



Notes on The Linguistic Register: A Psychoanalytic Perspective on Boundaries

Rhett-Lawson Mohajer and Tara Rava Zolnikov

Research suggests that choices and limitations in utilizing language tend to be commensurate with one's socioeconomic status (Pace et al., 2017; Schwab & Lew-Williams, 2016) as well with as one's sensitivity to context (Wagner et al., 2010; Wagner et al., 2014). The latter is especially the purview of the linguistic register. The relationship between two parties, their relative status, and the situational context wherein conversation occurs is manifested in the linguistic register that the speaker and the listener wield (Ikeda et al., 2018). Any shift in the register engenders transmutations in word order, vocabulary choice, and situational use, which are syntax, semantics, and pragmatics, respectively (Boult, 2007). Ikeda et al. (2019) argued that the choice of register can constitute a form of control which, if adopted insensitively, conveys rudeness and perniciously impacts the relationship between the parties. A wrong choice of the linguistic register in an analytic context, whether unintentional or purposeful, implies a certain intention and may be interpreted diagnostically and not just as disrespectful behavior.

It is worth noting the word "control" and its variable role since it implies a persisting cleavage between what lies within and without the boundaries of the linguistic envelope. We focus here on this form of boundary creation so as to provide added insight into the patient's inner world. The psychoanalytic framework provides a container for the treatment process and entails a multitude of elements, including, but not limited to, the position of the patient (chair/couch), the length and frequency of appointments, the fee, and the analyst's capacity for self-observation of shifts in inner world dynamics (Gabbard, 2016). The boundary-defining criteria we cite differs especially in national contexts. British psychoanalysts, for example, generally consider that only a high weekly frequency of sessions qualifies treatment as psychoanalysis, while the French psychoanalysts believe a lower frequency meets the criteria for what one might term a full-scale psychoanalysis (Gibeault, 2010). Psychoanalysts trained in the British model utilize language as their tool whereas ones trained in the French model use language as the third (Birksted-Breen & Flanders, 2010). Yet the key tenets of the psychoanalytic framework remain unchanged despite differences in determining the ideal frequency of conduct of sessions and the use of language by the analyst. We apply the same reasoning to differences over the reckoning, or even recognizing, of the influence of the linguistic register in the analytic situation as a way of drawing acute attention to this easily overlooked dimension.

Linguistic Register and Social Status

Unlike some Indo-European languages, the words *you* as a singular subjective pronoun and *you* as a plural subjective pronoun are not always sufficient as stand-alone words. For example, *tu* and *vous* in French and *to* and *shoma* in Farsi create a key distinction that indicates the degree of intimacy and relative social status. Mingling or misapplying them

can have serious consequences. This feature is a switching of linguistic registers in interactions in formal conversations. In Italian, the third-person singular feminine pronoun *Lei* plays the same role regardless of the sex of the party that has the higher status in the conversation. Deploying the semantic meanings of these deceptively familiar pronouns discloses essential information on the perceptions of each party vis-à-vis one another and the audience in terms of power and status and stance (Raymond, 2016). Identity status depicts the more relatively immutable aspect of one's identity in conversations like being a parent whereas stance illustrates the dynamic elements of one's identity in a conversation, for instance, being a patient in a physician's office (Raymond, 2016). The distinctions spoken registers of the English language is covertly embedded in the linguistic registers (Goulart et al., 2020) and these indicate one's context awareness and social control (Ure & Ellis, 1977). Speakers of the English language often use semantic variations to communicate the same status-oriented judgments or estimates. This much is commonly recognized. The speaker may consider determinants that are not linguistic in order to use certain grammatical structures or vocabularies (Biber, 1995). For a more revealing look at congruence (or lack thereof) between register and context we use as an illustration the English words 'overdressed' and 'underdressed' to refer to the imputedly odd state of one's attire in a given situation. In the same manner, one can deploy compound words 'over-register' and 'under-register' to explicate the variable aptness of the linguistic register by an individual in any given context. For example, an individual suffering from toothache may use the consultative register to communicate pain to the doctor, stating, "I broke my tooth yesterday and the past couple of days have been horrible; the pain is awful."

This example depicts what we term a congruent linguistic register, that is, a perfectly ordinary and apt patient-dentist interaction in a consultative setting. However, if the patient instead vulgarly blurts, "I fucked up my tooth yesterday; the past few days have been shitty," the patient is using a linguistic register highly incongruous with the professional setting. Meanwhile, and in the same situation, saying that "Forsooth, had I abstained from nuts and not indulged in a transient instant gratification the day before, I would not have to endure this incessant pain" could be an excessive 'over-registration' in the dentist's office (unless, perhaps, the patient is a professional actor or writer having some mordant fun with the situation). Cock (2016) asserted, notwithstanding the prevalent association between the hearer-oriented pronoun 'we' and the speaker-referring pronoun 'you' with the presence of power distance and casual conversational languages, respectively, it is the combined intersubjectivity and the attention to context that are determinant of their effects. Intersubjectivity, from the psychoanalytic standpoint, preserves [and indeed enhances] the predilection for interpersonal context sensitivity (Orange, et al., 1997). In short, the relation between control and the linguistic register occurs against the backdrop of interpersonal context and unconscious motivations.

