



On Unconscious Emotions

Michael Fox

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ON UNCONSCIOUS EMOTIONS¹

I

A number of influential critics of psychoanalysis have argued that certain Freudian concepts which are central to the psychoanalytic interpretation of behavior, dreams, slips, and other phenomena can be made sense of only if analyzed dispositionally. Thus, for example, dispositional analyses of ascriptions of unconscious desires, unconscious motives, unconscious memories, and unconscious hatred have been advanced² as the only meaningful elucidations of their roles in the psychoanalytic language of interpretation and explanation.

Another such concept, which has recently been made the subject of a dispositional analysis by Harvey Mullane,³ is that of unconscious emotions; and it will be my purpose here to examine the dispositional thesis concerning unconscious emotions (as presented by Mullane) in Sections II and III below. While in my view, dispositional analyses of psychoanalytic concepts generally miss the point of Freud's attempts to characterize and account for aberrant psychological phenomena, I shall show that this is so in what follows only with respect to his treatment of unconscious emotions. To do this, it will be necessary to provide a nondispositional interpretation of statements ascribing unconscious emotions (Section IV). From the application of this alternative and nondispositional analysis of unconscious emotion ascriptions (Section V), two main conclusions will become clear: (1)

¹ An earlier version of this paper was read to the Colloquium of staff and graduate students at Queen's University, Kingston, Ontario, Canada. I am indebted to my colleague, Mr. Henry Laycock, who replied to the earlier paper, for his extremely helpful comments.

² By Bertrand Russell (*The Analysis of Mind* [London: George Allen & Unwin, 1921], pp. 30-40, 58-76), Lewis White Beck ("Conscious and Unconscious Motives," *Mind*, LXXV [1966], pp. 155-179), Knight Dunlap ("Psychoanalysis and the Unconscious," in Irwin G. Sarason, ed., *Science and Theory in Psychoanalysis* [Princeton: D. Van Nostrand, 1965], pp. 123-136), and Arthur Pap ("On the Empirical Interpretation of Psychoanalytic Concepts," in Sidney Hook, ed., *Psychoanalysis, Scientific Method, and Philosophy: A Symposium* [New York: Grove Press, 1960], pp. 283-297), respectively.

³ Harvey Mullane, "Unconscious Emotions," *Theoria*, XXXI (1965), 181-190.

that there is only one kind of case in which a dispositional analysis of ascriptions of unconscious emotions is evidently warranted and required, and (2) that what Freud usually meant to denote by the expression "unconscious emotion" — contrary to what one might think — is a presently (consciously) experienced emotional state which the patient intentionally, but self-deceivingly, disguises even from his own awareness.

II

Mullane's paper on unconscious emotions (mentioned in the preceding Section) puts forward the view that emotions, like fear or anxiety,⁴ cannot, by definition, be unconscious, yet presently *mental* states, since we can only ascribe emotional states as such to agents who are, will eventually be, or would be (if the appropriate circumstances prevailed), actually and consciously experiencing such a state or having such a feeling. We *can* ascribe emotional states to others in the absence of the experiential element of these states; but such an ascription is meaningful only in terms of the agent's future, or at least possible, experience.⁵ The conclusion to be drawn from this, Mullane reasons, is *not* that no sense can be made of such statements as "*P* has an unconscious fear of *X*," or "*P* is unconsciously afraid of *X*" (even though *P* does not *feel* afraid), but rather, that these and similar formulations are meaningful if (and only if) analyzed dispositionally, i.e., in terms of what *P* *would* feel *if* the conditions were right. His point is that the psychoanalytic session is designed to make the conditions right for a patient not only to accept the analyst's interpretation of his performances and thoughts, but also, to experience consciously the emotions (abreaction) which the analyst has hypothesized as being evident in his neurotic symptoms and actions. These things can be accomplished only if certain blocking conditions are removed. The patient must experience these emotions as directed at certain persons, situations, character traits of his own, etc., which figure prominently in the analyst's interpretation.

⁴ Mullane treats "fear" and "anxiety" as roughly equivalent in meaning. While this is not strictly accurate, I shall adopt his usage for the sake of discussion, since the remarks I want to make are not dependent upon distinguishing these terms. The American Psychiatric Association's *A Psychiatric Glossary*, 3rd edn. (Washington, D.C. : American Psychiatric Association Publications Office, 1969), defines anxiety as: "Apprehension, tension, or uneasiness that stems from the anticipation of danger, the source of which is largely unknown or unrecognized. Primarily of intrapsychic origin, in distinction to fear which is the emotional response to a consciously recognized and usually external threat or danger" (p. 12).

⁵ This seems clearly contradicted, however, by Mullane's assertion (*ibid.*, p. 183) that "it is *not* the 'essence' of an emotion that we should feel it."

This summary is basically correct; but Mullane's conclusion in no way licenses or entails a dispositional analysis of *all* expressions referring to unconscious emotions or feelings. To adhere to a strictly dispositional analysis of all statements about unconscious emotions is to confuse a necessary condition for verifying a certain class of psychoanalytic interpretations with the reasons for their being proposed initially, and therefore, too, with the criteria for their meaningfulness. Meaningfulness, in most of these cases, is a function of extending the explanatory techniques of everyday life by generalizing or using appropriate analogies. The reasons for so doing are to seek intelligibility where none was previously available, to understand neurotic behavior, verbal utterances, and other symptoms, as meaningful, symbolic, and purposive, and finally, to use these acquired insights to help the neurotic individual gain control over his illness.

