Self and Other

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The cases discussed in this chapter have been selected primarily for the purpose of further exploring the merits of a person-oriented approach to object relations. In those instances where the analysts involved present their material in a way that is consistent with a drive-oriented theory of object relations, I provide alternative readings of the same material from a person-oriented perspective.

The case of Mrs. A. will serve as a brief introduction to the issues at stake. In this particular instance the analyst (Peterfreund 1983) demonstrates a flexible responsiveness to object-relational factors as distinguished from dealing, in a stereotyped way, with sexual factors assumed by others (his supervisor and discussants at a case conference) to underlie the patient’s symptoms. Peterfreund intends this case, and the others in The Process of Psychoanalytic Therapy, to illustrate two possible approaches to the psychoanalytic process. One he designates as “stereotyped” and the other as “heuristic.” The former approach tends to be weighted down by a rigid set of self-confirming presuppositions whereas the much more flexible, open, heuristic approach lends itself better to genuine discovery. Peterfreund’s agenda differs from mine. He uses the case of Mrs. A. (and others) to contrast barren and productive modalities of the psychoanalytic process. Peterfreund devotes particular attention to technique and comparatively little attention to the nature of the analyst’s theoretical presuppositions. I take the liberty of using a portion of his material for a different purpose because it seems to me that what the group of analysts whose approach he criticizes have in common conforms to the drive-
oriented approach, whereas Peterfreund’s own assumptions reflect the person-oriented approach to object relations—even though he does not talk about that orientation as such.

Mrs. A’s presenting symptoms include hypochondriacal preoccupations, fears of death, intense anxiety, depression, agoraphobia, and episodes of tachycardia in which her pulse rate often exceeds 160 beats per minute. She feels “friendless, alone, ugly, and unloved” (all quotations pp. 7–15). Peterfreund remarks that in all the years of his experience he has “rarely seen, outside of a hospital setting, a patient so anxious, so constantly in terror, so unable to find a moment of peace.” Peterfreund’s supervisor, critical of his early transference interventions, contends that the patient should be talking about her husband “since he, according to the supervisor, was probably the cause of the patient’s difficulties. The supervisor told me she had a hunch that the patient was ill because her husband was making her do a perversion.” In the “Rashomon situation” of the case conference, one discussant insists that the patient is only trying to “seduce” Peterfreund through her anxiety, and another believes, on the basis of mouth and throat symptoms, that the patient is “obviously struggling with fantasies of devouring her father’s phallus.” He wants to know why oedipal issues are not discussed in the case report. The ideas of a third discussant are consistent with the overview Peterfreund provides of the case: “It seemed probable that at age 4 the patient had been struggling with violent aggressive feelings toward her very ill, psychotic, depressed, silent mother.”

Although Peterfreund makes no effort to place the relevant biographical facts of the case in a particular theoretical framework, a great many of the details scattered throughout his presentation become especially significant within the perspective of an object relations theory emphasizing attachment deficits. Among them are Mrs. A’s anxiety, her depression, and her agoraphobia—especially when considered in the light of Bowlby’s view of phobia, discussed in the previous chapter, as a manifestation of separation anxiety. Mrs. A. feels she needs treatment when she becomes unable to leave home alone. “When she first began to work, in her teens, her anxiety was so intense that she had to be accompanied by her mother.” She feels “alone” and “unloved.” She lives a living nightmare of fear of “death, destruction, cancer, heart disease, abandonment, and consequent total helplessness” (italics added). She lives in “an unreliable, unstable, unpredictable world, one that could not be trusted.” Like the as-if and false-self figures to be discussed in Chapter 6, Mrs. A. feels she must
"create a superstructure, a facade to conceal the nothingness. I always copy and become like others. I don't know who the real me is." Specific separations of Mrs. A. from her mother—which may be inferred to be responsible for the patient's developmental deficits—include the mother's depression after the birth of the patient, and one lasting for six months after the birth of a sibling three years her junior, that is, during the critical phase of attachment needs. This mother, described as angry, paranoid, and totally lacking in warmth, is virtually absent even when actually present. "The mother, according to the patient, 'could not hear,' and was intolerant of any opposition. 'Bad' behavior 'killed' her, and she constantly threatened abandonment."

Comparable problems in the realm of attachment needs leading to serious emotional conflicts in later years will be found in all of the following cases. The gravity of the consequences varies considerably. It varies roughly in proportion to the extent of the deprivation, the degree of development achieved prior to the deprivation, and the quality of the emotional support provided by parents and their surrogates after the period of deprivation. Each case is unique, yet all exhibit the consequences of developmental crises involving interpersonal and intrapsychic conflicts stemming from various forms of separation and loss.

**GABRIELLE**

At the beginning of her sixteen "on demand" sessions with Winnicott (1977), covering a period of nearly three years, Gabrielle, affectionately nicknamed "The Piggle," is only two years and four months of age. This daughter of devoted parents experiences fretfulness, sleeplessness, and scary fantasies about a **black** mummy who "comes in after her at night and says, 'Where are my yams?'" (6). To "yam" is to eat. The term "yams" also designates her mother's breasts. Gabrielle has nightmares about something she calls "the babacar." "Tell me about the babacar, **all** about the babacar," she repeatedly demands of her mother, who understands only that "the black mummy and daddy are often in the babacar together, or some man alone. There is very occasionally a black Piggle in evidence" (7). Though Winnicott does not say so, it becomes apparent to the reader that "babacar" stands for "baby car," a vehicle or container of some kind. Confused at first regarding the meaning of "babacar," Winnicott launches one of his most crucial interpretations when Gabrielle asks him during
the second session, “Do you know about the babacar?” After twice asking her to tell him what it is, he risks an interpretation: “I said, ‘It’s the mother’s inside where the baby is born from’” (24). Gabrielle affirms his understanding. “She looked relieved and said: ‘Yes, the black inside.’” In spite of this insight, the nightmares about threatening black mummy's and ominous babacars continue for a long time. As late as the twelfth session (age 4 years, 1 month) Gabrielle remarks, “The more I go to Dr. Winnicott, the more bad dreams I have” (162). That is scarcely Winnicott’s fault—for the most part, at least. The nightmares undoubtedly continue because the related emotional conflict requires further uncovering and working through, and because Gabrielle has need of further maturation—over and above therapy—before she will be able to deal with her problem.