Discussion

Given the situation delineated above, the individual's capacity to perceive the intricacies of the context in which one is at any moment as well as the person's ability to respond to the situation at hand by choosing the right linguistic register will help to reveal certain covert personality facets. Therefore, in a clinical setting the patient's attitude, persistent or

episodic, toward the choice of one's linguistic register provides the observant clinician with valuable information. Ambivalence is an indication of maintaining contradictory feelings toward the same object, while splitting the ego is the propensity for dividing one's world into all-good or all-bad objects (McWilliams, 2011). The individual who continuously uses splitting, albeit unconsciously, throughout adult life simply does not have the required capacity to tolerate ambivalent feelings; for example, to be angry at one's partner or spouse while still loving that person. At times, it is all love and at others, only anger. Poor impulse control is one manifestation of an ego that is split (Kernberg, 1975). Since the linguistic register is an indication of control (Ikeda et al., 2019), whether in the form of exertion or withdrawal, attention to the patient's consistent utilization of an incongruous linguistic register becomes a source of rich clues for the clinician.

Hence, a patient's *persistent propensity* for under-registration may indicate an unconscious attempt to devalue the clinician. Devaluation, Perry et al. (2013), asserted, is a defense mechanism whose aim is to distort an image [and to one's advantage]. This maneuver safeguards one's self-esteem (McWilliams, 2011). According to the *Psychodynamic Diagnostic Manual Second Edition* (2017) [PDM-2], a hallmark of borderline personality structure, in addition to splitting, is the individual's incapacity for mentalization. Newirth (2016) maintained that mentalization is one's capacity to mediate affects and subjective experiences of oneself and others. Therefore, the capacity to mentalize, depending on the situation, could signal one's inability to recognize that one is perceiving a situation as menacing while it may indeed be the opposite, particularly in a clinical setting. Upon noticing the initial social power distance as one begins consultation, the patient may interpret this ascribed distance (the therapist, after all, is usually a doctor of some sort) as a threat to self-esteem and resort to an inappropriate registration to denigrate the therapist. It is helpful for the therapist, apart from the veiled insult, to remain mindful of the linguistic register the patient is using.

Further, via an object relations lens, once the analyst appreciates the linguistic register as a source of insight into the patient's inner world, a glimpse of the latter's endopsychic structure becomes available. Fairbairn introduced a multilayered theory of personality which highlights the structure of the inner world of the individual as one internalizes the outer experiences, hence accounting for trauma as well as the inner distortions of the experience of trauma (Scharff, 1996). According to Fairbairn (1944/1994a) the ego is always split which, in turn, instigates the splitting and repressing of the object, hence the exciting object and the rejecting object in the endopsychic personality structure (Fairbairn, 1946/1994b; 1951/1994c) both of which are persecutors and the latter especially frustrating (Fairbairn, 1951/1994c). The partial egos and the part-objects cathected around them, namely the libidinal ego/exciting object and the internal saboteur/rejecting object, perpetually exist in the unconscious. The psychic system consigned to the unconscious is part of the endopsychic personality structure; however, one ramification of this process is that at times the psychic template becomes activated. Once an individual's personal proclivities are coupled with certain provocative triggers in the person's environmental context, the result is the manifestation of a defense mechanism

(McWilliams, 1999). This manifestation, against the backdrop of transference, signals the crossing of analytic boundaries (Freud, 1937/1968).

The aforementioned process does not always appear in the form of motor behavior (a punch in the face) but more likely will transpire in the unconscious choice of vocabulary, tone, or linguistic register, for example, during the moments of suspected devaluation of oneself or intended defensive response to others. While sarcasm toward the person in the position of power is one of the responses of the partial ego cathected to the rejecting object, once the dynamic template between the dyad becomes triggered, if the individual identifies with the rejecting object, the person tends to make a show of devaluing the other party (Celani, 2010). Therefore, attention to the patient's *persistent* [emphasis added] choice of under-registration is a source of insight for the therapist. Not only may it reveal what emotions become enacted but also it might show the side of the dynamic that the clinician is reckoned to be on: the side that the parent once was or the side that the patient once used to be. It needs to be iterated, the clinician needs to pay attention to other factors that partake in the process: is the patient expressing anger? Is the under-registration limited to a fit of anger? What message is the body language and facial gestures of the patient conveying? Hence, the adjective 'persistent' matters immensely here.

