

## CHAPTER THREE

### MELANIE KLEIN: INNOVATIVE THEORIST

#### 3.1.Introduction.

Melanie Klein was the founder of an object-relations theory of the mind and the first theorist to provide a complete model of early psychical life (Bacal & Newman, 1990; Likierman, 2001; St Clair, 1986). However, her entry into the psychoanalytic community was fraught with challenges and opposition which continued throughout much of her professional career. She had no formal medical or psychiatric training which questioned her creditability as an evolving theorist and Klein had to initially rely on her commitment to Freudian theory, her own analysis and her maternal, clinical observations of amongst others, her youngest son Erich (Grosskurth, 1986; Schwartz, 1999; Segal, 1992).

After moving from Berlin to London in the autumn of 1926, a divorced mother of three children, her most productive and creative years still lay ahead. She established a new theoretical school, pioneered a psychoanalytic treatment for children, had a significant and lasting influence on her most creative British colleagues and motivated the first psychoanalytic work with individuals suffering from psychotic and borderline conditions (Likierman, 2001; Spillius, 1988).

Ironically, during a time, which could have been considered as the height of Klein's professional career in London, she was subjected to amongst others her daughter Melitta's public criticisms of her work. A further source of confrontation occurred in 1942-1943 with Anna Freud, who was generally regarded as Freud's intellectual prodigy and "voice". In an arranged series called the "Controversial Discussions", regular confrontations were held between Klein and Anna Freud, which had the potential to seriously compromise and eradicate Klein's work and her ability to train students (King & Steiner, 1991; Likierman, 2001, Mitchell, 1986; Segal, 1992).

Late 1960 heralded Klein's final contribution, "Narrative of a Child Analysis". She had become ill earlier that year and was diagnosed with operable cancer. Whilst recuperating in hospital she

sustained a hip fracture, suffered complications and died. Her legacy as “one of the most creative thinkers of the twentieth century” (Segal, 1992, p. 134) permitted new insights and challenges to accustomed ways of relating to children in particular and to behaviour in society in general (Grosskurth, 1986; Segal, 1992; Spillius, 1988).

In the discussion that follows, we track the chronological development of Melanie Klein’s theory. Detailed descriptions of Klein’s theoretical constructs are also provided during the course of this chapter. It is relevant to note that for the purpose of this study, a conscious decision was made to retain Melanie Klein’s theoretical framework as the main Kleinian framework against which to mirror and explore the findings. However, during the course of this chapter, relevant, brief references are made to some of the subsequent developments of Klein’s theory. The decision to retain Klein’s original theoretical framework was made mainly for pragmatic reasons as this study is of limited scope. In addition, due to the nature of this study, Klein’s keen emphasis on the intrapsychic processes within individuals rather than on the interpersonal processes between them, provided some opportunity for contributing further knowledge to the interpersonal facet of human functioning.

### **3.2. Klein’s encounter with Ferenczi, Freud, and psychoanalysis: an overview.**

It was in Budapest during 1910-1921 that Klein first discovered psychoanalysis. As a result of compounding personal difficulties, she decided to go into analysis with Sandor Ferenczi, a brilliant and charming Hungarian doctor who had accepted and contributed much to the psychoanalytical domain (Likierman, 2001; Schwartz, 1999). These sessions were very important to her and encouraged by Ferenczi who considered Klein to have a particular talent and giftedness for psychoanalytical understanding as a result of her shared observations with him on her youngest son Erich aged 4 years, she was motivated and inspired to sustain her growing interest in the discipline. However with much experience behind her in later years, Klein was to lament that Ferenczi had been “too kind and so had shied away from interpreting the negative transference, leaving her treatment incomplete” (Likierman, 2001, p. 14).

It was also during this association with Ferenczi that she discovered Freud’s works and became completely enthralled by psychoanalysis (Schwartz, 1999). In particular, his article, “On Dreams” relieved a long period of personal intellectual starvation and her marked enthusiasm for

the subject was captured in the intense accounts in early papers of her psychoanalytic work with young children (S. Freud, 1901; Segal, 1992).

Klein's earliest work in 1919 was entitled "The development of a child" (Schwartz, 1999). Inspired by Ferenczi's encouragement, this paper was a brief study of her son Erich, later masked as "Fritz". Approximately a year later, Klein was granted admission to the Hungarian Psychoanalytic Society on the grounds of her findings in her conversations with Erich (Grosskurth, 1986; Spillius, 1988). She was inspired to write a sequel in 1921 entitled "The child's resistance to enlightenment" in which she described her analysis of Erich during sessions that were structured around his most primitive fantasies and anxieties. Her interpretations were fed by his unrefined responses and in this manner, the foundation for Klein's innovative and pioneering play technique had been laid (Fordham, 1995; Likierman, 2001).

Ferenczi's apparent impact on Klein's pioneering paper in 1919, was as a result of a multi-faceted context. Firstly, he was her psychoanalyst and mentor. Secondly, Ferenczi's own professional development during his analysis of Klein was important particularly through his correspondence with Freud (Grosskurth, 1986; Schwartz, 1999). Thirdly, his personal theoretical persuasion resulted in a distinctly Freudian influence in her analysis and ensured that he was able to provide her with an original psychoanalytic encounter. These three components made a lasting impression on Klein's future work in the field of psychoanalysis (Likierman, 2001; Segal, 1992).

Freud's role in their relationship was pivotal and Klein perceived herself as a faithful follower of his theoretical orientation although she never had direct or written contact with him. Ferenczi on the other hand, had meaningful communication with Freud on a daily basis and was also a prominent though corresponding member of Freud's exclusive Wednesday Evening Circle later known as the International Psychoanalytic Association (IPA) (Haynal, 1993; Schwartz, 1999; Spillius, 1988). However in the 1920's Ferenczi's friendship with Freud was subjected to unmet expectations and disillusionments and gradually deteriorated (Monte, 1999; Segal, 1992).

As an original and enthusiastic thinker, Ferenczi naturally introduced some of his own insights and ideas into his analytic relationship with Klein (Grosskurth, 1986; Schwartz, 1999). His

thinking formed the basis of the well known and respected British object relations school which produced gifted persons such as Winnicott, Balint and Fairbairn in addition to inspiring many other theorists such as Bion and Bowlby (Scharff, 1992; Schwartz, 1999; St Clair, 1986). Klein built on Ferenczi's insights which facilitated her own thoughts and ideas on the intricacy of the primary mother-infant relationship, the infant's ability to introject the core of this relationship and the significance of this occurrence to the development of a healthy ego (Bacal & Newman, 1990; Fordham, 1995).

In addition, Ferenczi's theorizing also provided Klein with the conceptualisation of the primary relationship between mother and infant as source for the later formation of symbolic thought and therefore the ability to make sense of the world (St Clair, 1986; Schwartz, 1999). However, it was not merely Ferenczi's unambiguous thinking which inspired Klein but also his unique psychoanalytic awareness and personality which added to her growth as a theorist and which would in due course enable her to bravely and without reservation, explore raw mental states (Segal, 1992 ; Stanton, 1990). Throughout their relationship, both Ferenczi and Klein were able to keep a professional distance and she largely profited by his mentorship (Grosskurth, 1986; Schwartz, 1999). During the course of her analysis, she had the freedom to criticize and decline some of his findings and in so doing was permitted to engage in an independent intellectual stance (Likierman, 2001; Segal, 1992).

Despite Ferenczi's significant influence on Klein, it was overlooked for nearly a century partly because of his diversion from Freudian thinking in pursuit of his own innovation. Consequently in 1933, towards the end of his life, Ferenczi was effectually ostracised from the psychoanalytic community who at all costs demanded a unified professional distinctiveness (Likierman, 2001; Schwartz, 1999; Segal, 1992). This turn of events had serious inferences for Klein who, in the face of professional complications was inadvertently obliged to succumb to a recommitment to Freudian thinking for fear of her own expulsion (Grosskurth, 1986; Segal, 1992).

Klein presented her observations to astounded colleagues shortly after her arrival in Berlin in 1921 who were unaccustomed to raw and liberal portrayals of infantile mental life as opposed to scientific decorum and propriety as depicted by amongst others, Freud (Grosskurth, 1986; Schwartz, 1999). Interpretations of his work paled by comparison in both emotive style and content, which did little to endear Klein's acceptance into the psychoanalytic community. On

the contrary, this placed her at the centre of controversies both within and outside this circle for many years (Likierman, 2001).

As her professional difficulties increased and confrontations with amongst others Anna Freud proved particular threatening to her work, Klein severed all ties with Ferenczi which immediately had future implications for her initial and subsequent groups of followers (Spillius, 1988; Schwartz, 1999). In like manner, they looked to Freud rather than Ferenczi to recognize her work and major contribution in the field of psychoanalysis (Likierman, 2001).

Paralleling the harsh rejection of the Berlin psychoanalytic community, Klein experienced the support of a tolerant British Psychoanalytical Society which gave her a much needed morale boost and for the first fourteen years of her life in London, she enjoyed increased material, scientific and personal prospects (Likierman, 2001; Segal, 1992).

In particular, the period between 1926 to 1938 before the arrival of the Freuds were very productive years for Klein. In 1930, “The importance of symbolism in the development of the ego” was published which described the analysis of a 4-year-old Dick who had shown signs of psychosis. This was unfamiliar territory at the time and consequently provided unique opportunities for the psychoanalysis of psychotic adults (Likierman 2001; Schwartz, 1999).

After battling with a period of depression as a result of compounding personal difficulties and losses, Klein resumed her writing and in 1935 published “A contribution to the psychogenesis of manic-depressive states” which expressed her ideas regarding depression (Segal, 1992). In 1940, “Mourning and its relation to manic-depressive states” was published which furthered Klein’s ideas regarding loss as a result of the death of her eldest son (Likierman, 2001). These two papers described Klein’s perspective on the inner world of individuals with particular reference to the chaos death can bring to bear on their inner landscapes (Schwartz, 1999; Segal, 1978).

