"Winston Churchill once said, 'The United States and Great Britain are two great democracies divided by a common language.' This 'Tower of Babel' motif is apparent today in the United States in the debate between ego psychology and self psychology and between the British school of object relations and the American version of object relations, that of ego psychology's representational world. Dr. Hamilton has taken upon himself the task of integrating these disparate lines of thinking and of reconciling them with current developmental concepts. He moves gracefully and accurately through Freud, Klein, Erikson, Hartmann, Bion, Fairbairn, Winnicott, Kohut, Tolpin, Kernberg, and particularly Mahler. He employs these and many other key contributors in order to develop the thesis of the overarching importance that object relations, including Kohut's selfobject functions, Kernberg's affectsive self-object units, Klein's internal objects, and Jacobson's object representations, has for the development of the self.

'The fact that his formative training took place at the Menninger Foundation gives an even deeper perspective to this book. It was there that ego psychologists from the United States met classical analysts from central Europe, Kleinian analysts from South America, and Middle School analysts from Great Britain. It was also there that analytic ideas were seriously and methodically studied in psychotics, borderlines, and narcissistic disorders. It was here also that analytic group psychology, including the Tavistock method of Bion's, was put into operation. With all this as his backdrop, Dr. Hamilton takes us on an object relations guided tour through psychosis, borderline conditions, narcissistic personality disorders, neuroses, group phenomena, and mythology, integrating each step of the journey with developmental signposts.

'This book best approximates what every psychiatric resident, clinical psychologist, psychiatric social worker, and analytic institute candidate would have wished for. It is an extraordinary handbook of the new developmental psychologies of psychoanalysis.'

--James S. Grotstein, M.D.

"Dr. Hamilton has provided us with a text that is at once comprehensive, sophisticated, clinically relevant, and perfectly understandable to the budding professional. The author breathes life into the theory with his liberal use of clearly written clinical vignettes and literary references. Moreover, Hamilton is blessed with a touch of the poet, which makes his prose a supreme pleasure to read. This is a superb achievement that deserves a place on the shelves of psychiatric residents and other trainees in the mental health disciplines."

--Glen O. Gabbad, M.D.
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At its inception, this book was intended to be a translation of object relations theory into understandable English, one that does not water down concepts or sacrifice richness of thought. All students of self–other relationships, graduate analysts as well as those just beginning their mental health careers, have decried the difficulty of object relations literature. It was time for a new version.

Like most intellectual movements, object relations theory began as a series of arguments against viewpoints held by particular colleagues, or as an attempt to insinuate new ideas into the old framework of a then dominant group. These discussions had to use established technical words, sometimes with new meanings or even with shifting meanings. Therefore, the original language was cumbersome and confusing, though appropriate to the purpose and audience.

Recently, there has been such a widening interest in and acceptance of object relations ideas that increasing clarity is both possible and needed. The defensiveness of awkward wording is no longer in order. Jargon requiring knowledge of once prominent debates has become more hindrance than help. Yet I was hesitant to discard the original terminology entirely. I did not want this book to become a
opportunity to learn and grow. Drs. Walter Menninger, Roy Menninger, Roland Atkinson, James Shore, and Joseph Bloom provided administrative support as I undertook this project.

Ms. Catherine Ponzoha read the manuscript on her own time and with her usual goodwill. She made numerous useful suggestions, both tactfully and incisively, always in the context of encouragement and support; I cannot thank her enough. My father, Dr. Norman K. Hamilton, helped with the first four chapters, as did Dr. Robert Frick. Ms. Joan Langs edited the entire manuscript, suggesting when warranted, challenging when necessary.

My students provided case examples, as well as useful criticisms and questions. They were patient as I discovered these ideas with them.

My patients are already aware that I have learned and benefited from my work with them. Some of them may wonder if they will recognize aspects of themselves in the case material. I regret that I could not write about each of them personally, because they are each important as individuals with particular circumstances and in their entirety, but respect for their privacy forbade my doing so. I was obliged to disguise the particulars, combine case material, and divide examples in such a way as to make recognition by family and friends impossible and recognition by the patients themselves uncertain. I extend my deepest gratitude to my patients for the privilege of knowing them, working with them, and learning from them.
PART I

SELF, OBJECT, AND EGO

O chestnut-tree, great-rooted blossomer,
Are you the leaf, the blossom or the bole?
O body stooped to music, O brightening glance,
How can we know the dancer from the dance?

—William Butler Yeats, "Among School Children"
In addition to our loves, friendships, and rivalries, we have intricate relationships within us. They are not static images, but rather, powerful influences on how we feel about ourselves and relate to others. The people around us also affect us within ourselves. The exploration of these internal and external relationships has led to a growing body of knowledge called object relations theory.

Developmentally, we begin in an undifferentiated state, unable to separate ourselves from our environment. We gradually come to know who we are in relation to those who care for us, our parents. We cannot at first conceive of ourselves as separate from these people upon whom we depend for our very existence. Afraid of our aloneness and smallness, we need to gain courage by taking in love and nurturance from our caretakers. To protect this self-parent relationship, we begin to attribute difficulties to things outside of it. Only after we receive the concern which we need can we grow strong and confident enough to accept our weaknesses and longings as our own and care about others.

This process continues in early life and throughout adulthood. We take in aspects of our relationships and make these a part of ourselves. We also attribute aspects of ourselves and our accumulated
internal relationships to those around us. We continue this process when we are mentally healthy.

When people are mentally ill, this internalizing and externalizing becomes stymied or stuck in a repetitive or extreme pattern. Some reenact acquired internal relationships with everyone they meet, regardless of the inclinations of the other person. Others thoroughly isolate themselves and cannot relate to or care about anyone; they become imprisoned in their internal world. Many individuals are so vulnerable to influence that they acquire the characteristics of whomever they meet, chameleon-like. They are unable to establish a stable identity or self.

Object relations theory is the study of these internal and external relationships in healthy children and adults and in patients. Over the past 30 years students of object relations have breathed new life into psychoanalysis. The concepts of this theory are compelling in their immediacy and usefulness and have permeated and influenced not only psychoanalysis, but also psychotherapy, group therapy, family therapy, and hospital administration.

There are natural rivalries among mental health clinicians, as there are in any field. These rivalries foster a tendency to splinter off object relations theory by calling it a new school or a deviant theory. Similarly, ego psychology was once considered deviant, and self psychology is often currently described as outside the mainstream. Some clinicians have claimed that object relations theory is not new, but is merely a rearrangement and elaboration of one part of old theories.

Knowledge cannot be owned, controlled, relegated to splinter groups, or kept neatly within the bounds of any school or discipline. Like other bodies of knowledge, object relations theory is a set of ideas to be considered. For the present, the intellectual ferment in the exploration of interpersonal and intrapsychic functioning centers on concepts of self and object. It is with these basic concepts, self and object, that the study of object relations begins. In Part I, I also discuss the ego, which integrates and differentiates our internal and external self- and object-experiences.

CHAPTER 1
THE OBJECT

Object means a loved or hated person, place, thing, or fantasy. Some people find the word object dehumanizing when used for persons, distasteful or inaccurate. Yet, it has persisted in widespread use.

Freud (1905a) introduced the term. In his "Three Essays on the Theory of Sexuality," he studied the perversions. He discovered how people can relate to an object, a thing such as a shoe or stocking, as if it were a sexual partner or loved one. It became convenient and accurate, then, to use the word object to denote something invested with emotion, whether it was another person, an inanimate thing, an idea, or a fantasy.

When people say they love their country and are loyal to their country, they have a feeling in relation to a thing, their country. Just what that thing is, however, is variable. A country can be denoted by geographic boundaries. It can be an abstraction as defined by a set of documents. It can be a collection of people who have citizenship. It can be a fantasy referring to a complicated set of loyalty and identity issues. Any of these concepts of one's country can be an object, because a country can be important enough for people to love or hate. People work, fight, and sometimes die for their country. They disparage, flee, and sometimes rebel against their country. Clearly,
people have strong feelings about their country, though a country is not a person, not a mother, father, child, husband, wife, lover, or friend. Nevertheless, a country can be an object in object relations terms.

People can love houses, cars, cats, dogs, mountains, valleys, trees, and rivers. They can love a painting, book, poem, God, or an image. Similarly, they can hate all these things, related things, parts of these things, or entirely different things. Although the first love object is the mother, still, the less personal term, object—to denote a thing invested with emotional energy, with love and with hate—remains useful. The word other can sometimes be used interchangeably with object.

Klein (Segal 1964) was one of the earliest and most controversial object relations theorists. She demonstrated that studying the relationship between internal fantasies, called self, and internal fantasies, called objects, could help us understand many previously confusing mental states in both healthy and ill people. These fantasies could be either conscious or unconscious.

There are internal objects and external objects. An internal object is a mental representation—an image, idea, fantasy, feeling, or memory relevant to another person. An external object, in contrast, is an actual person or thing. One of the most confusing aspects of object relations literature is that many authors fail to clarify whether they are referring to an internal or external object; they may even change usage in mid-sentence.

This subject of internal versus external is more complex than it first appears. It takes us into epistemology and the nature of reality—subjects of debate for thousands of years. How do we know what we know? Is there really a world out there? What does the world out there have to do with what we perceive? Rather than venture further into such abstractions here, we will simply acknowledge that the failure to distinguish internal from external objects obscures much of object relations literature. I will return to this subject of internal and external worlds in later chapters.

It is no coincidence that the psychological term object is equivalent to the word object in its grammatical sense. Prototypical sentences have the structure of subject, verb, and object. Object relations theory has this same structure. There is a subject—the self; there is a verb—to love or to hate; and there is an object of that love or hate. This simplified grammatical construction particularly helps in studying psychological states in which there is no clear distinction between subject and object. Such psychological states precede the development of language and the grammatical ordering of experience in

children; they are preverbal. There will be more to say about self–object confusions throughout this book.

An object is a person, place, thing, idea, fantasy, or memory invested with emotional energy (love or hate or more modulated combinations of love and hate). An external object is a person, place, or thing invested with emotional energy. An internal object is an idea, fantasy, or memory pertaining to a person, place, or thing.
CHAPTER 2

THE SELF

Psychoanalytic literature abounds with discussion of the self. Several journals have devoted entire issues to this topic. There is even a branch of object relations theory called self psychology (Kohut 1971, 1977).

The word self historically has meant wind, breath, shade, shadow, soul, mind, universal self, transcendental oneness, one, the unmoved mover, spiritual substance, the seat of good and evil, a supraordinate agency, and so forth. More mundanely, it has meant body, a bundle of perceptions in constant flux, a person and all that pertains to a person. A word with such a history is bound to carry with it issues of spiritualism versus physicalism and mind–body duality versus mind–body unity.

One’s very self—the thing in the world which is closest to a person—defies definition. Theoretically and developmentally the concept of self lags behind that of object. A baby learns to discriminate its mother from strangers before developing a firm awareness of self as distinct from mother. The mother–other distinction precedes the self–mother distinction. In other words, the ability to see objects as different from one another precedes the ability to appreciate self as a separate entity.
Nevertheless, there have been advances in understanding the concept of self. Many authors conceptualize the self as a mental representation—that is, an idea, feeling, or fantasy. Like object, this representation refers to a loved or hated person or thing. Unlike the object, this idea, feeling, or fantasy pertains to one’s own person in a fundamental, biologic way. As Freud (1923, p. 26) put it, “The self is first and foremost a bodily self.”

