Changes in Relationships and the Integration of the Self: A Study on Self-Awareness and Growth Based on Object Relations Theory and Emotion-Focused Therapy (EFT)

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Abstract: This study explores the psychological adaptation process of individuals in changing relationships, integrating object relations theory and emotion-focused therapy (EFT) to provide both theoretical analysis and practical insights. The case study focuses on Michi (pseudonym) and her emotional fluctuations in workplace relationships, revealing how psychological mechanisms such as projective identification, true self and false self, and the paranoid-schizoid and depressive positions influence individuals' perceptions of relationships and emotional regulation. The study finds that Michi experienced a psychological transition from anxiety and anger to self-awareness and emotional regulation as she faced the promotion of her colleague and the changes in their relationship. Her initial emotional turmoil stemmed from high expectations of attachment and manifested as projective identification and control needs. As she engaged in self-exploration, she employed EFT techniques such as emotional experience and the empty-chair work to conduct an internal dialogue, ultimately achieving a renewed understanding and integration of her emotional patterns, relational expectations, and self-stability. Theoretical analysis suggests that psychological distress in changing relationships is not only influenced by external environmental changes but also significantly shaped by internal object relation patterns and self-stability. Through EFT's emotion-focused interventions, individuals can more effectively identify and transform maladaptive emotional patterns, thereby enhancing psychological flexibility and autonomy in the face of relational changes. The study emphasizes that the core of psychological growth lies not in controlling external relationships but in the stability and integration of the inner self. It also provides theoretical and practical guidance for workplace relationship adjustment, emotional management, and psychological counseling.

Keywords: Relationship changes; Object relations theory; Projective identification; True self and false self; Emotion-focused therapy (EFT); Self-awareness; Psychological growth

1. Introduction

1.1. Background and significance

Projective identification is a core concept in object relations theory, referring to an individual's projection of unacceptable emotions and internal conflicts onto an external object (such as a mother or therapist) to alleviate anxiety [1]. Based on the theoretical foundations of Klein, Fairbairn, and Winnicott, this study explores the psychological mechanisms of projective identification and proposes possible regulation and intervention strategies. By integrating perspectives from psychotherapy, family relationships, and clinical applications, the study establishes a modern social adaptation model of projective identification, providing theoretical support for clinical psychological interventions.

1.2. Theoretical framework

The research is grounded in object relations theory, drawing on key contributions from the following.

Melanie Klein: Developed the concepts of paranoid-schizoid position and depressive position, emphasizing the role of projective identification in emotional regulation [2].

Donald Winnicott: Introduced the concepts of true self and false self, focusing on how early relationships shape identity and emotional stability [3].

Ronald Fairbairn: Proposed the internal structure model, highlighting how individuals construct self-identity through internalized object relationships [4].

Emotion-focused therapy (EFT): Developed by Greenberg & Johnson, EFT is an experiential approach that helps individuals identify, process, and transform emotional patterns to promote secure attachment and healthy relationships.

2. Infant psychological development from the perspective of object relations theory

2.1 Klein's paranoid-schizoid position and depressive position

Building upon Freud's instinct theory, Melanie Klein emphasized that the core of psychological development lies in early object relationships. According to her theoretical framework, infant psychological development can be divided into two key stages:

Paranoid-schizoid position (0–6 months): At this stage, the infant lacks the ability to integrate experiences and perceives objects in an extreme, all-good or all-bad manner. The infant splits the mother into a "good mother" (who provides nourishment and comfort) and a "bad mother" (who is absent or frustrating). This mechanism helps the infant cope with internal anxiety.

Depressive position (after 6 months): As the infant's cognitive and emotional capacities develop, they begin to integrate these fragmented object representations, recognizing that the same caregiver can possess both positive and negative traits. This realization leads to feelings of guilt and a desire to repair the perceived damaged relationship with the caregiver.

Projective identification plays a crucial role in this process. Infants project their unacceptable emotions (such as aggression or fear) onto external objects, shaping their self-identity and interpersonal dynamics. As they transition to the depressive position, they develop a more integrated and stable self-concept. However, if this transition is disrupted, it may lead to pathological projective identification, affecting future emotional regulation and relationships.

This study explores how early interventions can help individuals overcome pathological projective

identification and move toward a more integrated self-experience.

2.2. Fairbairn's internal structure model

Ronald Fairbairn challenged Freud's theory of libidinal drives, arguing that the primary motivation of human behavior is not merely the pursuit of pleasure but rather the establishment and maintenance of object relationships. He proposed that individuals construct their inner world through processes of introjection and projective identification. Fairbairn's endopsychic structure model consists of the following [5].

