Commentary on Friemann

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One of the great strengths of Friemann’s paper on reducing conflict is the emphasis he puts on emotions and emotion-laden states. The presentation of argumentation and dialectical disagreement given by most philosophers treats arguers as if they were emotionless, or as if they should be. For example, of the 66 papers at this OSSA Conference only 3 or 4 consider emotion-laden states in an important way. Yet it is hard to find many examples of actual-world argumentation and dialectical reasoning where emotions do not play a strong part.

1.

The central focus of Friemann’s paper is the concept of identification (or fusion). Friemann traces a theme in the recent literature on reducing or resolving deep conflicts: for a dialogue to develop in deep conflicts, so this theme runs, participants should empathize with one another, at least as far as possible. They should not, on the other hand, go so far as to identify with one another. Identification, in contrast to empathy, is a dangerous state of mind to develop.

Friemann traces this mistrust of identification back to its roots in therapy, to Carl Rogers and others. It is the dangers of identification that Friemann wants to question.

In opposition to this theme, Friemann maintains that in deep conflicts, between ordinary people, identification is not appreciably dangerous at all. The fact that the conflict is a deep one, and that it occurs between ordinary people (rather than between therapist and client), are central parts of Friemann’s position. In such conflicts, Friemann argues, the chances that identification will occur are very slim. Rather, identification is an ideal that participants should aspire to—even if it is unlikely (because their conflicts are so deep) that they will ever succeed in identifying (or fusing) with the other.

Friemann begins in a therapeutic setting and spells out what is meant by identification. He does this by contrasting it with empathy: It is helpful, maybe essential, for a therapist to empathize with her client; it is dangerous, maybe harmful, for a therapist to identify with her client.

What is the difference between the two? I hope you already have an intuitive grasp of the difference, because spelling out that difference will be one focus of my commentary.

Friemann goes on: The relationship that holds between ordinary people who are locked in deep conflict is entirely different from the relationship that holds between therapists and patients. It is difficult enough for people in deep disagreements even to empathize with one another; they are extremely unlikely to identify with one another. So there is very little danger of identification actually occurring. Therefore, it should be held up as a goal or ideal in those situations.

Near the end of his paper, Friemann even offers some practical techniques that might help a participant approach the ideal of identification with the other.
Commentary on Richard Friemann

I want to focus on two aspects of Friemann’s paper, and as part of the second one, I am going to conclude that Friemann is wrong. I will argue that we should not hold up identification as a goal—even among ordinary people, even in deep conflicts—because it is dangerous and often harmful.

2.

I want to begin by showing how unsatisfactory all the specifications of empathy and identification are to an analytic philosopher. Indeed, if I weren’t already quite familiar with the two states, the words these famous therapists use to spell them out would never help me see what they were talking about.

Friemann begins spelling out the difference by quoting an early definition of Carl Rogers’:

The state of empathy or being empathetic, is to perceive the internal frame of reference of another with accuracy and with the emotional components and meanings which pertain thereto as if one were the person, but without ever losing the ‘as if’ condition. Thus it means to sense the hurt or the pleasure of another as he senses it and to perceive the causes thereof as he perceives them, but without ever losing the recognition that it is as if I were hurt or pleased and so forth. If this ‘as if’ quality is lost, then the state is one of identification (p.6).

Friemann comments that “Here Rogers warns us three times not to lose the ‘as if’ condition or we will end up with identification” (p. 6).

(A great deal will be made of this “as if” part (by Friemann, Rogers and others), but I find it seriously misleading. (I’ll try to show why near the end of this paper.))

When therapists identify with their clients, they are in a state of confusion. Some theorists think it’s a confusion of identities, others that it is a confusion of experience.

The problem with identification is a “confusion of identity”: “A therapist is allowed to feel what his client feels as long as he realizes it is the client’s feeling that he is feeling. In emotional identification, it appears that the therapist can’t make the distinction between his patient and himself” (p. 8).

On p. 9 Friemann is discussing Arnett’s idea that it is irresponsible for therapists to identify with their clients. Friemann says: “There doesn’t seem to be any irresponsibility in feeling what another feels while being aware that it is not your feeling.”

(I think I know what Friemann is trying to get at, but it is hard to say it clearly. What could it possibly mean to feel what another feels while knowing it isn’t your feeling? If I’m feeling it, then it is my feeling. The words used are not helping.)

With an air of making matters clearer, Friemann quotes two psychotherapists:

. . . the therapist must be careful not to confuse his or her experience with that of the client’s or get lost in the client’s experience. One is to enter the client’s experience on an “as if” basis but never to lose the sense of distinction between self and client.

