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Birth to Psychic Life

Albert Ciccone and Marc Lhopital

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Birth to Psychic Life

Based on rich clinical experience and on theory from numerous psychoanalytical works, this book explores and analyzes the emergence and development of the psychic life.

Birth to Psychic Life explores the genesis of the psychic apparatus, reconstructs the development of subjectivity, with its ups and downs in babies as in all subjects, and studies the relationship between mental states at the dawn of psychic life and those characteristic of psychopathology. The book refers to Freudian, Kleinian and post-Kleinian works, proposing articulations between the different theoretical models. The referenced works' contributions to the understanding of early psychic disorders, as well as to the implications of infantile psychic suffering in adulthood, are essential. The authors identify the three psychic constellations, recognized by many, that accompany the psychic birth and suggest new more adequate names in view of current works on subjectivity: the auto-sensual position, the symbiotic position and the depressive position. Many other new and original proposals are developed by the authors.

Providing tools to think about the processes of psychic growth, this book will be of interest to all psychoanalysts and psychotherapists working with infants and interested in the impact of early psychic development throughout life.

Albert Ciccone is a psychologist, psychoanalyst and professor of psychopathology and clinical psychology at the Université Lumière-Lyon 2, France. He is also founder and president of the Association lyonnaise pour une psychanalyse à partir de la clinique de l'enfant (ALPACE).

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The New Library of Psychoanalysis was launched in 1987 in association with the Institute of Psychoanalysis, London. It took over from the International Psychoanalytical Library which published many of the early translations of the works of Freud and the writings of most of the leading British and Continental psychoanalysts.

The purpose of the New Library of Psychoanalysis is to facilitate a greater and more widespread appreciation of psychoanalysis and to provide a forum for increasing mutual understanding between psychoanalysts and those working in other disciplines such as the social sciences, medicine, philosophy, history, linguistics, literature and the arts. It aims to represent different trends both in British psychoanalysis and in psychoanalysis generally. The New Library of Psychoanalysis is well placed to make available to the English-speaking world psychoanalytic writings from other European countries and to increase the interchange of ideas between British and American psychoanalysts. Through the *Teaching Series*, the New Library of Psychoanalysis now also publishes books that provide comprehensive, yet accessible, overviews of selected subject areas aimed at those studying psychoanalysis and related fields such as the social sciences, philosophy, literature and the arts.

The Institute, together with the British Psychoanalytical Society, runs a low-fee psychoanalytic clinic, organizes lectures and scientific events concerned with psychoanalysis and publishes the *International Journal of Psychoanalysis*. It runs a training course in psychoanalysis which leads to membership of the International Psychoanalytical Association – the body which preserves internationally agreed standards of training, of professional entry, and of professional ethics and practice for psychoanalysis as initiated and developed by Sigmund Freud. Distinguished members of the Institute have included Michael Balint, Wilfred Bion, Ronald Fairbairn, Anna Freud, Ernest Jones, Melanie Klein, John Rickman and Donald Winnicott.

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Albert Ciccone and Marc Lhopital

Translated by Andrew Weller

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We would like to express our warm gratitude to Didier Anzieu, as well as Dunod Editeur, and in particular Virginie Catoni and Jean Henriot, thanks to whom this book has enjoyed, and continues to enjoy, an extraordinary adventure.

French editor's note

The first version of *Naissance de la vie psychique* (1991) received the “Prix psychologie 1992” awarded by the *Journal des psychologues*.

Presentation of the 3rd edition

The first version of *Naissance de la vie psychique* appeared in 1991. A second reorganized and enlarged edition was published in 2001. As for the second edition, we have once again opted, while fully measuring the scale of the task, for a new revised, expanded and updated edition.

A few words, to begin with, about the history of the birth of this book, whose audience and success have constantly been confirmed; a few words that are worth writing because this history is quite astonishing. This book originated as a “*maîtrise*” (master’s degree) in psychology that Marc Lhopital and I did in the context of a unique system of training in France, which still exists at the University Lumière Lyon 2, set up by Alain-Noël Henri, which allows students who have an established professional activity and experience (particularly in the field of healthcare, but also in other social practices) to train in psychology and to acquire knowledge from research work (or several renewed studies) on their practice, the issues at stake in it, and its purposes. Once the “*maîtrise*” has been validated, the students, said to be “in a professional situation”, begin the traditional course of professional training for psychologists leading to diplomas that were called DESS (*Diplômes d’état supérieurs spécialisées* ... now called “Master’s”). The research topic of this “*maîtrise*” concerned the genesis of psychic life and its early disturbances, and came to the attention of the organizers of a colloquium on the work of Didier Anzieu at Arles, in which Didier Anzieu was taking part himself, who asked us to discuss briefly a particular point of his work. With much emotion and anxiety, I made this intervention which consisted in drawing Didier Anzieu’s attention to a number of contradictions in the manner in which he related certain aspects of his theorization

of the skin-ego with the ideas of Esther Bick on the psychic skin and those of Donald Meltzer on the dimensions of psychic space.¹ With his habitual openness of mind and generosity, Didier Anzieu recognized the pertinence of these remarks, asked to read the university research study from which these questions had arisen and, to our great surprise, wrote to us a few weeks later to tell us that this work deserved to be published and that he was proposing it to the publisher Dunod for the collection “Psychismes” of which he was the founder. We were extremely moved, but also entertained great doubts because it is probably extremely rare for such a publication to precede the completion of university training. And yet this was the case for the signing of a contract for this first project. The publication came a few years later, during which time we were able to further our practical experience as psychologists, started psychoanalytic training, and benefited from the valuable support of Didier Anzieu and René Kaës. The book immediately met with success on publication and the following year obtained the “Prix Psychologie” awarded by the *Journal des psychologues*. Our psychoanalytic clinical experience, as well as our subsequent research studies contributed thereafter to its rewriting in 2001, for the second edition. And today this will be its third version.

The overall architecture of the previous text has been preserved but certain formulations have been clarified and nuanced, while models have been improved and given greater complexity. We have introduced many additions and developed new points. The references have also been expanded and updated. We have indicated where this is the case by referring to many other studies, present, recent or old, as well as to our own studies on psychic development, early psychopathology, psychic transmission and its stumbling-blocks, trauma, the effects of disability, intersubjectivity and the genesis of thought, the rhythmicity of experiences, the infantile and baby aspects of the self, parenting and the weaknesses of the parent-child relationship, internal parenting, and so on.

We have enriched the illustrations, but have retained all the previous clinical observations because they still seemed to be enlightening and capable of withstanding the examination of theoretical models.

While our discussion articulates a certain number of models that are available in the psychoanalytic conceptual domain, it also takes into account and discusses certain theories elaborated in other

or adjacent fields to psychoanalysis, such as the studies on attachment, developmental psychology and interactionist or cognitive approaches.