The experience of separation and loss that precipitates Gabrielle’s conflict centers around her responses at the age of 21 months to the birth of a sibling, Susan. Prior to this time her behavior was normal, her development optimal. Both the mother and Winnicott recognize that the birth of Susan marks the beginning of Gabrielle’s conflict. The mother writes, “She had a little sister . . . when she was twenty-one months old, which I considered too early for her. And both this [event] and (I would think also) our anxiety about it seemed to bring about a great change in her” (6; italics added). The mother’s sense of guilt derives, we learn, from the fact that she herself experienced (presumably in a negative way) the birth of a sibling at the same age as Gabrielle. How this sense of guilt on the part of the mother affects her handling of Gabrielle does not get explored in the case. There is no mention, either, of the period of time Gabrielle is separated from her mother in connection with the birth of Susan, or how the mother tries to handle Gabrielle’s subsequent turmoil other than eventually seeking professional help from Winnicott. We do not learn much about the interactional style of the mother, or whether she attempts to compensate for Gabrielle’s sense of loss with extra physical closeness and emotional contact. We do learn about one of Gabrielle’s responses to the situation: “When the new baby came she trained herself in a week” [toilet trained] (14). In his notes at the end of the first session, Winnicott writes, “Troubles started with the arrival of a new baby, which forced the Piggle into premature ego development” (17).

Most of Gabrielle’s responses to her predicament take the decidedly negative forms of confusion, conflict, guilt, and hostility. She no longer plays “with any concentration now” (7). Identity problems crop up. “She
hardly even admits to being herself. She is either the baba, or more often the mummy. “The Piga [Piga = baba plus Piggle?] gone away, gone to the babacar. The Piga is black. Both Pigas are bad. Mummy, cry about the babacar!” (7). And Gabrielle no longer allows anyone to call her the Piggle. Throughout the treatment period there are many references to naughty, destructive behavior. Sleeplessness becomes chronic. Thumb sucking begins with the birth of the baby sister (105)! Motor control decreases. “From the age of six months, she adored her father, and at that age said: ‘Daddy! But she soon forgot or ceased to be able to use the word” (14). Her increase of reserve toward her formerly beloved father appears to reflect the emotional distancing that Bowlby (1969, xiii) refers to as “detachment” (resulting from anger toward parents after separation). Gabrielle appears to hold both parents responsible for her troubles—insofar as she understands them. Although Gabrielle verbalizes death wishes toward her “real” mother, saying, rather politely, “I’d like you to be dead” (1977, 87), she directs most of her hostility at fantasied, internalized bad-objects, such as when she dreams of breaking the black mummy into pieces (37), and when she dreams about shooting “the black mummy” (116). At one point she cooks up a truly Kleinian dish: “She had a recurrent dream that her mother and father were cut into little pieces, boiling in some container; whenever she shut her eyes the image returned, so she tried to keep awake” (147). Her fears stem directly and immediately from internalized bad-object and bad-self representations, and only more remotely, in ways beyond her understanding, from actual events connected with the birth and subsequent presence of her sister.

Although Winnicott realizes that Gabrielle’s problems begin with the birth of her sibling, the frequency of his inclination to shift the focus of his interpretations to sexual matters, along Freudian and Kleinian lines, makes it uncertain that he grasps the extent to which Gabrielle’s dreams, her play during the clinical hours, and her other behavior reflect her sense of separation and loss, and her guilt about retaliatory feelings. Many of Winnicott’s interpretations are oedipal, often in an explicitly sexual way, in spite of his knowing that the trouble commences in a pre-oedipal phase. When Gabrielle tries to force the toy figure of a little man into the driver’s seat of a toy car by pushing it in with a stick, Winnicott responds during the first session with “something about man putting something into woman to make a baby” (11). It is as though Winnicott cannot credit the undeniable importance in this case of the theme of birth without insisting
simultaneously on the probable relevance, even for a two-year-old, of the mechanics of begetting babies. Susan’s mere existence creates the problem for Gabrielle—not how she came into existence. But for Winnicott, rubbing toy carriages together must necessarily symbolize making babies (80). When Winnicott asks Gabrielle what she is thinking about a toy train she is playing with, she says, “It is long, like a snake,” and then he asks, “Is it like a big daddy thing?” and she replies (age 3 years, 9 months), “No, a snake. Snakes are poisonous if they bite. If you don’t suck the blood out, the man will die” (137). When Winnicott elsewhere addresses the very real possibility that Gabrielle feels guilty because she has her daddy all to herself in the train (the real one she travels to her sessions in), Winnicott says, “You began to be a bit frightened then [when playing with the toy train] to think of having daddy all to yourself in the train, especially when you think of what you want to do to him, because you want to do to daddy the same as you were showing me when you took the stuff[ing] out of the [toy] dog.” Then he adds, “When you love me [analyst-daddy] it makes you want to eat my wee-gee” (156).