Writing from 1921 until her death in 1960, Klein added a new dimension to the understanding of very young mental operations and human suffering. In these and other papers such as “Notes on

some schizoid mechanisms” published in (1946), Klein considerably extended and fundamentally departed from the concepts of object and object relations initiated by Freud (Grosskurth, 1986; Likierman, 2001; Segal, 1992; Spillius, 1988). An overview of Klein’s theoretical departure from Freud is provided in 3.6, as part of the discussion on Kleinian theory.

At this point however, we turn to early beginnings in the innovative and transitional work of Melanie Klein. Our initial focus will fall on her pioneering paper: “The development of a child” (Klein, 1921/1975).

### **3.3. Early beginnings.**

#### 3.3.1. “The development of a child” - Part One (1919).

Drawing on both Ferenczi’s mentorship and Freud’s psychoanalytic theoretical acumen, Klein chose and integrated themes from Freud’s theory of drives and Ferenczi’s emergent object relations model (Likierman, 2001; Schwartz, 1999). She found in Freud’s (1909) account of his pioneering psychoanalysis of “Little Hans”, a working model which she could apply to her own psychoanalytic intervention with her son Erich. Similarly to Freud, Klein’s case study of Erich, includes verbatim accounts which mirror the child’s unreserved style of questioning and pre-school language (Monte, 1999; Spillius, 1988).

In later years, Klein (1921/1975) with hindsight proposed that Erich’s actual problem was inhibited due to the covert, deeply rooted and unconscious anxieties of infancy and early childhood. Although Klein did not mention this notion in her paper at the time, Klein’s focus in child analysis was not on treating symptoms as Freud had been practising but rather on preventing an escalation of behaviour which may indicate future pathology. Consequently it was quite possible for her to ignore the importance of presenting symptoms in children (Greenberg & Mitchell, 1983; Likierman, 2001).

In observing her own child, Klein expressed personal concern for Erich’s apparent delayed development. He was extremely reserved in his behaviour as well as intellectually inhibited

particularly when compared to his older siblings. However, Klein would not accept these symptoms as indicative of arrested intelligence as he appeared to be “...both in looks and behaviour ..an alert and intelligent child” (Klein, 1921/1975, p.2).

Furthermore, his memory and attention to detail was superior once attained and he would obliviously escape into invincible phantasies where he could “cook, read, write and speak French perfectly” (Klein, 1921/1975, p.3). His accumulative symptoms however concerned her sufficiently that she felt steps should be taken to prevent subsequent pathology. In this manner, Klein wanted to liberate Erich from his evident learning difficulties prior to them becoming too embedded in his personality (Klein, 1921/1975).

Klein used Erich’s analysis in order to draw universal conclusions regarding all children. In reading Freud’s account of “Little Hans”, she realised that unlike Hans, numerous children also laboured under nervous problems but were restricted in spontaneously asking their parents questions because of their highly conservative backgrounds. As a result, they were denied open and direct answers to their curiosity (Klein, 1921/1975). Rather, adults tended to burden children with moral guilt instead of helping them understand their primitive impulses. Even in the case of non-neurotic children, Klein felt that they too could in all probability also be suppressing impulses in numerous ways which remained unobserved by their parents (Klein, 1921/1975).

By extrapolating individual conclusions based on her study of Erich to the therapeutic requirements of the rest of young children in the community at large, Klein extended her vested interest in personal mothering to elaborate on Freud’s view of the individual. In this manner, Klein initiates two journeys of exploration namely, an external one that points to the child’s social surroundings and an internal one which points to the child’s unconscious world (Klein, 1921/1975).

When considering the external, social environment, Klein suggested that the direct spontaneous verbal exchange between parent and child as described in “Little Hans” should be followed in society as a permanent aspect of childrearing (S. Freud, 1909). In this regard she stated: “Honesty towards children, frank answering of all their questions and the inner freedom which

this brings about, influence mental development profoundly and beneficially” (Klein, 1921/1975, p.19). Should such spontaneous conversations therefore occur between parents and children, parents would not flinch from the innate sexual curiosity of their child and would be able to guide them towards an informed awareness of their sexual development. By responding in this way parents would “...safeguard thought from the tendency to repression” and therefore prevent an additional “... withdrawal of instinctual energy...” (Klein, 1921/1975, p.19) pursued by increasingly destructive repressions, given that every associated connection to the unacceptable thought would likewise be suppressed. However, should sexuality be liberated from its “dense veils of secrecy...” so that the innate “..wishes, thoughts and feelings..” of the child are not suppressed and do not become a “..... burden of false shame and nervous suffering...” (Klein, 1921/1975, p.19), destructive repressions could be prevented (Likierman, 2001).

Furthermore, Klein considered her proposal to have additional benefits other than preventing sexual repression. She elaborated on Freud’s concept of sexual curiosity as the initial step towards the specific desire for knowledge and emphasised the definite intellectual advantage which children have who are allowed to spontaneously question sexuality (Klein, 1921/1975). This aspect of Kleinian thinking was a decisive factor in her pursuit of generalising openness with all children (Schwartz, 1999).

Klein was inspired to attempt additional new ground. Her role as a mother made her aware of some of the essential milestones in the development of children which parents were not always able to share, as they took place in the nursery school. She argued that in order to extend psychoanalytic knowledge, analytically trained women could be introduced into nursery schools in order to observe and if needs be manage developmental problems of children (Klein, 1921/1975). This pioneering idea would afford children the right to autonomously develop their natural curiosity and intellectual independence instead of unquestioningly accepting adult opinions. She suggested that robbing a child of his own intellectual development could result in an “intellectual injury” which could have damaging and permanent implications for the child (Klein, 1921/1975, p.19)

Resonating Ferenczi’s thoughts in this paper, Klein (1921/1975) attributes healthy childhood development to the freedom of sexual curiosity and intellectual autonomy. In addition, as in

Frenczi's theorizing, she considers religion and moral emphasis as barriers to this vision. Klein suggested that religion could be used by parents to sustain their personal authority so that "...at a time when the child is intellectually unprepared for, and powerless against authority, his attitude is so much influenced that he can never again, or only at the cost of great struggles and expense of energy, free himself from it" (Young-Bruehl, 1988, p. 16).

Treating her own son was not an easy task for Klein and she proceeded with considerable caution. His questions: "Where was I before I was born?" (Klein, 1921/1975, p. 19) and "How is a person made?" (Klein, 1921/1975, p.19) challenged her view on the sexual enlightenment of children as she was concerned that this information may be unsuitable and overpowering (Likierman, 2001). She consequently told Erich (contrary to the governess' version of a baby-bearing stork) that babies came from the mother's body but deferred information regarding adult sexual intercourse. Klein felt in this way, Erich could gradually take in the information and should he show any untoward responses, she could address them timeously (Klein, 1921/1975).

In addition, her first accounts only reflected the relationship between mother and baby. What Klein did not know, was that her superficial responses were insufficient for Erich's persistent, enquiring mind and in a covert manner he gathered alternative versions of information from adults in the household and eventually confronted her with "the baby-bearing stork" and other mystical animals and beings such as angels (Klein, 1921/1975 p.19; Likierman, 2001). She rejected them all as "only a story" (Klein, 1921/1975, p.19) which led to explosive reactions by her son who determinedly held on to his mythical world (Spillius, 1988).

Klein realised that additional discussions regarding sexual enlightenment were being hampered by mystical beings and angels and Erich continued to act out his objections by relentless repetition of questions, and by asking her permission to leave and live with the neighbours when he didn't like her answers (Klein, 1921/1975). Although there was conflict between them, Erich continued his persistent questioning and appeared to accept certain aspects of the information she provided (Klein, 1921/1975). However, he insisted that Klein provide adequate support for her version of reality as opposed to his mystical world and if she rejected the notion of angels, given the amazing world around him, what about the existence of God? In addition, Erich rallied the support of his father in the debate, who believed in God (Klein, 1921/1975).

Confronted with a turning point in her work with her son, Klein realized on the one hand to support Erich's conviction that there was a God would be contrary to her personal beliefs and detrimental to the educational programme which she was suggesting and on the other, to dissuade Erich regarding his faith in God would be to oppose his father and in so doing, discredit the issue of adult discretion in general. This could not be understood by a young child (Klein, 1921/1975).

Although having to face these challenges Klein was not discouraged. Once again, she drew from Ferenczi and Freud (Grosskurth, 1986; Schwartz, 1999). Ferenczi sufficiently liberated her to explain from a religious perspective that some people, including his father opted to believe in God although from a scientific perspective, nobody had tangible proof that He existed (Likierman, 2001). From Freud, Klein experienced a growing awareness that despite conflicts which occurred as a result of Erich's distinct line of questioning, this did not indicate regression but rather that questions on sexuality once answered, opened up a much wider spectrum for further exploration and inquiry (Klein, 1921/1975).

Erich's line of questioning enabled Klein to realise that the inexplicable territory of religion was a necessity for the child because it reflected a further intangible territory later conceived "...as the inner world of the unconscious mind" (Likierman, 2001, p. 35). Klein was to learn that as in the case of religion, this unconscious dominion holds omnipotent mystical entities or primitive inner images which exert a magnitude of power over the self (Greenberg & Mitchell, 1983; Likierman, 2001; Schwartz, 1999).

Through her interactions with Erich, Klein (1921/1975) discovered that sexual enlightenment is the underlying process for something far more profound. It facilitated intellectual growth because of the important fundamental intrapsychic process in individuals, which is exclusive to a psychoanalytic context. In addition, this was the prerequisite for Freud's concept of "infantile omnipotence" which Ferenczi extended (Ferenczi, 1909).