Finally, our discussion continues to accord a central role to the relationship with the object and to the transformation of experiences, particularly painful ones, in this relationship to the object as a condition of development. Such a position coincides with the majority of current conceptions which, in different epistemologies and fields of practice, deal with the question of the emergence and development of psychic life with reference to a model of intersubjectivity. These conceptions highlight how thinking, the sense of existence, and identity rely on conditions that have their origins in intersubjective experiences.

A final word, now, to draw attention to a point that is clarified more closely in the introduction. Interest in the baby, in the birth of subjectivity, has led many authors, in the past but also in the present, to reduce the baby's experience to the mother–baby relationship. The adjective “mothering” (rather than “maternal”) has been retained in order to consider the attention and primary care given to a baby, the primary environment that he encounters, a term which, in spite of its “gendered” aspect, refers as much to the mother as the father, and to every important person in the baby's life, every adult that gives him his/her love, that is attached to him and helps him to grow. But most of the time we use the term “parental”, and we deliberately highlight the “parental” before the “maternal” and the “paternal”. Indeed, it is first and foremost the parental that guarantees the conditions for a harmonious, creative and secure development of the baby. The parental contains the maternal and the paternal, and contains the links between each of them within each parent. Parental functions – maternal and paternal – are primarily psychic functions which characterize the internal parenting of each parent, and of each subject, in the same way as psychic bisexuality does.

Lastly, we defend the idea that experience with babies and knowledge of the baby are very useful for clinical work and for clinical practice with all patients – children, adolescents or adults. We hope that reading the following pages will play a part, for each reader, in developing his/her curiosity about the experience of babies and the conditions of the emergence of thought, and will foster his/her attention to the infantile and baby aspects of patients, irrespective

of the forms of his/her practice, because it is always these aspects that are affected most when psychic suffering is intense and cannot be contained. All psychic care consists, in large part, in hearing and containing the suffering of infantile or baby aspects, and in helping the child or baby in each patient to develop his thinking and to grow.

Albert Ciccone
December 2018

Note

- 1 This discussion can be found in the book edited by Didier Anzieu titled *L'Épiderme nomade et la peau psychique* (Anzieu et al., 1990). It is also taken up again and developed in Chapter 7 of this volume.

Preface to the 1st edition

Birth to Psychic Life rather than *Birth of Psychic Life*. Psychic life pre-exists, in effect, the newborn infant in the form of a psychical apparatus that is specific to the couple, family and group that form the background of psychic life, the matrix on which it nourishes itself and from which it will have to detach itself. It is within this common psychical apparatus that the child finds his place as a psychic being and can, if everything goes well, build his own personal psychical apparatus.

Over the last few decades, a significant body of literature has appeared on the relationship between the baby and the mothering environment, on its maturational and pathogenic effects, and on the particularities of their treatment. It had become necessary to make both an analysis and synthesis of it in order to make it as useful as possible for practitioners (psychologists, child psychiatrists, psychotherapists, psychoanalysts) and for researchers. This was this considerable task that Albert Ciccone and Marc Lhopital undertook and saw through successfully at the University of Lumière Lyon 2, and we are pleased to publish their book at Dunod. The authors have scrutinized, condensed, commented on and criticized this literature, and compared it with their clinical experience. They have chosen an original and fruitful study plan. Taking as their starting point a short article by Esther Bick on the constitution of the psychic skin in infants, during the first year of life approximately, they have identified six statements that govern successively the six postulates of their book: the introjection of an external object (the breast) ensuring the link between the parts of the self; the correlative constitution of a psychic space; the assimilation of the containing object with the skin; thanks to this psychic skin, the acquisition

of the distinction inside/outside and of the processes of splitting; in the case of failure, the continuation of pathological projective identification and consecutive confusions of identity; and the formation of a “second skin” in reaction to the real or fantasized inadequacy of the containing object.

Like any study that delineates its field and the issues at stake in it in order to better treat its object, this one puts into latency and presupposes some of the major conditions of birth to psychic life: that the human “mothering environment” is a relationship between subjects in which each one plays his role from the beginning; that this intersubjective organization only produces its effects of “birth” if, and only if, a principle of “unsticking” and linking establishes from the outset, a third element between the baby and its primary object; and finally that this environment is only a psychic environment by virtue of the speech-representations, half-said and prohibited, that are exchanged in it.

Didier Anzieu, René Kaës

INTRODUCTION

In *Une peau pour les pensées*, Didier Anzieu states that

Psychoanalysis has shown a great deal of interest in the investigation of psychic contents – fantasies, anxieties, screen memories, etc. – as the means and conditions of access to the psychic conflicts and neurotic symptoms that result from them. It did not give much consideration to the problem of the container, which was taken for granted, until it encountered cases – narcissistic personalities, borderline cases and certain psychoses – where the psychic container was so clearly damaged or deficient that the first reaction was to declare them unanalysable. How is the container constituted [...]?

(1986a, p. 75, translated for this edition)

We will attempt, if not to answer this question concerning the earliest states of psychic life, at least to identify its main terms, while emphasizing the importance of the psychic envelope and the role of the containing function of the external-internal object in the development and functioning of the psyche.

It was the encounter with the thought of Esther Bick, and particularly her considerations concerning the psychic skin (Bick, 1968, 1986),¹ which, in the day-to-day clinical experience of early psychopathology, inaugurated our project of looking, from a psychoanalytic point of view, at the conditions of the birth to psychic life. We will approach this question by studying, among other things, the relationship between the subjective states at the beginning of psychic life and the subjective states in psychopathology. We will explore how knowledge and understanding of psychopathological

states tell us about the development of psychic life and, conversely, how the understanding and representation of the first forms of psychic life equally tell us something about psychopathology.

0.1 Principal propositions concerning psychic birth

The aim of this work is to attempt a reconstruction of the genesis and early alterations of the psyche in order to account for the conditions of birth to psychic life. While our discussion is based to a large extent on the thinking of Melanie Klein and her successors, we will endeavour to highlight the interfaces and links between various models. These interfaces do not erase the differences but reveal a “common substance”. The theoretical support of certain authors will help us in this work of linking. This is the case, for instance, of the theoretical model of Piera Aulagnier which will help us to, among other things, make connections between the conceptions of Esther Bick and those of Didier Anzieu.

Melanie Klein’s thinking was an invaluable contribution extending the scope of Freud’s work, and her studies permitted considerable advances in the knowledge of mental life, in particular its primary states. Furthermore, Melanie Klein’s theses, from 1946 onwards, defending, with increasing insistence, the early existence of the ego and object-cathexes were accepted, confirmed or taken up again, as Jean-Michel Petot (1982) has pointed out, and remain very relevant today. Melanie Klein drew attention to the early relationship established between the baby and his mother, the “innate and unconscious sense” of the existence of the mother’s breast, the manifest relationship to the external world (1952ab), at a time when the studies of René Spitz (1965) and of genetic psychology, for instance, were spreading the idea that the smile is only intentional at three months, or that the baby does not recognize its mother’s face before the age of eight months, etc. Research in experimental or genetic psychology, or other lines of research, and in the domain of the skills of the newborn baby, or of the foetus,² have since confirmed the pertinence of Melanie Klein’s ideas and how they were ahead of their time.