If Gabrielle wants to eat her parents in the Kleinian stew, it must be out of anger rather than lust. Winnicott notes in one of his lists of session themes, “Guilt because of destructive impulses toward the good object” (131). He also correctly interprets the babacar as an ominous, retaliatory womb. But time and again, at least in this case, Winnicott’s otherwise clear perception of the object-relational dynamics becomes overcast with miasmic clouds of sexual interpretation. As I mentioned at the beginning of this book, when Gabrielle puts two stuffed animals together during the sixth session and says, “They are together and are fond of each other,” Winnicott feels impelled to remark, “And they are making babies” (77). Gabrielle responds, “No, they are making friends.” With the benefit of this corrective feedback Winnicott shortly thereafter recognizes the transference elements of Gabrielle’s linking of two toy carriages by saying, “Gabrielle and Winnicott make friends” (78). Functionally speaking, the in-session phrase, “making babies,” serves a dual purpose by giving expression to themes in the separate-but-related realms of attachment and sexuality. For Gabrielle, “making babies,” to begin with, at least, can only refer to the immediate source of her problem, Susan, and indirectly to the separation she probably experienced at the time, and to the “virtual separation” taking the form of a probable decrease of attention from her mother subsequently. Thus it may be that many of Winnicott’s sexually
oriented interpretations serve Gabrielle’s needs—not because of but in spite of their sexual focus—for the simple reason that the more important, object-relational elements are “co-present” in his constructions.

Gabrielle’s condition improves dramatically with the “on demand” support of Winnicott’s facilitating environment, the devoted ministrations of a good-enough mother, and the development of such adaptive capacities as learning to tolerate her ambivalence, and learning how (by identifying with mummy, presumably) to tidy things up. She tries to “tidy away” the black mummy (72), though that does not work at first. Before she reaches the age of four she can say (in contrast to her sense of herself as a black Piggle at two), “I am a nice tidy girl; I tidy things up” (148). She internalizes good-mother representations. “She loves cleaning and making things better” (107), writes her mother. In Kleinian terms, “By acquiring habits of cleanliness, the infant’s anxieties about his dangerous faeces (i.e., his destructive badness), his bad internalized objects and internal chaos are again and again temporarily diminished” (1952a, 227).

Gabrielle learns to mend herself as well as her toys, leading Winnicott to remark in preparation for termination, “You can be a mender, so you don’t need me as a mender now” (1977, 166). She has internalized this aspect of his functioning. Above all, Gabrielle learns, directly or indirectly, the answers to many questions, such as “What is black, daddy?” (73), and whether witches have breasts (133), and where babies come from, and what it is like to be born. “I am just born,” she says, playing a game with her daddy, “and it wasn’t black inside” (30). “Tell me, tell me,” she reiterates, hungry for understanding. “Tell me about the babacar, all about the babacar” (7). “I want to know why the black mummy and the babacar” (40; italics added). Winnicott often reads her queries as quests for sexual knowledge, but I think that is not what she wants to find out about, mainly. She wants to find out about things like badness. Gabrielle has to struggle to comprehend her sense of her own badness, her blackness—as well as the blackness she thinks she encounters in others. She finds her feelings confusing. And why not, if she hates those she loves, including herself?

ANNA

Because the analysand discussed in Lichtenstein’s famous paper on “Identity and Sexuality” (1961) was a prostitute, it would seem to be impossi-
ble to erase the significance of sexual elements in the case history of Anna, the principal source of evidence supporting Lichtenstein's hypothesis that "human identity is established by a specific use of the non-procreative sexual function" (185). Fortunately, there is no need to erase the sexual elements entirely in order to perceive the extent to which Anna's identity turns out to be much more a function of her early attachment deficits than her early sexual experiences.

When Anna begins treatment at the age of twenty-three, Lichtenstein lists the presenting problems as "prostitution, conflicts arising from homosexual relations, periodic drinking, suicidal impulses and depression" (209). Feelings of despair and loneliness threaten to overwhelm Anna. Lichtenstein particularly concerns himself with the discrepancy between Anna's role as a prostitute and what she calls her "real self." She represents her real self in terms of her interest in the arts, intellectual matters, and self-improvement. "She looked upon herself somewhat like a person who, for some reason outside of himself, has to play a social role disconnected with his original position in life" such as "a forced laborer in a prison camp" who understands he is really a scientist, or musician, or whatever. Anna also has problems in regard to her love affairs. The difficulty, for her, is not that her emotionally important relationships are lesbian, but that these relationships repeatedly follow a disastrous sequence: falling passionately in love with a girl, living with her "as wife and husband" (with Anna seeing herself in the role of wife), feeling possessive and jealous, being unable to maintain the relationship, then falling into depression, excessive drinking, loneliness, and the role of being a prostitute—a role she invariably abandons when her lesbian relationships are stable.

The crucial facts concerning Anna's life circumstances and early object relations are these. She is the illegitimate child of a sixteen-year-old woman who becomes a successful singer in vaudeville. Though she is shown his picture, Anna never meets her father. Her grandmother, "a very religious woman" who cannot accept an illegitimate granddaughter, prays for her granddaughter's early death. In contrast, Anna's grandfather is warm and affectionate. She remembers him as the only person to give her unqualified love during her early years, though she also recalls getting affection from a nursemaid. Her stepfather, who often beats her, makes "sexual advances" on one occasion; no particulars are given about this episode. Anna's relationship with her beautiful, vivacious mother, who often places her in foster homes while she is on the road, is profoundly ambivalent, "being
at once both passionate and deeply resentful” (213). “For Anna, her mother was the most beautiful woman whose love she constantly was seeking” but “she never knew where she stood with her mother” who “for some reason” she did not understand seemed to be ashamed of her and not to love her (213). The result of all this, says Lichtenstein, is that Anna “became her mother’s most ardent lover” and tried her best to arrange for her mother to leave her stepfather so that she and her mother could “live for each other only” (214). When her mother does leave her stepfather, Anna works from the ages of thirteen to fifteen at all kinds of jobs in order to support her mother. When her mother subsequently gets involved with still another man, Anna feels betrayed and decides to run away, at the age of fifteen, shortly thereafter finding a job as a dancer in a nightclub, and not long after that slipping into prostitution as a way of meeting her financial needs.