During the elaboration of the concept, Ferenczi also became aware of the decrease of "infantile omnipotence" with development which then makes "... way for a developing sense of reality"

(Ferenczi, 1913/1952). The development towards a sense of reality away from infantile omnipotence was not what Klein had predicted. In working with Erich, his emerging reality sense befriended a level of unhappiness which afforded Klein subject matter for the second part of her paper (Grosskurth, 1986; Likierman, 2001).

### 3.3.2. “A child’s resistance to enlightenment” - Part Two (1921).

Eventually published as a single paper in 1921, as: “The development of a child”, Klein’s analysis of Erich yielded an occasion to consider her oversight of the father figure in procreation. In trying to remedy this omission, Klein experienced strong resistance from Erich himself and subsequently proposed that inherent features exist which determine the child’s ability to endure reality (1921/1975).

Simultaneously, there seemed to be a marked improvement in Erich’s progress paralleled by the introduction of play in their exchanges. Being able to play enabled Erich to finally liberate his pent up reticence and express his most distressing thoughts to Klein. Her interpretation of Erich’s Oedipal and other phantasies expressed in play, led to the introduction of her innovative play technique which would launch her into further ground-breaking territories (Klein, 1921/1975; Likierman, 2001; Segal, 1992).

Klein cautiously tracked Erich’s play as a mode of symbolism and investigated his intricate games and phantasies in the utmost detail, absorbing their unconscious importance which led her to the most primitive Oedipal phantasies. It was during these sessions that she first conceived of the significance of the mother in the mother-infant relationship and also of the maternal body as the primary location of the infant’s extremely powerful psychical activity (1921/1975). The maternal body, symbolized in play appeared to be an abundantly occupied hub of unconscious psychical energy which mirrored the infant’s most primitive conceptualisation of his human surroundings. The maternal body in this instance, was perceived as a form of totality and experienced by the infant as the whole of existence (Likierman, 2001; Schwartz, 1999).

This material which was slavishly and accurately noted and captured by Klein the mother, had extensive inferences for her future work as it opened the door to the sphere of infantile phantasy

life (Greenberg & Mitchell, 1986). Furthermore, this had significant implications for Klein's work as she would finally decide to distinguish child psychoanalysis from the pressure of moral education - in essence, from all pressures associated with a child's education and socialisation (Likierman, 2001; Schwartz, 1999; Spillius, 1988).

### 3.3.3. "Fritz", the neighbour's son.

Klein's paper on "Fritz" alias Erich was seen to accurately represent the earliest stages of her psychoanalytic technique instead of being just a study or observation of psychoanalytically oriented parenting. She had decided to mask Erich's identity because her departure in style from Freud and "Little Hans" necessitated a representation of the child's intellectual freedom to function independently rather than being subjected to parental persuasion and educative pressures (Klein, 1921/1975).

Consequently, should she as a mother analyse her child (a perfectly acceptable phenomenon of the psychoanalytic technique at that time), Klein initially felt the authority of parental influence would contaminate the psychoanalytic process. Secondly, as advocator of a pioneering psychoanalytic play technique, it would be contrary to the future interest and following of her model should the psychoanalytic community at large of which she was at that time a full member, become aware of her dual role as both mother and analyst, as this was the perception she was wanting to move away from. Thus, "Fritz" was born and disguised as a neighbour's son (Klein, 1921/1975).

The period 1919-1941 saw Klein facilitating significant progress in psychoanalytic insights. The latter part of her second paper on "Fritz" in 1921 suggested that both parents and society should share the responsibility for a child's mental well-being and that child psychoanalysis could be made available at the time of general pre-school education by psychoanalytically trained nurses, in the mother's absence (Klein, 1921/1975). In deciding to present "Fritz", Klein was not only separating her ideas from Freud but was in addition considering the work of Hermine Hug-Hellmuth, a Berlin psychoanalyst, who was also of the conviction that child psychoanalysis could be conducted within an educational setting (Likierman, 2001).

Therefore, by allowing her child to be analysed by a professional, the mother recognises the fact that the path of child development possibly does not lie solely in the dominion of parental influence (Klein, 1921/1975). For Klein herself, the reconciliation of the two roles of mother and psychoanalyst was a challenging one but one she could integrate as she continued to work with Erich in an unbiased and psychoanalytic way. Later joined by an authentic patient Felix, Klein was afforded the opportunity to shift her psychoanalytic observation “from working as a mother, to working with the child of another” (Likierman, 2001, p. 41).

#### 3.3.4. Instinctual riots in the playroom.

Klein may not have envisaged the chaos she would encounter when her first child patients were given free expression. The behaviours of Peter, Grete, Rita, Felix, Trude, Ruth and Ernst amongst others whilst overwhelming their parents were contained, diligently recorded and interpreted in the instinctually primitive manner that they were offered (Grosskurth, 1986; Schwartz, 1999; Spillius, 1988). Wreaking havoc on and around the furniture and attempting to inflict some pain on Klein herself were seen to be more than haphazard vandalism since they were interpreted as the communication of the inner subjective exponents of the child’s anxiety (Klein, 1921/1975).

Her portrayal of Erna, a six-year old girl in particular was regarded as Klein’s most detailed case study during her first years as child analyst and was extrapolated to her unique mode of interpretations with all other child patients (Frank & Weib, 1996; Petot, 1990). The account given of Erna is most noted for revealing in an intense and unrestrained manner the primitive psychological life already identified in her analysis of other child patients (Frank & Weib, 1996; Klein, 1921/1975; Petot, 1990). Themes of sadism, cannibalism, deprivation, hatred, punishment and cruelty were common. Klein used these opportunities to reinforce the symbolism provided by the child’s play as the reality of inner landscapes being portrayed rather than expressions of merely distressed play phantasies (Grosskurth, 1986; Likierman, 2001; Petot, 1990).

#### 3.3.5. Early criticisms of Klein’s work.

Greenberg and Mitchell (1983) suggest that Klein’s earliest interpretations ruminated exclusively

around libidinal contexts lending her work the flavour of Freudian psychoanalysis. However, Klein's direct peers were less concerned about the sexual emphasis she placed on her interpretations given the Freudian influence and mode of thinking which prevailed at the time (Schwartz, 1999). Extreme and unusual interpretations were considered appropriate due to the nature of the disturbed, unconscious mind being addressed. Rather, they were particularly concerned with Klein's direct and open technique in working with a child patient, specifically regarding hidden sexual symbolism expressed in his play (1921/1975).

Given these criticisms however, Klein (1927a/1975) was afforded the opportunity to clarify their misgivings with the presentation of "Symposium on child analysis" in 1927, where she publicly defended her work. She stated:

"...Supposing that a child gives expression to the same psychic material in various repetitions- often actually through media, i.e. toys, water, by cutting-out, drawing etc – and supposing that, besides, I can observe that these particular activities are accompanied at the time by a sense of guilt, manifesting itself either as anxiety or in representations which imply over-compensation, which are the expression of reaction formations – supposing, then, that I arrive at an insight into certain connections; then I interpret these phenomena" (Likierman, 2001, p. 49).

This was in direct response to Anna Freud's earlier, public criticism of her work in which she appealed to a greater following by emphasising the "shortcomings" and "eccentricities" in Klein's approach and interpretations (Likierman, 2001; Segal, 1992).

Anna Freud relentlessly challenged Klein's evolving theory on many levels (Young-Bruehl, 1988). Specifically she questioned Klein's persuasion that like the adult patient, the child patient has the capability to form a significant transference in the psychoanalytic relationship. In addition Anna Freud objected to Klein's orientation that a "primitive version" of love relationships exist in the form of an internalised and integrated reality in a child's mind. This version Klein believed impacts on the child's relationships with every adult including parental objects (Klein, 1921/1975; Schwartz, 1999; Spillius, 1988; Young-Bruehl, 1988).

Furthermore, Anna Freud questioned Klein's intuitive approach to free association (A. Freud, 1946). Klein (1932/1975) firmly asserted that lying on a couch and free-associating was not a prerequisite for the discovery of inner lives. Instead, play was the appropriate alternative and equivalent of the adult individual's freedom to free association in which the child's hidden unconscious was made accessible to the analyst. As in the case of adult dreams, components of phantasy exposed through play were derived from the same primitive source consequently housing a "royal road to the unconscious" (Young-Bruehl, 1988, p.165).

### 3.3.6. Klein's theoretical departure from Freud.

During the period 1927 –35, Klein had continuously attempted to apply Freudian concepts to her clinical observations and conclusions in order for her to become associated with the main body of Freudian thought (Likierman, 2001; Petot, 1990). Specifically, there were central elements of Freud's theory that Klein wanted to apply to her observations. In particular, the area of infantile sexuality was of interest to Klein. Although Freud had recognised infantile sexuality he did not explore it exhaustively, which allowed Klein the opportunity to extend the concept (Likierman, 2001). Drawing on her observations and the influence of Freud and other psychoanalytic mentors, Klein eventually found herself diverging significantly from classical Freudian theory and her work began to take on a unique nature of its own (Greenberg & Mitchell, 1983; Petot, 1990; Schwartz, 1999).

Boldly working directly with troubled children, developing compelling, new techniques as well as original ways of thinking about the inner landscapes of very young infants were but some of Klein's theoretical elaborations that turned Freudian theory upside down (Likierman, 2001; Schwartz, 1999; Segal, 1992; St Clair, 1986).

In the following paragraphs, key differences between Freud and Klein's theories are summarised. We turn firstly to the difference in time frames in which Freudian and Kleinian theory is respectively located (Segal, 1992). Other differences which are indicated are childhood developmental processes; the neuroses and the psychoses (Bacal & Newman, 1990); the death drive (Bacal & Newman, 1990); the unconscious (Segal, 1992); phantasy and repression (Mitchell, 1986); the development of sexuality (Segal, 1992); the Oedipal complex (Likierman, 2001); fathers (Segal, 1992) and lastly, babies (Segal, 1992).