III

Let us begin by considering the examples offered by Mullane to show that talking about unconscious emotions does not "amount . . . to asserting that there are such things as 'unfelt feelings' in addition to the usual sort which are of course, felt."⁶ He advances six cases, five of which are such that it would be appropriate (even necessary) to speak of unconscious emotions in the contexts provided by their special features. Mullane argues that normally, the feeling of fear accompanies being in a dangerous or threatening situation, so we learn that if *A feels* afraid, then *A is* afraid (as we know also from self-awareness). It does not follow, of course (and he goes on to illustrate cases to support this position), that if *A is* afraid, then *A feels* afraid as well, for an emotional state comprises "three components, the behavioral, the physiological, and the experiential."⁷ Thus, he maintains that even "in ordinary usage, terms like 'fear,' 'anxiety,' 'hate,' do not necessarily refer to 'private' feelings, but rather are sometimes solely concerned with the nonexperiential aspects of emotional states."⁸ Hence, since we sometimes do legitimately ascribe an emotional state to someone on grounds other than his introspective reports, we must have other criteria for doing so (as, in fact, we do). Or to put it differently, there are other sufficient conditions for, e.g., one's being afraid, than one's conscious feeling.⁹ But the final court of appeal must be the agent himself, for we can never conclusively argue that he is in a certain emotional state unless he

⁶ *Ibid.*, p. 181.

⁷ *Ibid.*, p. 183.

⁸ *Ibid.*

⁹ *Ibid.*, p. 190.

does now, will at some future time, or would (in principle, under special circumstances) be able to, experience being in that state and report on it as such. This claim is illustrated by Mullane's six cases, in each of which the experiential aspect of the emotion is absent, but in which the emotional state is predicated of the agent nonetheless.

In Case 1,¹⁰ a person comes upon a poisonous snake in the woods and his immediate response is to run away from it. Further, he does not feel any fear until he is out of danger. Here Mullane comments that "surely, it could be said that I ran because I was afraid. The object of the fear is, in a perfectly straightforward way, the snake, and it is from fear of it that I run, even though while running, I do not feel afraid . . . [T]he above example can be understood as a case in which, *for a time*, only the behavioral element [of fear] is present."¹¹ Case 1 is intended to establish what I call *thesis (i)*: that *A* can be afraid without feeling afraid at the given time, though he will feel afraid after the delay required to avert a dangerous situation. It follows that if *A* does *not* feel fear at some subsequent time, then we are forced to say that we were wrong — he was not afraid,¹² nor did he run from fear. And it is worth noting that here, Mullane is *not* defending anything like the once celebrated James-Lange theory of the emotions, according to which one is afraid *because* he runs away, rather than vice versa; nor is this case dependent upon a psychoanalytical description or interpretation.

Case 2¹³ is one in which a patient exhibits "anxiety-behavior" (lacks concentration at work, is easily distracted, goes through compulsive rituals of various sorts, etc.), yet "talks about himself in a detached and unemotional way and does not, in general, appear to be feeling any unusual discomfort." We may say, however, that "on a purely descriptive level, he *is* anxious . . . We would surely not say, simply because the feeling is not present, that he behaves *as if* he were anxious, but is really not anxious."¹⁴ Thus Case 2 provides evidence for *thesis (ii)*: that *P* can be afraid without feeling afraid when he is not presently, and has not recently been, in a dangerous situation. And here, Mullane comments,

The same argument, essentially, applies to cases where the feeling is unconscious, i.e., in cases where the feeling has been repressed. In the second illustration, it is perfectly obvious that anxiety need not actually become conscious; the patient's defenses might never be broken down. Yet if the assertion

¹⁰ *Ibid.*, pp. 182-184.

¹¹ *Ibid.*, pp. 182-183.

¹² *Ibid.*, p. 185.

¹³ *Ibid.*, pp. 184-186.

¹⁴ *Ibid.*, pp. 184-185 (Mullane's italics).

that he is unconsciously anxious is correct, then he must feel anxiety if the relevant ego defenses are weakened. That is, the notion of unconscious anxiety must be a dispositional one; the feelings cannot "exist" in the unconscious, — to say this is clearly contradictory. So what must be meant is that the patient is *disposed* to feel anxious; that given the appropriate circumstances he will actually have feelings of anxiety.¹⁵

Case 3¹⁶ is of essentially the same sort as Case 2, with the exception that the patient's behavior does not show that he is afraid unless it is first interpreted by the analyst as so doing. This example is one in which "A patient is said to have an unconscious fear of displaying aggression even though he experiences no such feeling, and despite the fact that his behavior does not, at first glance seem to indicate that he is afraid of displaying his own aggressiveness."¹⁷ And the additional information which provides grounds for the interpretation just mentioned comes out during the analytic session in the situations selected for discussion by the patient, and in the manner in which he reports them. Another factor introduced in Case 3 is that of the patient at first rejecting the interpretation out of hand, but later coming to accept it as correct. "Yet he may still not *feel* afraid or uncomfortable either in analytic sessions or when he is involved in aggressive situations, even though he admits that he has assumed a 'counter-phobic' attitude as a result of being afraid of his own aggressive tendencies."¹⁸ (Note: he is not yet cured, because he has not experienced the fear directed at the original source of his aggressive impulses. This is because in general, a psychoanalytic interpretation is successful as an explanation of the patient's behavior and mental state, and effective in modifying them, if and only if the patient knows the interpretation, accepts it as correct, "and rightly so, and for good reason."¹⁹) Case 3, then, supports *thesis (iii)*: that *P* can be afraid and accept (know) that he is afraid, without feeling afraid.

There follow²⁰ two cases which are very similar in import. Case 4 is Freud's analysis of "Little Hans,"²¹ who transfers his fear of his father into a universal and unreasonable fear of horses. "In doing so, it is said, he is better able to handle his anxiety since he can generally

¹⁵ *Ibid.*, p. 185 (Mullane's italics).

¹⁶ *Ibid.*, pp. 186-188.

¹⁷ *Ibid.*, p. 186.

¹⁸ *Ibid.*, p. 187.

