
**A PROCEDURAL THEORY OF THERAPEUTIC
ACTION: COMMENTARY ON THE SYMPOSIUM,
“INTERVENTIONS THAT EFFECT CHANGE
IN PSYCHOTHERAPY”**

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ABSTRACT: Operating largely outside of awareness, the procedural mode of processing has been neglected in psychotherapy and psychoanalysis, and yet it is critical to our understanding of therapeutic action. This group has made an outstanding contribution to a procedural theory of therapeutic action, integrating some of the most important current concepts in infant research, cognitive psychology, systems theories, and adult psychoanalysis. The procedural mode of “implicit relational knowing” is placed within the context of a moment-by-moment, mutual regulation model of co-constructed exchanges. Nonlinear dynamic systems theory has greatly influenced their theory of change. The centerpiece is Louis Sander’s concept of the “moment of meeting.” Although the concept of intersubjectivity is central in all the papers, the multiple uses of the term suggests that a careful re-examination of the definitions of intersubjectivity is sorely needed. We must now integrate the work of this group with other current procedural theories of therapeutic action.

RESUMEN: Quizás por falta de conocimiento, se le ha restado importancia dentro de la sicoterapia y el sicoanálisis, al procedimiento en la manera de procesar, el cual es clave para nuestra comprensión de la acción terapéutica. Este grupo ha hecho una contribución sobresaliente a la teoría de procedimiento de la acción terapéutica, integrando algunos de los más importantes conceptos actuales dentro de la investigación sobre el infante, la sicología cognitiva, las teorías de sistemas, y el sicoanálisis para adultos. El modo de procedimiento del “conocimiento implícito de la relación” se coloca dentro del contexto de un modelo de mutua regulación de intercambios co-construidos de momento a momento. La teoría de sistemas dinámica y no lineal ha influido grandemente su teoría de cambio. El punto central es el concepto del “encuentro momentáneo” de Louis Sander. Aunque el concepto de intersubjetividad es clave en todos los ensayos, los usos múltiples del término sugieren que seguramente se necesita reexaminar las definiciones de intersubjetividad. Debemos integrar ahora el trabajo de este grupo con otras actuales teorías de procedimiento de acción terapéutica.

RÉSUMÉ: Opérant largement en dehors de la conscience, le mode de procédure de développement a été négligé en psychothérapie et en psychanalyse, et est cependant critique pour notre compréhension de l’action thérapeutique. Ce groupe a superbement contribué à la théorie de procédure de l’action thérapeutique, intégrant certains des concepts actuels les plus importants en recherche infantile, la psychologie cognitive, les théories de système, et la psychanalyse adulte. Le mode de procédure de la “connaissance

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relationnelle implicite” est placé dans le contexte d’un modèle de réglage mutuel, moment-à-moment, d’échanges co-construits. La théorie de systèmes dynamiques non-linéaires a largement influencée leur théorie de changement. Le concept central est le concept de “moment de rencontre” de Louis Sander. Bien que le concept d’intersubjectivité est central dans tous les articles, l’utilisation multiple de ce terme suggère qu’une ré-examen attentive de ces définitions d’intersubjectivité est tout à fait nécessaire. C’est maintenant que nous devons intégrer le travail de ce groupe à l’autres théories actuelles de procédure d’action thérapeutique.

ZUSAMMENFASSUNG: Durch sein Wirken weit außerhalb der Wahrnehmung wurde die prozeßhafte Art der Verarbeitung in der Psychotherapie und der Psychoanalyse vernachlässigt, obwohl sie entscheidend für unser Verständnis der therapeutischen Handlungen ist. Diese Gruppe hier hat außerordentliche Beiträge zu einer prozeßhaften Theorie der therapeutischen Handlungen gemacht, indem sie einige der wichtigsten, derzeitigen Konzepte der Kleinkindforschung, der kognitiven Psychologie, der Systemtheorie und der Erwachsenenpsychotherapie integriert hat. Die prozeßhafte Art des “vorhandenen Beziehungswissens” wird in den Kontext eines gegenseitigen, von Moment-zu-Moment Modells des gemeinsam hergestellten Austausches gestellt. Nicht-lineare, dynamische Systemtheorie hat deren Theorie der Veränderung stark beeinflusst. Das Kernstück ist Louis Sanders Konzept des “Moments der Begegnung”. Obwohl das Konzept der Intersubjektivität an zentraler Stelle in allen Arbeiten vorkommt, verweist der vielfache Gebrauch dieses Wortes doch auf die Notwendigkeit einer Überprüfung der Definition des Begriffs der Intersubjektivität. Wir müssen jetzt die Arbeit dieser Gruppe mit anderen gegenwärtigen, prozeßhaften Theorien der therapeutischen Handlung verbinden.

