

THE TACIT DIMENSION

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THIRTY YEARS after its appearance, Blankenburg's "Psychopathology of common sense" has not lost its relevance. In my commentary I will try to illustrate the fruitfulness of his approach by pointing to some connections with the phenomenology of the body as well as with recent memory and infant research.

As Blankenburg himself indicates, the notion of *common sense* developed by a shift of meaning from the classical *sensus communis* and thus has its original basis in the sensual-bodily experience. By the *koinè aisthesis*, Aristoteles meant a central sense organ integrating all single modalities of sensation (which he localized in the heart). In German physiology and psychiatry of the nineteenth century, the *sensus communis* was still translated as "*Gemeingefühl*" ("common feeling") or "cenesthesia" (Fuchs 1995). This term denoted the inner, proprioceptive bodily sensations, but also an original unity of the senses, which has been rediscovered by recent infant research as intermodal sensory perception. The affection of the body was thus regarded as the common basis of all sensation.

Looking on this track for a bodily basis of the *common sense*, we find it in the habitual structure of the lived-body as analysed by Merleau-Ponty (1945). The body is the primary "matter-of-course," namely, the tacitly functioning medium of our everyday being-in-the-world prior to any subject-object split. The body schema, in Merleau-Ponty's view, is not only a system of familiar units of movement or "kinetic melodies," it also incorporates the surrounding things,

tools, and spaces that are familiar to us and that we "inhabit." Thus, the musician "does not only manipulate the instrument like a separate object, but lives in it like a limb and inhabits the expressive musical space it opens" (Behnke 1997). But for Merleau-Ponty, the body schema is also the basis of "intercorporeity," i.e., a prepersonal sphere of reciprocal comportment and understanding prior to any explicit consensus and symbolic communication. In this sphere of elementary contact, the "atmospheric" senses play a major role: The sense of *smell* (as shown, e.g., by the expression "to scent treason" or in German, "*jemand nicht riechen können*" [not be able to "smell" or stand someone]) as well as the sense of *taste* whose ambiguous meaning, mentioned by Blankenburg, points to the bodily basis of the feeling for what is suitable, decent, or aesthetically pleasing. Even the designation of *homo sapiens* that we give to ourselves is derived from the latin *sapere* (to taste/to know), and thus shows that the knowledge characteristic for man is not an explicit one, but an intuitive, implicit knowing or "feel" for his surroundings, or as Kant says, an "aesthetic rather than intellectual judgment" (cited by Blankenburg).

Polanyi (1967) has analysed this knowledge at the roots of common sense as "tacit knowledge." It is based on processes of Gestalt formation that enable us to grasp unified wholes through their constituting elements without still being aware of the latter. Thus, we understand the facial expression of others immediately but cannot tell from which details. Or we know how

to waltz without knowing the single movements or being able to explain it. Tacit knowledge implies all the taken-for-granted that we have forgotten once it has become our second nature and part of our bodily habits. It is mainly based on the neuronal coupling of single sensori-motor units by repeated perception or action. This unconscious knowing has only recently come to be explored by psychology under the heading of “implicit” or “procedural memory” (Schacter 1987, 1996). It contains familiar styles or “melodies” of moving, perceiving, and being-with-others in which our whole bodily and emotional experience is engaged. There is an atmospheric, “felt” quality about them that cannot be analysed into single elements. Implicit knowledge may, therefore, never be wholly expressed by words—it is only realized in the concrete situation. It may only be circumscribed by expressions such as “how it feels...,” “how it is...,” e.g., how it is to waltz, how water feels, how it smelled at home on Christmas, etc.

The essential structures of implicit knowing are certainly built up in early childhood. Blankenburg himself points to a developmental basis of the apparent “*a priori*” of the common sense in the intersubjective constitution of the life-world. (“Every child knows these things!” as his patient complains.) Now this implicit knowing is mainly imparted to the child by way of imitation, i.e., by the *mimetic capacities* of the lived-body. Infant research has shown that even newborn babies are able to imitate expressions of others, to transpose the seen gestures and facial movements into their own bodily proprioception (Meltzoff and Moore 1977, 1989). Visual, proprioceptive, and motoric modalities are integrated into one intermodal space (*sensus communis*). One’s own body and the other’s body are experienced as similar. There is a sphere of bodily sensibility and mutual resonance that we all share from the beginning with others as embodied subjects.