Starting with Kleinian thought, which we will link up with other conceptualizations, we will identify the three psychic constellations, recognized by several authors, that are attendant upon this event that is psychic birth (we will see why the terms can vary and why we

are proposing certain formulations that seem to us more adequate): the *auto-sensual* or *adhesive* or *autistic position*, the *symbiotic* or *paranoid-schizoid position* and the *depressive position*. We will stress the dynamic nature of psychic organization oscillating at a very early stage from one position to the other and from a narcissistic pole to an object-related pole. The central role played by the depressive position in this dynamic will be highlighted, and especially depressive anxiety, experienced in a more or less narcissistic and catastrophic or object-related mode, depending on the degree of complexity of the psychical apparatus as well as on its level of integration which determines the nature of the experience of loss. In this connection we will propose the notion of melancholic position which, alongside the auto-sensual, symbiotic and manic positions, offers the psyche a possibility of defensive withdrawal when faced with depressive pain.³

This picture we are putting forward of the psyche oscillating between different positions, one of which is predominant at each stage of its development, will allow us to conserve the idea of primary narcissism or a first phase of auto-sensuality, as well as of normal symbiosis, even though, in the light of studies on the skills of the newborn baby, these notions could be reconsidered. We feel it is appropriate to maintain the idea of these developmental stages, but it is necessary to clarify further the picture we have of auto-sensual and symbiotic psychic states, and in particular to reconsider the notion of primary narcissism, which cannot be reduced – as it often is, based on Freud's (1914b, 1940a) remarks – to the idea of an objectless stage in which subject and object are undifferentiated. The normal auto-sensual and symbiotic phases, like autism and symbiotic psychosis, do not correspond to states of closedness. Openness to the object is obviously present in them, but the relationship to the object is of an essentially narcissistic nature. Thinking in terms of the *positions* of the psyche within each mental state or during each phase of development is more appropriate, in our view, for accounting for these psychic movements, these oscillations between cathexis and decathexis, openness and closedness, as evidenced in the newborn infant and the autistic child or psychotic child – and as evidenced in every subject in his development as well as every subject presenting a psychopathology.

The term position was introduced by Melanie Klein⁴ to denote a psychic constellation regrouping particular anxieties, their related mechanisms of defence, and a way of relating to the world generated

by these anxieties and by the manner of protecting oneself against them. These constellations, these psychic positions, appear from the beginning of psychic development and are reactualized throughout life, as Melanie Klein (1948b, 1952a) said – and that is why she uses the term position rather than that of stage or phase of development –, in connection with situations particularly linked to the uncertainties of psychic development or to disturbing or traumatic contexts. And the psyche oscillates between different positions, both in the course of its development and in more or less fixed psychopathological states. Within this oscillation, one position dominates, thereby determining the singularity of a mental state or phase of development and making it possible to denote this or that stage or this or that psychopathology. But the psyche is never immobilized in a constant state, in one exclusive position, in an immutable mode of functioning. It always oscillates between more or less important states of closedness and more or less pronounced states of openness. Such a model can be applied just as much to psychic development as to psychopathology. And this model converges with the conceptions of many authors to whom we will be referring in this book, who consider that in every personality “normal” and “pathological” aspects, “neurotic” and “psychotic” or “autistic”⁵ parts, zones that are open to the world and development, and zones that are closed and resistant to any growth, coexist.⁶

We fully adhere, and our clinical experience constantly supports this adhesion, to this idea of a possible coexistence within the personality of non-psychotic parts, which are concerned about their development and respectful of their dependent relations, and psychotic parts, or autistic enclaves, which are saturated with omnipotence and maintain the illusion of independence. We will present the psychotic and autistic processes that can be deployed even in non-psychotic personalities, and will indicate, among other things, how thought can be prey to autistic manoeuvres.

We will describe how the construction of subjectivity and the sense of identity are based on normal processes of identification and mechanisms of defence, but whose persistence and, above all, distortion, under the effect of forces inherent to the baby himself and/or pressures stemming from the environment, determine the psychopathological evolution. The modalities of identification at the basis of subjectivity and the sense of identity are represented by *identification through adhesivity* in the bidimensional auto-sensual space,

identification through projection in the tridimensional symbiotic space, and *identification through introjection* in the quadridimensional individual space. The defensive modalities, apart from these identificatory processes which can also have defensive functions, essentially concern *dismantling* in the auto-sensual position, *splitting* and *idealization* in the symbiotic position, and *repression* in the depressive position.

These identificatory and defensive processes may be in the service of development, but also of resistance to growth. We will develop, for instance, the idea of projective identification with internal objects to account for incorporation fantasies that are necessary for introjective identification, or to account for disturbances of the sense of identity, dissociation or depersonalization. We will look at the process of transition from one modality of identification to another, and will put forward the idea that each modality of identification contains qualities related to states or processes that are anterior to it ontogenetically: “projectivity” contains “adhesivity” and “introjectivity” contains “projectivity”. We will further suggest that the relation of proportionality between these different qualities determines the success of the identificatory movement and the authenticity of the sense of identity.

Concerning the modalities of identification, we will distinguish and denote by different terms the psychic process and the state of mind to which its utilization leads. The term “identification” will denote the process, and the term “identity” (adhesive, projective or introjective) will denote the state of mind.

We will place emphasis on the function of the containing object and on the introjection of the containing function in the construction of subjectivity and the sense of identity. We will thus examine psychic development in its relation to the development of the *psychic envelope*. The containing object – “momentary or optimal” – as we will define it, is a container not in the sense of a recipient but of an “attractor” (Houzel, 1985b, 1987) which attracts the instinctual and emotional life of the baby. The optimal container gathers up the scattered sensuality and creates the conditions for maintaining “consensuality” (Meltzer et al., 1982). Moreover, it is a transformer of raw experiences that cannot acquire psychic status. (René Kaës speaks of a “*conteneur*” – Kaës, 1976a, 1979.)

We will often have recourse to the description of phenomenological observations as we wish to maintain close links between the conceptual approach and the reality of daily clinical practice.