抄録：手順procedure という情報処理様式は、ほとんど意識の外で作用するため、精神療法でも精神分析でも見過ごされて来たが、治療的行為を理解する上で欠かせないものである。乳幼児研究、認知心理学、システム理論、大人の精神分析における最新の最も重要な概念のいくつかを統合することにより、われわれのグループは、治療的行為に関する手順理論に多大な貢献をした。“言わず語らずの内に関わりを知ること” implicit relational knowing の手順様式を、共構築された交流の時々刻々の相互調整というコンテキストの中でとらえた。変化に関するその理論に多大な影響を与えたのが、非直線的力動的システム理論であり、その中心が、Louis Sanderの“出会いのモーメント”の概念である。すべての論文において間主観性の概念が中心を占めているが、用語の多義性を考えると、間主観性の定義の綿密な再検討が非常に必要であることが分かる。われわれのグループの業績と、治療行為に関する手順理論の最近の動向を統合する必要がある。

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Working with the assumption that something more than interpretation is needed to bring about change in psychotherapy and psychoanalysis, this illustrious group has outlined an important, creative theory of therapeutic action. They begin with the observation that most patients remember special moments of authentic person-to-person connection with their therapists. This special moment is explicated by Sander’s concept of the “moment of meeting,” a moment of reciprocal recognition, and is importantly elaborated by the other authors. Sander was originally influenced by Martin Buber’s (1965) description of an “I–thou relationship,” and by Buber’s position that all true healing (and living) takes place through “meeting.”

This group proceeds to describe a theory of change that integrates some of the most important current concepts in infant research, cognitive psychology, systems theories, and adult psychoanalysis. Using the distinction between procedural and declarative modes of information-processing, the foundation of the theory rests on the procedural mode of “implicit relational knowing,” most fully described by Lyons-Ruth. In contrast to the more usual semantic mode of verbal interpretation, it is through this implicit, procedural mode of relating that an additional critical dimension of therapeutic action occurs. Implicit relational knowing is placed within the context of a moment-by-moment, mutual regulation model of co-constructed exchanges, with all the richness of the previous contributions and current elaborations that Sander, Stern, and

Tronick bring to this model. Nonlinear dynamic systems theory has greatly influenced their theory of change, in the use of concepts such as the self-organizing process of systems, emergent properties, the role of perturbation in change, and a more fully “process” view of representation based on a brain that updates its “maps.” Clinical use of this theory is illustrated by Bruschiweiler-Stern, Harrison, and Nahum.

The centerpiece of this set of papers is Louis Sander’s concept of the “moment of meeting.” It is not easily apparent from the papers that Sander originally formulated this concept, beginning with his study of the biorhythms of the sleep–wake and feeding cycles of mothers and newborn infants. In Sander’s framework, the infant begins life able to be aware of inner state, and of recurrent experiences of inner state as it shifts across the expectable interactive contexts of the 24-hr cycle. Maintenance of organization in the system depends on “matched specificities” (Weiss, 1970), a resonance between two systems attuned to each other by corresponding properties (Sander, 1995). To achieve matched specificities, the system must be capable of mutual adjustments. This involves a continuous dialectic between processes of interactive-regulation and self-regulation (accruing to initiative and agency) of both partners. Matched specificities between two systems attuned to each other yields awareness or recognition in each partner of the state of the other. In a “moment of meeting,” two states of consciousness are “matched,” in the sense that “the way one would ‘know’ oneself would be matched by the way one was ‘known’ by an other” (Sander, 1995, p. 589). Sander notes the similarity with Winnicott’s description of the “sacred moment” in the “squiggle game”: a moment of shared awareness such that “the child becomes aware that another is aware of what the child is aware of within” (Sander, 1995, p. 590). A match between how one knows oneself and how one is known facilitates developing agency and identity.

Sander (1992) translates this framework into adult psychotherapy in commenting on Schwaber’s moment-by-moment attention to the cues of subtle shifts in her own and her patient’s state, more often nonverbal than verbal. This attention yields the possibility of a moment of mutual recognition, a moment of meeting, which is a healing moment that changes the organization by “providing a new base from which the patient can act as agent in his own self-regulation” (Sander, 1992, p. 583).