Lichtenstein’s complex discussion of Anna’s “sexual identity,” on which her prostitution has little bearing, begins by following the lead of Greenacre and Mahler. He quotes Mahler concerning the development of “sexual identity” as follows: “We conceive of the sense of self-identity as arising from [the] alternation of two kinds of experience, namely pleasurable bodily contact with the nursing mother and also pleasurable reunion with her during sleep, alternating with interpolated periods of wakefulness” (190). A gradual “libidinization of the body surface” is assumed to occur. Lichtenstein treats sexuality as an undifferentiated element of identity, as compared, for example, to Lichtenberg’s (1989) representation of the sexual system as one of the five more or less separate motivational systems of the self. In Lichtenstein’s view, the derivation of the sexual side of identity is essentially twofold, one being the element of bodily contact of child with mother and the other being a species of mental contact taking the form of fantasied symbiosis (the second kind of experience mentioned by Mahler in the passage above). Thus it is that Anna’s devastating experience of loneliness, described as being “of intolerable intensity, undistinguishable from profound anguish, as if, in her words, she would go out of her mind” (219), leads to a reunion fantasy that Lichtenstein regards as fundamentally erotic not because it takes the form of the reunion of adult lovers but because the reunion is symbiotic, symbiotic reunion being intrinsically libidinal from Lichtenstein’s perspective.

During periods of loneliness Anna indulges in what Lichtenstein calls her “Mad Lover fantasy.” The lover is a madman—or madness itself. “He comes to make love to her, but while doing so, he destroys both her body
and her mind," an experience she imagines as one of ecstatic happiness (219). Anna calls the following (written) version of the fantasy "Return":

Ah, he quiets Sanity, for I hear the sounds of my lover's footsteps. — Is that you beloved, is that you returning to Drown in my madness, to baptise me with the Sweetness of our foolishness? Oh, bring back the strange but happy love. — Bless you, and drink with me my blood to quench our starved thirstiness. — Farewell, loneliness of Sanity, for madness has come to save my Soul. Hold my hand, lead me through the gates of Hell where we may rejoice to the Sins of humble men. Embrace me oh madness, let my nakedness and nudity quench thy thirst for madness with love of a longing heart.

(219)

A comparable version, untitled, reads in part, "Don't leave me, for with you I am not alone. Keep me safe in your oblivion, safe from the haunting night... Come back, come back, my Sweet love, don't turn me out... Let me drink to our holy madness, to our love of Solitude, Oh madness, I love you, come back to keep me free from Sanity" (219-20). For Lichtenstein, Anna's masochistic fantasy of aggression turned against the self is "obviously a fantasy representing a desire for symbiotic fusion with the lover, expressed in archaic oral concepts of being devoured by the Madman" (220). Lichtenstein goes on to reason that Anna's mother has imprinted upon her an identity theme incompatible with separateness as an individual. He "transcribes" this theme as "being another one's essence" (221).

Assuming identity themes to be "irreversible," yet susceptible of variations, Lichtenstein states that for him the therapeutic problem has to do with whether Anna will become able to experience a less pathological version of the implementation of this theme. In this connection he quotes a letter from Anna, written after termination, that tells about her new relationship with a man called Ray. It reads, in part:

Never before have I felt peace of mind with anyone, warmth and [a] feeling of wanting to do [things for him?]. I feel so much part of him that when he tells me something that was unpleasant to him, no matter what... I hate the thing or person for it. I feel it displeased him and that makes it terrible. If he is very tired, fatigue takes hold of me, and I seem to share his feeling, and usually end up relieving him of it. Does real loving make one feel a part of another? When he makes love to me I really feel that I'm way down deep inside of him, that his arms are my arms, etc. When he laughs, and he does not often, but [when] he really does, I am filled with sheer glee. When he is sad I long to whitewash all that has caused him his miseries and I feel compassion so deep that I usually have indigestion.(229)
For Lichtenstein, the implications of this letter are mixed. Anna’s capacity to fall in love with a man rather than a woman implies adaption, but “she loves symbiotically to such a degree” that Lichtenstein doubts that Anna would be able to deal with the loss if this relationship were not a lasting one.

Whatever the scientific status of the concept of symbiosis, there appears to be no reason to quarrel with Lichtenstein’s assumption that such themes in Anna’s letter (and in her fantasy of the Mad Lover) as union, reunion, fusion, and boundary loss bespeak states of body and mind that might be referred to, if only metaphorically, as “symbiotic.” Nor can there be any need to question the value of concepts like “identity” and “identity maintenance”—or even the value of Lichtenstein’s claim that identity maintenance takes precedence over all other principles determining human behavior. What one may be permitted to question are Lichtenstein’s assertions about “sexual identity,” by which he seems to say not that there must be a sexual side or aspect of one’s identity but rather that one’s identity is intrinsically and inescapably sexual by virtue of one’s early bodily contact and “symbiotic” experience of one’s mother. One questions, in particular, the conventionally sexual reading Lichtenstein accords various themes in Anna’s case. In his phrasing, Anna does not just love her mother; she becomes “her mother’s lover,” a love characterized, somewhat indirectly, as “incestuous” (217).

Rereading this case history within the framework of attachment theory leads to a quite different understanding of the loneliness theme. Such a reading emphasizes the many traumatic episodes Anna must have experienced when her mother placed her in “foster homes” while she was on the road. It emphasizes Anna’s experience of uncertainty in her mother’s love even when she was present, a problem presumably stemming from the mother’s negative feelings about her daughter’s illegitimacy. It emphasizes Anna’s craving for intimate relationships, sexual or otherwise, when she becomes an adult. And it assumes that the images of the Mad Lover fantasy Lichtenstein thinks of in terms of symbiosis are after all no more than common expressions of human need for attachment. “Drink with me my blood” may be out of the ordinary, but hardly such passages as “hold my hand” and “embrace me,” “don’t leave me,” “keep me safe,” and “come back, come back, my Sweet Love, don’t turn me out.” These words express Anna’s attachment needs, even if she is, in imagination, addressing Madness. Similarly, her depiction of her sense of being at one with Ray, not just in intercourse, metaphorically expresses a virtually universal hu-
man need for emotional intimacy. If Anna voices her personal need with a cry that is stronger than ordinary, perhaps that is only because the emotional insecurity of her early life enhances her desire for closeness.