Just like José Bleger (1971), we consider phenomenological observation as “that which is realized from within phenomena, as they are perceived, experienced and lived or organized by those who are an integral part of the phenomenon” (p. 50, translated from the French). Bleger distinguishes between the phenomenological and the naturalist point of view and gives the following example to explain this distinction: a mother and her child are in a room; the mother is going about her activities and the child is isolated in his game, each of them acting independently without speaking to each other or looking at each other. At a certain moment the mother leaves the room, and the child stops playing immediately to go out with her. Bleger points out that, from the naturalist point of view, and if we only consider the level of interaction, we can say that in the first sequence of this observed situation, there is no interaction or communication, and we may be led to suppose that each partner – the mother and the child – is an isolated and individual person. On the other hand, from the phenomenological point of view we can say that the mother and the child, albeit apparently isolated, are in fact in a state of shared symbiosis.⁷

The representation and comprehension of intra- and intersychic processes draw widely on spatial metaphors, which is helpful for representation but can also create misunderstandings. We will have to try in particular, on several occasions, to elucidate in the object-relationship what concerns the relationship to the internal object and the external object respectively. Phenomenology seeks to account for the link between intrapsychic processes, such as identificatory processes (adhesive, projective, introjective), and their behavioural correlates, their equivalents in the subject’s relationship to external objects. Just as the internal world is built through the internalization of experiences and of relations to external objects, the external world presents itself as a stage for the dramatization of the internal theatre. The object is thus often both outside and inside (which is reflected by the expression “external-internal” or “internal-external”, sometimes used in the following lines).

We will emphasize on several occasions the two conditions underlying the alteration of psychic development. The alterations of psychic development, the “accidents” of birth to psychic life, result from the encounter between a mothering environment at pains to fulfil its function of having to psychically contain and nourish the newborn baby, and a newborn baby whose capacity to benefit from

the psychic qualities of its mothering environment or of stimulating them is in abeyance. This constitutional “handicap” (heightened sensitivity, major intolerance for frustration, excessive destructivity, etc.) is partly dependent on proto-emotional experience *in utero*. The relationship to the object has a central role in the development of personality which consists in introjecting emotional experiences in the relationship to the object, in intersubjectivity. More than the object, it is the relationship to the object that is introjected.

Concerning the nouns that denote this first, primary object that the baby cathects, as for the primary environment that he encounters, we attach to them the adjective “mothering”. This qualifier reflects the primary care from which the baby who has just been separated from his mother’s body, from the maternal uterine matrix, benefits, in order to be born into the world. Although this term is “gendered”, we are using it first and foremost because it is not so easy to ditch social representations of parenting, and further because the primary care in question reconstructs a postnatal “symbiotic” matrix, extending the intrauterine matrix universe, a psychic matrix from which the baby and the parents separate, the baby developing his subjectivity and the parents their parenting. The feeding situation of the baby at the breast (or at the bottle) represents, as we shall see, a prototypical situation of this “containing” parental function assured by the object or mothering environment. “Mothering” and not “maternal”, for this environment which protects the baby, dispenses this primary care and permits psychic birth and growth, concerns both the mother and the father and every important person in the baby’s life, every person who gives their attention, their love, every person who raises the baby and to whom the baby is attached. The authors to whom we refer, whose contributions we take up or extend, are very often (too often) focused, sometimes exclusively even, on the mother and the mother–baby relationship. Our concern will always be to extend their considerations to parenting and always to place the “parental” function before the “maternal” function; for the light they throw on the mother–baby relationship, on maternal qualities, on the mother’s state of mind and on possible maternal insufficiencies or psychopathologies, etc., applies in the large majority of cases to the father and mother alike, and so we will transpose their reflections to the parental function and to the parent–baby relationship. We will also see how the “containing” function allies and articulates maternal and paternal qualities, psychic qualities that

belong to each subject, characterizing the internal parental objects and constituting the “psychic biparenting”⁸ of each of them.

We will mention the place of the family history, the place of the internal objects of each parent in the identificatory destiny of the child. Further, we will evoke the processes of psychic transmission, the parental projections that the baby inherits and that have an impact on early subjective experiences, determining in part the movement of subjectivation. In this way, we will throw light on certain psychopathological manifestations or symptomatological constructions from a transgenerational viewpoint.

Let us now present Esther Bick, before focusing on her theses concerning the notion of “psychic skin”, theses that will constitute an internal framework for our model.

0.2 Presentation of Esther Bick

0.2.1 Infant observation

Esther Bick belonged to the second generation of members of the Kleinian movement, including analysts such as Hanna Segal, Wilfred Bion and Herbert Rosenfeld. As a psychoanalyst, a pupil and then a close friend of Melanie Klein, she introduced, in 1948, “infant observation”⁹ into the core of child psychotherapy and psychoanalytic training at the Tavistock Clinic in London. In 1960, Martha Harris, who succeeded Esther Bick, developed and democratized this set-up by making it available to a large range of child practitioners. In the same year, Esther Bick’s infant observation was also made part of the Institute of Psychoanalysis training course in London. This observation involves observing an infant and his family once a week in the home setting over a two-year period following the infant’s birth. Esther Bick, and then others, supervised the work of students in weekly seminars. She ran such seminars until the end of her life. Thus, over a period of 30 years she studied a dense body of clinical material and developed a very rich understanding of the infant’s psychic life.

Surprisingly enough, the relations between psychoanalysis and direct observation (of the infant) have been ambiguous, with psychoanalysis often preferring the reconstruction of a mythical child on the basis of adult analysis, leaving a prominent role to speculative imagination. However, psychoanalysts have always carried out direct observations. Freud (1914a, 1916–1917, 1920) himself emphasized

on several occasions the interest of observing children directly or of analyzing a neurosis dating back to early infancy. He himself conducted direct observations: apart from the observations of auto-erotic behaviour characteristic of infantile sexuality (Freud, 1905) and the analysis by proxy of Little Hans (Freud, 1909) – which may be considered as the equivalent of a direct observation –, we can also mention the famous observation of the “wooden reel game” with his 18-month-old grandson (Freud, 1920). Melanie Klein (1952ab) observed infants and commented on infant observations.¹⁰ Anna Freud (1965) also recommended the direct observation of children. Susan Isaacs (1952) clarified the methodological principles of observation and emphasized the close and intimate links between observation and psychoanalysis. Bion (1967a, 1970, 1974–1977) played a role in enlarging the metapsychology of psychoanalytic observation. Other psychoanalysts practised infant observations: we may cite Donald Winnicott (1941, 1957) and Margaret Mahler (1968), among many others.¹¹

But it was Esther Bick who systematized infant observation and gave it its framework and impetus as an experience in psychoanalytic training. In 1964, she published an article called “Notes on infant observation in psycho-analytic training” (Bick, 1964) in which she explains the importance that she ascribes to this experience of infant observation in the training of psychoanalysts. She points out in this article how difficult it is to observe, that is, to “collect facts free from interpretation” (p. 254). Observation teaches caution and reliance on consecutive observations for confirmation of the meaning of the facts. The observer learns to “watch and feel without jumping in with theories” (*ibid.*). He also learns to discard fixed notions about how to handle a baby and discovers the unique character of each mother–baby or parent–baby couple. He learns to appreciate how a parent takes care of her baby and finds her own solutions. He learns to find the right distance that allows him to be sufficiently in contact with the situation and not to introduce distortion. This implies a capacity to discern the transference and countertransference movements, the projections of the parties involved – the family members and the observer himself – which nourish and intensify the internal conflicts of each of them. The observation of a baby in his family is an experience whose emotional impact is intense and requires a great deal of working through, which is part of training in the psychoanalytic method. The observer learns, moreover, how

the detailed observation of signs, of a subject's overall behaviour, is an important part of psychoanalytic work. This experience will also help him to understand the (current) infantile feelings of patients, to see the baby or the child that a patient was, and it will confirm the relevance of analytic reconstructions, particularly of his early development.¹²

Esther Bick wrote very little herself. The transmission of her teaching was essentially oral. Since 1988, the French translation of the *Collected Papers of Martha Harris and Esther Bick* (1987) has been available under the title *Les Écrits de Martha Harris et d'Esther Bick*. But infant observation according to Esther Bick's method has been constantly evolving in France, Europe and beyond, and many texts give an account of this method as well as its applications¹³ (in the treatment or prevention of psychopathologies or risk situations).