Although self-representations are private, they can be described, as can other private experiences, such as emotions.

A 2-year-old boy and his father walked back from the park one summer evening. They commented on their shadows stretched out before them on the sidewalk.

“That’s my shadow,” the boy said, “and that’s my Daddy’s shadow.”

“Yes,” his father answered, “there they are.”

Shortly, he lifted his son to his shoulders. The boy laughed at the change in their shadows.

“What’s that on top of my shadow?” his father demanded.

“That’s me,” the boy said, giggling.

Over and over he said, “That’s me.” Previously, he had said it was his shadow. Now he said only, “That’s me.” His shadow had become a self-image.

“That’s me” is what is meant by the self in object relations theory. Because the “that’s me” experience is so variable, I shall give several more examples.

B.G., a 30-year-old man, began psychotherapy because rapid changes in his ideas, plans, and religion had made life confusing and difficult. He entered a career only to end it. He joined a religious cult and began to think he was a saint. Soon he believed he was a devil. Then, he felt he was an objective scientist watching the play of biologic forces from afar.

Over months of psychotherapy, his severe self-confusion lessened. One day a year later, he entered the office relaxed and interested. “I had a strange dream last night,” he said. “I dreamed I was in a theater line waiting with some others. There were people from all walks of life and all ages and both sexes in line. As if by magic, a door appeared and who should walk in but me.”

“What were you like?” the therapist asked.

“I was just the same as I was in line, as I am, I mean. I walked right up to me. As I got closer to me, I had a pleasant feeling of recognition.”

“What happened then?”

“I walked right into me and disappeared, and we were one.”

As the patient discussed his thoughts about this dream, his therapist was reminded of watching an infant exploring his image in a mirror. At 7 to 10 months of age, B.G., like other children that age, may have approached a mirror closer and closer until his image disappeared. This only happens with the self-image, not with the object-image. B.G. was beginning to rework his early self-experiences. At a fundamental level, he was beginning to experience who he was. These images are the self.

An insurance executive sought respite from administrative details by visiting a friend. She greeted him in the foyer of her fifth-floor studio. When she opened the door, a wide, well-lighted work space spread out before him. “Come in,” she said. She gestured to the walls with a sweep of her hand, “Look around.”

Huge, bold canvases covered the walls. Black shapes alternated with whites and grays, dynamic, yet integrated. All the paintings were variations of black.

“All black,” he said.

“I guess I’ve been depressed,” she said. “But that’s me. That’s all I have to work with, so I’m working with it.” Her twinkling eyes and smiling face revealed that she was not now depressed, though she was telling him she had been or could be depressed. She was telling him something about her self.

The paintings were not self or self-images in the psychoanalytic sense. They were canvas and paint. Neither were her words her self. But her paintings and comments communicated something about her internal self-representations. These internal images are what is meant by self. In this case, she was referring to her depressed self, though she did not currently feel depressed.

Self-images are not necessarily visual. They are also kinesthetic—having to do with deep muscle sensation.

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1This statement is often translated, “The ego is first and foremost a bodily ego” (Freud 1923, p. 26). However, Freud used the word “Ich,” which means “I.” In the Standard Edition Strachey (Freud 1923, p. 7) usually translated “Ich” as “ego,” though it certainly means self in this case. Ego has come to have other, more specific meanings, which will be discussed in Chapter 4.
At the community swimming pool, a young man poised thirty feet above the surface. He leaped, tucked to pike position, spun one-and-a-half turns as he dropped, opened his pike, and slipped into the water. The water barely rippled around his ankles.

This diver relied on a finely tuned self-awareness of which he had no consciousness. He could not have consciously kept track of each balanced movement as he hurtled down through the air. He remained in control, because as he whirled he kinesthetically sensed exactly where he was in time and space. This sense is self.

Twenty years ago, near the Spanish Steps in Rome, I met a man from Virginia. He had no money, but he did have a guitar. When he played the blues and sang the popular, forlorn songs, a crowd gathered around him. Sad, hopeless complaints were transformed by the melody and rhythm. This man’s music changed the words from whining self-pity to expressions of endurance and hope and joy in the folly of our humanness.

The sounds were not his self, but they indicated something about his self. His sense of mood, of sadness mixed with hopefulness, of rhythm linked with melody, mirrored his internal sense of himself, at least one aspect of himself.

His fingers picked the strings, too rapidly to be noticed individually. Yet, he sensed exactly where each finger was and would be and what sound and tone and rhythm was associated with each movement and what words and meaning and mood pulled it all together. His song reflected an internal integration of at least some aspects of his self.

Self refers to conscious and unconscious mental representations that pertain to one’s own person. In this book, whereas object sometimes means an external person, place, or thing and sometimes an internal image, self always refers to an internal image. According to this usage, someone viewed by an outside observer is not a self, but a person. The self is private.

CHAPTER 3

SELF-OBJECT

Object relations are the interactions of the self and internal or external objects. Studies of fantasies have led to the conclusion that self- and object-representations do not exist independently but, rather, in relationships called object relations units. These units consist of a self-representation and an internal object-representation connected by a drive or affect such as love or hate, hunger or satiation (Kernberg 1976, Rinsley 1978).

Psychotherapists have learned a great deal about these units from borderline patients who have prominent all-good and all-bad object relations. The polarization of their self- and object-representations and affects makes them more obvious.

S.W. was a 32-year-old woman who entered all-good and all-bad self-object states. She began one session by complaining that her psychiatrist had forgotten to renew her antidepressant medication. He actually had refilled it, and she had overlooked that fact. He waited to clarify the misunderstanding. She went on to describe how she had had a difficult time over the weekend. She had told her husband she wanted him to look after the children on Saturday while she visited a friend. He replied that
she had gone to her dance class every evening the previous week while he stayed with the children. He would like to have some "family time" with her and the children.

She went on, "He said he wouldn't stand for me taking off every time he was with the kids. He was going to put a stop to that kind of behavior. That made me so mad. He was going to put a stop to who? Who is he to tell me what to do? And I told him so, too!"

"Sounds like you had an argument," the psychiatrist said.

"Not really an argument. I unloaded on him. He didn't say more. I got it off my chest. But when I woke up in the morning, I was still mad. I was mean, bad mean. I looked over at him asleep. I wanted to . . . to strangle him. I wanted to hit him with my fist as hard as I could in the face while he was asleep. I was mean. And with the kids, after I got up, I was cross with them. I scolded them. They hadn't done anything to deserve it, but I kept after them. The whole weekend was a waste."

The patient went on to talk about how let down she felt by her psychiatrist because he had not reminded her that she had a refill available on her antidepressant. She described how Easter Sunday had been depressing. She had visited the cemetery to look at her mother's and father's graves. The caretakers had neglected the graves. She was angry about that.

S.W. was in an all-bad self-other state. The self was bad, mean, depressed. Her objects, as represented by the psychiatrist, husband, parents, and cemetery caretakers, were forgetful, ungratifying, absent, dead, and neglectful. The affect connecting self and object was anger. The bad self, bad object, and angry affect comprise an all-bad object relations unit.

The same patient described an all-good object relations unit later in the hour.

The therapist asked S.W. what Easter had been like when she was a child. "It was great," she said, smiling brightly. "I got a new Easter dress and pretty new shoes. My mother always gave me something very special for Easter—a chocolate bunny. I got a chocolate bunny every Easter." Her tone of voice and facial expression were filled with warmth and tenderness. "I loved those chocolate bunnies. My father made a big breakfast. The whole family put on their Easter clothes. I looked so pretty in my new dress and shoes—and gloves, too; we got gloves, too. We'd go to church. Afterward, my mother would make Easter dinner. It was great."

S.W. was now in an all-good, self-object state. The good self was represented by the pretty little girl in her new Easter clothes. The good objects were represented by mother and father feeding the family and by the chocolate bunny. The affect was love. The good self, good object, and loving affect comprise an all-good object relations unit.

Developmentally, the earliest object relations unit is a symbiotic self-object in which the distinction between self and object is not clear. In the psychological sense symbiosis means a state of experiencing the self as inextricably intermingled with the object. When the word unit is used for symbiosis, it is misleading because it implies something discrete. This problem is encountered in all attempts to describe preverbal experiences with words. Words refer to differentiated experiences, whereas symbiosis is undifferentiated.

Symbiosis is the most undifferentiated self-object. It is traditionally associated with pleasant feelings, such as love, warmth, satiation, or even ecstasy, though it can also refer to unpleasant experiences. All mental life begins with symbiosis. It is the matrix out of which our very selves emerge. It is the emotional sea, the oneness to which we long to return. Although symbiotic longings are normal, psychotherapists have learned most about them from patients.

D.F. was a 26-year-old man with a five-year history of psychotic illness. He told his therapist that he was "enlightened" by a wonderful being named Light. Light had come to him as a presence one day. "He descended on me and told me all the mysteries. Do you know that if I peel off my skin, I am pure, white light? I can unravel my skin like someone else takes off a jacket. Light and I are the same thing. When I felt this truth, everything was peaceful and warm and beautiful. All my worries were gone. Things were quiet and all right."

"Is that why you forget to come to appointments, because you are with Light and everything is all right?" his therapist asked.

"Yes, that too, but mostly, there is no time."

"You forget the appointment?"

"There is no appointment," the patient said. "You see, everything is relative to the speed of light. When you are light and when you are with light and everything is light, there is no time. That is one of the secrets. It's all one thing. There's no place
either. That's why I can go into light and be in a different universe when I come out. It's all the same.

D.F. was describing a symbiotic experience. He and Light were the same thing, not limited by boundaries, peaceful, and unified. Stable concepts of time, space, and reality dissolve during symbiosis. Neither are space and proportion a given. Later in the treatment he began to feel himself to be at one with his therapist. He gave up his delusion of Light to become immersed in the treatment. He would sit silently with his doctor, certain he did not need to speak because the doctor knew his thoughts. This stage was a long time in developing. It was even longer before D.F. could begin to differentiate and move toward becoming his own person.

Symbiotic or fusion experiences are also called mergers. Federn (1952) called them blurring of ego boundaries. By whatever name, these states involve indistinct senses of self and object combined with a strong feeling to form the symbiotic object relations unit.

Symbiotic experiences are not peculiar to people suffering from psychoses. Everyone loosens his or her boundaries at times.

Artists, poets, and mystics have best described normal merger. In his poem “Ode on Intimations of Immortality from Recollections of Early Childhood,” Wordsworth described a symbiotic experience when he said:

There was a time when meadow, grove, and stream,
The earth, and every common sight
To me did seem
Apparel’d in celestial light,
The glory and the freshness of a dream.

E. L. Doctorow (1984) provided another description of symbioses in the following passage from “Willi.” This story begins with the description of a small boy who wanders into a field. Delighted with the warmth of the sun and the brilliant conviction in the colors, the boy describes: “I fell at once into a trance and yet remained incredibly aware, so that whenever I opened my eyes to look, I did not merely see but felt its existence.” Such states come naturally to children (p. 7).