On the other hand, the patient's *persistent* [emphasis added] proclivity for over-registration can also divulge information and be a source of insight into the individual's inner world. Blatt (2008) noted that self-definition is a multifaceted process that entails dominance, control, and power. Even though these issues are of concern to every individual to various extents; in certain personalities, they play a very prominent role, where one is likely an over-independent or counter-dependent personality. Depicting two categories of character disorders, Celani (1994) using Fairbairn's theory of personality structure, maintained, that personalities with independent patterns tend to overemphasize and their personal power. By highlighting personal power, the individual exhibits dominance and control as a telling characteristic, an exhibition that is running perpetually throughout the year! As an individual intensifies [albeit unconsciously] the utilization of a certain defense mechanism to the point that it becomes unyielding and pervasive, it entwines with the structure of the personality (PDM-2, 2017). The defensive style is an unconscious technique the individual incessantly uses to protect oneself and avoid revealing one's inner world. In short, using Fairbairn's object relations parlance (Fairbairn, 1946/1994b), the patient is placing oneself in the position of the internal saboteur and the therapist in the position of the rejecting object. This dynamic is an indication of covert and incessant aggression under a veneer of composure structured around formality.

However, with over-registration, a second possibility exists: the patient striving to please the clinician for a number of reasons. These reasons include a desire to impress the therapist with one's wide vocabulary and thus, win the clinician's affection, attention, or both. This is a dramatized depiction of the endopsychic dynamic between the exciting object/libidinal ego, the latter is the position of the patient whose unconscious aim is to place the clinician in the position of exciting object: the distorted image of the bad parent the individual had. According to Fairbairn (1946/1994b), the aforementioned cathexis is

repressed twice as the result of direct and indirect repression. It needs to be reiterated that either one of the dynamics mentioned above may manifest itself in the individual's fantasies and dreams (Fairbairn, 1951/1994c).

At this point, the question Paula Heimann asked about transference in the 1950s is apposite. According to Gordon (1999), Heimann asked, "Why is the patient now doing what to whom?" The therapist needs to understand the who, whom, and why of interaction (Bollas, 1996). The most common conceivable situation at the beginning of elective therapy is that the patient perceives the clinician as the exciting object, or else the latter would not have chosen psychotherapy. However, it is also possible that the patient perceives themselves as the exciting object and the psychotherapist as the libidinal ego. This dynamic, Celani (2010) emphasized, instigates the hope of reunification with the respective partial ego, thereby, unconsciously striving to entice the clinician with the possibility of healing a patient.

The aforementioned interactions are the impetus for the patient to act in a people-pleasing way with the hope of reunifying the libidinal ego with its respective part-object, the exciting object. Whether within the transference the patient actively hallucinates fusion with the analyst is a different subject unique to each patient and the patient's therapy journey. In short, the patient's predilection for over-registration or under-registration could be an indication of preserving one's self-esteem, attempts to manipulate or control the therapist, or not allowing oneself to be authentic, even genuinely angry. Many clinicians may recall patients with a proclivity for over-registration who brought dreams to the session in which they used expletives while yelling at a parent, spouse, partner, or boss.

Conclusion

Analytic boundaries play a prominent role in the psychotherapeutic process. We argue that the linguistic register as a form of boundary, to be trespassed or rigidly maintained, deserves more notice. The linguistic register is closely tied to control, the presence or absence of which has important manifestations in a session. Whereas repeated under-registration indicates the patient's propensity to use devaluation as a defense mechanism, a proclivity for over-registration may herald either a power play or a people-pleasing tendency. Utilizing Fairbairn's theory of endopsychic personality structure, the clinician will comprehend the partial ego or part-object position the patient is in at any given time when resorting to such defensive tactic. This means that the clinician will gain insight into the transference dynamic: each partial ego is cathected to its respective part-object in the patient's endopsychic structure. Attention to the linguistic register as one modest but important aspect of the analytic boundaries provides insight into who the patient really is communicating with and why the patient is communicating in a certain message.

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Dr. Rhett-Lawson Mohajer earned a Doctor of Psychology (PsyD) from California Southern University. He is a mentor in the Master of Arts in Counselling Psychology program at Yorkville University, has sat on the Psychoanalysis and Film panel of the International Society of Applied Psychoanalysis, has published on the applications of object relations theories, and is an editorial board member of Dialogues in Health. He is a registered psychotherapist, a registered clinical counselor, a psychoanalyst, and a musician.

Dr. Tara Rava Zolnikov earned a Ph.D. in Developmental Science from North Dakota State University. She has published extensively in some of the world's most renowned public health and global health journals, including The Lancet Oncology, American Journal of Public Health, AIDS and Behavior, Science of the Total Environment, and many more. In 2017, she received the Editors Choice Reviewer of the Year Award at the American Journal in Public Health. She is the editor for Dialogues in Health.

Dr. Rhett-Lawson Mohajer <http://orcid.org/0009-0001-9967-9847>

Dr. Tara Rava Zolnikov <http://orcid.org/0000-0002-0106-1214>