### 3.3.6.1. On time: past and present.

Whereas Sigmund Freud's theory centred on the role of the recreated past in the individual's current well-being, Klein's theory does not distinguish between the past and the present but rather suggests they are both always current in the individual's functioning (Fordham, 1995). Consequently the absence of historical time is apparent in Klein's work. This is particularly emphasised in Klein's perceptions of ego regression, infantile amnesia, the castration complex, the Oedipal complex and anxiety (Mitchell, 1986). Consequently, in Kleinian theory, ego regression is omitted (Bacal & Newman, 1990). Freud in contrast suggested that the ego could regress back to its earliest origins. Furthermore, Klein takes no account of infantile amnesia and a Kleinian following of the castration complex posited by Freud has received continual waning interest (Mitchell, 1986).

Klein's suggestions regarding a primitive Oedipal situation is object related and accepted via processes and phantasies of the depressive position (St Clair, 1986). Her significant conceptualisation of the "positions", infers timelessness, as position implies "a mental space in which one is sometimes lodged" (Mitchell, 1986, p. 28).

In her view of anxiety, Klein initially agreed with Freud in concluding that anxiety symbolized a frustrated desire, however later she suggested that it was in essence an expression of the death drive (Klein, 1933/1975). Klein places this aspect of individual functioning at the core of the clinical manifestation and emphasises anxiety as part of the present and therefore a continuous reality (Klein, 1931/1975; Mitchell, 1986; Segal, 1992).

Particularly in the psychotherapeutic setting, the anxiety, character and contents of the phantasies, as well as their underlying mechanisms are brought to the current situation with the analyst. Therefore, transference and counter-transference are not seen as symbolizing the past but rather speak to a current psychotherapeutic relationship (Klein, 1927a/1975; Mitchell, 1986).

### 3.3.6.2. On childhood development processes.

Klein, like Freud emphasised an instinctual drive in explaining motivation and the development of personality, however, she rejected the belief of childhood innocence and facilitated a growing awareness of the infant's precarious vulnerability (Klein, 1933/1975). Furthermore, she firmly insisted that children are also emotionally dependent on adults for the regulations of their states and not as previously suggested, dependent solely on them in a material and educational manner (Klein, 1933/1975; Mitchell, 1986).

Whilst Freud in exploring the complexity of childhood development processes concluded a dependence on prior, gradual mental growth which enabled a developing accommodation of the reality principle and therefore a greater recognition of the world, Klein hypothesised sophisticated and highly complex mental operations in very young children and highlighted infantile purposefulness of behaviour that appeared to be peculiar in nature (Likierman, 2001; Spillius, 1988).

In particular, Klein challenged and criticised Freud's idea of "object" (Greenberg & Mitchell, 1982; St Clair, 1986). She suggested that drives are inherently directed toward objects and not as Freud indicated, initially objectless because gratification is paramount (S. Freud, 1953; St Clair, 1986). According to Freudian theory, the form the object takes is immaterial. Furthermore, Klein criticised Freud's conceptualisation of instincts being objectless as she believed that every instinct is bound to an object (Bacal & Newman, 1990; Klein, 1927a/1975).

With regard to Freud's view of a child's change in his intense initial preoccupation with each progressive stage of childhood development, Klein felt this perspective as being too restricting. Instead, she found there was a continual, fluid mutual interaction between these stages rather than a fixed tendency towards crystallised progression through them, as identified by Freud (Mitchell, 1986).

In addition, Klein discovered specific mechanisms and clusters of attitudes which operated collectively and acted upon the child's primary interest with these stages. Whereas Freud

conceptualised “stages”, Klein described “positions”, namely the paranoid-schizoid- and depressive position (Klein, 1935/1975). These positions are representative of approximately the first and second trimesters of life, respectively (Bacal & Newman, 1990; Grosskurth, 1986; Schwartz, 1999; Segal, 1992; St Clair, 1986) and are discussed in greater detail during the course of this chapter.

Unlike Freud who felt that individuals develop beyond these “stages” of development, Klein suggested that individuals do not mature beyond these positions but incessantly harbour tensions between paranoid-schizoid-and depressive mechanisms which are relentlessly in play in a back and forth motion throughout life (Klein, 1935/1975).

### 3.3.6.3. On the neuroses and psychoses.

In the 1880’s in particular, Freud became intensely interested in the psychological nature of physiological symptoms (Likierman, 2001; Mitchell, 1986). The representation of the neuroses was puzzling and it was Freud’s goal to clarify these representations as far as possible with scientific propriety (Schwartz, 1999).

The first pattern of discrimination separated the neuroses into two circumstances namely the “real” neuroses (anxiety attacks, hypochondria and most likely the war neuroses) and the psychoneuroses (Mitchell, 1986). The former were regarded as psychological conditions provoked by genuine circumstances such as extensive violence or continual frustration. For the duration of his life, Freud remained interested in this differentiation but he did not expand on the pattern (Mitchell, 1986; Segal, 1992).

Klein on the other hand engineered a significant shift in interest from the neuroses as forwarded by Freud to the psychoses (Bacal & Newman, 1990; Mitchell, 1986; Petot, 1990; Schwartz, 1999). With her rediscovery of ego psychology, Klein carried with her the insights and techniques of Freudian psychoanalysis and in doing so posited that psychoses or narcissistic neuroses are infirmities of the ego (Segal, 1992). Whereas Klein focused on the linear relationship between normal ego development and psychosis, Freud suggested

that the neuroses must be regressed from or closed off to the ego in order to produce the psychoses (S. Freud, 1953; Mitchell, 1986).

#### 3.3.6.4. On the death drive.

Klein had earlier concurred with Freud's sexual explanations regarding human functioning but moved beyond his view to a growing reference to the death drive as a source of mental development (Klein, 1933/1975). Her conceptualisation of the death drive is different to a Freudian view in that from the earliest beginnings she was concerned with the ego and developed this concept to the level where it could be recognised as "the self" (Klein, 1946/1997).

According to Klein, the ego functions in conjunction with both the death and the life drive, warding off obliteration, and moving towards integration, expressing envy and experiencing gratitude (Klein, 1952b/1997; Likerman, 2001; Mitchell, 1986).

Alternatively, Freud's writings were concerned with the manifestations of the death drive which he suggested are associated with the ego's struggle for self-preservation and were usually interwoven with themes of sexuality (S. Freud, 1953; Segal, 1992).

#### 3.3.6.5. On the unconscious, phantasy and primal repression.

Klein suggested that the biological and emotive condition of the human being is unconscious. It parallels the life and death drives and their emotive components and from it emerge the pre-consciousness and consciousness (Klein, 1927a/1975). Furthermore, Kleinian theory states that the concept of "unconscious" is descriptive and may be compared to a "treasure chest" full of contents in contrast to Freud's conceptualisation of a dynamic mental system of thought (S. Freud, 1953; Klein, 1927a/1975; Mitchell, 1986).

A further distinction is noted in primary (unconscious) and secondary (the conscious and the preconscious) mental processes. Klein does not definitively differentiate between the

conscious, unconscious and preconscious in her theory as her conclusions are based on clinical observations of children at play (Klein, 1929a/1975; Schwartz, 1999). On the other hand, Freud's heightened discrimination between primary processes and secondary processes are integral to his theoretical stance (S. Freud, 1953).

Further arguments centred around Klein's concept of phantasy (unconscious) which was considered to reflect Freud's idea of primal repression but this is not the case (Mitchell, 1986). Primal repression according to Freud occurs "prehistorically" in the development of an individual and is a defence which constructs a past (S. Freud, 1953). A symptom is that past revisited. Klein's theory on the other hand, focuses on defences which have no historical origin and where inhibitions of the ego which bear no chronological value, challenge Freud's vested interest in symptoms (Greenberg & Mitchell, 1983).

When considering the defence mechanism of repression, Freud suggested that a child's emotional state coloured his perception of his father or mother and alluded to the fact that this may add to the super-ego prohibiting specific "naughty" thoughts (S. Freud, 1953). However, in later observations he stressed the role of verbally threatening adult behaviour in coercing children into repressing "bad" thoughts for fear of drastic retaliation from their parents, for example, fears of castration if caught in the act of masturbation (S. Freud, 1953; Likierman, 2001; Segal, 1992).

Once again, Klein challenged Freud's ideas and suggested that although parental behaviour was significant, she was persuaded that repression of a child's sexual thoughts or feelings probably originated as much from his personal sense of guilt or anxiety as from any definite threats from parental figures (Klein, 1932/1975b; Segal, 1992). She extended this concept and discovered that a fear that "thinking something can make it happen" escalated the child's anxieties regarding sexual fantasies and increased his impulse to conceal them (Segal, 1992, p. 29).

One way in which such a debilitating fear was managed was to attribute it to a parental figure. Therefore rather than thinking, "I mustn't think those thoughts" the child was certain that his mother or father was saying: "Do not think those thoughts" (Segal, 1992, p. 29).

### 3.3.6.6. On the development of sexuality.

With regard to the development of sexuality, Klein conceded that Freud's view of the primary relationship between mother and child laid the foundation for future sexual and marital interactions. However, unlike Freud she believed that the child had a premature awareness of the presence of the penis and the vagina. She suggested therefore that children have an instinctive sense of the genitals as they do of a breast and a nipple (Klein, 1927b/1975; Segal, 1992).

In addition, during the course of developing sexuality, Klein was of the opinion that the infant, child and adult in their innermost being search and long for a person who is unlike themselves and has something additional to offer, not merely a repetition of a prior relationship with themselves (Segal, 1992).

### 3.3.6.7. On the development of the Oedipus complex.

In describing the development of the Oedipus complex Klein strongly differed from Freud with regard to its onset in human development (Klein, 1928/1975). She regarded these aspects of personality structure to manifest much earlier than a child's four to five year old stage, as described by Freudian models (S. Freud, 1905). Here, Klein's innovative contribution to object relations theory lies in her work with Freud's "pre-Oedipal" child. She stated that personality factors leading to the Oedipal stage evolve over time. Consequently the Oedipal complex is in essence deeply embedded within the individual from the earliest beginnings (Klein, 1928/1975).