Sander was influenced by Martin Buber’s dialogical theory of knowledge. Buber considered psychotherapy to be an example of an “I–Thou” relationship, characterized by “mutuality, directness, presentness, intensity, and ineffability” (Buber, 1965, p. 12). In Buber’s view, an important kind of healing occurs through “meeting” rather than through insight and analysis. Through “entering into relation” men confirm each other, and each becomes a self with the other. By mutual confirmation, man knows himself to be “made present in his uniqueness by the other . . . as just so and not otherwise in all his wholeness, unity and uniqueness.” One can only do this as a partner, requiring not empathy or intuitive perception but ‘a bold swinging into the other’ (Buber, 1965, p. 29). In his view, confirmation and meeting do not replace transference, but they change the meaning and dynamic of transference.

Lyons-Ruth places the moment of meeting within the context of procedural knowledge. In contrast to the more usual verbal, symbolic, or “semantic” mode, she defines procedural or “implicit” relational knowing as “. . . rule-based representations of how to proceed, of how to do things . . . with others . . . such as knowing how to joke around, express affection, or get attention. . . . as much affective and interactive as . . . cognitive . . . (it) begins to be represented long before the availability of language and continues to operate implicitly throughout life.” (p. 3). It operates out of awareness, outside of verbal consciousness and the dynamic unconscious. The “moment of meeting” occurs in the procedural mode, reorganizing the patient’s implicit relational knowing, the expectancies, and rules that regulate intimate relating.

Lyons-Ruth gives us a clear, “user-friendly” exposition of implicit relational knowing, which provides the foundation for the theory of change developed by this group. In noting that only a small area of the patient’s implicit knowing will ever become the subject of verbal articulation and/or transference interpretation, she opens the door to the question of the relationship between procedural and semantic knowledge in therapeutic action. By implication, the procedural mode is far more pervasive and thus potentially more “organizing” than the semantic. We return to this question below.

Tronick and Lyons-Ruth substantially deepen the use of implicit relational knowing by placing it with the context of nonlinear dynamic systems theory, using the concepts of self-organizing processes and emergent properties of systems. In articulating their view of change, Tronick and Lyons-Ruth use the concept of a system “self-organizing” so as to become more complex and simultaneously more coherent, thus yielding emergent possibilities. Lyons-Ruth suggests that it is the moment of meeting that reorganizes the range of interactive regulation and expectancies in the dyadic system, rendering it more inclusive and hence more coherent. In this process new forms of regulation, new initiatives, and new possibilities of agency ensue.

In Tronick’s mutual regulation model, emotional states are regulated dyadically, and each must come to know the current state of the other if regulation is to succeed. Tronick now expands his model with the concept of the self-organizing process of open biological systems. He describes this self-organizing as integrating increasing amounts of information into increasingly complex but also more coherent states. Tronick adds the powerful idea that the self-organizing process of human systems is fundamentally dyadic. He hypothesizes that reciprocal emotional exchanges function as a self-organizing process at the level of the dyadic system, with the potential to expand each partner’s state of consciousness (state of brain organization). There is a mutual mapping of each partner’s state into the other’s brain. Furthermore, an emergent property of these reciprocal exchanges is the creation of single dyadic states of organization, which are more complex and more coherent than either partner’s state alone. In this process each gains greater complexity and coherence. Tronick suggests that the moment of forming a dyadic state of consciousness carries a powerful subjective experience of fulfillment, that is, a motivation of its own. It is this moment that is akin to the moment of meeting. It is this moment that carries therapeutic action, the power to change each person’s mental organization, at a procedural level. The still-face experiment illustrates the disturbing consequences of preventing the establishment of joint states of consciousness.

Tronick has succeeded in a creative deepening of the concept of the moment of meeting. By framing it within the hypothesis of dyadically expanded states of consciousness, he anchors it in nonlinear dynamic systems theory. His emphasis on the powerful subjective experience of achieving the greater coherence of the moment of a dyadic state of consciousness fills out more of the subjective dimension of the moment of meeting. Not only does this moment potentially carry intense fulfillment, but it also fulfills the principles of systems theory, so that no matter what kind of system (from cells to persons), the shared information of this moment expands the system and increases its coherence.

Stern develops the concept of the moment of meeting into a detailed and elegant theory of change. He explicates a moment-by-moment microprocess leading to and following from this moment, and he places the moment of meeting into the context of a perturbation theory of change, based on nonlinear dynamic systems. Stern’s diagram (see p. 306 of this issue) visually presents his explication of the moment-by-moment change process: from “moving along,” to the “now moment,” which under optimal conditions can become a “moment of meeting,” which is followed by an “open space,” and then returns to “moving along.”