Doctorow depicted a state we have all experienced, a state in which the distinction between the self and the not-self becomes irrelevant. He skillfully described this blurring of self-other boundaries by attributing Willi’s thoughts and feelings to the environment and equally by attributing characteristics of the environment to Willi. The “exhalations of the field” (p. 27) envelop Willi. Colors have conviction. Visualized objects are felt as his existence. There is a merging of self and other in a welter of undifferentiated experience. Freud (1930) called this the oceanic feeling.

Doctorow went on to describe how journeys of a lifetime passed before the boy’s eyes and how the scale of the universe was not pertinent.

- Here again, time and space mingle; they fluidly expand and contract. During merger experiences, large and small, fast and slow, become unities. There is no duality, because there is no subject-object distinction, upon which all order in the internal world depends.

- Everyone experiences the warmth, or even the ecstasy of fusion from time to time:

  - Two lovers hold hands as they stroll by the river. In the twilight of the first warm spring evening, they do not clearly distinguish themselves from one another. They are a couple.
  
  - A gray and twisted man leans on his cane before Renoir’s *Revers’ Lunch*. Alone, in the cool, white halls of Chicago’s Art Institute, he gazes unsentimentally. As he views the painting, alone, he enjoys the pleasure of youth and companionship and quiet flirtation. The flush of wine, the warm shade, and the repose after exercise are his— all this, as if he were there, in the scene of nineteenth-century France, which no longer exists, as depicted by an artist long dead.

- Anyone who has been injured and given a narcotic understands the warmth and peace within oneself and the environment, the slowness of time and irrelevance of space, which we feel during narcotic intoxication.

People who meditate enter such states. The devout of any religion feel at one with their God.

- A pregnant woman who pauses with her shopping cart contemplates the first flutter of new life within her. Amid the supermarket hustle, the rows of brightly colored cans, she smiles a quiet smile, betraying her symbiotic experience with her new fetus.

- The loss of sense of self, of time and space, of distinction from one’s lover, of existence itself, during orgasm is perhaps the most powerful fusion experience available to adults.

Less physiologically compelling than orgasm, but equally intimate, is the warmth and pleasure of feeling empathically understood. The conviction that another person knows what we feel and listens compassionately to us and understands entails a blurring of self-other boundaries. Conversely, understanding another person
empathically also involves a blurring of self–other boundaries. Although empathy can, in retrospect, be dissected and translated into everyday observations (Hamilton 1981), we cannot empathize while maintaining clear self–other boundaries. By definition, empathy requires the absence of such objectivity.

If symbiosis is a psychological state during which self and other are fused in a warm, satiated, loving, or ecstatic feeling state, what would happen if we went to the opposite extreme? What would happen if we isolated a person from his environment in an attempt to find out just what a person is, in and of himself? Would isolation of a person from external objects change his internal self- and object-experience?

Following World War II, scientists took an interest in the effects of the isolation used in brainwashing during the war. They performed thousands of experiments over a period of 30 years (Solomon and Kleeman 1975). This work led to the development of elaborate sensory deprivation chambers. Volunteers were submerged in tepid water inside insulated walls. A hood placed over their heads allowed them to breathe. Thick concrete and cork walls screened out all sounds. Skimmers at the water surface even dampened whatever wave action the subjects might generate themselves.

Isolated from the outside world, these volunteers underwent profound psychological changes. They lost their ability to organize their thoughts and concentrate. Vivid imagery and bodily illusions came to mind. Some hallucinated. Most became susceptible to suggestion. Their sense of identity dissolved. Time and space would not hold steady.

In object relations terms, bodily illusions are a change in the sense of self. Hallucinations are the confusion of self and other. In hallucinations, thoughts or fantasies, which are internal, are experienced as perceptions of external events. Internal and external, self and object, are confused in hallucinations. The suggestibility experienced in sensory deprivation and used in brainwashing also results from boundary confusion. It results from thinking that someone else’s thoughts and opinions are one’s own. Time and space become irrelevant, just as they do during the self–other confusion of symbiosis.

Surprisingly, then, attempts to isolate a person from external objects result not in a pure sense of self uninfluenced by the surroundings, but the opposite, a state similar to symbiosis, in which one person feels so close to another person or thing that he cannot distinguish himself from anything else. If there is no external object with which to compare one’s self, there is no self and no stable sense of reality. As these experiments suggest, our very selves will disintegrate without external as well as internal objects, for the self is nothing except half of the self–object duality.

Many people are “rugged individualists,” who like to feel certain of knowing who they are and what they stand for. Thus, they do not rest easy with the idea that their private selves are dependent upon their relation to the external environment, particularly their relationship to other people. Yet even astronauts, chosen for their fortitude, sense of purpose, and intelligence, must accept this fact. In the isolation of space, they must depend on routines, tasks, and orders from earthbound command centers to keep their orientation, to resist the pull of merger, fragmentation, and loss of self. Underwater divers must take similar precautions.

If we can all lose our sense of self as separate from the environment, what distinguishes us from those suffering from psychoses? Psychosis is characterized by self–object confusion, and everyone can develop such confusion; but not everyone is psychotic. Many clinicians think the difference is that those who are not psychotic can turn their boundary blurring on and off, as necessary, and those who are psychotic cannot. Rinsley (1982), who studied the object relations of borderline disorders, explained psychosis versus nonpsychosis this way:

As a group of psychiatry residents gathered around him, he told the story of a 12-year-old boy named Josh, who lived in Topeka State Hospital. He thought he had a radio inside his head. From outer space the radio received messages of war and invasions and spaceship battles.

The professor confided to his students, whispering behind his hand, “You know what I told him?”

He winked.

“I told him, I’ll tell you a secret, if you promise not to talk about it outside this room.”

Dr. Rinsley paused.

Then he went on, “Josh agreed and asked me what my secret was. So I told him, with appropriate conspiratorial inflections, ‘I have a radio in my head, too.’ ‘You do?’ Josh said.”

The professor nodded and looked around at the residents to see how they were receiving him.

“‘Yes, I do,’ I whispered. And do you know what he said to me? He said, ‘Then why aren’t you crazy like I am?’”

The professor sat up straight and grinned at his residents. He
put his hand to his ear, as if turning a radio knob. "Because,' I
said, 'I can turn it off.' ' He clicked his ear and sat back.
At first, it seemed that the professor was making fun of this
tormented child. But then he repeated with compassion and
warmth and understanding in his voice, "Because I can turn it
off, Josh. And you can't turn yours off yet. Do you want me to
show you how to turn it off?"

I do not know whether Dr. Rinsley ever taught Josh how to turn off
that radio he was hearing, but I do know he was a talented and
compassionate psychotherapist who helped many patients confused
about self and other. I also know that he did not wish to imply that
he had hallucinated radio transmissions, but he vividly and
empathically identified with this child's experience and could turn
this identification on and off at will. He reminded his students, over
and over, that everyone can understand psychosis.\(^1\)

Because people can and do relinquish the self-other distinction
from time to time, many object relations theorists assert that everyone
harbors within them a psychotic self as well as a nonpsychotic self.
This idea has led to uneasiness, criticism, and sometimes excessive
theoretical efforts to distinguish psychotic from nonpsychotic person-
ality structures. It seems preferable to sit still with the uneasiness,
neither affirming nor denying, looking only at the evidence.

An object relations unit is a self-representation and an internal object
connected by a drive or affect. When the distinction between self
and object in an object relations unit is unclear, it is called a self-
object. Symbiosis is the first and most thoroughly undifferentiated
self-object out of which other object relations evolve. Symbiosis is
conventionally described as being associated with pleasant affect,
such as love or ecstasy, though other fusion states may be confusing
or frightening.

\(^1\)Upon reading this account, Rinsley (1987) mentioned that after many months of
inpatient treatment, Josh was able to turn off the "radio"—he eventually recovered and
is doing well as a family man and in his own business.

CHAPTER 4
THE EGO

The ego cannot be experienced subjectively. The ego perceives,
integrates, thinks, and acts. It is central to our personalities, yet
unknowable. Its functions can be measured and observed from
outside, but it can never be known firsthand. During introspection,
the ego remains the observer within the observed.

When we contemplate the subjective experience of ego, we are
conceiving a self-representation or self-image, which we take to be
equivalent to the ego, but it is not the ego. Some people like to
identify with an aspect of their ego functioning—rational thinking, for
instance. This identity, however, is not ego; it is a self-representation.
Ego can never be known subjectively, because it is not a personal
place, thing, idea, or fantasy. The ego is an abstraction denoting a set
of functions.

Much object relations literature is confusing partially because the
word ego is used in so many ways without informing the reader
when the meaning has been changed. In many publications, ego can
mean self, organization, and organizer, interchangeably. Here, it
refers only to the organizer, not to the organization of the personality,
or to the self. It is one aspect of the broader concepts of ego. There
has been a move in recent years toward such specificity (McIntosh
1986). Because the term ego is central to object relations literature, it may be useful to discuss the history of this concept.

Freud defined *Ich*, or ego, in various ways as his work evolved, but at no time was his definition very clear. In his most highly developed version, *The Ego and the Id* (1923), Freud described three major structures of the personality—ego, id, and superego. The ego had several attributes and functions, but two were basic: (1) the ego was equivalent to the self; and (2) it was a coherent organization-organizer. Freud condensed these separate but overlapping ideas into a single concept, the ego.

As self, the ego represented conscious and unconscious awareness of various aspects of one’s own being, primarily body image and the subjective sense of self. This concept of self is similar to the one proposed in Chapter 2.

As system, the ego had a synthetic and organizing function. It balanced, integrated, and stabilized perceptions, impulses, emotions, and the demands of conscience. The impulses were called id; and the demands of conscience were called superego. Thus, the ego balanced id and superego. Freud did not clearly make the distinction between ego as self and ego as organizer and system. Rather, he described the ego in both ways interchangeably.

It was Hartmann (1952, 1959), an ego psychologist, who differentiated more clearly between ego as self and ego as organizer or system. He described the system ego as the agent of centralized functional control (1959). He emphasized the functions of differentiation, synthesis, integration, and balancing in the realms of perception, cognition, impulse control, and motor function. Hartmann (1952) predicted that these integrative ego functions would eventually provide the link between psychology and biology, mind and body.

Hartmann clarified the concept of the ego as system and organizer, though he did not distinguish between the concepts of organizer and organization. He probably did not do so because there is always a relationship between structure and function. Unlike Hartmann’s conceptualization, in this work, ego refers only to the ego as agent—an organizer, balancer, and central regulator. It does not refer to a structure or organization, but to “the process of organization per se” (Blanck and Blanck 1979, p. 9). To make this distinction clear, the phrase integrative ego functions will sometimes be used in place of the word ego.

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1I am indebted to Dr. Robert B. Frick for discussing these issues with me in detail.

Jacobson (1964) carried Hartmann’s thinking further when she described the formation of self-representations in *The Self and the Object World*. She delineated the progressive differentiation and integration of multiple, primitive self- and object-representations to form a stable identity. The ego was the agent of this process.