Through her interpretations and play technique Klein found confirmation of the nature of the Oedipal situation in children as young as fifteen months. In particular one such little patient Rita, from this age indicated a clear partiality to either her mother or her father at a time (Klein, 1926/1975). When needing her father's attention, she "...used repeatedly to express a desire to be left alone in the room with her father and to sit on his knee and look at books with him" (Klein, 1926/1975, p. 130). Klein continued to find supporting evidence that the symbolism expressed in her playroom by her little patients suggested that

Oedipal states were being manifested prior still to a child's second year of life (Klein, 1926/1975).

Klein's arguments regarding the earlier onset of the Oedipal situation in human development would be unfounded within a psychoanalytic framework unless she accommodated the pre-genital-, oral- and anal stages. Consequently, Klein retained the terms "id", "ego" and "superego" and recognised Freud's significant contribution of the oral-, anal- and genital stages of childhood development, however, these are not reflected in her work as they are in classical psychoanalytic theory (Grosskurth, 1986; Likierman, 2001; Mitchell, 1986). Instead, Klein proposed that the Oedipus complex concurred with prior pre-genital mental life and subsequently assumed the nature of the dominant oral- and anal stages: Klein suggests : "Intercourse comes to mean to the child a performance in which eating, cooking, exchange of faeces and sadistic acts of every kind....play the principal part" (Klein, 1927b/1975, p. 175).

In contrast to Freud's view of the Oedipal child expressing sexual desires towards one parent at the expense of the other's existence, Klein stated that due to the very young age at which the Oedipal situation begins to occur, the content of the need is not sexual and incestuous (Klein, 1926/1975). Rather, the desire is centred around unattainable oral- and anal gratification which is yearned for from both the mother and father. In particular, nourishment from the mother is craved. Should the infant perceive both parents as withholding his need for nourishment and gratification and giving it to one another instead, early Oedipal aggression will be directed towards them (Klein, 1927b/1975).

The Oedipal aggression towards parents who are bitten, soiled and greedily consumed in phantasy was indicated in Klein's work with Gerald, a four year old amongst others, who in play, initially symbolised biting off his father's penis and then cooking and eating it before cooking his whole body and victoriously devouring it, joined by Gerald's mother (Klein, 1927b/1975).

Whilst Freud's (1909) account of "Little Hans" also four years old described angelic Oedipal phantasies in comparison, Klein's account of Gerald's primitive pre-genital

phantasies proved to be enlightening. These observations of the manifestation of primitive unconscious material underscored Klein's persuasion that early Oedipal aggression is intensely sadistic and acute (Klein, 1927b/1975). In addition, drawing on further clinical experience she suggested that in the human child belonging to a civilized society, "...we find repressed and unconscious, the stages which we still observe in primitive people: cannibalism and murderous tendencies" (Klein, 1927b/1975, p.170).

Furthermore, Klein proposed that pre-genital aggression is not limited to infancy but can permeate the binding morals and principles of adulthood (Klein, 1933/1975). During the course of the evolution of her thinking, therefore, Klein recognized that Oedipal aggression is not solely a function of primitive tribes or seriously disturbed and perverted criminals but may manifest as sadism or cannibalism in disturbed or psychotic adult criminals of civilized societies (1927b/1975).

A case in point is Klein's study of Richard, a socially phobic ten-year-old boy who refused to go to school and shunned everyone except his mother (Klein, 1945/1975). Klein treated him during 1941 in London at the height of Hitler's reign of terror. Later in her final paper, "Narrative of a child analysis" published in 1961, Klein describes Richard as overtly obsessed with the annihilation and destruction Hitler was causing as he shadowed Hitler's progress carefully (Klein, 1945/1975; Likierman, 2001).

In play, his immature unconscious anxiety manifested itself in elaborate military exercises and simulated events of war, reflecting symbolic acts of pre-genital sadism such as mutilation, poisoning and burning (Klein, 1945/1975). Further acts of Oedipal aggression were expressed as a result of Richard's territorial possessiveness of his mother, towards his father and brother. His school friends were also subjected to unqualified aggressiveness by Richard's projection of his archaic states and they were subsequently avoided (Klein, 1945/1975).

In her account of Richard, Klein concluded that individual acts of cruelty could be extrapolated to human behaviour in society at large (Klein, 1945/1975). In addition, she suggested that such acts of brutality at both levels are functions of survival patterns which

carry the mark of pre-genital sadism (Klein, 1945/1975). Whilst quite appropriate in an infant who cannot express such sadistic phantasies by acting out, basic Oedipal aggression in adults carries disastrous costs (Klein, 1945/1975).

#### 3.3.6.8. On fathers.

When moving toward the depressive position, the infant develops the growing awareness of a father-object taking the primary good object (breast) away intermittently, hence depriving the infant of further nurturing and of the exclusive relationship he or she shares with the mother (Klein, 1925/1975). During this time jealousy and rivalry appear as the infant is confronted with managing three-person relationships (Klein, 1925/1975; Segal, 1992).

Freud suggested that a girl wanted to possess her father mainly to satisfy her desire for a penis so that she too could be a man (Segal, 1992). This ideal could result in a disparagement of both men as love objects and of the girl's mother (S. Freud, 1953). Klein on the other hand extended Freud's view. She was convinced that girls sought their fathers as love-objects and not just as property (Klein, 1937/1975).

In addition, in benign conditions, positive and loving phantasies resulting from the breast as an object of affection and desire were the basis for loving phantasies of both parents, not only of the mother (Klein, 1937/1975). Siblings and extended family members could also be included in these loving phantasies provided the external setting facilitated such phantasies (Klein, 1937/1975; Segal, 1992).

#### 3.3.6.9. On babies.

Linking to this aspect of development, Freud proposed that in their innermost being, girls actually wanted babies as replacements for the penis they lacked (S. Freud, 1905). This desire was fuelled mainly as an element of their relationship with their own bodies and with themselves (Segal, 1992). He posited that women who were burdened by the more paranoid-schizoid anxieties wanted a baby to prove their optimal functioning, and in so

doing ensure the world saw them as successful and well-balanced human beings. Having a baby under such circumstances would therefore also be a victory over their own mothers and other people (S. Freud, 1905; Segal, 1992).

Klein on the other hand suggested that girls under benign circumstances had a desire for babies for far more intricate reasons than their underlying desire for a penis. She proposed that should such a longing be apparent under these circumstances, it should be considered pathological and would be detrimental to their relationship with the infant (Segal, 1992). Furthermore, women who wanted a baby under these circumstances, were in essence concealing phantasies of emptiness and hollowness as a result of feelings of rejection, either of their own mothering or because their mothers did not supply and meet their needs. These women therefore wanted a baby to provide the love they had never received from any other person (Klein, 1937/1975; Segal, 1992).

At this stage of the discussion we resume Klein's journey towards an integrated theory of object relations as she continued to develop her ideas on the Oedipus complex and the mother as object. Although quite contrary to Freud's thinking Klein, bravely stood her ground and emphasised to her astonished colleagues that due to its early origins, it is first located in primitive infancy (Klein, 1928/1975).

### **3.4. The primitive Oedipal complex and the mother as object.**

Klein's thinking and emphasis on the significance of the mothers' breast for the infant culminated in her 1936 paper "Weaning". Prior to this time, she conceptualised an infant whose mental life develops as a result of a primary relationship with the mother's entire body. In addition, it is in this relationship, that the origins of the Oedipus complex are contained (Klein, 1928/1975). The infant's relationship with the mother's body however is not as with a human body. Rather, the infant associates the mother with a primitive phantasy experience towards which the primary and strongest desires for nurturance and being are expressed (Klein, 1928/1975).

The mother's breast in particular becomes a resource for fulfilling a certain amount of these life-giving desires. The infant however, also has a further intuitive phantasy of the mother's hidden and unreachable assets indicated by babies, faeces and an integrated penis. Klein (1945/1975) suggests that it is in this intuitive phantasy that the origins of the Oedipal situation are located.

As the infant develops, he experiences a growing awareness that he does not enjoy an exclusive relationship with the mother. Instead the mother's body as container for life-giving resources is occupied by a competitor namely, the father's penis which has the ability to produce additional competitors in the form of other babies. Therefore, the infant's primary reaction towards the mother body is viciously covetous which intensifies with the growing awareness that these competitors can be generated from within the mother's body and in addition, they have access to her life-giving resources. Klein later proposed that the infant at this stage of development in essence suffers from paranoia as a result of the fear of limitation and loss of ongoing life-giving sustenance at the hands of competitors (Klein, 1945/1975).

Although initially evolutionary in her thinking, Klein's vision of infancy was broadening, enabling her to give an increasing psychoanalytic portrayal of her work. As previously mentioned (see 3.2), Ferenczi had a remarkable and formative influence on her work (see 3.2). However, Klein's second psychoanalyst Karl Abraham offered her original insights into the significance of sadism as described in Freud's psychosexual theory (S. Freud, 1953). Consequently, we digress briefly at this stage to Karl Abraham's alternative view of infant sadism and the influence this had on Klein's thinking (Likierman, 2001).

### **3.5. Karl Abraham's alternative view of infant sadism.**

Karl Abraham proposed an alternative view of archaic mental life which had a significant influence on Klein's thinking specifically regarding infant sadism. In particular, his re-conceptualisation of the Freudian oral- and anal stages as being driven by primitive mechanisms of conservation or expulsion in contrast to Freud's conceptualisation of these stages being driven solely by hedonistic drives, maintained her interest (Likierman, 2001; Segal, 1992).