In this way, as Stern (1985) and Beebe, Lachmann, and Jaffe (1997) have described, *schemas of interactions* are formed and laid down in the child’s implicit memory, integrating the sensoric, the motoric, and the emotional modes. The child internalizes not isolated images of significant oth-

ers or “objects” but, rather, mutual experiences and sequences of interaction. From this results what Lyons-Ruth (1998) and Stern (1998) have termed an “implicit relational knowledge.” It is a preverbal, not symbolically encoded, knowledge of how to get along with others—how to have fun with them, how to express joy, elicit attention, avoid rejection, restore interrupted contact, etc. It is a procedural knowledge in the sense of being accessible only in contact with others, and of being organized temporally: as a feeling for the rhythm of action and reaction, for the *crescendo* and *decrescendo* of a sequence of behavior, for the “dancing steps” of the interaction. Implicit relational knowledge is a “musical” memory—one must be able to hear the “undertones,” the “music” that plays inaudibly in the interaction with the other. Also, when we speak of the sense of “tact,” it points to the relevance of rhythm and synchronization for the intercorporeal sphere. Common sense is also a feeling for the proper timing.

Let us summarize: In implicit memory, single elements of movement and perception are coupled together to unified wholes. This *implication* happens mainly by repetition and exercise: The couplings—or Husserl’s “passive syntheses”—are learnt *and* forgotten at the same time, thus easing our everyday performance. We do not have to think of *how* we do something and are free to direct ourselves to the aims we choose. However, the reciprocal process is also possible, i.e., an *explication* or uncoupling of the connected elements, e.g., by conscious attention that disturbs the taken-for-granted, implicit performance, or Gestalt. We do not see the wood for the trees anymore. If we repeat a familiar word several times aloud and think of the syllables, it will sound strange to us: The implicit coupling of syllables and meaning is dissolved. If the musician concentrates on his individual fingers, he will stumble in his run, as we also will when running down the stairs and thinking of the single steps. Explication thus disturbs the former familiarity and leads to an alienation or disintegration.

This pathological explication also applies to schizophrenia; it may be regarded, following Blankenburg, as a fundamental loss of implicit knowl-

edge and familiarity with the world and with others. Patients often experience a disintegration of habits or automatic performances, a “disautomation”:

“I found recently that I was thinking of myself doing things before I would do them. If I am going to sit down, for example, I have got to think of myself and almost see myself sitting down before I do it. It’s the same with other things like washing, eating, and even dressing — things that I have done at one time without even bothering or thinking about at all....I am always conscious of what I am doing.” (McGhie and Chapman 1961)

The units of meaningfully connected actions are deconstructed. Patients have to compensate for this disautomation by an awareness of each single movement that they have to prepare and release deliberately. This results in a loss of spontaneity and in what Sass (1992) called “hyperreflexivity”: Each action needs reflection and volition in a way that one could call a “Cartesian” action of the soul on the body. It is no wonder that the patients speak of a split between their mind and their body, of feeling hollowed out or robot-like. The sense of being alive depends on being an incarnated subject, i.e., on the integration of sensori-motor elements into meaningful unities that are at the person’s disposal. In perception, the disturbance manifests itself in an impaired capacity to recognize and categorize familiar patterns, which, in turn, leads to an overload of details; e.g., features of familiar faces may look odd and distorted like masks. Finally, the sphere of intercorporeity, based on the implicit feeling for atmospheric qualities, may be fundamentally disturbed, as shown by a patient of mine:

“For some time I had a feeling as if my clothes did not seem appropriate any more. My gait had changed; I walked stiffly and did not know how to hold my hands. My face seemed changed, too, and I began to wonder whether I might be regarded as a prostitute. Men looked at me so strangely....I took passport pictures of myself in order to see if I only imagined that. Then I began to feel sort of a charging or tension in my body when others came near to me. Finally I thought I should be made a prostitute by brain manipulation....” (Fuchs 2001, 165)

The patient is no longer able to use her bodily feelings as tacit means of perceiving the world. By the explication of single details of movement

and perception, the intercorporeal sphere has become unfamiliar and artificial. The patient’s body has come to seem distant and strange to her, reminding her of a prostitute. As Blankenburg’s patient, she loses the sense of “taste” or “tact,” the feeling for what is appropriate and decent in everyday situations; but this time the alienation of intercorporeity leads directly to a delusional interpretation.

By referring to phenomenology and developmental psychology, I have tried to point out an implicit, bodily basis of *common sense*, namely, in the intercorporeal sphere. By embodying more and more elements of perception and interaction, the child learns to use his body as a medium to understand the others and to make himself understood. Practical understanding in the life-world is originally based on an implicit, intuitive knowledge mediated by the lived-body. It is therefore no coincidence that the term “*common sense*” has its origins in the Aristotelian *sensus communis*, meaning the embodied unity of the senses. The question of how the implicit knowledge, the “wisdom of the body,” comes to suffer a pathological explication and disintegration in schizophrenia still remains open for further study. In any case, Blankenburg has pointed out the tacit dimension that may lead us to a better understanding of psychotic experience.

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