Although it is not necessary to delineate all the theoretical problems concerning the ego, it may be useful to indicate some areas of controversy in the object relations literature. Klein (Segal 1964) used ego as synonymous with self. Fairbairn (1954) changed the ego concept radically, defining three ego: central ego, libidinal ego, and antibidinal ego; these are the key elements of his object relations theory. Unlike Fairbain, Federn (1952) largely adhered to Freud’s description of the ego as the organized and organizing self, but added further elaborations, such as ego boundary. In this book, Federn’s useful concept will not be referred to as ego boundary, but as the self-other or self-object boundary. His concepts of ego feelings and the subjective awareness of one’s ego (Rinsley 1982) refer to what will here be termed self-awareness.

Kohut (1971) developed a self psychology excluding the ego as a useful element. His idea of transmuting internalizations is similar to integrative ego functions. Kernberg (1976) at first seemed to differentiate between ego and self. More recently, he has argued that Freud’s ambiguity concerning ego as self and as system reflects the actual state of things (Kernberg 1982).

Because of this welter of definitions, readers of object relations literature often find it useful to consider in each instance, even within the same work, whether ego means self, organization-structure, or organizer. As examples of the distinction between self and ego, I will present cases of severe psychiatric disorder with separate disturbances of self and integrative ego function.

E.J. was a 17-year-old girl whose referring physician reported that she had visual hallucinations, paranoid ideas, inappropriate affect, and difficulty completing school work for a year. A more detailed history revealed that her symptoms had begun the day before she was to go on an extended tour with her high school dance team. She went to a neighbor’s home where they smoked marijuana in his bedroom. She suddenly hallucinated.
fire emanating from her eyes and heard a stuffed animal warning her that people might try to kill her. Her hallucinations immediately ceased when she was hospitalized and given neuroleptic medication. Over the next year, she intermittently took the neuroleptic medication that was prescribed, and she continued to use marijuana regularly.

On examination she was found to be an attractive, dark-haired girl who dressed in cover-girl fashion. She alternately pouted coquettishly and smiled with a giggle as she talked. She was alert and oriented and denied recent or current hallucinations of any type. Concentration, memory, and general intelligence were above average. Her ability to abstract was intact. When presented with material above her educational level, she responded in a dramatic and embellished fashion. Her subtests on Wechsler intelligence tests were uniformly moderately above average.

Her mood was difficult to assess because she smiled and acted superficially happy, while admitting that she was hiding her depression. When further questioned about her unhappiness, she demonstrated it by weeping in an unconvincing fashion, which hid any genuine expression of emotion.

E.J. had displayed self-fragmentation. She had experienced a fantasy of fire as a perception of something external, actually coming out of her eyes. She also perceived the warning that people might harm her as a message from a stuffed animal. Aspects of self were attributed to the environment.

This self-other confusion took place while she was faced with separation from home, in an intimate setting with a boy, and intoxicated by marijuana. Her strong feelings and the intoxicant impaired her otherwise healthy integrative ego functions. The combination of neuroleptic medication, marijuana, and internal conflicts about graduating from high school and entering adult life contributed to her ongoing self-other confusion over the next year.

Her symptoms resolved entirely when she was placed in a calm and healthy living situation where marijuana was not available and neuroleptic medications were discontinued. In these circumstances, her constitutionally intact integrative ego functions allowed her to sort out her difficulties in psychotherapy. Self-other confusion had not recurred by the three-year follow-up.

F.Y. provided another example of time-limited self-other confusion in a patient whose integrative ego functions were usually intact.

This 34-year-old woman told her psychiatrist in a first interview that she was afraid she was going crazy. Her mother had recently died, her marriage was tenuous, and she felt pressured by having to work under critical supervision. She was beginning to have uncontrollable crying spells and difficulty sleeping.

Ten years previously she had had a similar difficulty which did develop into a time-limited psychosis. She was about to leave the country as a Peace Corps volunteer. She had broken up with her boyfriend, and her best female friend was ill. She developed crying episodes, sleep problems, and suspicions that she was being sent out of the country for malignant purposes. She hallucinated voices telling her to kill herself. She was hospitalized briefly and treated with antidepressant and neuroleptic medications for a few months. She recovered fully, worked on an assembly line, married, and had two children.

She now feared she would have another psychotic episode. The psychiatrist questioned her further about this possibility. “I get disorganized,” she said. “It’s my purse. I can tell because of my purse. Everything is out of order. I dump everything out and try to get it organized, but it seems like the more I try to put things back together, the more they get mixed up.”

The psychiatrist wanted to see how she would deal with these anxieties in an unstructured situation. He remained quiet despite the patient’s obvious anxiety.

She went on, “A woman’s purse is a part of her. I mean it really is her. I don’t know if you understand. It’s not like a man’s wallet. Men have wallets, and they may care about them; but a woman’s purse is actually her.” She stopped for a moment, shaking her head. She looked confused. “My purse is messing me up. I mean...”

The patient looked frightened. The psychiatrist decided to intervene. “It sounds like your purse is important to you, a symbol for yourself. When you are upset and feel disorganized, you feel like your purse is disorganized. So you try to organize your purse, but it is your thoughts that are getting mixed up.”

“That’s right,” the patient said sitting back in her chair. She was obviously relieved.

“You have had several losses recently. Your mother died, and now you are afraid you might lose your marriage, your job, and even your sanity. It sounds like you need someone to talk with so you can sort things out.”
“Yes, I would like that,” she said. She regained her composure and remained lucid in that and subsequent interviews.

F.Y. had brief episodes when she became confused about self and other in an extreme way. She had heard voices telling her to kill herself during her first psychotic depression; she had experienced her own suicidal thoughts as coming from outside her. She recovered fully from this episode until she had several serious losses once again. The distinction between her purge as a metaphor for self and her purge as a volitional being became hazy. She said, “My purges are messing me up.” Her usually intact integrative ego functioning had lapsed under pressure from recent losses so she could not compare and contrast sufficiently to keep straight what was inside her and what was outside her. Perhaps the loss of her mother had again aroused longings for closeness of such intensity that she had suspended her self–other distinction. Her ability to recover her balance as soon as the psychiatrist made meaningful contact with her suggests that good ego functions were potentially available to her. Her problems were mainly in the area of self and object relationships.

Some patients, in contrast to F.Y., show evidence of psychopathology that is more clearly in the realm of integrative ego functions.

K.A. was a 19-year-old man who had been adopted at birth. Even as a newborn, he was distinctly motorically overactive and hyperresponsive to stimuli. He had difficulty sitting still and was diagnosed as having a mild learning disability in elementary school. Spelling and arithmetic were particularly hard for him.

K.A.’s foster parents were tolerant and well-modulated people. Being active in sports themselves, they kept their son busy with activities. He garnered considerable self-esteem from his skills in baseball and hockey. His parents believed in positive reinforcement and praised him for his athletics, while overlooking his social and academic deficiencies.

As a teenager, K.A. lacked social abilities and the cognitive capacity to compare, contrast, and abstract. These problem areas caused him no end of trouble in high school. Socially, he was immature and impulsive. He fell in and out of love daily and grandiosely overestimated his athletic prowess. The other boys delighted in showing him that he was not the star he thought he was. Soon, he began to associate with other youths who were outcasts. He turned to marijuana, alcohol, and hallucinogens. At age 17, he developed the delusion that he had special knowledge of a murderous plot. His refusal to take medication hampered his outpatient treatment, until at age 19, he attacked his parents and was referred for long-term hospitalization.

Upon admission to the hospital, K.A. grinned and walked high on the tips of his toes, greeting everyone he encountered. He wore brightly colored suspenders and pressed jeans that were too short for his spindly legs. He was taking antipsychotic medication at that time and had no hallucinations. He had a fixed paranoid belief system. His concentration and ability to abstract were poor. He could not integrate complex stimuli and jumped from thought to thought. His mood shifted from moment to moment. Moreover, he had night time panic attacks following physical activity. Occasionally, he flew into rages and attacked the nurses.

Psychologic and neuropsychologic testing demonstrated mild diffuse cerebral dysfunction. Neurometric testing (a computerized electroencephalogram), carried out while K.A. was off medication, showed a generalized cortical deficit.

These impairments in integrative ego functions led to problems in his hospital routine. For example, on the volleyball court, each player is responsible for a vaguely defined area that changes with the serve. He was incapable of keeping track of such boundary changes and would rush about the court in widening circles, becoming increasingly anxious. After volleyball, he would pace the ward, painfully grimacing and complaining of overwhelming anxiety. When he was changed to an all-male basketball team, he no longer became overexcited and confused, as long as they played man-to-man. When the team played a zone defense, he could not stay within the ill-defined zones and would run from place to place, interfering with others’ responsibilities and neglecting his own zone. This failure to discriminate is but one aspect of impaired integrative ego function.

K.A. had difficulty with his primary nurse. This 40-year-old woman approached her patient in a professional and caring fashion. Her attractive physical appearance, combined with her capacity for concern, confused and overstimulated the patient. If she was left alone on one end of the ward with him, he would burst into physical violence. Once, he threw a potted plant against the wall near her head. Another time he struck her face with his fist. Afterwards, he wept bitterly, explaining that he had hit her because, as he put it, “She is my favorite nurse, and she’s so sexy I can’t stand it.” He could not differentiate between his
sexual and aggressive feelings. Neither could he modulate and integrate his emotions and behavior. He erupted into chaotic activity because of this failure in integrative ego functions.

K.A. eventually improved when ward personnel adjusted the stimulation around him and provided him with insight into his illness and his strengths and weaknesses. They physically contained his violence. After months of calm, deliberate treatment, he could work on the grounds, but he continued to need frequent reminders to persist with tasks. Five years later, he called to thank his helpers for their assistance and to inform them he was stable, but required moderate doses of neuroleptic medication and a structured living situation. He had recently tried to leave a halfway house to live on his own in an apartment, but had become disorganized and again displayed chaotic behavior until he returned to sheltered living. He realized he might always need a structured environment because he could not sufficiently organize his experience.

K.A. had impaired integrative ego functions and, therefore, self-object pathology. His delusion about murderous plots was a confusion of internal fantasies with an accurate assessment of everyday external events. Because the ego organizes self-image and object-image, ego deficits nearly always lead to self pathology. This interrelationship between ego and self has contributed to the blurring of the two concepts in much psychoanalytic literature.

Separating the concepts of self and ego provides clarity but also detracts from the richness of certain usages. For instance, observing ego has come to mean the ego as subject reflecting on itself as object. Descriptions of the observing ego used in this reflexive sense denote a contemplative state of mind that one can almost feel. Clearly separating self and ego as concepts does not allow for the reflexive meaning of observing ego. The ego is always the subject and does not observe itself; it observes self-image and object-image and their associated feelings. Observing the self becomes just another ego function, like acting, thinking, feeling, integrating, and organizing. While sacrificing some richness of meaning, the clarity achieved by separating the concepts of ego and self allows more comprehensible discussion of increasingly complex and ambiguous states of mind, thereby providing a richness of its own.