The method features three stages:

- the first is observing. The observer receives the emotional impact of the observed situation. He lets himself be impregnated by the situation, while trying not to interfere in the spontaneous unfolding of the parent/baby relationship;
- the second is note-taking. This involves a work of reconstruction. The observer, alone, gives shape to the traces left by the impact of the situation. He is invited to note all the details he can remember in simple language and without theoretical or interpretative codification;
- the third is the seminar. This is a period of group elaboration. The group (observers and psychoanalyst) put themselves in the service of the observation and the observer in order to develop an understanding of the observed situation, and of the impact of the situation on the observer.

In the following stage, the observer, transformed by all the previous work, returns to the family, and these stages are repeated rhythmically. The observer's psychic capacities to receive and contain the situation, his or her capacities to understand will be developed and thereby offer valuable support to the parent–baby relationship.

The first essential rule recommended by Esther Bick is, as Michel Haag (1984) relates, the “*tabula rasa*”, the “I don't know” attitude. Michel Haag reports these remarks by Esther Bick:

The fundamental thing is to really learn to observe, not to jump to conclusions or to use “clichés”, and to learn to see completely different things because one child is never the same as another [...]. Without the attitude: “I don’t know, I will see in the light of the facts”, no work with anyone, whatever his capacities, is really fruitful.

(Bick, cited by Haag, 1984, p. 25,
translated from the French)

The second essential rule taught by Esther Bick concerns the fundamental requirement that the observer only be a receiver and never initiate a change of any kind; he must not interfere in the observed situation, must respect the parent–child relationship, and must not impinge intrusively on a sensitive and vulnerable relationship.

The practice by the observer of these two major precepts has a beneficial influence for parents and baby alike. Manuel Perez-Sanchez (1981), among others, notes the degree to which the observer has a containing function for the parent–baby relationship. The observer who is able to receive the complaints and comments of the mother or father, without giving advice, is felt to be a support. Indeed, advice given with the aim of helping is usually experienced as a criticism by the parent concerning his or her parental capacities, as one more demand. That is why the observer who does not intervene, who does not interfere, who shows by the quality of his presence that he is psychically available to receive projections, worries and emotional turbulence, can serve as a support for the sometimes disconcerting experience of being a mother or father. The profound respect of the relationship between the parents and their baby underlying the practice of infant observation is clearly reflected in the texts that describe this practice.

This position advocated by Esther Bick seems to us to be a good model for what must be the clinical position of every psychotherapist, of every psychoanalyst. Being able to listen to the other person, being in contact with the internal world, without immediately clinging defensively to some pre-established perspective, to a pre-existing theorization, is the state of mind that the psychoanalyst must constantly strive for. Bion always insisted on the need for the analyst to discard theoretical constructions to be able to listen to – and think about – what the analysand is saying (see Bion, 1974–1977). He emphasized the need for the analyst to be “without memory and

desire”, explaining how desires, memories and the attempt at immediate understanding destroy the analytic state of mind (Bion, 1967ab, 1970, 1974–1977, 1997¹⁴). Furthermore, Bion (1967a) considered that analysis is based on “doubt”, and that it is essential to preserve this attitude of “philosophical doubt” to permit the continuation of the analysis. Likewise, according to Bion (1974–1977), mental growth occurs at the price of a state of continual psychic breakdown: each time something new is perceived, everything that has already been seen deserves to be reconsidered; living in this perpetual state of crisis is a condition for mental development. That is why we share the idea that true clinical listening occurs at the price of discarding any pre-established perspective, at the price of a requirement akin to what Esther Bick calls the “*tabula rasa*”. However, this experience still has to be tolerated. It involves accepting an extremely difficult and painful discipline, for it requires one to continually endanger internal relations that have been woven and which sustain knowledge and certainties. It requires a capacity to tolerate catastrophic anxiety (in the sense Bion (1965, 1966) gives to this term).

Let it be added that the observation of infants and parenting, in this state of mind, teaches one to be sensitive to the essential aspects of a caregiving relationship, in the sense of “taking care”, of being attentive to the foundations of a “caregiving position” and of “caregiving concern” (Ciccone, 2012c, 2014), and thus to building models of psychic care. Observing how a parent encounters a baby (and how the baby is sustained in such a movement of openness) or how a parent helps a baby give up a violent or aggressive impulse, or how a parent psychically “reanimates” a baby who is withdrawn, cut off from the world, or alternatively how a parent goes about consoling a baby in distress, is an invaluable source of information regarding the question of what is really healing in caregiving, and regarding training for every practitioner of psychic care, for every psychoanalyst. Such an experience helps to understand and to feel what is essential in the work of psychic care, and to build models for thinking about psychoanalytic care.¹⁵

0.2.2 The article of 1968 on psychic skin

After Melanie Klein’s description of the primary splitting and idealization of self and object, Esther Bick’s description of the psychic function of the skin constitutes, as Donald Meltzer points out

(Meltzer et al., 1975), the second convincing addition to Freud's conception concerning the beginning of mental life, that is to say the idea of "primary narcissism".

Freud (1905) had initially described the evolution of the libido from autoerotism – the sexual impulse separates itself from the functions of self-preservation, and therefore from the external object, and derives satisfaction from the subject's own body – to object-love. In the context of his investigations into psychotic states (Freud, 1911b), describes a stage between the phase of autoerotism and that object-choice, namely, the stage of narcissism. If, during the auto-erotic phase, the independent sexual impulses derive satisfaction from the body, each for its own needs, during the narcissistic phase they reunite and turn towards the ego, which is already constituted at this period (Freud, 1912–1913). Narcissism thus sees the ego take itself as its own love-object, before choosing external objects. In 1914, in his article "On narcissism: an introduction" (Freud, 1914b), Freud discusses the notions of ego-libido – sexual energy taking the ego as its object – and distinguishes primary narcissism from secondary narcissism. There exists an original libidinal cathexis of the ego, which corresponds to primary narcissism, while secondary narcissism represents the withdrawal of the libido from people and things in the external world and its recathexis in the ego, as evidenced in schizophrenia – or paraphrenia, to use Freud's term.