RENEE

If a sense of “self-identity” does arise in part from “pleasurable bodily contact with the nursing mother” (in Lichtenstein 1961, 190), as Mahler assumes, then presumably the absence of sufficient bodily contact with the mother and other parenting figures tends to inhibit the development of functional selfhood. Considerable evidence from cross-cultural studies in social psychiatry shows that the deprivation of bodily contact in child-rearing correlates with disturbed behavior of various kinds, especially violence (Prescott 1979, 67). In the case of Renee, we learn from the extraordinary autobiography she writes after her recovery from paranoid schizophrenia that while she is ill she hates people without knowing why. She expresses the cosmic dimensions of her hostility by constructing—in fantasy—“an electric machine to blow up the earth and everyone with it” (Sechehaye 1951a, 47). She also hates being touched—except by Mme. Sechehaye, her analyst (Sechehaye, 1951b, 38), who institutes innovative modifications in her therapeutic handling of the case in order to make contact with her psychotic patient, among them the practice of sitting beside her on the couch instead of behind her on a chair. Renee feels abandoned in the traditional format: “When she did not see me, she thought I was not there” (41). So often, and so meaningfully, does the theme of making contact echo and reecho throughout Renee’s story—that neither her account nor Sechehaye’s make note of the theme as such—that it serves particularly well as a focus for discussing Renee’s severe object-relational conflict.

The word contact refers variously to physical contact with “Mama” (as Renee usually calls her analyst), emotional contact with Mama, and contact with reality. Renee begins to lose contact with reality at the age of five when she experiences delusional hallucinations, fearing a schoolmate because she suddenly looks like a lion, and seeing a tiny crow’s head on everyone’s forehead. In spite of incipient depersonalization (people seem like puppets and robots), growing fears, and the loss through regression of certain skills (such as drawing, because she loses her sense of perspective), Renee manages to perform well in school for the most part, and to
help take care of her younger siblings until the age of seventeen, when she is diagnosed as lapsing into an irreversible schizophrenia. Her symptoms (initial and subsequent) include deep regression, loss of visual perspective, depersonalization, compulsive masturbation, suicidal and other self-destructive behavior (such as deliberately burning her hand), refusal to eat (for months she had to be tube-fed), mutism, catatonia, visual and auditory hallucinations, delusions of grandeur (believing herself the Queen of Tibet, who is nine centuries old), and delusions of persecution. Renee feels she must annihilate herself at all costs because of the enormity of her guilt: “I was profoundly guilty, a guilt vast and horrible, unbearable, remorseless; of what I knew not, yet deeply, immeasurably guilty” (1951a, 93). Horrible images assail Renee: “It seemed that my mouth was full of birds which I crunched between my teeth, and their feathers, their blood and broken bones were choking me. Or I saw people whom I had entombed in milk bottles, putrefying, and I was consuming their rotting cadavers. Or I was devouring the head of a cat which meanwhile gnawed at my vitals” (59). While Renee does not identify this introject in her autobiography, Sechehaye mentions that Renee compares her mother to “a mysterious cat, the aggressiveness of which she dreaded” (1951b, 27).

Complicating the course of her emotional illness are various physical problems, including a kidney infection the consequences of which are so severe that at the age of twenty-two her body weight falls to fifty-three pounds. Analysis commences when Renee is eighteen years old. By the age of twenty-six and a half she has fully recovered from her psychosis.

Among the relevant factors in Renee’s childhood contributing to her later troubles, Sechehaye mentions the following pieces of information (1951b, 21–32). These facts, which Sechehaye rarely discusses in direct relation to the contents of the analysis, will readily be seen to involve instances of intimidation, rejection, separation, and loss.

Renee, the first of several children, is unexpected and unwanted by her parents, who had to cancel a wedding trip to Japan because of her. Her mother finds her ugly and is “unable” to breast-feed her. Because her mother puts too much water in the formula, Renee refuses the bottle. She almost starves before her affectionate grandmother begins to spoon-feed her gruel. Perhaps even more important, the grandmother provides loving care and attention—until Renee abruptly loses her grandmother at eleven months. At fourteen months Renee loses a pet—a live, white rabbit—when her father kills it in her presence, after which she refuses to eat. At eighteen months a sibling appears, after which Renee begins to spit at
people, including her little sister. At the age of two a servant girl tells her, "Someone must have cut something off of you," implying castration. When Renee is five, her father takes a mistress, leading to serious marital discord. Depressed, the father proposes mutual suicide with Renee, perhaps only jokingly. "When Renee was seven years old, she placed some large stones on a railway track, hoping to derail the train and thereby kill someone; she does not say whom. This train ... was the one taken regularly by her father. She sucks the rust on fences in order to 'become stiff like iron,' and sucks stones to 'become cold and hard' like them." At nine, her father runs away with his mistress and all the cash, abandoning the family. Renee's mother also talks about mutual suicide with Renee, repeatedly, in which connection it seems worth quoting Bowlby on the subject of threats of abandonment: "Threats to abandon, including suicide threats, play a far larger part in promoting anxious attachment than has usually been assigned to them" (1973, 226). Sechehaye mentions that Renee's mother "frequently threatened that after her death she would return to Renee and pull her by the feet, to punish her for having loved someone other than her mother" (1951b, 27).