¹⁹ Arthur W. Collins, "Unconscious Belief," *Journal of Philosophy*, LXVI (1969), p. 668.

²⁰ Mullane, "Unconscious Emotions," p. 188.

²¹ Sigmund Freud, "Analysis of a Phobia in a Five-Year-Old Boy" (1909), in *The Standard Edition of the Complete Psychological Works of Sigmund Freud*, 23 vols., ed. by James Strachey (London: The Hogarth Press and The Institute of Psychoanalysis, 1953-1966), Vol. X, pp. 5-149.

avoid encountering horses, but cannot avoid associations with his father."²² Case 5 consists of a brief allusion to the phenomenon of "free-floating anxiety," in which anxiety is consciously experienced, but has no identifiable object. These cases may be seen as selected to demonstrate *thesis (iv)*: that *P* can be afraid, know that he is afraid, and feel afraid; and yet it is still meaningful, at the same time, to state that "*P* is (unconsciously) afraid of *X*," since the correct object of the fear has not yet been identified and acknowledged by the patient (i.e., the fear has not yet been experienced as directed toward its proper, appropriate object or source).

A final illustration, Case 6²³, cites the presence of an unconscious emotion in conversion hysteria. The example given is one in which hysterical blindness is said to be the result of the patient's unconscious anxiety and guilt "about wishing to see what is forbidden."²⁴ The principle at work here is, so to speak, "if thy eye offendeth thee, shut it off." But even though the patient is not consciously anxious or guilt-ridden, it is said that he "is blind *because* he is unconsciously guilty, anxious,"²⁵ and that blinding himself both serves as a punishment for wanting to fulfill forbidden impulses, and solves an unconscious conflict between the impulse and the patient's conscience (and therefore, removes the conscious anxiety previously experienced, i.e., prior to the hysterical conversion). This explains the hysteric's inappropriate lack of concern over his condition ("*la belle indifférence*").

Case 6 does not introduce any new factor, except that, as Mullane remarks, there is no overt and observable or describable act of *doing* on the agent's part here as there was in all previous cases. Yet Mullane also notes that even so, what occurs in this instance "is *understood* as if it were (behavior) . . . [I]t is only understanding [it] in this way that makes explanation possible. Regarding [this instance of] hysterical conversion, then, we find ourselves saying, in effect, that anyone who would 'blind himself' must *be* extremely anxious whether or not he feels anxious."²⁶ But we are entitled to say that the patient is afraid (anxious) if he *does* exhibit *uncommon* component behavioral and/or experiential characteristics of fear or anxiety, which may become evident to the trained observer during preliminary examination, diagnosis, and subsequent psychoanalytic sessions. To the trained observer, such characteristics are not at all uncommon, and therefore, he is able to interpret them as signs of unconscious anxiety

²² Mullane, "Unconscious Emotions," p. 188.

²³ *Ibid.*, pp. 189-190.

²⁴ *Ibid.*, p. 189.

²⁵ *Ibid.* (Mullane's italics).

²⁶ *Ibid.*, pp. 189-190 (Mullane's italics).

or fear. The course of analysis in Case 6 might run through successive exemplifications of the states indicated by theses (ii) to (iv), and then on to the feeling of anxiety as arising from the guilt associated unconsciously with whatever forbidden id impulses are operative in this instance. Finally, Case 6 might be said to illustrate *thesis* (ν): that P may be afraid (anxious) without feeling afraid, knowing he is afraid, or exhibiting the common component behavioral characteristics of fear (or anxiety); but it is meaningful to say that he is (unconsciously) afraid (anxious) since certain uncommon component behavioral characteristics can be interpreted as indicators of fear (anxiety); and on no other hypothesis can his present condition be understood.

III

Now the crucial problem that vitiates Mullane's discussion of these five psychoanalytic cases is evident already in his treatment of Case 1. Case 1 is considered only briefly both because it is nonpsychoanalytic and because it is supposed to be relatively uncontroversial. In fact, however, it is highly problematic, and exhibits a number of confusions that also underlie Mullane's analyses of Cases 2-6. To begin with, Mullane notes that we tend to think of an emotion as by definition or in essence an experiential state. According to him, this is because we also tend to overlook the nonexperiential element in emotion state ascriptions. But surely this is false. The reason why we tend to think of an emotion as essentially an experiential state is that it *is* essentially an experiential state. Behavior and physiological measurements are not identical with emotions; and though they may serve as criteria for the ascription of emotional states to others, this does not make the emotional states any less experiential "in essence."

Mullane's own example in Case 1 (which establishes the criteria to be used later in support of the claim that all ascriptions of unconscious emotions must be dispositional), shows that he is not convinced himself that behavior and emotional states are logically independent of one another. Actually, he vacillates between saying that they are *not* and saying that they *are*. On the one hand, Mullane indicates that there is some intimate connection between the fear behavior of running away from the snake and the later feeling of fear, such that one who runs from danger can correctly be said to have run "from fear" only if he did then, or will subsequently, feel afraid. (This, notwithstanding the fact that it scarcely seems reasonable to claim that a feeling at time t_2 is the cause or motivating factor of someone's behavior at an earlier time, t_1 .) But on the other hand, we are said to be entitled to ascribe fear behavior to the agent in the absence of the experiential state, to identify the object of the fear "in a perfectly straightforward way," and to assert that "for a time, only

the behavioral element [of fear] is present," as if there were *no* intimate connection between the agent's fear behavior and his experiential state. An additional element of confusion enters into Case 1 if we suppose that the agent did not feel afraid as he ran, but only later on, when he was out of danger. It would then be unclear why we should choose to say that he ran from fear, rather than that he became afraid upon recalling the incident — i.e., that it was his reflection upon the encounter, rather than the actual encounter itself, that made him experience fear.