The ego is an abstraction denoting the mental functions of differentiation, integration, balancing, and organizing in the realms of perception, memory, cognition, emotions, actions, and the demands of conscience. The ego compares, contrasts, and decides. It is the perceiver within the perceiver, which we can never know. People sometimes identify with their ego functions, as if the ego were the self or the person; but we are much more complex than our egos. The ego is a passionless thing, useful, but emotionally meaningless in itself. It is an abstraction denoting a set of mental processes.
INTRODUCTION

The sense of who we are in relation to others begins in infancy and evolves in a to-and-fro fashion. Through differentiation and integration, we form self- and object-images. Two sources of information have converged to indicate how this process takes place—observations of patients growing and changing in psychotherapy and observations of infants in relation to their mothers.

The most influential developmental studies in American object relations literature have been those of Mahler and her colleagues (Mahler et al. 1975). Other investigations, such as those of Spitz (1955) and Bowlby (1969, 1973), also demonstrate the importance of early mother-infant relationships in establishing a sense of self and other, though they emphasize slightly different aspects of the same process. Piaget's (1936, 1937) detailed descriptions of cognitive development are compatible with the findings of Spitz (Cobliner 1963) and Mahler (Fraiberg 1969, Lester 1983).

The seminal psychoanalytic observations have been brought together by Kernberg (1976, 1980). He relied on previous work by Hartmann (1964), Jacobson (1964), and Klein (Segal 1964), among others. The mental processes he observed in patients with borderline personality disorders have striking parallels to the behavior of chil-
Children in certain phases of development. These two lines of investigation, represented by the work of Mahler and Kernberg, have come together to form modern object relations theory.

This emphasis upon the work of Mahler and Kernberg is, of course, a vast oversimplification. In Chapter 19, I will discuss some of the other contributions. The ego psychologists, interpersonal psychiatrists, and self psychologists, not to mention the myriad individual therapists who have not written down their findings but have discussed them informally with colleagues, have all played their part. For clarity of conceptualization, however, the focus for now will be on these two prominent investigators.

Various mental dynamics seen in patients undergoing psychoanalysis or psychotherapy will be described in Chapter 6. Taken together with the developmental observations described in Chapter 5, these concepts form the heart of object relations theory.

CHAPTER 5

SEPARATION AND INDIVIDUATION

After studying severely disturbed infants, Mahler and her colleagues undertook a ten-year observation of 38 normal children and their 22 mothers. These children entered the study in their first few months of life. Psychoanalytically informed investigators observed them, both alone and interacting with their mothers, through their third year. This series of detailed and empathic observations were used to delineate what they called the psychological birth of the human infant (Mahler et al. 1975).

The phases and subphases of this growth process include:

- Autism, 0–2 months
- Symbiosis, 2–6 months
- Separation–Individuation, 6–24 months
- Hatching Subphase, 6–10 months
- Practicing Subphase, 10–16 months
- Rapprochement Subphase, 16–24 months
- Developing Object Constancy, 24–36+ months

AUTISM (0 TO 2 MONTHS)

Some object relations theorists (Fairbairn 1943, Isaacs 1943, Klein 1959) have suggested that people relate to objects from birth or even
in intrauterine life; but Mahler, like most American theorists, proposed an autistic phase preceding the capacity for relationships. In this phase, the infant forms a more or less closed psychological system and is cloaked in the reverie of a sleeplike state. The newborn's psychological withdrawal approximates the insulation of intrauterine life. Such an oblivion provides an intermediate zone between intrauterine and extrauterine life.

Spitz (1965), best known for his work *The First Year of Life*, similarly concluded that newborn infants do not yet have the neurophysiologic sophistication to differentiate between self and object. An infant must be able to distinguish internal from external in order to sustain an object relationship. It also must be able to organize perceptions into consistent internal images, a capacity which it apparently does not have. On the basis of these factors, Spitz argued that babies begin life in an objectless stage. Their eventual ability to enter a relationship awaits the maturation of neurophysiologic capacities, as well as the accumulation of experiences, such as feeding, holding, and cuddling.

Newborns respond to a touch on their cheek by turning in that direction and moving back and forth, beginning to suck—the rooting reflex. They may root toward the touch of a finger, or even a block, with the same vigor as toward the mother's breast. They show no special interest in their mothers, or anyone else, as yet. Findings like these led both Mahler and Spitz to concur that newborns have only reflexes—such as grasping, rooting, and startle reflexes—that channel their interaction with the environment. This rudimentary reactivity to the environment evolves into a relationship.

Infants younger than 1 month old spend much of their day in half-sleep and half-waking states. They seem to form a monadic system. Freud (1914a) called such a phase primary narcissism; during it, all emotional energy remains within or attached to the baby's own body. Emotional energy is not yet directed outward to external objects or inward to self- and object-representation. In Freud's terminology, the infant cathects his own body, or in everyday parlance, he invests emotional energy in himself. Since Freud considered erotic energies to be primary, before he developed the dual-drive theory of sex and aggression, he also called this phase autoerotic.

Much debate surrounds Freud's comments on primary narcissism, because it mixes the concepts of self and person. How can an infant invest emotional energy in its own body if it has no experience of a bodily self as an entity? The newborn seems to have no discrete self with emotional energy to invest in another aspect of the self. From an external viewpoint, however, the infant as a whole person seems to direct most of its emotional energy inward. These concepts of Freud's remain problematic because of a terminological unclarity.

Fairbairn (1941) stated that during the first few weeks of life the infant retains its mental state as it existed before birth. It resides in such total merger with its mother that it does not allow "entertaining any thought of differentiation from the maternal body, which constitutes its whole environment and the whole world of its experience" (Fairbairn 1943, p. 275). The issue for Fairbairn was not so much one of cathexis, or where the drives are directed, but of how the infant experiences itself as a part of its mother. Unlike Fairbairn, I agree with Mahler and Spitz that the newborn probably does not as yet entertain any coherent thoughts at all. The merger Fairbairn describes begins later, during symbiosis.

There is evidence that infants respond to light, color (Oster 1975), movement (Bower 1965), and sound (Wertheimer 1961), as well as to taste (Jensen 1932), smell (Engen and Lipsitt 1965), and touch (Lipsitt and Levy 1959). Infants appear unable, however, to distinguish between human and nonhuman stimuli. Additionally, they respond to their own bodies, just as they do their blankets, their cribs, or their mothers. They seem to live in a world of light and color, warm and cold, pain and pleasure, loud and quiet, still and moved. This world, it appears, is not divided into sets of opposites as is this description, which is divided thus because of the nature of language. During this preverbal, neonatal time, perceptions probably run together in a synesthesia. Moist sweetness, warm colors, and felt visions prevail. Perceptions may equally well fragment into disconnected bits of light, noise, touch, smell, and taste.

Even these poorly organized perceptions allow some connection to the environment. This early connectedness eventually evolves into complex relationships. Mahler referred to the well-known observation that each developmental phase blends into the next (Mahler et al. 1975). Earlier phases contain the anlage of the next phase, just as subsequent phases contain vestiges of previous development. In the autistic phase, there is only a small emotional investment in the external world; but there is some responsiveness to stimuli. "It is this fleeting responsivity to external stimuli that makes for the continuity between the normal autistic phase and later phases" (Mahler et al. 1975, p. 43).

Perhaps one reason adults find it difficult to conceptualize newborns as psychologically insulated is that adults themselves become so attached, or bonded (Klaus et al. 1972), to their babies. Any woman
who delivers a child and sees its bright eyes and hears its voice and feels it placed wiggling and warm on her belly knows that bond. Any man garbed in the green gowns of the birthing room, who sees and hears a newborn emerge wet and squalling from the mother and then holds that youngster up against his chest, knows the oneness with his baby. In such circumstances, the adult enters a partial fusion state and attributes his or her own feelings of attachment to the baby. Close observation by less involved scientists indicates that even though the child may mold to some degree, the attachment is still largely one way—parent to child. This fact does not diminish the importance of the parent-to-child bond, for it is this connectedness that provides the matrix within which the infant eventually forms its own relatedness.

Symbiosis (2 to 6 Months)

In Chapter 3, examples from clinical practice, the arts, and everyday life illustrated symbiotic experiences in adults. Mahler described this same symbiotic experience as the very stuff of the second through fifth or sixth months of life.

The child develops a "dim awareness of the need-satisfying object" (Mahler et al. 1975, p. 44) early in symbiosis. He begins to behave as if his mother and he were part of the same "omnipotent system—a dual unity within one common boundary" (p. 44). Freud (1930, p. 64) called this the "oceanic" feeling. 

Dawning awareness of a two-person relationship derives from both gathering experience and a maturing nervous system. Neurophysiologically, the ego functions of memory, cognition, and motor coordination are unfolding. They allow the infant to organize and remember the experiences of being hungry and fed, held and laid down, and of seeing, hearing, and smelling his mother's and his own body. These experiences provide a budding sense of self in relation to object. The child shifts from the one-person monadic system of autism to the bipolar self–other system of symbiosis. As yet, differentiation is not sufficiently complete to allow for development of a truly two-person relationship.

Not only do the ego functions allow for a budding relationship, but the relationship with a loving parent enhances the unfolding ego functions (Ritvo and Solnit 1958, Bell 1970, Mahler et al. 1975). If the child does not have such a relationship, if his mother does not adequately receive his cues about his needs and respond to them, the child's genetically programmed ego functions fail to develop. In the extreme case, as Spitz (1965) demonstrated with children raised in foundling homes, the child may return to an unrelated or autistic phase. These children, who lost their mothers, were left in cribs and fed with propped bottles. They were not held or rocked or fondled. With this lack of interaction, they began to lie motionless, staring, unattentive to their environment. Some of them wasted away and died of marasmus. Conversely, children who did have optimal interactions seemed to develop increasing abilities to perceive, process, remember, and respond to stimulation. There is a vital, circular interaction between the development of mother–child relationships and the maturation of ego functions.

The symbiotic relationship is heralded by the smiling response. Spitz (1946) noticed how the vertical, moving human face, or even a mask, releases a smiling response and visual following in the infant. This social smile is one of the first signs of a genuine relationship. While recognizing the importance of social smiling, Mahler emphasized the mother's holding her baby as one of the more important "symbiotic organizers of psychological birth" (Mahler et al. 1975, p. 49).

Mahler did not emphasize correct versus incorrect holding, but much like Winnicott, she focused on "good enough mothering" (Winnicott 1953) providing an adequate "holding environment" (Winnicott 1960) for a particular infant. A psychophysiological equilibrium is attained by matching mother and infant interactions, as Brazelton (1969) also demonstrated. These patterns are called "mutual cuing" (Spitz 1965). Mahler (1965) filmed this cuing and molding of the mother and infant. She described how the infant responds differently to the warmth and turgor of its mother's body than to inanimate objects (Mahler 1971). She also demonstrated how infants can adopt or take in the holding pattern of their mothers. One child she observed during the weaning process, which followed a period of happy breast feeding, began to claw and tear at his mother's blouse. Wanting to soothe her baby and yet protect herself, the mother bounced him in her lap (Mahler et al. 1975, p. 49). Subsequently, this small boy learned to comfort himself, and even later to play a peek-a-boo game with this same bouncing pattern. The holding pattern which the child adopted when only partially differentiated from his mother laid the groundwork for a later constructive, adaptive, and more differentiated relationship pattern.
tion, it experiences these unpleasurable events as encompassing its entire self and its world. When infants wall and scream, the whole world seems to be swallowed by their agony.