Autoerotism, which corresponds to the initial state of the libido, is thus distinguished from narcissism, the state that follows it. From this point of view, narcissism coincides with and represents the constitution of the early ego. Freud makes the following remark, which was to nourish many subsequent contributions, in particular those of Klein and her collaborators (Klein et al., 1952):

We are bound to suppose that a unity comparable to the ego cannot exist in the individual from the start; the ego has to be developed. The auto-erotic instincts, however, are there from the very first; so there must be something added to autoerotism – a new psychical action – in order to bring about narcissism.
(Freud, 1914b, p. 76–77)

Later, Freud (1915a, 1916–1917) erased the distinction between autoerotism and narcissism, describing as narcissistic the early original psychic state from which object-love only emerges later on, the

prototype of which is the intra-uterine state. Autoerotism is therefore envisaged as the sexual activity of the narcissistic phase of fixation of the libido. The descriptions that Freud gives of absolute narcissism, or of absolute primary narcissism (1940b [1938]), may lead one to suppose that this state is objectless, which apparently does not correspond to the idea that Freud had previously given of autoerotism, namely, that it is based on self-preservation and constituted by the effacement of the object when faced with the organ.

Melanie Klein's addition follows the presentation of the case of Schreber (1911b) in which Freud speaks of "abnormal alterations of the ego" inducing distinctive disorders of psychosis. Melanie Klein (1946) is led to put forward the notion of splitting in the early ego and of primary idealization of self and object. The operation of splitting, aimed at managing the anxiety resulting from the action of the death drive, reveals the qualities of good and bad object and inaugurates the beginning of object-relations. These emerge from the beginning of postnatal life when the "early ego" already has a few basic elements of cohesion and integration.

Esher Bick's contribution lies in her description of the *psychic function of the skin* in the development of subjectivity. She shows that the baby needs to have the experience of a containing object with whom he can identify in order to feel sufficiently contained within his own skin. This will allow him to tolerate physical separation and to protect the self from the disintegrating effect that it could have. Esher Bick describes the consequences of a disturbance of this experience in establishing a "second skin" function. She defines this *identification with a containing object* as a prerequisite for the process of splitting and idealization of the self and object.

Here is the essence of Esther Bick's (1968) text titled "The experience of the skin in early object-relations":¹⁶

The thesis is that in its most primitive form the parts of the personality are felt to have no binding force amongst themselves and must therefore be held together in a way that is experienced by them passively, by the skin functioning as a boundary. But this internal function of containing the parts of the self is dependent initially on the introjection of an external object, experienced as capable of fulfilling this function. Later, identification with this function of the object supersedes the unintegrated state and gives rise to the fantasy of

internal and external spaces. Only then the stage is set for the operation of primal splitting and idealization of self and object as described by Melanie Klein. Until the containing functions have been introjected, the concept of a space within the self cannot arise. Introjection, i.e. construction of an object in an internal space is therefore impaired. In its absence, the function of projective identification will necessarily continue unabated and all the confusions of identity attending it will be manifest.

The stage of primal splitting and idealization of self and object can now be seen to rest on this earlier process of containment of self and object by their respective “skins”.

The fluctuations of this primal state will be illustrated in case material, from infant observation, in order to show the difference between unintegration as a passive experience of total helplessness, and disintegration through splitting processes as an active defensive operation in the service of development. We are, therefore, from the economic point of view, dealing with situations conducive to catastrophic anxieties in the unintegrated state as compared with the more limited and specific persecutory and depressive ones.

The need for a containing object would seem, in the infantile unintegrated state, to produce a frantic search for an object – a light, a voice, a smell or other sensual object – which can hold the attention and thereby be experienced, momentarily at least, as holding the parts of the personality together. The optimal object is the nipple in the mouth, together with the holding and talking and familiar smelling mother.

Material will show how this containing object is experienced concretely as a skin. Faulty development of this primal skin function can be seen to result either from defects in the adequacy of the actual object or from fantasy attacks on it, which impair introjection. Disturbance in the primal skin function can lead to a development of a “second skin” formation through which dependence on the object is replaced by pseudo-independence, by the inappropriate use of certain mental functions, or perhaps innate talents, for the purpose of creating a substitute for this skin container function.

(Bick, 1968, p. 114–115)

In this fundamental text of Esher Bick we will identify six postulates that will represent six basic statements or six axes – the most essential ones concerning the subject we are concerned with – on the basis of which, or around which, we will develop our reflection:

- first postulate:
In their most primitive form, the parts of the personality felt to have no binding force amongst themselves are held together thanks to the introjection of an external object experienced as capable of fulfilling this function;
- second postulate:
The introjection of the optimal object, the mothering object (the “breast”), identified with this function of a containing object, gives rise to the fantasy of internal and external spaces;
- third postulate:
The introjected containing object is experienced as a skin. It has a function of “psychic skin”;
- fourth postulate:
The introjection of an external containing object, giving the skin its frontier function, is a prerequisite for the operation of processes of splitting and idealization of self and object;
- fifth postulate:
In the absence of the introjection of containing functions, projective identification continues unabated, with all the consequent confusions of identity;
- sixth postulate:
Disturbances of introjection, resulting either from the inadequacy of the actual object or from fantasized attacks on it, can lead to the development of a “second skin” formation.

Notes

- 1 The article of reference is that of 1968, “The experience of the skin in early object-relations”; the text of 1986, “Further considerations on the function of the skin in early object-relations”, a posthumous publication of a paper presented at the pre-congress of 1975 of the British psychoanalytic Society, develops earlier discoveries.
- 2 See, for example, Vurpillot, 1972; Brazelton, 1973, 1979, 1982; Bower, 1977; Mehler et al., 1978, 1988; Trevarthen, 1980, 1989b; Trevarthen and Aitken, 1996; De Casper and Fifer 1980, De Casper and Spence,

- 1986; De Casper and Granier-Deferre, 1994; Herbinet and Busnel, 1981; Pinol-Douriez, 1984; Field and Fox, 1985; Lecanuet et al., 1989, 1995; Nadel and Camaioni, 1993; Busnel, 1997; and many others.
- 3 Kleinian and post-Kleinian authors attribute a primordial role, in the development of the human being, to depressive pain and psychic suffering. Donald Meltzer (1978) drew attention to the difficulties Freud had in taking psychic suffering into account as such, and not simply as the equivalent of an absence of pleasure.
- 4 The term appeared in 1928, in “Early stages of the Oedipus conflict”, but it was above all used from 1935 onwards, when Melanie Klein described the depressive position (in “A Contribution to the study of the psychogenesis of manic-depressive states”). Nevertheless, it was only later, after having fully conceptualized the other central position, the paranoid-schizoid position (Klein, 1946), that she was to explain the choice of this term (Klein, 1948b, 1952a).
- 5 Such as Wilfred Bion (1957), Frances Tustin (1972, 1981b, 1985c, 1990), Salomon Resnik (1986a), David Rosenfeld (1997).
- 6 See also Ciccone, 2018.
- 7 On the conditions and modalities of clinical observation, see Ciccone, 1998c.
- 8 See Ciccone 2011, 2012bc, 2014, 2016a.
- 9 Infant observation: infant includes both the newborn baby and the very young child.
- 10 Concerning infant observations carried out by Melanie Klein, it is worth noting an unpublished manuscript, “Notes on baby”, presented and commented on by Joseph Aguayo (2002), in which Melanie Klein recorded periodic observations of her grandson, following his birth in 1937 and during his early childhood. It is one of the first detailed and long-term infant observations carried out by a psychoanalyst (an observation that could not be published for obvious reasons, though some extracts were used in her 1952 article, “On observing the behaviour of young infants”). We can see Melanie Klein’s capacity to observe shrewdly what was unfolding before her eyes, her sensitivity to the feelings of the baby, and her touching manner of helping him to overcome his states of distress. These notes show how much attention she paid to the impact of the environment on the baby, to the resonances between the emotional experiences of the baby and those of the parents. We mentioned earlier to how Melanie Klein was ahead of her time: as Aguayo shows, some of her observations in this document anticipate theorizations that others made later, for instance,