Friemann then comments: “The concept of experience is more limited than the concept of identity, so presumably one could become confused over whether or not an experience belonged to oneself or another, while not being confused about one’s identity” (p. 10).
As Dave Barry would say: I am not making this up! Taking the words at all literally, how would any of this work? Suppose the therapist is in the midst of identifying with a client. So we ask her, “Who are you?” Would the therapist, having “a confusion of identity,” not know whether she was herself or someone else? Or we ask, “Is this your own experience or your client’s?” Would the therapist, having a “confusion of experience,” not know whether it’s her own or someone else’s?

The attempts to spell out empathy and identification and the differences between the two are almost unbelievably convoluted and confusing. I don’t want to lay this at Friemann’s feet: all the specifications, by later theorists as well as Rogers, grope to characterize these states of minds in words that manifestly don’t do the job—at least not for anyone who is careful about language.

3.

I think I know what Friemann, Rogers, and the other theorists are talking about when they try to spell out what identification and empathy are. But I know this from previous acquaintance with the concepts in practice. I don’t think that the words of Rogers or Friemann or anyone else in this debate would help me to understand the concepts if I did not understand them already.

Here’s an example of identification in a therapeutic setting. A man and a woman come to a therapist for marriage counseling. The man describes how the woman “mistreated” him and how angry he is about it. The therapist becomes angry with the woman. That’s a case of identification.

The therapist is not “confusing” her identity or her experience with the man’s—we could describe it that way, but only by risking a lot of misunderstanding. Nor is she really “getting lost” in the man’s feeling—though this description for me comes closer. What she is doing has two aspects: one, she is feeling anger herself, and, two, there is something inappropriate about this. She, the therapist, is angry, and it is inappropriate for her to actually be angry in this situation. What’s more, she is angry with the woman. It is directed anger. She is taking sides.

She is not empathizing with both (whether both are present or not).

The inappropriateness is a key part of what happens in identification, and it can take any number of forms. You can see why Rogers and other theorists use such a convoluted description to capture identification: The therapist is angry, in this example, even though nothing has been done to her. Any alleged mistreatment was done to the married man, not to the therapist.

Experientially, the therapist’s anger is almost jolting in its inappropriateness. We might wonder, “What’s she got to be angry about? Nobody did anything to her!” We might even conclude that the therapist has her own issues and that these are playing a major part in her reaction of anger. Far from feeling his anger, she may well be projecting her own.

With empathy, by contrast, the therapist wouldn’t be angry at all. She would allow herself to see the situation as the man sees it; she would get hold of his perspective. Now we can see why Rogers uses that “as if” description: he means that the therapist is not in fact angry at all; she is not feeling anger. Rather, it is as if she is angry. What does this mean?

In empathizing with the husband, the therapist is able

(a) to maintain her therapeutic distance,
(b) to know what he is feeling,
(c) to realize how one could well have those feelings in this situation, and
(d) to understand how having those feelings would be valid from his perspective.

With empathy, the therapist could say, “Oh, I know what it feels like to be unfairly treated, and I know how a person could well feel unfairly treated in the circumstances you describe.”

In addition, empathizing with the man allows her
(e) to empathize also with the woman.

Notice that in empathy there is a cognitive component that seems to be lacking in identification. That is, in empathy there is a good deal of intellectual as well as emotional openness; there is a lot of thinking-things-through-from-the-other-person’s-perspective. In identification, by contrast, any cognitive component (understanding intellectually what is going on) is likely to be overwhelmed by the emotions.

In the therapist’s case, identification is inapplicable. By becoming angry herself in response to the man’s story, her feelings and reactions are inappropriate in at least four ways. They are inappropriate with respect to beliefs she holds (the theoretical principles that guide her therapy); with respect to her role in relation to the conflict (she is a therapist, not a party to the conflict); with respect to the distance she should be maintaining; and they are inappropriate with respect to who she in fact is (she is not him—she is not the person who was mistreated).

Friemann clearly recognizes that identification is inappropriate for the therapist. The question is: Is it similarly inappropriate to identify with someone in a non-therapeutic context, specifically when two people are engaged in deep conflict?

4.

Friemann maintains that identification is extremely unlikely in cases of deep conflict. That is part of his reason for thinking that it’s not really a danger in such situations. Since it’s virtually unachievable, it can function as an ideal. If I am in deep conflict with you, the ideal would be to identify with you—to “feel your feelings” (without the buffering “as if”), and thus feel the full impact of your side.

I’m not so sure that identification is as uncommon in deep conflicts as Friemann thinks it is. He might be right if strong emotions followed a logical course of action. If fascism and communism were purely sets of beliefs, we would not see people go from one to the other without passing through all those more centrist political views that lie between them. In fact, though, “flip-flopping” from fascism to communism is not all that unusual. It is far more usual than passing from fascism to conservatism to liberalism to communism.

Linda Lovelace became a born-again Christian. So did Saul of Tarsus. Raging death-penalty advocates and raging death-penalty opponents sometimes flip to the other side, displaying their fervor now for the side they were just ragefully against. Ronald Reagan went from socialist to right-winger without going through the intermediate stages.