Case 1 leaves the reader profoundly puzzled; for Mullane maintains that we can draw from it "a legitimate distinction between being afraid and feeling afraid in the sense that one can be afraid without feeling afraid."²⁷ However, not only is this distinction quite unclear in itself, but it is also not at all evident that we *are* entitled to draw it on the basis of the material supplied so far. We still have no grounds for saying meaningfully of anyone, e.g., that he *is* afraid, though he says he does not *feel* afraid. What would be an adequate basis for making such statements about others? What observational requirements would have to be met? Clearly, neither question is answered by the dispositional claim that *A's* present behavior is motivated by an emotional state which he is said to be in now (though he is not aware of it, and may quite well not feel distressed in any way), but would (will) not experience in any way until some future situation is brought about. This claim makes no sense at all.

In order to answer the questions just raised, we must distinguish, as Mullane fails to do in sufficient detail, between first-person reports and third-person ascriptions of emotional states. So far as *I* am concerned, *I am* afraid only if *I feel* afraid. And because this is so, no one — not even the psychoanalyst — can afford to ignore or minimize what the subject under observation says about himself. (The importance of this will become clear in a moment.) For the same reasons, we also take it as both necessary and sufficient to *feel* afraid that one be in some experiential state E_x which we have learned to label "fear." Consequently, if *I* articulate my experiential state to myself as one of fear, then *I* necessarily am afraid.

But a number of things change as soon as we adopt the standpoint of an observer. For an observer, it is not necessary that *I feel* afraid and report that *I am* afraid in order that he may say *I "really" am* afraid (though it is sufficient, when he has no strong grounds for doubting the veracity of my report.) Nor is it either necessary or sufficient for him that *I* correctly identify my experiential state as anxiety

²⁷ *Ibid.*, p. 183.

or apprehensiveness in order that he may say that I “really” *feel* anxious or afraid. But this does not contradict what was said above about his taking my introspective report seriously. A psychoanalyst, and anyone else who deals regularly with self-deceivers, must be a skeptical observer (as we all are perhaps more often than we realize); and as such, he will accept sincere avowals and introspective reports about the present experiential states of others only when he is convinced that they have correctly represented these to themselves. For the curious thing about the phenomenon of self-deception is that although an emotion is an experiential state by definition, it is one (and not the only one) that may be misrepresented to, or disguised from, oneself, and therefore, misdescribed to others.

Representing an emotion correctly to oneself involves identifying it for what it is, as having a certain object, or as being directed at some “appropriate” source. (Cases 4 and 5 are not really exceptions to this rule, since fear is not “correctly represented to oneself” unless it is identified as fear *of* whatever it is the fear of.) It is clear, even from ordinary self-observation, that one is sometimes unsure how to describe the way he feels until he correctly identifies the source or object of the experiential state he is in. (E.g., I may not be able to articulate to myself the fact that I feel depressed until I realize that the morning news has spoiled my day: the tragic events reported then have been intruding into my thoughts all day.) What is less clear is whether a realization that something or other is the object or source of the feeling changes the feeling either qualitatively or in intensity. In psychoanalytic cases, such as those cited by Mullane (and which will be discussed shortly), it is unclear whether the patient’s feelings change in kind, or just become more plainly (and undeceivingly) defined by him — and also more intense as a result — when once he realizes their proper object or source. I believe, however, that according to Freud, the latter is the case, though his writings on the subject of unconscious emotions are not altogether unambiguous on this point. For he writes:²⁸

. . . it may happen that an affective or emotional impulse is perceived but misconstrued. Owing to the repression of its proper representative it has been forced to become connected with another idea, and is now regarded by consciousness as the manifestation of that idea. If we restore the true connection, we call the original affective impulse an “unconscious” one. Yet its affect was never unconscious; all that had happened was that its *idea* had undergone repression.

²⁸ Sigmund Freud, “The Unconscious” (1915), in *Standard Edition*, Vol. XIV, pp. 177-178 (Freud’s italics).

Thus, it seems that it is the structure of consciousness built up around the given affect — in general terms, the patient's attitudes and orientation toward the world — that changes.

The conclusions to be drawn from this preliminary discussion, then, are, first, that Mullane cannot simply remark that "the presence of the behavioral element alone can serve as a sufficient condition for one's being afraid,"²⁹ and leave it go at that. For some ascriptions of emotional states to others involve overriding the testimony of their introspective reports. A spectator *can* regard behavioral signs alone as a sufficient criterion for the ascription of an emotional state, e.g., to me, of which I am unaware and which I actively disavow (such that he can say, "You really *are* afraid, even though you don't feel afraid"), but only if he has two kinds of grounds for doing so. (1) He must have good reason to believe that I *am* in the state he says I am in; and (2) he must also have good reason to believe that I am in self-deception in regard to the state I am in, thereby misrepresenting it to myself in some way. His ascription entails, as Freud said, that I am actually *in* the experiential state which he claims to have identified correctly all along, for the reason that (as Mullane sometimes seems to recognize) behavioral and experiential aspects of emotions are conceptually intertwined in such a way that one cannot be said to "be afraid" simply because he exhibits "fear-behavior." This is why the patient in analysis must come to identify his own conscious experiential state as fear — fear of something or other, related directly or by association to some past person, thing, situation, or incident, the memory of which has been repressed. The interpretation can only be confirmed in this way; and in the absence of this condition it remains a mere fanciful construction.

It is evident, from the foregoing, that ascriptions of emotional states to others cannot intelligibly be dispositional. For the subject in question must be experiencing something, or it is inappropriate, if not meaningless, to say that he is *now* in the emotional state ascribed, since being in it entails experiencing it. If he *is* in such a state, (even if he fails to represent it correctly to himself as such) this is a *present* state and not a disposition. It is the present experiential state, under its correct description, and the associations that underlie it (as interpreted by the psychoanalyst), that cause or motivate the aberrant behavior.