Abraham (1924/1973) had come to the conclusion that a human infant moves through a recurring developmental process which starts with a benevolent oral sucking phase and ends with an anal preserving phase. However, there is also an intermediate phase comprised of two sadistic sub phases which succeed one another rapidly namely, the oral cannibalistic sub phase and the anal sadistic phase of ejecting and annihilating (Abraham, 1924/1973). It was within this phase that Klein located the infant's "phase of maximal sadism" which she repetitively mentions during 1927-1935, lending a psychoanalytic rationale to her previous ideas of Oedipal aggression (Likierman, 2001; Segal, 1978).

Although Klein's thinking focused largely on the sadistic and aggressive nature of the infant, Abraham's conceptualisations facilitated a movement towards Klein's own thinking around increasingly benign tendencies in the infant (Klein, 1937/1975). She suggested that benevolent and malevolent tendencies are not a function of disconnected developmental phases and that to perceive the infant as progressing in such phases of development, from sadism to benevolence would reflect linear thinking (Klein 1937/1975). Rather, Klein suggested that annihilating and tender impulses are interrelated, coexisting in ongoing conflict. It is as a result of this relationship that the mental life of a human being is formed (Monte, 1999; Segal, 1992). Herein lay Abraham's most important effect on Klein's thinking – his general re-conceptualisation of pre-genital mental life which specified its fundamentally relational character (Abraham, 1924/1973; Likierman, 2001).

The object relational nature of Abraham's thinking was not envisaged and was in effect a consequence of his premeditated focus on the relevance of pre-genital phases to specific pathologies (Abraham, 1924/1973). Although he did not pay deliberate attention to this aspect of pre-genital mental life, Abraham's transcriptions of his patients' narratives reflect numerous touching emotional states thereby alluding to a rich dialogue of emotional relationships (Likierman, 2001).

Furthermore, with the introduction of Abraham's comprehensive psychosexual theory, Freud had by then conceptualised the intellectual mechanisms of introjection which he associated with an infant's tendency towards oral incorporation and a tendency towards projection (St Clair, 1986). Yet Freud did not elaborate on his ideas around these two mechanisms or place them within the broader context of primary mental development (Segal, 1992).

In like manner, Abraham did not extend or integrate his findings on the object-directed nature of primitive oral and anal behaviours (Segal, 1978). Consequently, a complete object relations theory still remained elusive. By accepting the legacy of both these and other avenues of thought, Klein was faced with the challenge of incorporating them all into a comprehensive object relations theory (Bacal & Newman, 1990; Likierman, 2001; Scharff, 1992).

### **3.6. Towards an integrated Kleinian theory of Object relations.**

Historically, Klein's avid defence of the primitive Oedipal situation previously described in 3.3.6.7, paved the way towards the consideration of an Oedipal arrangement which did not include a primal scene concerning fully recognised parents. However, she became aware that although much of her clinical experience supported her ideas surrounding the development of pre-genital aggression towards the parents, her arguments lacked a psychoanalytic account of the intrapsychic aspects of this experience (Likierman, 2001; Monte, 1999).

In addition, Klein was unable to clarify which specific mental mechanisms made it possible for the infant to direct aggression towards the parents in a manner that twisted his perception (Likierman, 2001; Segal, 1992). However, she managed to surpass this challenge by drawing on Freud's conceptualisation of the mechanisms of projection and introjection. In this manner, she was able to extend her thinking regarding their influence on the primitive Oedipal experience (Klein, 1929a/1975; 1931/1975). These two mechanisms are discussed in the following paragraphs. A further mechanism which evolved from Klein's formulations on projection and introjection is also discussed, namely anxiety (Klein, 1931/1975).

#### **3.6.1. Projection and Introjection.**

Klein described the psychic mechanisms of projection as a mental process which occurs whereby the infant believes an object has qualities that are in essence his own feelings (Klein, 1931/1975). Directed initially at the mother's breast, the infant if gratified believes the breast is good and this represents what is felt throughout life to be good and benevolent (St Clair, 1986). Alternatively, if deprived the infant turns its frustration and hatred toward the bad breast which then represents everything evil and persecutory (Greenberg & Mitchell, 1983; Klein, 1926/1975).

Introjection on the other hand describes the mental phantasy whereby the infant takes into him or herself (introjects) something that is perceived in the external world (Klein, 1931/1975). In this way, external frustrating objects and sources of anxiety consequently become internal persecutors of the petrified infant (Bacal & Newman, 1990; Greenberg & Klein, 1931/1975; Mitchell, 1983; St Clair, 1986).

Enriching her thinking with these two psychic mechanisms, particularly the mechanism of introjection, clarified the continuous display of symbol formation and characterisation which Klein had seen each time in her child patients' play (Klein, 1929a/1975). For the first time, Klein started to depict mental life as essentially imaginative, rich in "phantastic" beings which occupied the inner landscape of individuals with their relationships and journeys (Bacal & Newman, 1990; Greenberg & Mitchell, 1983; Klein, 1929a/1975; St Clair, 1986).

Formerly indicating connections between destruction and pre-genital aggression, Klein's descriptions started to appeal to connections between the emergent ego and human creativity. She aptly portrayed this aspect of human functioning extensively in a 1929 paper in which she studied the biography of the artist Ruth Kjär (Klein, 1929b/1975).

Klein's understanding of the creative process depicted in her account of Kjär led her to consider a further creative process namely that of reparation, which was to take on significant proportions in the development of her theory (Klein, 1935/1975). Reparation speaks to the mental capability of being able to restore and renew the object that had been attacked in phantasy, thereby continuously rebuilding inner benevolence (Klein, 1935/1975). In ascribing the power of reparation and creativity to mental activity, Klein added an increasingly intricate aspect to her evolving theory. However, her previous focus on sadism and its effect on the child remained. (Klein, 1921/1975).

In addition, Klein's focus on anxiety increased and she extended this concept to propose the somewhat restructured view that symbolic thinking or symbolism is the sole consequence of anxiety, therefore disregarding the presence of other emotional triggers in the development of such thinking (Klein, 1930a/1975). In Kleinian theory, phantasies are a vital part of a child's attempt to understand the world. Consequently, Klein clarifies symbol formation as evolving

from the hunt for objects in the external world which represent those in the inner world (Klein, 1930a/1975; Segal, 1992).

Klein also suggested that an infant's earliest antagonistic projections colour his perception of his parents as well as other animate and inanimate objects, turning them into "objects of anxiety" (Klein, 1930a/1975, p.221). The infant therefore discards terrifying objects and looks for original comforting ones in his external reality. However in his quest to rediscover in the external environment that which has been lost as a result of his destructiveness and aggression, every original object has to symbolize or represent that which has been discarded and lost through fear (Klein, 1931/1975).

### 3.6.2. Anxiety, Sadism and the Super-ego.

Klein's views regarding anxiety evolved from her ideas on projection and introjection (Mitchell, 1986). As a result of her clinical observation of her child patients, she came to the conclusion that being able to withstand some measure of anxiety was a prerequisite for mental growth (Klein, 1934/1975; 1945/1975). Consequently, only severely disturbed children are unable to tolerate anxiety. In this manner the psychologically frail child radically reduces his capability to introject external reality with disastrous costs to his whole mental functioning (Klein, 1934/1975).

Here Klein also drew on her observations and account of Dick, a four year old boy who functioned at an intellectual level of approximately fifteen or eighteen months (Klein, 1930a/1975). His adjustment to reality and emotional relations to his external world were severely impoverished and he was apathetic to the absence or presence of either his mother or his nurse. Furthermore, his overt expression of anxiety was negligible (Klein, 1930a/1975).

In describing her findings Klein suggested: "... there was a complete and apparently constitutional incapacity of the ego to tolerate anxiety. The genital had begun to play its part very early; this caused a premature and exaggerated identification with the object attacked and

had contributed to an equally premature defence against sadism” (Klein, 1930a/1975 p. 223-224). Klein concluded that Dick’s behaviour was quite extraordinary. She thought that his strange display of oblivion to other people was as a result of Dick’s mind fiercely and continuously forcing out his aggression and consequently destroying his object. She also considered the possibility that his defences were schizophrenic (Klein, 1930a/1975).

As Klein’s object relations theory continued to evolve, she also came to re-consider the impact of sadism on the individual as a result of introjective processes which were at play. Her reflections led her to thinking specifically about where the content of the sadistic assaults are harboured (Klein, 1945/1975; Likierman, 2001).

Projections of sadism onto the parents instantly challenge the infant with outer personifications of his hostility (Klein, 1945/1975). The introjection of these personifications lead to imagos of terrifying, assaulted parents. As a result, the anxiety instilled in this psychic exchange encourages the child in his growth towards social morality and is in essence considered to be a pre-condition for this aspect of human functioning. Therefore, according to Klein anxiety may be seen to be a deterrent of sadistic tendencies in human beings (Klein, 1933/1975).

Whilst Klein had come to the conclusion that anxiety results from sadism which is projected, she also believed that some anxiety is foremost in the mind. Consequently she associated initial experiences of anxiety not with a developmentally acquired function but rather with a spontaneous inner registration of a specific occurrence (Klein 1929b/1975).

One of Klein’s supporters, Susan Isaacs, suggested that such behaviours could be referred to as “reflexive” mental behaviours (Likierman, 2001, p.86). This was also indicative of the death instinct which Freud had proposed in 1920 and which Klein came to see as part of the most primary experiences of the human being and psyche (Klein, 1933/1975). In order to survive, the infant needed to be born into the world, aware of death and a sense of his inner annihilating instincts. This primary awareness took the form of a primitive dread of destruction. However immature, anxiety was therefore fundamental to every living state (Klein 1929b/1975).

Connecting this awareness to her prior conviction that the super-ego develops prematurely in the child’s developmental progress, Klein proposed that projections from the child onto the Oedipal

parents as well as being internalised as imagos, also persist in their functioning inside the child's mind as the super-ego (Klein, 1927b/1975). This psychic organisation appears in primitive psychic life as a direct result of the introjection of punitive parental images. As such, the most primitive super-ego activity is intensely sadistic and generates a degree of terror directly proportional to the degree of projected sadism by the infant (Klein, 1927b/1975).