These unpleasant experiences also serve their developmental purpose. Mahler and Gobeliner (1955) suggested that ever-increasing memory traces of unpleasurable (bad) emotional experiences in contrast to the prevailing pleasurable (good) experiences help define budding self- and object-images during the symbiotic phase and thereafter. Pleasure and pain, good and bad, become a second polarity around which the child organizes its world, along with the self-other polarity.

The infant gradually acquires an awareness of something out there, of someone holding and caressing and feeding him, in contrast to neglecting and leaving him. He can simultaneously feel himself to be the one caressing and feeding himself. The baby's poor self-other differentiation allows for this confusion. The infant can readily feel that when he moves his eyes, searching for the mother, she magically appears. When he moves toward her breast, it spontaneously approaches. When the mother of symbiosis is sufficiently present, the infant can associate his need, his wish, his hunger to be fed with her presence, as if the wish and fulfillment were one thing. Omnipotence permeates the baby's symbiotic world. As the baby moves, the world moves; as the baby feels, the world feels; as the baby breathes, the world breathes.

For parents, the symbiotic phase of their infants often fills them with joy. Both mothers and fathers can delight in the warm closeness of their babies, perhaps recalling their own infantile experiences. Nevertheless, feeding problems, sleeping troubles, and the requirement of being available twenty-four hours a day can wear on young parents. Occasionally, because of their own makeup, they may find the closeness of relating to a symbiotic infant threatening their own autonomy. Under such circumstances, they may retreat. Such efforts at distancing can take the form of imposing overly rigid feeding and sleeping schedules on the baby. Typically, however, parents enjoy the growing bond with their child.

Whereas mothers often find their parental role confirmed by their responsive infant, new fathers may at times feel displaced from this intense dyadic relationship between mother and baby. Some fathers nurture and support their wives in their new role, thereby participating indirectly in the symbiosis; and some mothers can share the symbiosis in this way. With more frequent sharing of direct child-care tasks, other fathers feed, nurture, and hold the baby themselves, thereby developing an intense symbiotic relationship of their own. In this case, the baby may experience the parents as one entity. The mother-father may thus become a partially undifferentiated other pole of the symbiotic dyad, though there is evidence that infants respond somewhat differently to different caretakers very early. Mahler did not study this parenting situation, but rather investigated only the traditional family constellation of middle-class Americans.

SEPARATION-INDIVIDUATION (6 TO 24 MONTHS)

Subphase 1: Hatching (6 to 10 months)

Symbiosis blends into the beginnings of the separation-individuation phase when the child is about 5 or 6 months old. The first subphase of separation-individuation is appropriately called hatching or, more technically, differentiation.

Whereas the child previously faded in and out of sleeplike states, directing attention inward or only attending to the me-mother unit, he now develops a look of "alertness, persistence, and goal directedness" (Mahler et al. 1975, p. 54); Mahler's staff members could consistently identify this look of attentiveness and would describe the child as "having hatched."

The child now seems to strain away from his mother's body while being held, apparently to have a better look at her. This tangible sign of differentiation contrasts with the previous molding of the infant in his mother's arms. As differentiation proceeds, the child increasingly explores parts of his mother's body, "pulling at mother's hair, ears, or nose, putting food into the mother's mouth" (Mahler et al. 1975, p. 54).

It is during this subphase that infants begin to derive increasing pleasure from a special blanket, teddy bear, or other soft, pliable object. Winnicott (1953) called these cherished possessions transitional objects. He considered them to represent both self and mother and, as such, to be residual from the omnipotent dyad of symbiosis. Yet the child seems to maintain an awareness at some level that the special possession is neither self nor other. Transitional objects will be discussed in more detail in Chapter 6.

The "hatching" child displays an increasing interest in the appearance of other people as opposed to his parent. The child seems to compare and contrast his budding mental image of the mother with everyone in his environment. Insofar as the father is intimately
involved in child rearing, he shares this privileged position with the mother.

A young father in the grocery store carried his 7-month-old daughter in his arms. The little girl, in blue corduroy coveralls with a white embroidered puppy on the bib, leaned back from her father’s shoulder, looking at his face, then staring at the passing people. Her wonderment attracted a friendly, gray-haired lady who approached her, smiling. Rather than indifferently smiling back at the kind woman, as a symbiotic child might have done, the little girl quieted down and clung closer to her father’s chest. She peeked around his neck at the woman, fascinated and yet certain that this was not her object of attachment. She seemed to sink back into the symbiotic unity as she molded and clung to her father.

Many psychoanalysts have termed this differential response to nonparents stranger anxiety. Brody and Axelrad (1970) studied the variability of this reaction. Mahler preferred the term stranger reaction and considered anxiety too strong a word. She emphasized that the more secure an infant has been in his symbiotic attachments, the less anxiety and the more interest he will show in response to strangers. Aside from the strength of the response, most authors agree that stranger reactions demonstrate not only an increasing differentiation of self from mother, but also an ability to differentiate others from mother. The mother retains the self-object potential of a previous symbiotic relatedness, and thus the child clings to her. Simultaneously, he aggressively pushes away from strangers who might threaten the dual unity.

The child develops increasing motor skills as this subphase progresses. Improved mobility derives from maturation of both the musculoskeletal and nervous systems. This ego function of motor coordination serves the process of self-object differentiation by eventually allowing the child to go beyond straining back from his mother’s arms. Eventually, this budding person can slide down from his mother’s lap to play at her feet. Even if he learns to roll or drag himself along the floor, he tends to stay at his mother’s feet. Emotional closeness and distance are visibly evident in terms of physical proximity between mother and child.

Most parents delight in the beginning differentiation of their children. A mother can now enjoy the presence of an emerging real person in her infant, thereby feeling both less alone and less enmeshed with her baby. She can enjoy the flattery of her child pulling at her ears and hair, exploring her face and clothes. The father, who may have been hesitant to intrude into the mother–child dyad, now often feels freer to dandle his child on his lap. He may hold the baby in the air above his head, cooing and laughing, and enjoying being pulled at and fed by the baby.

With any change come new problems. Even normal infants from time to time annoy their good mothers with intrusive explorations and demands. In addition to feeling a bit irritated, mothers also tend to feel some sadness as symbiosis gives way. Others are relieved of what may have been a burdening closeness for them. They may take this opportunity to wean their babies or return to work. Some mothers feel the need to become pregnant once again. In less healthy relationships, they may become so lonely and needy themselves, they cannot tolerate the baby’s efforts at differentiation. They may alternately smother the child in love and then reject him, placing him in the crib alone for long periods when he fails to gratify their own needs for merger. Most frequently, however, the process of hatching takes place in a mutually satisfying fashion for the parents and the infant. A to-and-fro movement of closeness and distance—the dance of separation-individuation—has begun.

**Subphase 2: Practicing (10 to 16 months)**

The practicing subphase gradually emerges from differentiation. Mahler named it practicing, because the child aged 10 to 16 months or so seems to delight in exercising autonomous ego functions over and over, as if practicing new skills. A chapped-cheeked 10-month-old may play pat-a-cake again and again, howling with delight at each repetition. Although the fledgling child may enjoy lap games, he becomes most enamored of crawling, creeping and—finally—walking.

At first, this practicing remains rather subtle. The child’s interest in his mother, which developed as he psychologically hatched, spreads to objects which she provides him. Early in this subphase, he may fondle and explore blankets, bed clothes, bottles, and toys. With wide-eyed wonder, he may turn a block over and over in his hands. One of these objects, such as a blanket or teddy bear, may become special to him—a transitional object.

The toddler’s budding motor functions drive him to explore all aspects of the world. Soon, he can crawl or creep away from his mother, always checking back, at least visually, at first. He seems to
orbit around his mother, who remains a “home base” (Mahler et al. 1975, p. 69); and he returns to her from time to time, as if for “emotional refueling,” before venturing forth once again.

When upright posture is achieved, the child sees the world from a different perspective. Locomotion magically opens new vistas before him. He becomes “intoxicated with his own faculties and with the greatness of his own world. Narcissism is at its peak” (p. 71). The bright-eyed tyro is full of himself, toddling from here to there, exploring and mischievous. His facial expression declares his delight in each new discovery. Greenacre (1957) called it the “love affair with the world” (p. 57). Grandeur and omnipotence are the order of the day.

To-and-fro practicing games evolve into peek-a-boo. The baby covers his eyes and mother disappears. He opens them and mother reappears. Squealing with delight, he enjoys his mother’s reciprocal pleasure. He covers and uncovers his eyes, omnipotently causing her to disappear and reappear, over and over again.

In catch-me-if-you-can, the toddler catches mother’s attention and dashes off. He flees, certain he will be followed and swooped up in mother’s arms and released. Mahler suggested that such games reflect the child’s exhilaration, not only in exercising his new ego functions of self-direction and running, but also an “elated escape from fusion with, from engulfment by, mother” (Mahler et al. 1975, p. 71). Like the Gingerbread Man of the popular children’s story, the practicing-subphase toddler seems to taunt, “Run, run as fast as you can. You can’t catch me, I’m the Gingerbread Man.” Yet, he seems reassured that mother both will want to catch him and will put him down again after she does.

Mother typically accepts this further disengagement of her toddler. She remains present for refueling and enjoys the child’s interest in the world outside the dyad. She often maintains involvement by watching her toddler and empathically delighting in his newly found delight in the world. This pleasure and confidence that the child can master his forays into the larger environment seems to be a trigger for the child’s own feeling of safety. Most parents also become a bit anxious about the child’s grandiose obliviousness. Children can fall down stairs, run into the street, play with sharp objects, insert knitting needles into light sockets, and engage in myriad other disastrous endeavors.

The majority of parents can traverse these difficulties with a little effort, but some have great difficulty with this developmental phase, particularly mothers who have an exaggerated need for symbiotic relatedness. In Mahler’s (Mahler et al. 1975) study, a few mothers pushed their child away during this phase, as if to avoid the pain of gradual separation. At other times, such a mother might interrupt her child’s delighted practicing to pick him up and hug him, when she needed the closeness, not when her child needed it. In a few cases, it almost seemed as if the mother were practicing and refueling according to her own internal conflicts around separation, rather than responding in a reciprocal fashion to her child’s to-and-fro behavior.

Mahler suggested that parents optimally respond to their toddler’s moving away by giving them a gentle push, yet retaining emotional contact. They thereby provide a confident expectation that the child can master his new skills in an enlarging world.

Suphase 3: Rapprochement (16 to 24 months)

As the child’s motor skills develop, his cognitive abilities also grow. The toddler seems increasingly able to comprehend his separateness toward the end of practicing and the beginning of rapprochement. Perhaps this growing awareness of his aloneness is what leads to his newly increased need for his mother’s love. The practicing child’s imperviousness to frustration and apparent obliviousness to mother fade. Spontaneous refueling and dashing away now evolve into a more deliberate search for and, alternatively, avoidance of physical contact. The difference between this behavior and that of the practicing youngster is more one of tone than tenor. Children in both stages move to and fro, but the rapprochement-subphase child seems to have a renewed awareness of vulnerability, and of dependency on the mother.