²⁹ Mullane, "Unconscious Emotions," p. 190.

IV

We are now in a position to see that descriptions of aberrant actions and mental states which depend upon expressions referring to unconscious emotions do *not* always entail dispositional statements, as they are alleged to do by Mullane. This will involve the provision of an alternative, nondispositional interpretation of these expressions which shows that the concept of "unconscious emotions" is more genuinely explanatory than Mullane has indicated, and which does greater justice than his approach to the kind of understanding provided by psychoanalysis. What I want to take issue with in the following is *not* the claim that when we ascribe unconscious emotions or feelings to someone we mean he will or would consciously experience being in such states, with full awareness of what states they are, if the conditions were right; rather, it is the claim that this is *all* we mean — that such states must be dispositional, and therefore, presumably, not mental. For the dispositional analysis cannot adequately account for the nature of the emotional conflicts which cause such great anguish to persons suffering from severe neuroses, and which are typical of such illnesses.

Mullane assumes that when psychoanalysts speak of unconscious emotions, they must be referring to unexperienced experiences, which of course, *is* a self-contradictory and unintelligible notion. This is an incorrect, but quite excusable, misunderstanding in view of the following sort of perplexing observation made by Freud, and cited by Mullane:³⁰

It is surely the essence of an emotion that we should feel it, i.e., that it should enter consciousness. So for emotions, feelings, and affects to be unconscious would be quite out of the question However, in psychoanalytic practice we are accustomed to speak of unconscious love, hate, anger, etc., and find it impossible to avoid even the strange conjunction, "unconscious consciousness of guilt," or a paradoxical "unconscious anxiety."

However, this shows only that Freud did not fully understand what it was that he had really discovered, and that therefore, he did not have a clear way of conceptualizing it. Let us now look at what is at stake when unconscious emotions or affective states are introduced into psychoanalytic discussions.

Freud tried to explain neurosis in a way which does justice to the fact that this condition comprises experiences "lived through" by a *conscious* subject or agent. How, then, it may be asked, does this square with what he said about *unconscious* emotions? The answer, I believe, is to be found in some of Mullane's own suggestions. First of

³⁰ *Ibid.*, p. 181. Cited from Freud, "The Unconscious," p. 177.

all, even if a neurotic subject does *not* identify his conscious state as one of fear or anxiety, he does feel that his activities, perceptions of situations, dreams, thoughts, etc., are disoriented. Second, he comes, as a result of the procedures of analysis, to accept that his actions, conscious states, and so on, have been influenced by unconscious anxiety (for example) in regard to a certain kind of situation: "it is often true that the patient will *recognize* he is anxious, that is, he will acknowledge a redescribed version of his behavior even though he does not, as yet, feel anxious."³¹ Third, through more detailed and extended development of the analysis, the patient "arrives at the point where he agrees with the analyst's redescription of his behavior in that he sees that he '*must* be afraid[,] [e.g.,] of expressing aggression."³²

Mullane seems unclear here himself as to how strong a conviction ought to be attributed to the patient, and as to what an adequate phenomenological description of the patient's state of mind would be. He says, on the one hand, "At this stage, he recognizes he is afraid in the sense that he agrees that his behavior can be correctly redescribed as fear-behavior," and on the other hand, "So here we have a case where someone knows that he is afraid (characteristically expressed, perhaps, as '*must be,*' '*surely must be,* given my behavior,' etc.) in that he recognizes that his behavior is symptomatic of fear, yet he does not feel afraid."³³ Apparently, Mullane says the latter because he thinks that the patient understands the connection between fear behavior and being afraid from observations of others, then observes himself as a spectator might, and decides that the evidence is sufficient to conclude that he is afraid.³⁴ This, of course, reintroduces the confusion mentioned previously between self-observation and third-person ascriptions of emotions. (I do not want to deny that a patient undergoing analysis must often find himself in the position of an observer with respect to his own behavior, for this is obviously so. But even he, as an observer, cannot sensibly conclude that he is afraid in the absence of a correct identification and articulation to himself of the experiential state which the subject says he is really in.)

The formulae, "I must be afraid," and, "I surely must be afraid, given my behavior," may be taken to characterize the process of the patient's slowly coming to an awareness, then an acceptance, of a state ascribed to him by a psychoanalytic interpretation. However,

³¹ *Ibid.*, p. 186 (Mullane's italics).

³² *Ibid.*, p. 187 (Mullane's italics).

³³ *Ibid.*

³⁴ *Ibid.*, pp. 187-188.

being afraid and knowing that one is afraid (in the spectator sense just described) are necessary, but not sufficient, for the patient to accept an interpretation, and to become relieved of his symptomatic distress, as Mullane himself admits. He must also come to *feel* afraid: "[an] interpretation cannot be correct, and a cure effected, unless the patient avows the interpretation and experiences anxiety as a result of following the leads which the interpretation provides."³⁵ But this does not in any way show that the patient's unconscious fear or anxiety was a dispositional state. The final justification of a psychoanalytic interpretation which features a hypothetical description of an "unconscious emotion" (e.g., his "real" feeling) will have to do with the patient's conscious experience and identification of the emotional state so designated as directed toward a particular object, person, or situation. But it does not follow from this that such expressions as "unconscious fear" or "unconscious anxiety" can and must be analyzed dispositionally. Can a viable alternative account of the role and status of unconscious emotions in psychoanalysis be given? I think it can.

