomes a

resource of their self that can be accessed (when needed) in a soothing form with immediacy and thus (presumably) with spontaneous efficacy. Of course, in this coping strategy the other still plays a crucial and indispensable role, as it is the therapist that introduces clients to it and the one who first applies the self-action distinction to clients, in order to help them develop a more positive, secure, and stable sense of self. But what strengthens clients' self is not so much the therapist as *the other* as it is their own conceptual understanding of what both the self-action nondistinction and distinction are, how they work, and with what effects. This understanding is embodied, as it is supported by physical and emotional experience and perception (thus, for instance, clients sense that the therapist applies the distinction to them) but it is not experience *per se* that clients are given so that they could interpret, direct and order their experiences, but concepts; or, more precisely, concepts that can be experienced.

The reason why I believe that this combination of intellectual understanding and its mechanical, rudimentary, almost non-reflective application can work is that it is based on a gradual, formative and experiential process of reversing the instinctive judgment that generates unconscious ways of acting which lead to perpetration or/and receipt of violence. The reversal is done first by exposing (intellectually and experientially) the initial judgment (the self-action nondistinction) as incorrect and damaging, then by showing (through explanation, biographically contextualized reflection, and actual relational experience) why and how it would help to be corrected by a new judgment (the self-action distinction) and facilitating its assimilation, and then by offering an efficient way for the new judgment to be consistently reinforced and appealed to in challenging, distressing situations, as a fast and powerful enough regulatory tool to work against automatic mechanisms.

One other reason why I consider that this therapeutic approach can be effective is what also sets it apart from both attachment and cognitive-behavioral interventions: it provides clients not just with strategies 'to do', 'to think', and 'to cope' in particular problematic situations, but with a 'way to be' that supports them in a complex range of situations, problematic or not, as it guides their understanding and practice of what it is to be a self, to have a will and use it, to act and be responsible for one's actions. It gives clients a metaphysics of self and action that supports them in building a self able to distinguish itself from its own and others' actions, to own the former, and to generate thoughts that regulate emotion and behavior when either its own or the other's actions appear outside its control.

5 Conclusions

Interventions in attachment-informed therapy aimed at changing clients' representational models of self and other focus on work with emotions, senses and behavior, and do not include reflection on the self, its inherent capacities, and how it is distinct from the other and from both the self's and the other's actions. Such reflection, facilitated by direct experience, biographical contextualization and relational interactions is advanced here as the core of a new therapeutic approach to countering the unconscious operations of the representational models that lead to either perpetration or receipt of violence. It is pointed out that an instinctive value judgment on the nondistinction between self and action helped build the models and keeps supporting their automatic modes of operating. A metaphysically-grounded view of self as distinct from actions is proposed, and then translated into self-

soothing brief statements that clients (offenders and victims) can use in order to regulate anxiety when they feel threatened or distressed before, during, and after the performance of a violent act.

The self-action distinction can complement existing methods in attachment-based therapy and be employed also outside an attachment-theory framework, in the therapy of violent and traumatized individuals. Future work is envisaged in order to expound in more detail the reflective-experiential approach and make it more accessible for application in practice. This approach challenges both therapeutic and philosophical established ways of conceptualizing agency and responsibility in their relation to giving and receiving violence, and this challenge can be extended by future work as well.

Biography

Bio: Assistant professor, Department of Psychology and Communication Sciences, University of Pitesti, Romania. Research interests: Augustine; medical humanities – especially how Augustine’s views on substance, evil, will and action can inform psychiatric-psychotherapeutic treatment of violent behavior and trauma, and medical approaches to the care of chronic patients. Recent publications: (2014). A Philosophical Concept of Deprivation and Its Use in The Attachment-Focused Treatment of Violence. *International Journal of Applied Philosophy* 28/2, 331-346. (2015). Patients’ substantialization of disease, the hybrid symptom, and *metaphysical* care. *Journal of Evaluation in Clinical Practice* 21/3, 380-388.

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