In the mother-infant relationship in particular, the infant projects its own demanding traits on the breast and re-internalises the image of the object as a fusion of itself and the object in such a way that the infant's own greed is transformed into an image of a greedy breast, which becomes the demanding superego and the internalised persecuting object (Grotstein, 1982). By means of splitting, this internalised persecutor can be separated from the self or the "I" (Klein, 1945/1975). Splitting as a psychic mechanism is discussed during the course of this chapter.

In addition, the superego naturally does not accurately represent the parents as objects but is made up of the phantasy images of the parents that the infant introjects, modifies and alters by its own feelings and phantasies (Klein, 1945/1975). The infant therefore determines the harshness of the superego by its own feelings as well as sadistic and cannibalistic impulses. Introjected objects are thus experienced as living internal figures that hurt and persecute. However, should the infant experience an inner world of objects at peace, greater inner harmony and integration occurs and less conflict is felt (Klein, 1945/1975).

The notion that human beings are terrified by their own violent tendencies as a result of the intrapsychic process of introjection, suggests an innate moral preference in the human personality (Klein, 1933/1975). Therefore, the orientation towards morality comes from the inner world of the individual rather than from a socially imposed external reality as well as from a mind which battles its own hostility from the time it is originally expressed and projected (Klein, 1933/1975; Likierman, 2001).

This stage of the development of Klein's theory was important in her growing emphasis on the acutely positive as well as acutely negative introjected images. Cruel, punitive parental imagos internally distorted and introjected, were diminished in favour of "...identifications which approximate more closely to reality" (Klein, 1929a/1975, p. 203).

In summary, the intrapsychic processes of projection and introjection enable the child to interact meaningfully with an external reality however, these processes are also influential in the inner distorted images which colour the child's perception and awareness (Likierman, 2001). The thinking process is consequently fundamentally creative in that it dramatizes, personifies and forms symbols. Reality is in conflict with invincible phantasies and as a result the elements of frustration, anger and the need to bear some measure of anxiety imposes significant challenges on the development of the mind (Klein, 1929b/1975). A beneficial measure of anxiety encourages the mind to an impatient but fruitful pursuit of original and satisfying objects. The infant is therefore not just a defensive attacker, but an eager voyager and pioneer (Bacal & Newman, 1990; Likierman, 2001).

In elaborating and developing her theory, Klein started recognizing that the process of placing the experiencing self in outer reality is a means in which qualitative experience can be drawn from an existence that would alternatively be comprised of a series of worthless actions. Essentially therefore, it is a method of building emotional meaning into human relationships (Likierman, 2001).

The next stage of the journey focuses on Klein's conceptualisation of psychic defence mechanisms, dissociation processes and primitive object love. Our first point of departure is an overview of Klein's conceptualisation of psychic defence mechanisms and dissociation processes (Likierman, 2001; Schwartz, 1999).

### **3.7. Klein's conceptualisation of psychic defence mechanisms, dissociation processes and primitive object love.**

#### **3.7.1. Psychic defence mechanisms and dissociation processes.**

Although Klein meticulously defended her clinical observations, they remained too extreme in their structure and did not appeal to the thinking of her peers. Whilst introducing some elaborations on Freudian theory may have been more acceptable, her departure from Freud in the evolution of her theory was seen to be too radical (Grosskurth, 1986; Schwartz, 1999). In

addition, Klein needed substantial explanations for the new insights she was offering but which she was not always able to provide at that moment. In particular, statements regarding Klein's core theoretical tenet, that of acute anxiety experienced by the infant, provoked further questioning (Segal, 1992; Petot, 1990).

As a result of these "windows of opportunity" in her thinking, Klein was persuaded to reflect on the likelihood of primitive psychic defences. In turn these pointed to the increasingly unsettling notion that some ego capacity may be present at birth (Klein, 1930a/1975). Klein has often been quoted as using the term "ego" and "self" interchangeably but as Mitchell (1986) suggests, it has been noted that "from the very beginning it is the ego that interests Klein", (p.31).

Diligently arguing her case regarding the possibility of an ego at birth, invited many unpopular responses from her colleagues and caused much discomfort within psychoanalytic circles (Klein, 1930a/1975). The ego which Klein was promoting had organisational capacity in that it could bring order out of worldly chaos but in addition, it could recognize danger, "...experience anxiety and perform defence manoeuvres to avoid mental distress", (Likierman, 2001, p. 85). Klein was in essence appealing to her colleagues to discard the widely -accepted notion of developmentally acquired, complex mental processes like experiencing anxiety and organising defences and entertain the alternate, more archaic conditions which she was proposing (Monte, 1999).

As Klein developed her ideas over time, one of her most significant contributions to the field of psychoanalysis would be in the area of psychic defences. A core facet of her thinking was that the foundation for underlying defensive activity associated with anxiety is primordial "fight-flight" responses, described by Freud and related to the death instinct (S. Freud, 1920; Klein, 1935/1975/a).

In describing his conceptualisation of the fight-flight reaction to danger, Freud embarked upon further investigation of the mechanism of repression, as he had previously pointed out that whilst an individual is able to physically run from external dangers, sources which facilitate internal dangers need to be evaded and eradicated (S. Freud, 1905; Mitchell, 1986). The mind is consequently inclined to find various means of evading the inner source of this danger and tries to alter the psychic reception of it (S. Freud, 1905; Segal, 1992).

Alternatively, Klein's clinical observations brought her to the conclusion that "anxiety was warded off by a noticeable exclusion of reality" (Klein, 1929a/1975, p.201). First noted in George, Klein came to realise that his preoccupation with gallant victories enabled him to distance himself from unsettling feelings caused by his extreme anger and paranoid anxieties. In this manner, extreme anxiety and an early, unyielding defensiveness were elicited (Klein, 1929a/1975).

Klein finally had some answers to the hypotheses raised during her clinical observations. She was able to infer that when a child tries to push away and reject either aggressive parts of himself, or the anxiety-generating objects produced by projection, he frequently employs psychic defence mechanisms which are based on a dissociation process (Klein, 1929a/1975). In her work with Gerald, she elucidated the dissociation process even further when she came to the awareness that these types of processes are not only resorted to in order to create divisions in the object but in addition, they serve to create matching divisions in the self (Klein, 1929a/1975).

Furthermore, Klein also observed that defences based on dissociation processes are clearly linked with usual growth patterns (Bacal & Newman, 1990; Monte, 1999). At birth the entire realm of experience is incoherent and psychic immaturity reflects the inability of the infant's mind to assimilate more than a momentarily piece of experience. In this regard Klein suggests:

"The object world of the child in the first two or three months of its life could be described as consisting of hostile and persecuting, or else of gratifying parts and portions of the object world. Before long the child perceives more and more of the whole person of the mother, and this more realistic perception extends to the world beyond the mother" (Klein, 1935/1975, p. 285).

In essence, during the course of the development of her theory, Klein realised that the young mind of the infant was predisposed to fragmentary and dissociation processes because of its gradual assimilation of the world and because of the dissociation defences that produced radical images (Monte, 1999; Petot, 1990). However, as the infant mind matures, fragments of experience and parts of the self are integrated into a meaningful whole (Klein, 1940/1975). In

addition, Klein was aware that dissociation processes support the ego-integration process during the course of development by defending the human being against overpowering anxiety (Likierman, 2001). On the other hand should they be used excessively, these processes could avert a sufficient sense of reality and compromise the development of the individual (Klein, 1926/1975).

Building on her knowledge of the “fight-flight” response mentioned in the preceding paragraphs, Klein could conclude that a primitive, elementary ego functions within the parameters of defensive activity associated with this earliest level and a sense of identity begins to take form. However, the infant’s sense of identity is originally erratic and consequently gives rise to a disjointed, multiple experience of a primordial sense of self (Klein, 1930a/1975).

Due to this line of thinking Klein was progressively led to formulate and present one of her most significant contributions to object relations theory namely, the concept of developmental positions (Bacal & Newman, 1990; Grosskurth, 1986; Likierman, 2001; Monte, 1999; Scharff, 1992; Schwartz, 1990). The paranoid-schizoid position occurs during the first few months of life and the depressive position occurs at approximately eight months of age (Fordham, 1995; Klein, 1935/1975; 1940/1975). In addition, these positions generate a specific type of self at various times, such as the paranoid self, a depressed self or an obsessional self (Klein, 1940/1975). These positions are discussed during the course of this chapter.

Klein also suggested that primitive states are arranged around the various positions which fade and emerge constantly, reflecting a specific corresponding aspect of the self at various moments (Klein, 1940/1975). Given these observations, Klein gained the insight that the mind’s progression towards integration is imperative for development because it generates a whole identity made up of parts of the self which are assembled over a period of time into a more comprehensive and secure identity (Klein, 1940/1975).

The process of developmental integration however, was seen to be a courageous and challenging task facing the infant (Grosskurth, 1986; Schwartz, 1999). As the infant gains deeper insight into reality, the more difficult his existence becomes. It is in reality that pain and loss are

experienced and the infant is obliged to confront these aspects of human functioning (Klein, 1931/1975). Also, benevolent experiences are no longer experienced as coming from a perfectly and untainted good object. Instead such experiences are believed to be a single feature of a diverse benevolent and malevolent reality (Klein, 1926/1975).

As a result of the increasing sense of reality which the infant experiences in his striving towards integration, Klein started formulating ideas regarding the second core concept of her theory namely, the depressive position (Likierman, 2001; Monte, 1999; Segal, 1992). It was also within this context that her reflections began to centre on the development of human love and the role of the primary good object (Grosskurth, 1986; Petot, 1990). A discussion of these aspects follows.