Central ego: The core self that maintains conscious control and rational thinking.

Libidinal ego: The part of the self that craves exciting but unattainable objects, often representing unfulfilled desires.

Anti-libidinal ego: The part of the self that internalizes rejecting or punitive objects, leading to self-criticism and emotional suppression.

Exciting object: Represents idealized but often unattainable sources of satisfaction [6].

Rejecting object: Represents sources of disappointment and rejection, shaping the individual's defensive mechanisms.

This model closely parallels Klein's theory: while Klein emphasizes the dynamic process of projection and re-integration, Fairbairn highlights the structural formation of personality. The study explores how these early object relations influence adult psychological patterns, particularly in attachment styles, self-perception, and emotional regulation.

2.3. Winnicott's theory of psychological development

Donald Winnicott focused on the role of the environment in shaping self-development, introducing concepts such as true self and false self and the "good enough mother" [7].

2.3.1. True self and false self

True self represents authenticity, spontaneity, and emotional congruence [8]. False self develops as a defense mechanism when individuals suppress their true emotions to conform to external expectations [9]. If false self dominates, individuals may experience a persistent sense of inauthenticity, emotional emptiness, or identity confusion.

2.3.2. The "good enough mother"

Winnicott argued that a mother does not need to be perfect but must provide consistent emotional responsiveness. When caregivers offer empathic attunement, infants develop a stable sense of self. If the mother fails to provide this, infants may develop attachment insecurities and struggle with emotional regulation.

2.3.3. Transitional objects and phenomena

Transitional objects (e.g., a child's favorite blanket or toy) help bridge the gap between dependence on the mother and developing independence [10]. This concept is linked to the formation of psychological resilience, helping individuals cope with separation, loss, and autonomy development. Winnicott's theories are crucial for understanding how early caregiving relationships impact adult self-regulation, authenticity, and interpersonal patterns.

2.4. Riviere's stages of infant psychological development

Joan Riviere further refined object relations theory by dividing infant psychological development into three stages:

Pre-object stage: Infants experience pleasure and pain but have not yet formed a concept of distinct objects [11].

Split object relationship stage: Infants divide objects into "good" and "bad" (similar to Klein's paranoid-schizoid position) [12].

Integrated object relationship stage: Infants begin to perceive objects as whole entities, leading to a more stable emotional foundation [13].

Riviere's framework aligns closely with Klein's but places greater emphasis on the development of the superego and its role in emotional regulation. Understanding these early developmental patterns helps explain why individuals develop specific defense mechanisms, emotional coping strategies, and relational tendencies in adulthood.

3. The influence of infant psychological mechanisms on psychological issues

Infant psychological development significantly impacts adult personality, emotional regulation, and interpersonal relationships. This chapter explores how early object relations shape later psychological challenges, focusing on projective identification, personality development, emotional disorders, and relational conflicts.

3.1. Manifestations and impact of projective identification

Klein's paranoid-schizoid position explains how infants split objects into "good" and "bad" to cope with anxiety. This early mechanism influences later cognitive distortions as follows.

Extreme thinking patterns: Individuals may categorize others as entirely good or bad, leading to rigid interpersonal dynamics [14].

Paranoia and projection: People experiencing paranoid thoughts may unconsciously project their internal fears onto external objects, perceiving others as threatening [15].

Emotional dysregulation: The inability to integrate positive and negative object representations can lead to intense emotional fluctuations and instability [16].

In clinical cases, pathological projective identification is linked to borderline personality disorder, attachment trauma, and interpersonal conflicts. The therapeutic goal is to help individuals recognize and integrate these projections, reducing emotional distress and improving relational stability.

3.2. The role of object splitting in psychological disorders

Fairbairn's object relations model explains how individuals internalize rejecting objects, leading to self-criticism and depressive tendencies [17]. Psychological challenges include the following.

Depression and anxiety: Internalized negative object representations reinforce self-devaluation and chronic worry [18].

Personality fragmentation: A rigid Libidinal Ego and Anti-libidinal Ego structure may cause identity confusion and relational avoidance [19].

Self-sabotaging behaviors: Individuals with unresolved object splitting may subconsciously engage in self-destructive actions to validate negative self-perceptions [20].

Intervention strategies focus on helping clients recognize and reframe these internalized patterns, fostering self-compassion and psychological flexibility.

3.3. The influence of early attachment on emotional development

Winnicott's true self and false self theory provides insights into how caregiving experiences shape personality development. Individuals dominated by false self tend to struggle with authentic self-expression, leading to emotional repression and social anxiety. The absence of a "good enough mother" results in attachment insecurities, which manifest as anxious or avoidant relationship styles in adulthood. Therapeutic approaches, such as emotion-focused interventions and self-exploration exercises, help individuals reconnect with their True Self, fostering resilience and self-acceptance.