In view of the many threatening, anxiety-provoking factors in Renee's early life, it is not surprising that when the positive transference finally becomes established, after much difficulty, Renee feels enormously "relieved" as well as joyful: "She told me later that after leaving the session she would jump up and down in the street shouting, 'I have a mother! I have a mother!'" (1951b, 38). Prior to this time Renee experiences the "indescribable distress" of "absolute solitude"—of being "terrifyingly alone." After Sechehaye becomes Mama, Renee remarks, "Only near her I felt secure, especially from the time when she began to sit next to me on the couch and put her arm around my shoulders" (1951a, 44, 46; italics added). Yet Renee's selfhood is so fragile, and her hold on reality so precarious, that the slightest disturbance can serve to break off contact, such as when Sechehaye utilizes the pronouns "I" and "you" instead of speaking about "Mama and Renee" (1951a, 52) at a language level consonant with Renee's current level of psychological functioning.

One of the implications of what Renee refers to as "the miracle of the apples" (1951a, 98–108) is that her contact with reality is a function of her emotional contact with Mama. Before the therapeutic breakthrough of the miracle of the apples, Renee allows herself to eat nothing but green apples "still attached to their Mama-tree." When the farmer's wife where she is staying at the time gets angry with her for picking apples that are
still green, she feels there is nothing left for her to eat. She flees in rage, shame, and despair, convinced that "an irresistible authority wished me dead." Ordinary food will not serve. Renee refuses the beautiful apples Madame Sechehaye purchases from the store for her, saying, "I want real apples, Mamma's apples, like those," as she points to her analyst's breasts. When Sechehaye responds to this message by holding Renee and feeding her one of the ripe apples after symbolically pressing it against her own breast, Renee is not only able to eat apples, and subsequently to take other food, but she also begins to be relieved of her other symptoms. She no longer risks being changed into a famished cat, "prowling cemeteries, forced to devour the remains of decomposing cadavers." Best of all, she makes contact with reality: "Instead of infinite space, unreal, where everything was cut off, naked and isolated, I saw Reality, marvelous Reality, for the first time. The people whom we encountered were no longer automatons, phantoms, revolving around, gesticulating without meaning." Mama also changes. Before the miracle, Renee experiences her as being like an image, a statue—artificial and unreal. "But from this moment on she became alive, warm, animated, and I cherished her deeply. I had an intense desire to remain near her, against her, to preserve this marvelous contact" (107; italics added). Renee had detested milk, but now it seems altogether natural to her to drink it. The symbolic apples protect as well as nurture: "On the mantelpiece were always two beautiful apples representing the maternal breasts given me by Mama to protect me. At the least anxiety I ran to them and at once was reassured" (108).

The theme of contact pervades Renee's narrative, directly and indirectly. When she is young Renee experiences one of her friends as unreal, like a statue: "I saw her eyes, her nose, her lips moving, heard her voice and understood what she said perfectly, yet I was in the presence of a stranger. To restore contact between us I made desperate efforts to break through the invisible dividing wall, but the harder I tried, the less successful I was" (1951a, 36). When Sechchaye takes Renee with her to the seashore for three weeks, "I had no contact with her. . . . Apart from the sessions she was a stranger" (88). "It was only when I was near 'Mama,' my analyst, that I felt a little better," she says elsewhere, "but even for this, nearly an hour had to go by. Indeed, it was only toward the end of the hour, and sometimes not until twenty minutes after it, that I made contact with 'Mama' " (49). Renee experiences loss of contact as abandonment, such as when the psychiatric nurse serving as Mama's surrogate goes on vacation: "All night long I sobbed in anger and grief; my whole
world had fallen to pieces. Her absence was simply unbearable. . . . I felt a pervasive sense of abandonment” (112). And she rages against Mama for allowing it to happen.

Sechehaye's first significant emotional contact with her patient, at the advent of the positive transference, comes about at the end of three and a half months of analysis when Renee begins to bring in drawings representing the fantasies of her inner object-relational world. Her presentation of these drawings relieves Renee and provides her analyst with crucial insights—much as Milner’s patient’s paintings do in *The Hands of the Living God* (Milner 1969). But the most dramatic therapeutic achievements in Renee’s case occur when Sechehaye develops new measures of achieving contact with her patient through her imaginative utilization of what Winnicott eventually comes to call transitional objects. (Renee’s analysis concludes in 1938.) The symbolic apples on the mantelpiece constitute one such set of objects. Many of the most significant objects in Renee’s case are self-surrogates, that is, they represent aspects of her developing sense of selfhood—like the unnamed cloth monkey Mama gives Renee, which Renee calls “my first double” (1951a, 95). At first Renee associates the monkey’s raised arms with her own impulse to strike herself. When she communicates her fear, Mama responds by lowering the arms and verbally reassuring her. This episode becomes a turning point in the analysis: “From that moment, the impulse to self harm left me abruptly” (97) And Renee adds, “I had no more contact with her except when she took the little monkey in her arms and talked to him, a thing she did too rarely to suit me” (99). Later on Sechehaye succeeds in reestablishing contact with Renee by giving her a stuffed tiger: “Then Mama gave me a beautiful plush tiger, and, taking it from her, I recognized him as my defender which alone, with Mama, could shield me from harm” (120).

Another critical episode in Renee’s redevelopment takes place when Mama gives her a baby doll whom Renee names Ezekiel. “Taking courage one day when Ezekiel was in Mama’s arms, I pushed his head forward on her bosom to test whether I had the right to live. At this, Mama pressed him to her breast and let him nurse. This she did regularly several times a day so that I awaited the moment in fear of her forgetting. But Mama did not forget, and I began to dare to live” (123). During a period when Renee has to be sedated for pain (kidney infection), she experiences the sedation as being in a green sea “quite like being in Mama’s body.” When the pain passes, her greatest joy is to lie peacefully “in the green light, my
hand in Mama's, Ezekiel on her heart. My contact with Mama persisted without interruption. Her sweet voice alone sufficed now to soothe the voices [of the persecutorial system] and the impulses [to harm herself]. And more and more, I preferred to be near her, rather than within her” (126). At first Sechehaye wisely refuses to allow Renee to eat alone because Renee dares to feed herself, as distinct from being fed, only if Mama is close by. “Later Mama gave me a letter in which was noted in detail what food I was to eat, food she herself had prepared, so that even in her absence she was near me” (1951a, 126–27). The various transitional objects (the cloth monkey; the doll, Ezekiel) serve as containers of Renee's externalized self-representations, these being benign constellations of self as distinguished from the more primitive and conflicted ones (Little Iron Bar; the hostile Famished Cat Self; the grandiose Queen of Tibet).