We know that fear and anxiety motivate certain kinds of action in everyday situations, and from what we know about patient *P*, plus what we know about others in similar situations (showing similar overt symptoms, etc.), it is a reasonable explanatory hypothesis that *P*'s actions are motivated by fear or anxiety. In the course of the treatment based on this preliminary hypothesis, *P* comes to recognize that he has deceived himself even about the real source and nature of his present feelings, which are symbolic of, and caused by, some more basic, repressed, and disavowed associations. Herbert Fingarette's recent analysis of the concept of self-deception³⁶ is pertinent here. (In the following passage, Fingarette employs the notion of "spelling-out." This is a technical term introduced by him to indicate that the model of consciousness he is adopting is one in which "To become explicitly conscious of something is to be exercising a certain skill." "Explicit consciousness," then, is like a full and clearly articulated description of "what we are doing or experiencing," or of "some feature of the world as we are engaged in it."³⁷)

The crux of the matter is this: certain forms of spelling-out are in their implication clear affirmations by a person of his personal identity. To say in angry tones, "I am angry with you," or to rise and say, "I'm leaving now," is not only to express a certain anger or intent, it is to acknowledge it explicitly *as mine*. This is so typical, so utterly familiar, that we do not ordinarily appreciate the possibility that an individual might be angry or have a certain intent, ex-

³⁵ *Ibid.*, p. 186.

³⁶ Herbert Fingarette, *Self-Deception* (London: Routledge & Kegan Paul, 1969).

³⁷ *Ibid.*, pp. 38-39.

press his anger or his intent, and yet not do so in such a way as expresses acknowledgement of them *as* his. Indeed they may be disavowed. A person may angrily say that he is not angry; and it is not uncommon to observe an individual reveal his worried state even while disavowing worry or concern. An individual may plainly be maneuvering to leave someone's company, yet disavow any such intent. If one disavows one's loyalty to a country, one may yet continue to live there and profit from the privileges, suffer the disadvantages; but one has surrendered the right to speak *as*, e.g., an American, or to speak *for* America. Analogously, one who disavows an emotion, an intent, a deed, thereby surrenders the authority to speak *as* one who feels, intends, or does so and so and he abdicates the authority to speak *for*, that is, to spell-out, the emotion, intent, or deed.³⁸

It seems to follow from this that others can know one's own state of mind better than oneself precisely because they can identify what one's real feelings are, in the sense that they are feelings, which he will not, and cannot, allow himself to disclose to himself. Perhaps this point will be clarified by the following analysis which approximates, at least partially, an adequate phenomenological description of the one kind of self-deception explained by psychoanalysts in terms of an unconscious emotion. It is not that we are *mistaken* in describing what we consciously feel in such cases, but that we literally *do not know how to go about describing what we feel*, and therefore, cannot be sure *what* we feel, since we cannot face the truth. There might be a sense to saying that in those cases in which we do attempt to describe what we feel (perhaps even with a show of self-confidence), we *do* misdescribe, but not merely because of inattentiveness (ignoring the presence of the feeling) or failure to discriminate the feeling carefully. Rather, we do so because of a *need for* self-deception — a purposive or intentional refusal to (so to speak) "be self-disclosing." Thus, for example, a person who does not realize that his overreaction to a given situation displays jealousy is not conscious of being jealous; but "[t]his does not mean that he does not *feel* the emotion that we call jealousy . . . On the other hand, he does not recognize it *as* jealousy, and may be quite sure that what he is feeling is righteous indignation."³⁹ And in a sense, the patient in Mullane's aggression example (Case 3) "knows" that what he says he is experiencing is not the genuine emotion that he is, in fact, experiencing, but does not want to identify correctly — this is why he either has trouble doing so, or else vehemently and/or unconvincingly disavows the description given by someone else.

³⁸ *Ibid.*, p. 73 (Fingarette's italics).

³⁹ John Macmurray, *The Boundaries of Science: A Study in the Philosophy of Psychology* (London: Faber and Faber, 1939) pp. 243-244 (my italics).

But unconvincing or insincere disavowals are relatively easy to see through. What about *sincere* disavowals, which are a feature of many cases of self-deception (especially among those who have spent many years practicing and refining this art)? Surely, in those cases, it is the degree of conflict between what he says about himself (e.g., about his motives and intentions) and his behavior, the kinds of situations he contrives to put himself in (or that appeal to, or repel, him), his slips of the tongue, and other information of a revealing nature that we may have about him. Thus, sincere avowals and disavowals may also be undermined by observations of various types, if there is sufficient reason to believe that the agent in question is in self-deception. And further, even if the agent *never* acknowledges and avows the emotion which is allegedly operative in his behavior, we would still be entitled to maintain that the description of his behavior given with reference to this allegedly unconscious emotion is accurate — provided, of course, that we have very strong evidence and a sufficiently large body of generalizations drawn from similar cases in the past to fall back upon. On Mullane's dispositional account, however, this would be impossible.

But many philosophers might find this an unpalatable conclusion, arguing that if an agent's avowals and disavowals are subject to rejection, then they must have been insincerely or unconvincingly made. For if not, how could we ever rely on introspective reports in normal situations, for example, about how a person feels? However, to answer this objection, it is *not* the case that all avowals and disavowals made by self-deceivers are insincere or unconvincing (insofar as this refers just to what they say about themselves). They may be as sincere as you like, and will be especially so in some instances (e.g., where the defense mechanism of reaction formation or overcompensation is being employed). In any case, it is not the sanctity of introspective *experiences* that is in jeopardy here, but only that of the class of introspective *reports* consisting of sincere avowals and disavowals.

It does not follow, of course, that when someone is self-deceiving, he is *lying* to us about his feelings, emotions, or mood (though he may be "lying to himself," i.e., accepting a falsehood about himself which he does not and cannot disclose to himself). For lying is intentional deception, and since self-deception *is* intentional (in a sense discussed earlier), one may "lie" to oneself. But if one is self-deceived, he cannot lie to others, except insofar as his reports are extensions of his "lies" to himself.