“Moving along” integrates Stern’s concepts of “theme and variation” (Stern, 1977), familiar “ways of being with” (Stern, 1985), and an “envelope” of subjective time with a dramatic

line of tension toward a goal (Stern, 1994). It is similar to the concept of “ongoing regulations” developed by Beebe and Lachmann (1994; Lachmann & Beebe, 1996). It is the usual, ongoing way that therapist and patient relate to each other. The “now moment” is an important addition by Stern, a “hot moment of truth,” catching each “off guard,” thus pulling the interaction entirely into the present and challenging the stability of each partners’ expectations of the other. It operates as a “perturbation,” as a catalyst for reorganization. It requires something new from both partners, something not predictable, in essence, a “nonlinear jump.” If the two partners take the jump, which requires that the now moment be mutually recognized and seized, then a moment of meeting can take place. This nonlinear jump evokes Buber’s “bold swinging into the other.” The now moment reorganizes the intersubjective context, so that each partner knows that the other knows that this moment has occurred. By separating the “now moment” from the “moment of meeting,” Stern captures the experience familiar to clinicians that either partner may back away from the possible moment of meeting. A potentially fragile transition must be negotiated, in which each must contribute something authentic and unique.

Stern then adds another element to the microchange process by elaborating on Sander’s concept of “open space,” which follows the moment of meeting. In Sander’s hands, influenced by Winnicott, the open space is a period in the 24-hr rhythmic cycle of sleep, wake, feed, and play, in which the dyad can briefly “uncouple,” and each can creatively generate something “of his/her own,” while “alone in the presence of the other.” Stern elaborates this concept by giving the open space the function of *assimilating* the moment of meeting. By implication, from Sander’s original use of the term, in this assimilation each makes the preceding experience of the moment of meeting something of her/his *own*. Following the open space, the pair returns to “moving along.” Stern has beautifully “unpacked” the moment of meeting into its “micro-genetic” moment-by-moment change process.

Three papers in this issue illustrate this procedural theory of therapeutic action with rich clinical examples. Bruschiweiler-Stern poignantly describes two “now moments” in a medical setting. Helping a terminally ill man openly acknowledge that he would die helped him die peacefully. Demonstrating that a crying, squirming newborn had the ability to calm down and reorganize helped a new mother reconnect with her representation of a “gratifying baby,” as opposed to a feared “nervous baby.” Bruschiweiler-Stern suggests that this theory of therapeutic action is not limited to formal therapy and is useful to all providers of care.

Harrison’s case of Sophie is a fascinating exploration of a psychoanalysis of a little girl from the ages of three to five. Sophie’s presenting problem was withholding her stools and severe oppositional struggles with her mother. Harrison describes moments in which she and Sophie shared a sudden intense emotion as examples of “now moments.” The first occurred when Harrison experienced a “click of recognition” of an important theme, the child’s cry of protest that “nothing was the matter,” and Harrison’s sense that it had to do with loss. Harrison managed to communicate her recognition to the child without words, persisting in leaning forward without anxiety despite the noise, and Sophie stopped screaming. In further games of hiding, tricking, losing, something hidden, and something lost, Sophie played with the idea that the pet was hiding, or the pet was gone. “She and I both saw that the space was empty, and we both knew that the pet was there. Then, together, we looked up at the ceiling . . . and saw the pet. Neither of us said a word. It was a moment that seemed suspended in time, each of us gazing at the invisible pet” (pp. 312–313 of this issue). These are illustrations of moments of reciprocal recognition, shared awareness, meeting. Harrison notes that sometimes they occur in words, sometimes not; sometimes the narrative content is important, sometimes it is not. In Harrison’s descriptions of the moments of meeting she beautifully illustrates Sander’s key criterion that each knows that the partner knows what the self knows.

In his case illustration, Nahum takes a dissenting view, and argues that the moment of

meeting and mutual recognition does not necessarily occur in a moment, and does not necessarily involve awareness: “. . . transformation does not necessarily encompass awareness at the moment it occurs. Our model is in fact more gradualist . . .” (p. 2). He describes a gradual shift in the treatment of a woman who is profoundly unsure of the ownership of her own initiative. She feels that if she did have sex, she would not be able to evaluate whether it was something of her own, or whether it would be something that she was pushed into. Over the course of the several sessions of the fascinating verbatim material that Nahum presents, she gradually shifts from feeling that it is her analyst who is intruding the subject of sex on her, as “a sexual maneuver,” wanting her “to strip,” to pursuing the topic of sexuality herself. She continually goes back to the session in which he first brought up the topic, to weave back into the dialogue more of her own thoughts, associations, and interpretations. The transformative process that Nahum is illustrating here is one of gradually feeling more like an agent in the exchange. “Each time the patient is able to mobilize her initiative in the interaction, her sense of agency is altered and strengthened . . . on the road to being able to claim her desires as hers.”