Beyond all doubt, Sechehaye's modifications of classical treatment serve Renee's deepest object-relational needs. Sechehaye's commitments to Freud's drive and structural theories seem not, in practice, to impede the treatment. When Sechehaye presents a formal interpretation of the case in the analytical section appended to Renee's autobiography, her language remains locked into libido theory, and into what Bowlby calls the theory of secondary drive: “Renee could not love herself since her mother had refused to nourish, hence love, her. When the ego is no longer charged with libidinal energy produced by the introjection of maternal love, destructive forces soon invade it. As Freud has shown, there is a complication of drives. When the libidinal drives are frustrated, the drives to self-preservation lose their defensive energy and abandon the ego to self-destruction” (1951a, 149). In contrast to the many passages referring to libido theory in the interpretive supplement to the autobiography, Sechehaye expresses her account of the case in Symbolic Realization, for the most part, in ordinary, non-technical language, and rarely resorts to metapsychological formulations. She recognizes more clearly in Symbolic Realization, though she does not elaborate on the idea at length, that Renee's enormous guilt comes from “the aggressiveness against the mother, the siblings and herself” (1951b, 136). Sechehaye also remarks, in language perfectly consonant with attachment theory, that “the tragedy of the situation is that maternal love is indispensable to the baby, and its deprivation leads to hopeless clinging of the child, who does not want to die” (1951b, 136). In her review of the curative factors in the case, Sechehaye emphasizes that by “maternal love” she means something like “functional
maternal love,” that is, a responsible, loving, and operationally effective response to all of the child’s needs as distinguished from mere unimplemented or ineffective feelings of affection. As far as Sechhaye is concerned, successful “symbolic realization of the fundamental emotional demands” (1951b, 13) of the child through such enactments as her symbolic care of Ezekiel constitute “proof of maternal love” that encourage Renee to love herself (1951b, 141).

Bowlby’s babies are anxious because mommy has gone away, or may go away. Klein’s babies are anxious because their hatred may destroy mommy. Renee’s feelings of total abandonment, and her fantasy about a machine to blow up the world, suggest that we need to keep both sources of anxiety in mind.

JOEY

Unlike the other cases considered thus far, in which the analysts’ perceptions of the material were always, except for Peterfreund, shaped to some degree by a drive-oriented view, the case of Joey exhibits no distortions of this kind. On the contrary, Bettelheim (1967) may be said to present this material, in a book that focuses on infantile autism, in a manner that reflects the basic assumptions of a person-oriented theory of object relations. The person-oriented theory of object relations implicit in Bettelheim’s presentation, may furthermore be said to exhibit the elements mentioned in Chapter 2 that characterize a unified theory, one that is informed by attachment theory yet remains fully attentive to the dimension of internalized object relations, and that utilizes self theory as distinguished from ego psychology. Bettelheim contends that self is “stunted” in autism (92) but sufficiently present to initiate defensive withdrawal from others, autism being “an autonomous response” (408) by the child. And as more recent discussions of self do, Bettelheim’s commentary stresses the importance of interpersonal mutuality between mother and child for the development of selfhood.

Joey, “the mechanical boy” (as Bettelheim refers to him in the title of his initial publication of the case in the pages of The Scientific American), lives in a world where feelings have no place, a world of machines. When he enters Bettelheim’s school at the age of nine and one-half years, he is a “talking autistic child,” one who has speech but does not communicate. To observers he seems like a robot, devoid of all that is human and
childlike. His only play, and all of his fantasies, pertain to machinery. In what looks like a travesty of attachment behavior, Joey feels obliged to plug himself in to sources of electrical energy before he can be empowered to perform basic physiological functions like eating and defecating. He even fabricates a "breathing machine" out of "masking tape, cardboard, pieces of wire, and other odds and ends." Although his observers feel anxious about losing a bit of their own humanity while watching him, he has "the ability to hold the fascinated attention of those who watched him in his vacuum, to seduce them into believing him a machine" (238). When he is one year old, his parents give him an electric fan to play with. After that, all of his transitional objects are inanimate objects—but sometimes highly animated inanimate objects, airplane propellers being his favorite. When he runs around the school grounds he gyrates his hand in front of him, propelling himself with his own propeller—in fact, becoming a propeller. Machines are his protectors and controllers. He must insulate himself from the dangers of the world, such as when eating: "Under no circumstances, now, could he eat unless in touch with the table. He had to sit on a piece of paper, pressed against the table, and his clothing had to be covered with napkins. Otherwise, he later told us, he was not insulated and the electric current would leave him" (244). He refuses to drink except through piping systems built from straws, believing that the liquids are pumped into him. When he masturbates, he moves his penis as if it were the handle of a machine and calls it "cranking up the penis" (304).

What does it take to create a robot boy? Not surprisingly, we learn that at his birth Joey's mother thinks of him as a thing rather than as a person. She refuses to nurse him, not so much out of dislike as out of indifference. During the early months Joey's mother never cuddles him, or plays with him, or even touches him except when necessary. The mother impresses members of Bettelheim's staff as being deeply insecure and as incapable of regarding Joey as a person in his own right. Joey simply never succeeds in penetrating the wall of indifference set up by the mother. After his mother leaves Joey at Bettelheim's school, psychotherapy helps her to understand some of her own emotions: how trapped she feels by the marriage, how rigid she is about maintaining control of her emotions, and how anxious she feels about the possibility of coming "unglued and becoming a mental patient." Bettelheim infers that "Joey must have felt that his emotional demands on his mother were a burden
to her, of which he should free her by not asking for affection any more” (260).