G.B., a 20-month-old boy, repeatedly searched out his mother, interrupting her while she was reading or folding clothes or working at her desk. He would climb into her lap, overcoming all obstacles, get her attention, and snuggle warmly into her lap. When she would put her arm around him, he would push it away and wriggle off her lap; but he would linger near her, looking a bit indecisive. During the practicing subphase, he had been content to play at her feet awhile and then dash off again,
joyful and enthusiastic. Now, he seemed to need more closeness, but sought control over that closeness.

The child in the rapprochement subphase may shadow his mother. He may follow her with his eyes or actually follow along behind her for much longer periods than the brief “refueling” of practicing. This shadowing alternates with warding-off behavior, which is both more active and more conflictual than the dashing-off of practicing. In the earlier subphase the youngster delighted to move closer or run away toward some more interesting object. Closeness or distance now becomes conflictual. The child manifests dependency and needs for independence simultaneously.

This motoric approaching and avoiding is joined by other forms of communication. The child learns to say, “No!” He often becomes quite negative, indeed. This negativism is the verbal counterpart of physical pushing away. The child has a new, more modulated skill. He can maintain his separateness by standing still, by not obeying, by not coming when beckoned, by not snuggling, by not eating his food, and by saying, “No!”

The child also uses his utterances and facial expression to woo his mother. His fear of losing her becomes increasingly evident. Both boys and girls may now become demandingly dependent. Rather than accepting mother’s warm embrace, her feeding, her help when she offers it, the child coerces her into giving help but rejects her spontaneous efforts. This odd conglomeration of newly found assertive powers and dependence appears to be an awkward solution to the conflict between growth toward increasing selfhood and a yearning to sink back into the bliss of symbiotic fusion.

M.S., a 24-month-old girl, pestered her mother in a most engaging way. When her mother worked on business accounts, M.S. dumped her teddy bear in her mother’s lap, returned to her room for her rabbit, turtle, frog, another teddy bear, bed clothes, and a new jack-in-the-box. As soon as her mother set one toy down, or one fell off her lap, the child promptly and firmly replaced it. If her mother patted her, she turned away and brought more toys. When her mother ignored her to do her own work, the little girl imperiously pushed her mother’s arm out of the way and rearranged the toys on her overflowing lap. If her mother put the ledger aside and picked her up, she would fend off her embrace. This toddler’s mother at times felt her patience was being strained.

With the child’s increased ability to influence his mother, to find her, to command her attention, to woo her, and to leave her, he develops a heightened awareness of the limits of his abilities. The child experiences a loss of magic power; grandeur erodes. A collapse of omnipotence is inevitable, because as the child’s ability in other areas grows, his cognitive capacity to recognize and remember failures also develops.

The rapprochement-subphase child soon notices that his mother does not always want what he wants. He no longer seems able to relate to her as a home base or refueling depot designed solely to meet his needs. He must increasingly relate to her as a distinct person. Instead of dashing back to her, yanking on her leg for a few minutes, then dashing off, the child now seems more tentative and aware that his reception depends to some degree on his mother’s mood. She may be at various times warm, distant, busy, or reflective. The mother’s behavior is not magically controlled by the child.

Along with this increased awareness of separateness, smallness, and loss of omnipotent grandeur, the child becomes subject to fits of impotent rage and helplessness. He may throw temper tantrums when frustrated.

E.F., a 23-month-old boy, played much of the hour before dinner in his room. At the table he suddenly wanted his mother’s undivided attention. He banged his plate with his spoon and hissed his food whenever his parents discussed the day’s events. When they turned their attention to E.F., he no longer wanted his food. He wanted his mother’s food. She was glad to give him a bite from her plate, but he wanted the whole plate. He climbed down from his chair and up on her lap. She picked him up for a moment to hold him before returning him to his own chair. He grabbed her plate and attempted to overturn it. The mother retrieved it just in time. Twice more this interaction was repeated. Losing her patience, his mother sat him firmly on his chair and said, “No!” E.F. burst into impotent rage. He threw himself on the floor, kicked, and screamed. He was inconsolable for five minutes before calming, and finishing dinner.

In traditional families, tantrums take place more often with the mother than with the father, probably because rejection by the old symbiotic partner can hurt so much more. Fathers sometimes misunderstand this situation and think they handle their children better
than their wives do. Such a misunderstanding may lead to discord between the parents.

The emotional swings of children during rapprochement can take on a characteristic pattern called splitting. The mother and another person may be treated alternately as all-good or all-bad.

When J.S.'s mother left him each morning at the baby-sitter's house, he would cry, cling to his mother, and shrink away from the baby-sitter, as if she were a bad person. His mother was the good object, and his baby-sitter the bad object. As soon as his mother shut the door, he would stop protesting and crawl into the baby-sitter's lap. He would rest his head against her before sliding down to romp in the playroom with the other children.

This process reversed itself in the evening. Upon his mother's return, J.S. would at first ignore her, then dawdle at the door as if ambivalent about leaving. Sometimes he would swear at his mother and say, "Bad Ma." His mother was now the bad object and the baby-sitter the good object. Once the door was shut behind them, J.S. would turn to his mother in the driveway, shouting, "Up, up!" She would lift him in her arms, and he would smile, hug her, and play with her hair until he was securely in his car seat once again, safe with his good mother.

This little boy had evidently developed an image of a good object who held him and gratified him and a bad object who abandoned him. Whether the mother or baby-sitter was the good or bad object depended on how she was interacting with him at the moment. This division of the object world into all-good and all-bad is called splitting. Who is good and who is bad in split object relations often flip-flops according to the child's mood and circumstances. Both intrapsychic and interpersonal splitting will be discussed in the next chapter.

Another aspect of the rapprochement crisis is the development of increasing attachments to transitional objects. Children at this subphase may insist on having their teddy bear or blanket with them most of the time. The blanket, which had a passing function as a transitional self-object in hatching and practicing, now becomes the sole property of the child. He clings to his blanket and jealously says, "Mine," and grabs it back if someone else picks it up. Mother soon learns that cars are one space in which the child particularly needs a transitional object. Transitional activities and rituals also emerge. Parents and children develop ceremonies around the separation that takes place at bedtime. Shared activities such as looking at books or

singing soothing songs seem to help the child develop a feeling of safety before moving from the presence of mother to the separation of being put to bed.

Struggles between closeness and autonomy gradually subside as rapprochement resolves. The child finds an optimal distance. The intensity and duration of temper tantrums decrease. Emotions become more modulated, and a new emotional repertoire emerges. The practicing child was elated and hyperactive; the early rapprochement child displayed some affective instability; the late rapprochement toddler can now display sadness, disappointment, and sometimes even concern. A capacity to empathize with the mother's moods emerges.

At this time the child can begin to play with children in a nearby room. He no longer needs his mother's visual presence. Symbolic activities occupy more of the toddler's time.

Language skills develop apace, increasing the child's sense of omnipotence and control once again. With a few words he elicits a specific response from his parent. He can now say "I" as well as "me" and can use simple sentences, such as, "I want ta' " for "I would like some toast, please." The use of "I" instead of the indirect objective case first person pronoun, "me," or the third person, "baby," to indicate the self as the subject of a sentence suggests an increased subject-object differentiation. The use of simple grammatical sentences demonstrates how the child now organizes his world into subject, verb, and object components. As mentioned in Chapter 1, this grammatical construction corresponds to the construction of object relations units in the following way:

Object relations unit:  

Self  Affect  Object

I  Love  Mother

Grammatical sentence:  

Subject  Verb  Object

I  Want  Toast

I  Want  Up

(in mother's lap)

Language behavior confirms that the child has a developing sense of being a self, a distinct entity, in relation to the world. This capacity to conceptualize self and others is further illustrated by children's recognizing and naming familiar people and themselves in photograph albums.

The child at this age rapidly increases his interest in dolls and other play figures. Favorite dolls are marched around the room, taken for
walks, or bathed. Peek-a-boo with play figures and putting them in and out of containers are also common activities. This interest in toys going into and out of containers may parallel the child’s own emergence from the engulfment of fusion and his longing for a return to merger. Playing with dolls suggests a growing richness of internal fantasy. It requires an ability to conceptualize aspects of the self and internal object-representations and to project them onto external objects, such as dolls or other figures. Play also requires an ability to maintain an “as-if” or “transitional” sense of internal being external without losing a true sense of boundaries; external symbols are used as if they were internal self- or object-representations without losing a sense of body intactness.

As the child grows in separateness and moves toward object constancy near the end of rapprochement, he takes in aspects of the people around him in new ways. Rules are one of the more obvious aspects of his parents which he internalizes.

M.W. started to stick a spoon handle into an electric outlet. Frightened, her mother shouted, “No!” and slapped the little girl’s hand, though she normally did not swat her children. That day, M.W.’s father put a new, child-proof cap over the outlet and said to her, “No, no, ouchy.” The next morning, as she ate her cereal with a spoon, she caught sight of the electrical outlet by the toaster. Upending her spoon, she pointed the handle toward the receptacle. “No! No!” she said. She hit herself on the hand, saying, “No, no! Ouchy,” over and over.

She had perceived her parents’ admonitions. The previous diffuse closeness has given way to a new, more specific ability to take in aspects of the object without losing a sense of separateness.

This increasing sense of self includes a developing gender identity. Children discover their genitals early. In the practicing subphase, they can delight in touching their penis or clitoris. In rapprochement, they continue to develop an increasing awareness of the differences between the sexes—that some people have a penis and testicles and some have a vagina, labia, and clitoris. They begin to categorize themselves and others into male and female. A tangible manifestation of this categorization can be seen in their relation to the mother. When children discover, and show an interest in having or not having genitals similar to mother’s, boys seem impelled toward greater differentiation—more distance and motor activity—whereas girls seem to move closer to their mothers. Sometimes this lingering closeness in girls is strikingly ambivalent. Mahler and colleagues (1975), like other psychoanalytic observers (Tyson 1982), have commented that some little girls tend to cling to their mother and yet manifest anger and disappointment in her when they discover she has not provided them with a penis.

The subject of penis envy is hotly debated. Some authors emphasize that it is not the penis or lack of it which plays a crucial role, but similarity to or difference from the mother (Chodorow 1974). Girls may maintain a closer bond to their mothers because they experience themselves as deeply and fundamentally similar, even in sensitive anatomic areas. Boys, on the other hand, must differentiate more thoroughly, because of their being different from their mothers. Chodorow (1974) has suggested that boys might differentiate too early for optimal development. Discussion over whether boys or girls develop optimally takes us out of the realm of object relations theory and into that of professional debate which often proves more destructive than helpful.

For parents, especially mothers, the rapprochement subphase holds numerous gratifications, but perhaps even more frustrations. The child may demand and reject help simultaneously. He may coerce and control the mother as an extension of himself. He may be negative and obstinate and throw tantrums. The demands on the mother are great. She is called upon to be available, and yet not controlling. She must restrain the child from actual dangerous activity without being intrusive. She must encourage separation without rejecting. Few mothers can remain so steady, so optimally close and distant, without feeling frustration, especially when the child places mutually exclusive demands on her, even small ones—such as insisting that his shoes be pulled effortlessly onto his feet, but that he be allowed to do it himself!