In focusing on the therapeutic action of an increased sense of agency, Nahum is operating with one central aspect of Sander’s theory. On the other hand, he downplays the “hot moment.” The material does more gradually reveal the patient’s feeling that “I know that you know that I know. . . .” Nahum thus illustrates some central aspects of this group’s theory of therapeutic action, but he is not talking about a moment of meeting.

However, in the Wednesday session the patient in retrospect comments that in the Tuesday session, something that Nahum had said had deeply affected her: “. . . and then yesterday, you were so open to my saying I do talk about sex . . . I went from being apologetic to propounding my own point of view” (p. 4). Is she describing a *moment* of change for her, even if not a true moment of meeting for both?

Morgan’s final paper carries important caveats: this is not wild analysis, the usual rules of psychoanalytic discourse are not being overthrown, and the moment of meeting should not be misconstrued to imply that therapist and patient are equally known to each other. It is interesting that Buber’s description of the moment of meeting also emphasized asymmetries of role and experience, and that healing depends as much upon the recognition of difference between therapist and patient as it does on mutuality of meeting (p. 51). However, Morgan’s insistence that within this asymmetry, the emotional experience of the therapist plays a role, but not his or her emotional needs, remains difficult to reconcile with his acknowledgement that each partner’s implicit relational knowing about how to relate exists primarily without awareness.

Morgan is alone in the group in his attempt to clarify the role of the verbal, declarative discourse in the moment of meeting, and this remains an important, largely unexplored question for this group. He underscores the theme echoed in the other papers that, “. . . interpretation . . . [is] one of a number of ways of getting to a . . . moment of meeting, but such verbal exchanges are not a necessary condition for change to occur” (p. 8). This is an important change for psychoanalytic theory, the idea that therapeutic action can occur at the procedural level without verbalization, and it is currently being forcefully argued by others such as Grigsby (Grigsby & Hartlaub, 1994), Emde and Clyman (Clyman, 1991; Emde, Biringen, Clyman & Oppenheim, 1991), Bucchi (1997), and Schore (1994, 1996).

Morgan adds to the use of nonlinear dynamic systems theory by including a more fully “process” view of representations, based on a brain that “updates” its “maps.” Finally, although one of Morgan’s goals in the paper is the delineation of this model of change from other self-psychological and relational schools of therapy, he does not really get around to this complex topic in this paper. His pursuit of this topic would be an important contribution, because this

procedural theory of therapeutic action still needs to be placed within the broader field of current psychoanalytic theories.

A remaining query I would pose to this group is the complex meaning of the term intersubjectivity, which figures centrally in each author's paper, yet remains remarkably inconsistently and vaguely defined. The state of confusion about this term is vividly captured when Tronick asks (p. 292 of this issue), "Why do we seek (the reader may choose his or her favorite term) connectedness, intersubjectivity, social contact, attunement, emotional synchrony, reciprocity, attachment." Although Tronick does not imply that these terms do not carry their own definitions, in current psychoanalytic oral and written discourse these terms are often used interchangeably. In defining the real relationship as "the intersubjective field constituted by the intersection of the patient's and the therapist's implicit relational knowing" (p. 285 of this issue), Lyons-Ruth defines intersubjectivity by procedural knowledge. This is distinctly different from the way central psychoanalytic theorists of intersubjectivity use the term (see, for example, Beebe, Knoblauch, Rustin, & Sorter, 1998; Benjamin, 1990; Ogden, 1994; Stolorow & Atwood, 1992). A careful reexamination of the definitions of intersubjectivity, as well as an integration of semantic and procedural understandings of the term, is sorely needed (Beebe et al., 1998).

In conclusion, the procedural mode of processing has been neglected in psychotherapy and psychoanalysis. Operating largely outside of awareness, the procedural is a *different mode of organizing experience* and is critical to our understanding of therapeutic action. Across development, it is at the implicit, procedural level that powerful "emotion schemes" (Bucchi, 1997) of face, gaze, vocalization, and body are organized, moment-by-moment split-second mutual influence is constructed, the experiences of influencing and being influenced are played out, and the disruption and repair of optimal mutual influence is negotiated. This group has made an outstanding contribution to a procedural theory of therapeutic action, which psychoanalysis urgently needs. We must now integrate the work of this group with other current procedural theories of therapeutic action, such as those of Bucchi, Grigsby, Schore, Clyman, and Emde.

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