So far, we have seen that ascriptions of unconscious emotions do not necessarily denote either "unfelt feelings" or dispositions. Thus, the patients in Mullane's Cases 2 and 3, who (according to him) must

come to *feel* afraid before they can accept the interpretations and be cured, do not actually come to feel afraid, but rather, to acknowledge in the fullest sense that they *are* afraid. That is, they become able to disclose to themselves how they really do feel and why, and at the same time, become able to describe fully and accurately their feelings. They become able to articulate the full dimensions of their emotional states, to accept the responsibility of "speaking for" their feelings, to acknowledge them not just as evident in their overt behavior to an observer, but *as theirs*. They do this by abandoning the guise of not disclosing to themselves their true feelings. It is along these lines that we must understand the phenomenon of "free-floating anxiety" (Case 5) as well, for this is a paradigm case of the refusal to accept responsibility for having or harboring certain feelings.

We should not leave the matter here, however. For many (if not most) sincere introspective avowals may still be considered incorrigible, if we have nothing else to go on, and/or if there are no good grounds (as there must be) for doubting the validity of what the agent says about himself. The distinction between normal and neurotic performances is sometimes difficult to draw; but this does not show the distinction to be an unreal and unimportant one. At least we may say that when a person's avowals are *not* in conflict with his physiognomic signs, comportment, deeds, and words, as assessed by others, then we can safely accept his sincere avowals. There is always the possibility that he may be deceiving us or putting on an act (as in self-deception) — we can only be *virtually* certain that he is not; but this is the chance we take if we consider ourselves to be good judges of character, good friends, or good assessors of evidence.

V

To conclude this discussion, let us look once again at Mullane's five psychoanalytic cases and reassess them in the light of the foregoing discussion of unconscious emotions. In Case 2, Mullane says that the patient's "anxiety is unconscious because he does not feel anxious and also, perhaps, because he does not recognize that he is anxious."⁴⁰ He adds, in a footnote,⁴¹ "This does not mean, of course, that he never feels anxiety. It means that, given the character of his behavior, he does not feel nearly enough anxiety." I take these remarks to mean that sometimes the patient (*P*) *does* experience being in some emotional state, E_x , but that he misrepresents it to himself "because he does not feel anxious." (It might be better to say that his

⁴⁰ Mullane, "Unconscious Emotions," p. 184.

⁴¹ *Ibid.*, n.5.

misrepresenting it to himself *is* his not-feeling-anxious.) But if what the analyst means in ascribing unconscious feelings of anxiety to *P* is that "On a purely descriptive level, he *is* anxious," as we saw earlier Mullane maintains, then the analyst, as observer, must be giving a diagnosis of *P's* behavior as anxiety behavior. What else could be meant? Therefore, if anxiety is an emotion, we *must* say, as Mullane argues we cannot, "simply because the feeling is not present, that [*P*] behaves *as if* he were anxious, but is really not anxious." The only qualification is that we must rephrase "[*P*] is really not anxious" as follows: "*P* does not feel anxious (though he does experience some disturbances in his emotional equilibrium) because he has not acknowledged to himself (and will not do so) that these disturbances are manifestations of anxiety." Correspondingly, thesis (ii) is false: *P* cannot be afraid without feeling afraid.

Case 3 is harder to deal with, but still lends itself to the same treatment. In this case, the analyst has reasons to believe that a patient, *P*, is "unconsciously afraid of displaying aggression," although he "experiences no such feeling," and his behavior "does not display any fear of aggression."⁴² The following three items of information that Mullane supplies suggest that it is not just the case that *P's* behavior is "disguised,"⁴³ but that his aggressive feelings are as well.

- (a) . . . his behavior does not, at first glance, seem to indicate that he is afraid of his own aggressiveness. In fact, he takes advantage of every opportunity in which he can express aggression in a socially acceptable way, and he seems to thrive on fierce competition; it is in just this sort of circumstance that he appears most sure of himself.⁴⁴

This indicates that overcompensation is taking place — *P* experiences the highest degree of self-confidence and self-satisfaction in the most aggressive situations. He behaves in such ways to "convince himself" that he is not afraid to be aggressive (cf. whistling while passing a cemetery at midnight).

- (b) Let us say that in the early stages of psychotherapy the patient dwells at great length on his "successes" in situations where he is aggressive, and insists that he thoroughly enjoys himself in such circumstances. If it is suggested to him that, perhaps, he really does have certain misgivings regarding aggression, he vehemently denies it and says that such a suggestion is outrageous.⁴⁵

Here, it becomes clear that *P* not only claims to enjoy being aggressive; he also considers himself a *success* when he is aggressive. He rejects the interpretation that begins to bite into this self-image.

⁴² *Ibid.*, p. 187.

⁴³ *Ibid.*, p. 186.

⁴⁴ *Ibid.*

⁴⁵ *Ibid.*, p. 187 (Mullane's italics).

- (c) As the analysis proceeds, let us say that the patient begins to have certain doubts about his aggressive activities, and that eventually he arrives at the point where he agrees with the analyst's redescription of his behavior in that he sees that he "*must* be afraid" of expressing aggression. In recognizing this, he has realized that to disguise an unconscious fear of aggression, he has gone to the opposite extreme by "showing" to himself and to the world that he is utterly fearless, that he actually enjoys being aggressive. At this stage, he recognizes he is afraid in the sense that he agrees that his behavior can be correctly redescribed as fear-behavior.⁴⁶

Here, *P* realizes that he has been overcompensating and misrepresenting his fear to himself as fearlessness, "disguising" it from himself by "assum[ing] a 'counter-phobic' attitude." However, *P* may still not experience fear, since the ultimate source and cause of his aggressiveness and self-deceiving 'counter-phobic attitude' are not yet known to and acknowledged by him.