The mother may be going through an emotionally difficult process herself during this time. After fantasies of having a baby, she first has one within her, as an actual part of her body, for nine months. When the infant emerges from her, this physical unity is replaced by the psychological unity of symbiosis. As psychological birth progresses, the mother must go through a prolonged push-pull separation process at the child’s pace and according to the child’s needs, often with disregard for her needs for closeness and distance. The child’s slowly developing capacity for concern and empathy toward his mother may be little recompense for the demands placed on her.

The mother who did not differentiate adequately often has the most trouble at this phase of her child’s development. Because of her own
anxieties over separation, she may do quite well with a symbiotic child who gratifies her need for closeness. During practicing, she may narcissistically enjoy the child’s grandiosity. During rapprochement, though, she may experience anxiety as the child differentiates. She may cling to the child when he shows the slightest urge to separate, or cuddle the child when she needs it, not necessarily when the child needs it. The child is put down when the mother feels secure. Some mothers will actually reward closeness and punish separation with abandonment (Masterson and Rinsley 1975); that is, if the child shows a bit of independence, such mothers threaten to leave. They may be distant, often leaving the youngster alone for long hours. Alternately, when the child comes docilely to such a mother, she may wrap him in the warm embrace of fusion. This pattern is seen in the rewarding and punishing object relations units of borderline personality disorder to be discussed in Chapter 10.

Not all threats of abandonment, however, lead to psychological trouble. Even “good enough” mothers occasionally threaten their children with leaving them.

A young mother backed toward her car, facing her child, her arms full of packages. The obstinate 2-year-old clung to a shopping cart. She refused to be cajoled into entering the car. “Okay, Mommy go bye-bye. Bye-bye,” the mother waved with her one free finger. The little girl stopped her play, quieted, and searched her mother’s face. “Bye-bye,” she repeated, struggling to open the car door. Her voice beckoned in its warm tones, rather than rejecting. The child looked at her once more, and then ignored her and climbed up a shopping cart. The mother stood up, sighed, put down her packages on the front seat, and said, “Oh, okay, have it your way.” She walked over to the toddler, pried her chocolate-smudged fingers loose from the shiny cart, and carried her kicking and screaming to the car. Once strapped down in her car seat, the little girl accepted a grimy blanket her mother tossed her.

This mother, though seeming to threaten abandonment to coerce her child, did not actually do so. The tone of her voice betrayed her. Throughout, she was warm and beckoning. The child remained secure of her attachments.

Winnicott (1960) has stated that the child contributes to his own developmental process, obtaining much of what he needs from the environment. He does not need optimal mothering, only good enough mothering. Some children are more difficult to parent than others, just as some mothers have difficulties allowing distance and closeness when appropriate. Some children and mothers who might be otherwise adequate to the developmental tasks facing them are simply a poor match (Brazelton 1969). An energetic, ambitious mother who values autonomy and self-direction may have more difficulty with a calm baby boy who goes at his own pace. She may do better with an active, somewhat driven child who might be a challenge for another mother.

Fathers can take on new importance for their children during rapprochement, because of the push-pull struggle between mothers and children at this time. Throughout symbiosis or hatching, fathers may share the mother–child closeness. During rapprochement, the father’s sharing usually shifts to a distinct role as a third party. This outside, yet special, person can help the mother and child disengage from the symbiotic dyad and from their consequent autonomy and control struggles. The father can foster the separation process by commanding the attention and emotional involvement of both mother and child as distinct people.

OBJECT CONSTANCY (24 TO 36 MONTHS AND BEYOND)

Signs of developing individuality and object constancy appear as the to-and-fro separating and returning of rapprochement wanes. Individuality entails an increasingly stable sense of who one is in various situations and moods. Object constancy means the ability to hold a steady image of the object, especially the mother, whether she is present or absent, gratifying or depriving. There is considerable evidence of developing individuality and object constancy in the midst of rapprochement. There is even more overlap between this phase and its predecessor than with the other phases. Furthermore, developing object constancy and individuality continue throughout life. This phase is open-ended.

The clinging and rejecting, demanding and dependent behaviors of the rapprochement-age child fade. He seems more secure, able to concentrate on his own tasks and to more or less ignore mother for long periods. Mahler and colleagues (1975) sought to illustrate this new-found security when they asked mothers to quietly leave their children in the playroom in order to see how they might react to an unannounced separation. A 26-month-old girl provided one example. She had had a solid first few months with a mother who was
optimally available to her. When her mother left the playroom, this child played quietly without any concern about where her mother might be. She only became aware of her mother's absence as she grew very pleased with her drawing. At this point, she looked up and asked several times where her mother was. Mahler said the researchers believed the child wanted to share her drawing with her mother; but when no one answered her, she returned to her drawing and became happily involved in it.

To Mahler and her group this behavior suggested an ability to sustain a positive image of the mother. When this little girl wanted to share her pleasure with her mother, she asked for her; however, not finding her, she was sufficiently secure of her mother's ongoing interest and availability that she could continue concentrating on her own play. The fact that she was not merely disinterested was demonstrated by her looking up to show her mother her good work. This interest was further demonstrated when the girl's mother returned to the playroom, and she greeted her with smiles and brought her toys to show her. There was little demanding or running away, but a more modulated and secure response. It seemed as if the girl could reassure herself that her mother was there for her if she wanted or needed her.

This ability to hold an image of the good enough mother constantly in mind depends on both neurophysiologic development and interpersonal experience. Piaget (1937) studied the development of cognitive object permanence, which is a bit different from psychoanalytic or emotional object constancy (Hartmann 1952). Object permanence is the ability to seek hidden inanimate things after a lapse of time. Such searching suggests that the child can conjure up a mental image of the lost thing and hunt for it. Several psychoanalytic authors (Coblin 1965, Fraiberg 1969, Lester 1983) have discussed the interrelationship of object permanence and object constancy. Since object permanence is the ability to search for hidden, inanimate things with the conviction that they can be found, object permanence is a prerequisite for constancy.

Emotional object constancy is complicated by feelings about other people. Because love and hate, hunger and satiation, can be so overpowering for youngsters, these feelings color experience. When angry or frightened, a child may have more trouble remembering that his mother exists as a good person than recalling a hidden toy when calm. Strong feelings can overwhelm memories of prior emotional qualities; thus, attaining a stable internal image of an emotionally charged object takes much longer than the mere development of knowledge that a misplaced toy still exists.

Bell's (1970) studies indicate that children with positive parental relationships develop "person permanence" before "object permanence." These studies do not contradict the finding that object permanence precedes object constancy. They merely demonstrate the importance of a stable and warm environment for the optimal unfolding of cognitive abilities. Children may be able to remember and look for a parent before they can do so with other things in their environment if they have a good relationship; but this ability is not emotional object constancy. Emotional object constancy is more complex than the cognitive task of remembering and looking for a physical person. It is the capacity to recall good feelings about a parent while seriously disappointed in them. Integrating emotions in this way takes longer to develop.

Before object constancy, the greatest emotional danger to the child was object loss. Now it becomes the loss of the love of the object. With a love object the issue is emotional consistency, not the mere presence of a nurturing thing.

Observations concerning object permanence and object constancy have convinced many psychoanalytic thinkers that a neurophysiologically determined ability to remember and form internal images is one prerequisite of object constancy. The other necessary ability is that of combining pleasant and unpleasant emotions in relation to the same person. This capacity to remain secure that the absent and therefore frustrating mother is the same one who admires and loves the child depends not only on being able to combine opposites intellectually, but also on an accumulation of a sufficient number of good experiences. There must be enough warm experiences available to the child that minor separations do not completely overwhelm his ability to call them to mind. When such good interactions are not adequately available, severe ambivalence develops. Highly ambivalent children show considerable anger and longing when their mothers leave, possibly because they cannot retain a positive image of the mother while she is actively or passively frustrating the child (Mahler et al. 1975).

The achievement of individuation usually goes hand-in-hand with the ability to form a more or less constant image of the object. Self constancy begins to coalesce. This increasingly secure sense of self allows for more purposeful activity. Because the child knows who he is and what he wants, even when mildly frustrated, he can now persist with tasks.

A sense of time and the ability to delay gratification mature along with the capacity to remember good things in the face of frustration. Children can now say they will see their aunt or uncle or another
favored person tomorrow or in a little while. This increased sense of being a person in time and place is evidence of developing individuation, that is, a sense of being a cohesive individual with continuity over time, space, and interpersonal context.

As in all life-stages, children do not entirely leave their old struggles behind them during this phase. They often continue to betray doubt over their individuality by insisting excessively on autonomy in areas beyond their competence. For example, a little boy demanded that he be allowed to carry his own suitcase out to the car by himself, although he could not lift it. Negativism and temper tantrums also persist to a greater or lesser degree. Struggles over bowel control can sometimes suggest a need to reaffirm bodily separateness.

Parents begin to decrease slightly in importance at this time. The child can now fairly securely attend a preschool without evidence of overwhelming loss of a sense of mother or individuality. Fathers become still more important and can be seen increasingly to engage in organized play with their children.

The process of developing object constancy and individuation does not end in early life. Issues of learning who we are as separate individuals in relation to other individuals must next be negotiated in terms of the important oedipal conflict. Again in latency, adolescence, and especially when leaving home during young adulthood, these issues need to be reworked. Separation and identity concerns return for further resolution when we marry, when we have children, when our children traverse their own developmental stages, when we leave old jobs and take new ones, when we move to a different town, when our children leave us for their own careers, when we suffer illnesses, when we prepare for retirement, when we face the loss of our spouse or other loved one, and when we prepare for our own death. If we are fortunate, we spend a lifetime developing an increasingly complex and integrated sense of ourselves in relation to other people. This sense of identity becomes freer of wide swings determined by our moods or our circumstances.

In this chapter I have described how children develop an increasing sense of separateness and of individual integrity. While acknowledging the important work of others, I have focused primarily on the observations of Mahler and her colleagues as presented in _The Psychological Birth of the Human Infant_ (1975). Her work has been of central importance to virtually all American object relations theories. Kaplan's book _Oneness and Separateness_ (1978) is another account of personality development, largely inspired by Mahler's work.

Objects are irrelevant during the autistic phase (0–2 months); the child seems to remain in a psychological shell. As the child develops a budding awareness of self and object, the mother and child begin to form two poles of the dyadic unity of the symbiotic phase (2–6 months). Gradually differentiating from the mother, the baby enters the separation-individuation phase and its subphases: differentiation, practicing, and rapprochement. He becomes increasingly aware of his mother as a separate entity during the differentiation subphase (hatching) (6–10 months). Soon, increasing motor and cognitive skills seem to intoxicate the child with his own prowess, and he runs off from his mother, as if the world is all his. This subphase is called practicing (10–16 months). A growing awareness of his own separateness and helplessness ushers in the subphase of rapprochement (16–24 months). The child moves to and fro, separating and returning, demanding and yet dependent. As rapprochement resolves, the child displays an increased confidence in his mother's continued loving presence despite her occasional absences. Such an ability to retain an image of the mother as primarily gratifying but also frustrating is called emotional object constancy (24–36 months). The child develops a more stable and complex sense of individuality along with this increasingly stable sense of the object.

These observations of infantile phases and subphases are paralleled by a set of intrapsychic and interpersonal mechanisms observable as people grow and change in psychoanalysis and psychotherapy. The psychological mechanisms will be the subject of the next chapter.