3.4. The impact of early object relations on adult relationships

Object relations significantly influence interpersonal dynamics and conflict resolution:

Unresolved infant anxiety → Fear of Rejection: Individuals with early attachment disruptions may exhibit heightened sensitivity to criticism and abandonment.

Projective identification in relationships: Unconscious projections of past traumas can create toxic cycles of blame, control, and emotional dependence.

Emotional repair through self-awareness: Recognizing and integrating these relational patterns enables individuals to develop healthier, more balanced interactions.

Therapeutic interventions target emotional processing, self-awareness, and relational skills to break repetitive conflict cycles.

4. Exploring emotional distress: An integrative approach based on EFT

Emotion-focused therapy (EFT) is an intervention for addressing projective identification, emotional dysregulation, and relational conflicts. EFT, rooted in object relations theory, humanistic psychology, and neuroscience, emphasizes emotional awareness, processing, and transformation to promote psychological growth.

4.1. Theoretical foundations of EFT
4.1.1. Object relations and EFT: Emotional healing in practice

Object relations theory emphasizes the profound impact of early relationships with significant others on psychological development, while Greenberg's emotion-focused therapy (EFT) focuses on the processing and transformation of emotional experiences. The two theories share a deep alignment in understanding and intervening in emotional distress. Object relations theory posits that early relational patterns shape an individual's internal object representations, influencing their emotional regulation capacity. In contrast, EFT facilitates the recognition and modification of emotional schemas, helping clients re-experience and transform these early internalized emotional patterns. Therefore, the emotional experiencing and adjustment process in EFT can be seen as a concrete application of the "internal object repair" concept in object relations theory, providing an effective intervention pathway for negative emotional patterns formed due to early relational trauma.

4.1.2. Humanistic psychology and emotional processing

EFT is derived from humanistic psychology and inherits Carl Rogers' assumption of individual self-actualization, arguing that emotions are at the heart of mental health. EFT promotes the expression and integration of individual emotions through empathy, unconditional positive regard, and Congruence, and helps patients develop more adaptive emotional coping styles.

4.1.3. Neuroscience and emotional regulation

EFT is supported by research on brain functions, particularly in the amygdala and prefrontal cortex, which regulate emotional responses. By fostering emotional awareness and cognitive integration, EFT enhances psychological resilience and self-regulation.

4.2. Core techniques of EFT

4.2.1. Emotion categorization and awareness

EFT categorizes emotions into the following.

Primary emotions: Deep, instinctive feelings (e.g., sadness, fear).

Secondary emotions: Socially influenced responses (e.g., guilt, shame).

Instrumental emotions: Used to manipulate situations (e.g., strategic anger).

Recognizing these distinctions helps individuals identify authentic emotional needs.

4.2.2. Two-chair work

Used for internal conflicts, the two-chair work technique allows individuals to engage in dialogue between different parts of the self (e.g., self-criticism vs. self-compassion), enhancing emotional integration and reducing internal distress.

4.2.3. Empty-chair work

Primarily for unresolved relational conflicts, this technique enables clients to express unspoken emotions toward an imagined person, reframing past experiences, and promoting emotional closure.

4.2.4. Experiential markers

Therapists identify key emotional moments in therapy, guiding deeper emotional engagement and transformation.

4.3. Applications of EFT

4.3.1. Treating anxiety and depression

EFT helps individuals process unresolved emotions, reducing rumination and emotional suppression, leading to improved mood regulation.

4.3.2. Attachment repair

For individuals with anxious or avoidant attachment, EFT fosters secure emotional connections by reshaping relational patterns.

4.3.3. Trauma recovery

EFT is effective in post-traumatic stress disorder (PTSD) treatment, allowing individuals to reprocess traumatic emotions in a safe therapeutic environment.

4.3.4. Relationship counseling

By enhancing emotional communication and empathy, EFT strengthens intimate relationships, helping partners navigate conflict more effectively.

5. Conclusion and implications

5.1. Research conclusions

This study examined how early object relations shape individual psychological development and how EFT can serve as an effective intervention strategy. The key findings are as follows.

5.1.1. Projective identification and psychological development

Projective identification is a fundamental psychological mechanism that shapes self-perception and interpersonal relationships. In normal psychological development, projective identification helps individuals regulate anxiety, but in pathological cases, it can lead to severe emotional distress and relational conflicts. The persistence of early object splitting (good vs. bad) can cause adults to develop rigid cognitive and emotional patterns, affecting their ability to integrate self-perception and external reality.