It is important to note here that I may be an observer of my own behavior, but not unequivocally so. "I *must* be afraid" betokens not a static plateau of self-awareness, but the gaining of insight, the movement towards an avowal of the truth of an interpretation and a correct representation to oneself of the feeling he has been experiencing. I do not just observe my behavior and then conclude such-and-such, but rather, begin to see that I have deceived myself and that a crack is appearing in the once impermeable facade. I am being forced, by the weight of the evidence and the persuasiveness of the interpretation, to admit that, so to speak, "the jig is up." So thesis (iii) is also false: *P* can "know that he is afraid" if this only means that "he recognizes he is afraid in the sense that he agrees that his behavior can be correctly redescribed by an observer as fear-behavior"; but it does *not* follow, once again, that *P* can "be afraid without feeling afraid" or "be afraid and know that he is afraid without feeling afraid."

Cases 4 ("Little Hans") and 5 ("free-floating anxiety") present no further problems, since in both the emotion is, *ex hypothesi*, experienced and correctly represented by the patient himself; but what remains unconsciously is the identity of the object or source to which the emotional state relates. These cases conform very closely to Freud's description of the status of unconscious emotions quoted earlier. Thesis (iv), therefore, may be accepted as an adequate characterization of one meaningful sense in which unconscious emotions are ascribed.

The foregoing treatment of unconscious emotions will do for cases like those just discussed, and perhaps, can also be extended to include what is usually described as "unconscious conflict between

⁴⁶ *Ibid.* (Mullane's italics).

emotions." But it will patently *not* do for certain extreme instances like Case 6 (hysterical blindness). To say "in effect, that anyone who would 'blind himself' must be extremely anxious whether or not he feels anxious" must mean that the patient's behavior is evidently an extreme form of anxiety-response. But in this case, a highly figurative sense — or at least a very different sort of sense — must be attached to ascriptions of unconscious emotions. This would also be true in any other psychoanalytic interpretation where the alleged "unconscious emotion" is not experienced as some present emotional state — i.e., where symptoms are "consciously distress-free," and/or where the emotion has never been consciously and correctly articulated by the patient to himself as directed at its proper object or source. Mullane seems to be right about interpretations like that offered in Case 6. In cases of this sort, the unconscious emotion that is alleged to be at work is *not* some form of misrepresented experiential state; and therefore, the patient must be in some *nonexperiential* state at t_1 , which is such that he would experience and report certain feelings at t_2 , when certain hypothetical blocking conditions are removed. If, as Freud says, in such cases of hysterical conversion, an affect of some kind becomes "cathected" onto some part of the body, thereby causing a physical symptom or inhibition (such as blindness or paralysis), then the affect which is designated as the unconscious "energizer" must cease to exist *as an emotion* so long as the conversion remains effective. (The patient may, of course, be said to experience something that relates to the hypothetical emotion, namely a complex of kinesthetic sensations. But note how peculiar it would be for an analyst to tell a patient who has allegedly converted anger into a headache, "What you *really* feel is anger.") Hence, if Case 6 may be construed as an instance of behavior motivated by an unconscious emotion at all, then this description *must* (logically) comprise a dispositional statement of the sort specified by Mullane. For only when the conversion is "reversed" or "undone" (whatever that entails) *could* the affect be experienced as an emotion, and become subject to description by the patient in any way whatsoever. Prior to this time, he either experiences nothing unusual, or he experiences *physical* distress; he cannot experience the affect allegedly associated in this manner with the hysterical symptom since, *ex hypothesi*, the affect-qua-emotional-state has ceased to exist. (Otherwise "conversion" would not carry its standard meaning.) Thesis (v), then, would have to be rejected in favor of some formulation which takes all of these points into account.

It must be admitted here that a complication enters into the discussion of hysterical conversion which prevents one from making

such generalizations with complete confidence. For according to Freud, since conversion is a defense, the physical symptom associated dynamically with the unconscious emotion provides a discharge for the psychic energy bound up with the emotion. Thus, the symptom remains so long as it continues to be energized (stimulated) in this manner. But the physical symptom does not always absorb all of this energy; and in these cases, the patient may experience conscious distress as well. In such cases as this, the dispositional analysis would have to be preferred, and will be contingent upon the acceptance of Freud's theory of the underlying psychodynamics.

VI

Summary — In the vast majority of cases, "unconscious emotions" are actual, *presently experienced* mental states, which the patient inaccurately and self-deceivingly reports, due to the operation of defensive ego maneuvers. These are the automatic (i.e., unconscious) responses he has developed to deal with certain situations with which he is incapable of coping otherwise. But, then, in these instances, the psychoanalyst simply makes a prediction about what the patient would *report* (not about what he would feel for the first time, so much as how he would identify his experiential state) if the conditions were right, and not a dispositional statement, as Mul-lane urges. (It is commonly asserted that psychoanalysis makes few predictions; but surely every interpretation must contain such predictions as this.)

It is the disguise resulting from self-deception that makes it appropriate to describe the emotion as "unconscious" — i.e., the patient cannot and will not allow himself to recognize it for what it is. He is deluding himself about whatever it is that he feels, and is keeping the full significance of the emotional state hidden from himself. There is a whole dimension of the emotion which is repressed here, to expose which requires the subject to admit and avow certain *reasons* (unconscious motives) for harboring the emotion he is said to harbor. Thus, it seems that the adjective "unconscious," when applied to emotions, must function either in the dispositional sense or in the sense of being descriptive of what *is* experienced, but is (from the patient's point of view) unrecognizable, unacknowledgable, and yet is (from the observer's point of view) efficacious in shaping and giving meaning to his conscious experiences, responses, and overt behavior. The latter is the primary sense; and it signifies that the emotion is unconscious not in the sense of being unsensed, unnoticed, unattended, or ignored, but in the sense of being unrecognized, uncommunicable, and unavailable to awareness.

MICHAEL FOX.

QUEEN'S UNIVERSITY AT KINGSTON (ONTARIO, CANADA).