Joey exhibits marked detachment from people in general and his parents in particular. When it is time for his parents to depart after they bring him to the school, he gives no sign of feeling. He never (until he improves) refers to anyone by name; instead he refers to them by such phrases as “that person” or “the small person.” In a way that is typical of autistic children, he avoids using personal pronouns, especially the word “I.” They are too dangerous. For two years he refuses to do any reading unless he may skip the word “father” when it appears on the page. Later, when he develops enough to be able to use personal pronouns, he uncovers his anger: “If my parents were here, I would kill them; it’s not the School that’s bad; it’s my parents’ fault. If they were here and I had a fan, I’d put their fingers in it while it’s whirling, and I’d cut them to pieces” (258). He is angry at his mother, he says, “because she didn’t punish me for my angry feelings I had about her. I had to punish myself” (259). Years more have to pass before Joey can uncover the yearning for emotional contact that lurks beneath the anger. Searle mentions that in his experience with chronic schizophrenics the transference suggests that underlying the hatred and rejection the analyst encounters in his parental role there are always powerful feelings of genuine love: “The schizophrenic illness now becomes basically revealed as representing the child’s loving sacrifice of his very individuality for the welfare of the mother who is loved genuinely, altruistically, and with the wholehearted adoration which, in the usual circumstances of human living, only a small child can bestow” (1958, 220). Considered in this context, it would seem that in becoming a machine, Joey only became the “thing” his mother beheld—and perhaps needed him to be.

When Joey draws a portrait of himself, the figure he sketches possesses a head with a jack-o-lantern face and a body formed of nothing except electrical wires. At this stage of his development he expresses anger by way of fantasies concerning tubes about to explode (“That light bulb is going to have a temper tantrum”), and he registers emotional depletion as “not enough power . . . coming in” (Bettelheim 1967, 253, 252). Much later Joey becomes able to risk the passive acceptance of love in the form of allowing his counselors to hold and carry and cuddle him. Much later still, Joey eventually risks actively asserting his own positive feelings toward Lou, his most-favored adult at the time. Initially he does this by
putting blankets over himself and Lou, the blankets serving as a safety net to prevent Lou’s escape when Joey touches him. “After innumerable experiments at binding the loved person fast,” Joey is still so overexcited at the prospect that he has to blow off steam by having what he calls a “rumpus.” After he is finally able to touch Lou, “he rushed to the farthest corner of the room shouting wildly, only to approach and reapproach, touching and retouching again. Reaching out for touch on his own was that unbearably exciting” (329).

Then came many months of a far greater daring when his behavior had less the character of a tantrum and more of a conscious seeking of body close-ness. He would put an arm around Lou’s shoulder, or sit in his lap for a moment—after which he would rush away. But now the adult was no longer supposed to stay put as when Joey had tied him down. Now he had to rush after Joey and catch him, so that Joey could know that his touch had been welcome. (329)

Once he gets connected to people, Joey no longer needs to remain attached to machines.

Before he achieves this level of development, he must experience a rebirth—and before that, momentous developments take place in the form of evolving self-representations. One of these is Kenrad the Terrible, a destructive alter ego based almost entirely on Joey’s projective identifi-cation with another boy at the school named Ken. Joey enacts in pantomime the process of pumping or drilling Kenrad’s feces out of him so that he will not get constipated. “It was still beyond Joey’s comprehension that anyone could possibly move his bowels ‘on his own steam.’ Only machinery could do that” (300). Another self-representation is Mitchell the Good, similarly based on Joey’s projective identification with a boy named Mitchell, healthier than Ken. In this instance, however, Joey rec-ognizes Mitchell as a real person and is able to call him by his name. The theme of rebirth begins when Joey plays at being a “papoose” wrapped up in a blanket. This papoose evolves into an electrical papoose. Then Joey commences a game called “Connecticut papoose,” a game in which he is no longer a collection of wires in a glass tube “but a person, though still encased and protected by glass, connected and cut off at the same time (Connect-I-cut)” (304). A great advance in Joey’s development occurs when he acquires an imaginary companion named “Valvus,” who is a boy “just like me.” Valvus is neither all good nor all bad, neither completely helpless nor all-powerful. But like a valve, he can turn himself on or off: “Through Valvus he achieved autonomy, that is, personal
contact of his own elimination [processes]" (314). For a period of time Joey enjoys being fed like a baby, using a nursing bottle, with warmed milk, which he takes while lying comfortably in bed. During this period Joey shows a great deal of interest in chickens and eggs. Suddenly one day, after cackling like a hen and flapping his arms like wings he crawls under a table draped with blankets. "There, by his own statement, he gave birth to an egg out of which he pecked his way newborn, into the world. 'I laid myself as an egg, hatched myself, and gave birth to me' " (325). At this point, remarks Bettelheim, "he was no longer a mechanical contrivance but a human child" (325).

Like the clinical texts examined in Chapter 3, the case histories concerning Gabrielle, Anna, Renee, and Joey can be seen to revolve around object-relational issues having little or nothing to do with sexual problems. The essential factor in these cases appears to be the children's need to form psychological bonds that constitute a suitable emotional environment, one that facilitates the natural development of functional selfhood. Winnicott's supportive analysis of Gabrielle's conflict beginning with the appearance of her sibling undoubtedly helps her to adapt to her situation and to overcome emotional deterrents to growth. Although Lichtenstein passes over the transference dimension of his treatment of Anna, her psychological gains suggest that the analytic process in some sense compensates for the severe emotional—as distinct from libidinal—deficits she experienced because of the many separations from her mother. The much greater severity of the emotional problems of Renee and Joey dramatizes how critical are the issues of physical and emotional (but fundamentally nonerotic) contact with parenting figures, and how devastating the guilt-laden rage toward inadequate parents can be.