5.1.2. The influence of early object relations on adult emotional experience

Infant psychological mechanisms (such as splitting, introjection, and projection) continue to influence individuals' attachment styles, emotional regulation, and relationship patterns in adulthood. Insecure attachment (including anxious, avoidant, and disorganized attachment styles) stems from early object relation failures and significantly impacts interpersonal stability. The development of a false self, due to insufficient mirroring and emotional attunement in early childhood, leads to emotional suppression and self-alienation.

5.1.3. EFT as a therapeutic approach for emotional regulation and self-integration

EFT provides a structured approach for emotional exploration and transformation, helping individuals process unresolved emotional experiences and correct maladaptive relational patterns.

5.1.4. Techniques such as two-chair work and empty-chair work facilitate emotional processing, self-dialogue, and relational repair

EFT's emphasis on emotional experience rather than cognitive analysis makes it highly effective in addressing attachment trauma, relational distress, and self-identity issues.

5.2. The intervention process

In the psychological intervention process, the client Michi explored the emotional distress caused by a workplace conflict. The therapist guided Michi to reflect on her attachment patterns, emotional needs, and the underlying psychological mechanisms driving her reactions.

5.2.1. Initial emotional exploration

Michi: I feel anxious when I hear that I might be "draining" people close to me emotionally. It makes me wonder if I have been doing that to my partner, relying too much on them emotionally, expecting them to carry my moods.

Therapist: What makes you believe that you are emotionally consuming others?

Michi: In my relationship, I often expect my partner to comfort me. When we argue, I always insist that they apologize first. Maybe I am using their emotional energy to stabilize myself.

Therapist: It seems like you are recognizing a pattern of emotional dependency. However, do you believe that all close relationships require a perfect balance of emotional energy, or is it possible for relationships to shift naturally over time?

5.2.2. Identifying the core conflict

Michi: I recently had a serious conflict with a close colleague. We had small disagreements before, but this time, we argued in front of others. Since then, I have been avoiding her.

   Therapist: What is the core issue that bothers you the most about this conflict?

   Michi: I expected our friendship to withstand small professional disagreements. But after this argument, I started thinking: has she changed? Did I lose my influence over her?

   Therapist: You mentioned losing influence. What does "influence" mean to you?

   Michi: I worry that she no longer admires me as much as before. Maybe I was projecting confidence in our relationship that was not entirely real.

   Therapist: This sounds like a question of self-worth. If someone stops admiring or relying on you, does that affect your sense of self?

5.2.3. Addressing projection and self-perception

Michi: I see now that when my friend distanced herself, I felt threatened, not just because of the conflict but because it made me doubt my own worth.

   Therapist: You might be experiencing projective identification—assigning internal self-doubts onto external relationships. This often happens when our self-value is tied to external validation.

   Michi: So, when she became more independent, I interpreted it as rejection rather than personal growth?

   Therapist: Yes. In relationships, when we feel emotionally abandoned, it often mirrors earlier experiences of perceived neglect. How do you feel now, recognizing this?

   Michi: A little uncomfortable, but also relieved. I think I need to shift my focus inward instead of seeking reassurance from others.

5.3. Practical implications
5.3.1. Integration of object relations theory in psychotherapy

Therapists should assist clients in recognizing how early object relations influence their current emotional distress and interpersonal patterns. Understanding projective identification and splitting mechanisms allows for more targeted therapeutic interventions.

5.3.2. Advancing EFT as a core intervention framework

EFT's experiential techniques provide a unique advantage in working through deep-seated emotional wounds. Incorporating neuroscience-based insights into EFT practice can enhance emotional processing efficiency and trauma resolution.

5.3.3. Application of EFT in non-clinical settings

EFT principles can be extended to workplace relationships, leadership development, and conflict resolution.

   Awareness of attachment styles and emotional responsiveness in professional and social settings can improve communication effectiveness and team dynamics.

5.4. Future research directions
5.4.1. Cross-cultural adaptation of EFT

Investigate how cultural differences in emotional expression and interpersonal expectations affect EFT

interventions. Develop culturally sensitive EFT models to enhance global applicability.

5.4.2. Neuroscientific research on EFT mechanisms

Explore how EFT influences brain activity, particularly in the regulation of emotional circuits. Identify biological markers of successful emotional integration in EFT interventions.

5.4.3. Longitudinal studies on emotional development

Examine how EFT contributes to long-term personality development and relational stability. Assess the impact of self-awareness training on mental resilience and emotional well-being over extended periods.

Disclosure statement

The authors declare no conflict of interest

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