Strong emotions don’t necessarily follow a gradual path when they change. People involved in deep conflict—where there is a heavy commitment of emotion to the exclusive righteousness of their own side and the utter wrongness of the other side—can easily flip-flop. (I’m not, of course, maintaining that this is common—only that it is not all that unusual.)
It’s partly the result, I think, of the extremity of the emotions involved. Suppose I relish strong emotions; I attach them to my own point of view exclusively; and I am in deep conflict with you on the other side. Then I find something unexpectedly “wrong” with my own position (or something unexpectedly “right” with yours). There is nothing especially impossible about flipping totally to your side. That is how conversion often works.

I believe identification plays a big role in this. At least, it is one common mechanism by which people flip from one extreme viewpoint to the opposite. Saul identifies with a Christ he’s been persecuting; the death-penalty advocate sees “Dead Man Walking” and identifies with the criminal’s anguish; the death-penalty opponent suddenly identifies with a murder victim.

Empathy produces a more measured reaction. Since it allows people to keep their distance while understanding another’s feelings, and since it allows an empathetic understanding even of opposing sides, it doesn’t lend itself so readily to flipping sides. (An empathetic Saul would say something a lot less extreme than the identifying Saul: “Ah. I see how unpleasant it must be to be persecuted, and I now see how your actions seem appropriate to you, given that you believe you’ve discovered the true faith. From now on, I’m not only going to stop persecuting Christians, I’m going to stop telling people how they ought to live.”)

5.

Finally, I want to maintain that identification retains its inappropriateness even in non-therapeutic settings, even when parties are in deep conflict.

Suppose A and B are getting divorced—and they are in deep conflict. Each believes the other would be an unhealthy parent for their daughter. Each wants custody. Each is furious at the other. (I’ve included three states of mind: a belief, a want, and an emotion—in fact a directed emotion.)

This is deep conflict. Part of what makes it deep is the conviction that the other parent would be bad for the daughter. You can see why Friemann thinks identification is unlikely in such a situation. But I would argue that, likely or not, it still would not be beneficial—precisely because of the inappropriateness that accompanies identification.

It would be inappropriate for A to “take on” any one of those states of mind. Consider the belief. Given that A believes B would be a bad parent, A should certainly not identify with B and take on the belief that B would be a good parent. That would be to abandon, without reason, A’s previous belief.

Similarly, A should not identify with B to the extent of taking on her want. B, after all, wants custody. Identifying with that want amounts to A’s abandoning A’s own want (and his belief as well).

Finally, it make no sense for A to identify with B’s emotion. B is furious: it would not help the conflict for A to feel furious. And it would involve great self-abandonment for A to be furious at himself.

None of these helps with conflict resolution. And none of them is appropriate. None of these constitutes the “ideal” that Friemann depicts.

What, then, should A do? What would help?
A should empathize with B. The empathy maintains a distance while still allowing A to see and understand the situation as B sees it. Or at least—and here’s that “as if” again—A, while remaining A, should feel the validity for B of how B sees things. By empathizing, A can start to understand how B could see A as a bad parent. A can be (as Friemann insightfully stresses) emotionally and intellectually open to B’s beliefs—but without the self-abandonment of taking them on himself. Similarly, empathizing can reveal to A how B’s want (to have custody), and even her fury at him, make sense—from her perspective.

6.

Finally, at the back of Friemann’s thesis, I think, is the belief that there is a continuum running from empathy to identification—in the sense that both are ways of helping parties “more adequately understand the emotional aspects of the conflict” (p. 1). Identification would allow this understanding to a significantly greater degree than empathy would.

I think Friemann is led down this path by the confusing way Rogers and others speak about identification and empathy. When A identifies with B, these theorists say, A feels B’s feelings; A confuses himself and his experiences with B and her experiences. This sounds as though A is getting in touch with B’s feelings in a singularly profound way—A is actually feeling B’s feelings himself!

But I don’t think this is so. People, of course, can’t really feel other people’s anger. That’s just a confusing façon de parler. All A can feel is A’s own anger: obviously. In the case of identification, A’s anger is triggered by hearing B’s story, by seeing how much B is hurting. A feels anger (A’s own anger, remember), even though nothing has been done to A. That’s confused; that’s inappropriate.

What happens in identification is that A imaginatively places himself in B’s situation, and that triggers A’s own mechanisms of anger. Far from bringing A and B closer together, identification is far more likely to be a result of projection.

I have argued that empathy and identification are different in kind. Empathy allows distance to remain. Identification does not. Empathy is cognitive: it is, partly at least, aimed at cognitively understanding the other. Identification is not: the effect of identification is to be feeling strong emotions, without much cause. In identification, a person abandons her own beliefs, desires, and emotions—even her identity—and “takes on” those of another. This is inappropriate whether she is a therapist or a party to a deep conflict.