- those of Winnicott on the “spatula game” (Winnicott, 1941) and on the “transitional object” (Winnicott, 1953), or those of Bowlby on “instinctive behaviours” and the “fear of the stranger” in his attachment theory (Bowlby, 1969). Remember that Winnicott and Bowlby were both in supervision with Melanie Klein at the moment when she was doing these observations (see, Grosskurth, 1986).
- 11 Margaret Mahler signalled the importance of her own studies on normal children and their mother, which enriched her analytic work with neurotic adults and children, and above all confirmed her hypotheses in the domain of infantile psychoses. She drew on the remarks of Edward Glover (1956) to the effect that analysts are able to make direct observations of infantile behaviour and, within the limits of their prejudices, to draw conclusions from them about primary mental processes. It is worth recalling that in the 1960s, in France, Myriam David and Geneviève Appell (1966), in association with John Bowlby, observed mother–infant relations, within a more ethological perspective, but using a methodology that was sometimes very similar to that of Esther Bick.
 - 12 On this theme of the interest of infant observation in psychoanalytic training, see the later article by Martha Harris (1976). For further development and illustrations concerning the interest of such an experience for training and psychoanalytic practice, see Ciccone et al., 2012; Ciccone, 2014.
 - 13 Perez-Sanchez, 1981, 1987; Haag, 1984, 2002; Miller et al., 1989; Sandri et al., 1994; Lacroix, Monmayrant et al., 1995; Ciccone et al., 1998; Delion et al., 2004, 2008; etc. See also, concerning the observation of young children, of 2 years of age or more, as it is also practised in the Tavistock Clinic training, and its applications, Adamo and Rustin, 2014.
 - 14 *Taming Wild Thoughts* (1997) is a posthumous book edited by Francesca Bion, which includes the paper “The grid”, written in 1963, and the transcriptions of two recordings of Bion dating from 1977.
 - 15 Based on the observation of babies and the work of parenting, one of us has thus proposed different models of psychoanalytic psychic care: the model of the “encounter”, the model of “drive integration”, the model of “psychic reanimation” and the model of “consolation” (Ciccone, 1998a, 2012c, 2014).
 - 16 A large part of this text can also be found in *Explorations in Autism* (Meltzer et al., 1975) of which Michel Haag (1984) has provided a complete French translation.

PART I

FIRST POSTULATE

In their most primitive form, the parts of the personality felt to have no binding force amongst themselves are held together thanks to the introjection of an external object experienced as capable of fulfilling this function.

This statement will lead us first of all to define introjection and to consider the relations between this process and the construction of the psychical apparatus.

Then we will turn our attention to the nature and qualities of the first external objects providing this containing function. We will therefore make a long detour in order to study autistic manoeuvres. We will then discuss primitive anxieties and psychic elements in their earliest form.



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INTROJECTION AND ITS RELATIONS TO THE CONSTRUCTION OF THE PSYCHICAL APPARATUS¹

The concept of introjection is fundamental for the help that it provides in representing the very construction of the psychical apparatus, and then its functioning. Introjection works in association with projection and, indeed, the process of introjection/projection may be considered as a genuine form of “psychic respiration” (Guignard, 1985).

We will first try to circumscribe this concept of introjection, before going on to use a phenomenological approach to elucidate it. We will then seek to explain an essential distinction differentiating introjection from incorporation. This distinction, which will reappear in different forms throughout this book, is essential for appreciating the functioning of psychic life, and thus of mental health.

1.1 Conceptual approach

The term introjection was introduced in 1909 by Ferenczi in symmetry with that of projection. Projection characterizes the expulsion by the paranoiac of his ego of impulses that have become unpleasant. Introjection is defined by the fact that the neurotic seeks to take into his ego as much of the external world as possible. This “inclusion” within the ego of the objects of the external world results from the extension to the external world of interest that is autoerotic in origin. This conception led Ferenczi to consider all object-love as an extension of the ego or an introjection:

In principle, man can only love himself; if he loves an object, he takes it into his ego.

(Ferenczi, 1912, p. 317)

Freud takes up this notion of introjection, introduced by Ferenczi, in “Instincts and their vicissitudes” (1915a). He describes the relations between projection and introjection which are involved in the differentiation of subject/object and ego/external world. The subject strives to introject what is good, which he takes into the ego, and projects what is bad, which he equates with the external world. This idea is stated once again in “Negation”, where Freud (1925) emphasizes the connection between introjection and the experience of oral incorporation (he had already described the connection between incorporation and identification in 1915 in an addition to the *Three Essays on the Theory of Sexuality* (1905), in “Mourning and melancholia” (1917) and in *Group Psychology and the Analysis of the Ego* (1921)).

Freud draws attention to introjection in the analysis of melancholia in 1917. Introjection corresponds to the withdrawal into the ego of the libido linked to a love-object as a result of an actual slight or disappointment. This libido withdrawn into the ego serves to establish an identification of the ego with the abandoned object. “Thus the shadow of the object [falls] upon the ego”, as Freud says (1917, p. 249).

Narcissistic identification with the object makes it possible to avoid abandoning the loved person, in spite of the conflict between the “critical activity of the ego” and the “ego altered by identification”. Freud takes up this process again in *Group Psychology and the Analysis of the Ego* (1921). In *The Ego and the Id*, Freud (1923) wonders whether introjection is not a precondition for giving up the object, thereby rendering the loss more tolerable. It would seem, then, that the introjection he described in melancholia, with its attendant pathological conflict, coloured by hate and sadism, between the ego-ideal and the ego identified with the object through introjection, in fact reflects a failure of introjection.² I will come back to this point further on.

In order to form a picture of the process of introjection it is necessary to draw on bodily, sensory or biological metaphors. In her text “Certain functions of introjection and projection in early infancy” (1952a), Paula Heimann takes up the comparison made by Freud on several occasions between the mind and the cellular organism (see Freud, 1920, 1921, 1923). The life of the cell, like that of the body, is maintained by virtue of two fundamental mechanisms: the

incorporation of extraneous but useful matter, and the expulsion of matter that is specific to the organism, but harmful. The mind obeys the same rule and its development is subject to the two essential processes of introjection and projection, which no longer concern the interior of the body, but psychic interiority.

Piera Aulagnier (1975), in her own way, describes the fundamental importance of the processes of introjection and projection in the construction of the psyche, and their connection with sensory mechanisms. In the model she proposes, the activity of the “originary”, that is to say emerging psychic activity, is based on the sensory model which is characterized by a continuous oscillation between “taking-into-self” and “rejecting-outside-self”. Piera Aulagnier extrapolates this double mechanism to all the sensory systems whose function entails the “taking-into-self” of information, a source of excitation and of pleasure, and the attempt to “reject-outside-one-self” that same information when it is a source of unpleasure. In psychoanalytic terms, “taking-into-self” and “rejecting-outside-self” may be translated by the *cathexis* and *decathexis* of that of which we are informed, and of the object of excitation, the source of this information. We can say that, following an experience of meeting and forming a link with an external object, introjection consists in establishing this object within the mind. More than the object, it is the *link with the object* that is introjected. It is the assimilation of the “experience of togetherness”, as Martha Harris (1977, p. 270) puts it, that makes it possible to face up to the rupture due to absence.

Furthermore, the internalization of objects through the process of introjection has identificatory effects. We can therefore speak of *introjective identification* to describe the experience of the ego that takes possession of objects through identification. Not only does the ego take possession of objects but it develops itself, deploys itself and grows through introjection. Introjection thus plays a role in constituting the ego.

These comments will gradually become clearer in the course of the book. Let us now try to describe from a phenomenological point of view this process involved in the concept of identification.

1.2 Phenomenological approach

Introjection consists, then, for the ego, in setting up the object within itself. This process has the consequence of abandoning the

object in the concrete world, and introjection can occur when the situation of object-loss arises: the abandoned, absent object is set up within the ego; it is introjected. Likewise, the infant can abandon the external object, the external source of gratification, if he has established a gratifying internal object. Thus, for example, the baby who sucks his thumb “remembers” his past pleasures in suckling at the breast and feels in actual contact with the desired breast.

Infant observation according to Esther Bick’s method can provide material that helps us to study and understand the conditions in which introjection seems to occur: it sometimes even makes it possible to observe the moment when processes of introjection come into operation. Martha Harris gives an example of this through sequences of an infant observation.

Between the age of 3 and 5 weeks, this baby had to suffer the fact that his mother momentarily had less milk. Following this period, he seemed to want to be nourished permanently and when he was not at the breast, he often placed his curled tongue between his lips, thereby filling his mouth. Around the age of 4 months, he seemed to experience terrible distress at the end of each feed, and was visibly frightened that the breast might be withdrawn from him. At this period, he liked to taste solid food and having put food in his mouth by himself, he would push it to the back of his mouth with his thumbs, sucking them greedily while looking incredibly depressed. Sometimes, after these sequences, he seemed to enter into contact with something and would talk to himself in a dialogue that had the intonation of his mother speaking to him and of himself responding; this cheered him up.

Martha Harris suggests that when the intense thumb-sucking, which occurred when the infant was still being nourished, gave way to the little inner conversation,

he had, as it were, abandoned his attempt to insist on having a false object, a thumb-nipple that would have belonged to him and could have nourished him each time he so wanted, and that instead of this false object he turned towards an internal remembering and had a dialogue with the internalized mother. It was apparently at this point that he had introjected

an experience with the mother, whom he had allowed to have a separate existence in the external world, but with whom he was able to speak in his internal world.

(Meltzer and Harris, 1980, p. 362,
translated from the French)

I (A.C.) have observed in an infant aged two and a half months a sequence that seems to reveal the beginning of a process of identification.

During a family reunion, the infant was sitting on her grandfather's knees and was having an intense conversation with him in a game from which they were both deriving great pleasure. The grandfather was holding in each of his hands one of the baby's hands and he brought his face close to the infant's face while caressing his own cheeks with the baby's hands. This contact between faces was accompanied by joyful vocalizations on the grandfather's part. Then the two faces moved apart and the baby was giggling with joy while gazing intensely at the happy expression on her grandfather's face. The game, in which these two phases alternated, continued for several minutes and the infant and her grandfather continued to derive evident pleasure from it. After this intimate and intense exchange, an uncle took the baby and put her on his knees with her back against his front in such a way that the baby could see all the members of the family involved in a lively discussion in which the grandfather was now taking part. At this point the baby was babbling intensely, laughing, and seemed caught up in an inner dialogue in which one could recognize intonations expressed by the grandfather's voice during their exchange. During this "self-dialogue" in which the baby seemed, in a sort of hallucination, to be reliving the earlier exchange with the grandfather, she accompanied her vocalizations with uncoordinated movements of her arms and hands in an attempt to bring them together.

Through these attempts at establishing links, the baby is staging the internalization of the privileged relationship that she has just woven with this object of the mothering environment in the form of the grandfather. She is trying to "psychicize" this experience. In his

quasi-hallucinatory play, she is dialoguing with that which is in the process of becoming an internal object.

It should be noted, moreover, that each time the grandfather speaks, taking part in the lively family discussion, the baby stops her play instantaneously, stops moving and is extremely attentive to her grandfather's voice, but without looking at him. She only resumes her activity again when he stops talking. It seems that, in the course of the process of introjecting the external object or experience, the baby is engaging in a sort of verification or comparison between the actual object and the future internal object, a sort of adjustment of this object that is in the process of becoming an internal object.

Manuel Perez-Sanchez (1981) describes the signs of protest of a one-month-old baby that he was observing as a movement of projection. The baby would kick with its feet and press its face against the breast when it could not find the nipple that it was searching for or when it was suckling a breast from which nothing came. This movement of projection consisted in trying to get rid of the "bad breast".

He explains the fact that, around the age of three months, pleasant experiences of breastfeeding are followed by peaceful moments in which the baby looks around, observes, is interested and happy, in the following way:

[The baby] *has incorporated his mother's calmness and security* – symbolically speaking, the "good breast" or the "good mother" – and *he is therefore capable of projecting around him* [...] placing his interest on everything that surrounds him, because he has something inside.

(Perez-Sanchez, 1981, p. 50, author's emphasis)

The baby can be generous and give himself to others because he has introjected a good and secure experience. This process functions in the same way for everyone, child or adult, but the difference with the adult is that he or she can retain the introjection for a long time, whereas the baby needs the presence of the object. If the mother is no longer paying attention to him, he quickly feels uneasy and cries. After moments of physical contact with his mother, of warm interaction, of gratifying exchanges, the baby who can smile to the observer, whose presence is no longer persecuting, shows