### 3.7.2. Primitive object love.

As previously mentioned, Klein experienced harsh criticism concerning her novel and unconventional ideas, particularly during the time of the 1940 “Controversial Discussions” with Anna Freud and she became compelled to unswervingly stand her ground in order protect her evolving theory (King & Steiner, 1991). She continued to formulate her ideas and during this time courageously proposed: “...we can assume that love towards the mother in some form exists from the beginning of life” (Likierman, 2001, p. 90). This suggestion was naturally considered to be both radical and unconvincing as the psychoanalytic culture which prevailed at the time strictly championed Freudian theory. What Freud largely suggested in his model was that mature (adult) love was defined as a minor event and that genital sexuality was a requirement for object love (S. Freud, 1905).

Klein’s evolving perspective on primitive infantile love however, had started to digress from her earlier adherence to Freud’s and Abraham’s conceptualisation of infantile libido and love as a subsequent component associated with genital sexuality (Petot, 1990; Schwartz, 1999). Drawing once again on the work of both Ferenczi and Abraham, Klein, contrary to the Freudian model came to the growing realisation that infantile love for an object although primitive, existed as a separate entity and was not merely a minor consequence of a more important occurrence in human development (Klein, 1937/1975).

Furthermore, in her initial description of love as: “Feelings of love and gratitude arise directly and spontaneously in the baby in response to the love and care of his mother” (Klein, 1937/1975, p.311), Klein was suggesting that there was an emotional component inherent in primitive libidinal states in conjunction with the experience of physical pleasure. Drawing on Ferenczi’s ideas of the developmental phases of love from an immature “tenderness” to a more mature “passion” (partly sexual love) confirmed infantile love as an independent entity (Balint, 1952). Consequently, Klein had further evidence for her suggestions around the presence of primitive infantile love, independent of genital libido (Klein, 1937/1975).

Klein elaborated on Ferenczi’s theoretical findings that suggested that as in her thinking, the mother’s breast was the first libidinal object. However, the element of passivity that coloured his description of the relationship between mother and a perceived receptive and passive infant, did not fit well with Klein’s thinking thus far (Likierman, 2001). She on the other hand, saw the infant as possessing a mass of powerful projective activities, both probing and protective. In addition, introjection gave rise to symbol formation and the formation of an inner world (Klein, 1944/1991). Furthermore, Klein also turned to Abraham for further support of her ideas. In his theory she found the element of passionate infantile activity as well as the idea of part-object relationships. However, his views on early object love mainly supported the notion of a sensual occurrence during infancy (Abraham, 1924/1973; Klein, 1944/1991; Segal, 1992).

Undeterred, Klein delicately merged both Ferenczi’s and Abraham’s’ perspectives and introduced the idea of active intensity to emotions as well as to physical experience (Likierman, 2001). In this regard, she suggested that early positive affect is also present in psychical life which previously focused solely on either genital experience or sadism (Klein, 1937/1975; 1944/1991) and therefore concluded: “First the whole interest and love focus on the nipple and on the breast; but very soon interest develops in the face and in the hands, which attend to (the infant’s) needs and gratify them. Thus, step by step, the infant comes to perceive and love the mother as a whole person.” (Klein, 1944/1991 p.756).

Faced with the additional challenge to substantiate her ideas, theorists such as Michael and Alice Balint offered supportive evidence for the development of Klein’s line of thinking about early object love in their description of “a passive aim – the desire to be loved” (Balint, 1952, p. 127).

Also motivated by Ferenczi, Balint's theory had previously gained credibility in psychoanalytic circles (Likierman, 2001; Schwartz, 1999).

### 3.7.3. The primary good object.

In 1946, when Klein described the primary good object she conceived of it as being formed by loving feelings which are projected by the infant onto the object (Klein, 1937/1975). Libidinal activity was fanned by love and libido itself concurred with Freud's concept of the life instinct. Consequently, immature libido progressed from the infant's physical oral gratification to becoming the fundamental source of his nurturance and existence. In this regard, primitive love may be seen as indivisible from libido (Klein, 1937/1975).

As Klein's thinking took on further form by 1957 she suggested that the breast as the earliest object of love reflected the intensity of the life instinct. She states: "I would not assume that the breast is to him merely a physical object. The whole of his instinctual desires and his unconscious phantasies imbue the breast with qualities going far beyond the actual nourishment it affords" (Klein, 1957/1997, p.180). As such for Klein, the breast also provides an endless, perfect source of intellectual nourishment. Furthermore, Klein believed that the libidinal invested breast when introjected formed the centre of the ego (Klein, 1957/1997).

Since Klein's alternative conceptualisation of libido focused on love and the life instinct, it was reasonable for her to propose that the primary good object that symbolizes libidinal passion must be primitively felt by the infant to be perfect (Klein, 1957/1997). The infant in essence projects his whole capacity for loving and pleasure onto the object which is then introjected with the object's genuine goodness to become his extreme core. Klein (1960/1997) later concluded that the good object is imperative to good sense and that "without the good object at least to some extent becoming part of the ego, life cannot continue" (p.265).

Whilst maintaining her view of the developmental view of infantile love, Klein diverted her thinking to include a view on the idealisation of the primary object. She suggested that the positive experiences which the infant has in relation to the primary object is effectually as a result of an idealisation of the object (Klein, 1946/1997).

#### 3.7.4. Idealisation of the primary good object.

Initially Klein (1946/1997), suggested that idealisation is in essence an additional psychic defence mechanism whereby the object's goodness is protectively exaggerated. She proposed: "Idealisation is bound up with the splitting of the object, for the good aspects of the breast are exaggerated as a safeguard against the fear of the persecuting breast" (p.7).

However Klein did not perceive of idealisation as the most primitive or dominant form of infantile love because she believed that the primary good object is in fact ideally experienced. She states with regard to her clinical observations : "...the breast in its good aspect is the prototype of maternal goodness, inexhaustible patience and generosity as well as of creativeness. It is these phantasies and instinctual needs that so enrich the primal object that it remains the foundation of hope, trust and belief in goodness" (Klein, 1957/1997, p. 180). Consequently, the primary good object as the introjected centre of the ego cannot be perceived to be less than ideal if it symbolizes the infant's entire instinctual desires and unconscious phantasies as well as laying the basis for "...hope, trust and belief in goodness" (Klein, 1957/1997, p.180). The idealisation ascribed to the primary good object in this instance however is not that of a defensive exaggeration of the goodness of the object, as the object symbolizes the life instinct and therefore remains the source of mental nourishment to the infant (Klein, 1957/1997).

In addition, Klein observed and acknowledged pathological idealisation of the primary object joined to omnipotent phantasies of the infant which was later developed by her adherents (Segal, 1978). This form of idealisation however, is not found at the primitive stage of object love but should be considered within the context of increased psychic integration (Klein, 1957/1997).

Klein's theory continued to evolve but it was during 1935-1957, that her innovative contribution to object relations theory emerged with her conceptualisation of her two key positions, the paranoid-schizoid- and depressive positions (see 3.6.2). In addition, her concept of primitive envy is also regarded as a significant contribution to object relations theory (1957/1997). Although theoretically the paranoid-schizoid position precedes the depressive position in Kleinian theory as we know it today, Klein's focus was initially firmly on the origin and nature of primitive infantile love for the primary object. She reasoned that if the primary object could

be loved, it could also be experienced as having been lost due to the infant's increasingly integrated sense of reality over time (Klein, 1957/1997). In addition, she concluded that the effect of loss on the infant could in all likelihood give rise to a depressive state (Klein, 1940/1975). This line of thinking, led Klein to her conceptualisation of the depressive position (Likierman, 2001; Monte, 1999; Segal, 1978).

In the next stage of the discussion, we focus on Klein's consideration of the depressive states and the depressive position. Our initial focus turns to the infant's first experience of loss, namely the process of weaning (Klein, 1936/1975). The manifestation and relevance of ambivalence in the depressive position also forms part of the following discussion.

### **3.8. Loss of the primary object, depressive states and ambivalence.**

#### 3.8.1. Loss of the primary object.

In her 1936 paper "Weaning" Klein describes the unmistakable loss of the nurturing, primary object and also describes a similar state to that of mourning which the infant experiences as a result of the weaning process. Although the primary object is the principle cause of this state which is comparable to mourning, the infant up until that stage had already been exposed and experienced many external minor losses such as the mother's regular absences and internally, via sadistic attacks which had continually destroyed her in phantasy (Klein, 1940/1975).

As the infant integrates part-objects of which the nurturing primary object the breast, represents the good and the absent breast represents the bad within the context of a growing awareness of reality, he is naturally exposed to pain, loss and disappointment. One of the significant losses the infant experiences is the loss of the sense of an ideal object which is on hand to supply an endless supply of nurturance and gratification (Klein, 1936/1975). Consequently, this sense of loss of the ideal object in the face of an increasing reality also facilitates a sense of "loss of the loved object". The mother symbolizing a whole object is tainted and incites fury and grief in turn. By identifying a whole mother, rather than the partial mother who provided the loved object, namely, the breast, the depressive position is activated (Klein, 1935/1975).

The depressive position is concerned with the infant perceiving the mother as a whole object possessing both good and bad attributes. Characteristics of this position include concern for the object, tolerance of ambivalence, a desire to make reparation to the object for harm done by the self and the ability to mourn losses (Klein, 1935/1975; 1940/1975). Further detail regarding this position is provided during the course of the discussion which follows on depressive states (3.8.2).

Klein's focus on a particular aspect of her theoretical framework, namely the inner world of an infant's objects was also beginning to receive attention at this stage as she was led to greater insights in her descriptions of the depressive position (Hinshelwood, 1997; Likierman, 2001). Her conceptualisation of the inner object landscape facilitated further growth in her understanding of the infant's profound sense of loss of the loved object and also led to greater insights regarding depressive states (Mitchell, 1986). In this regard, two of Klein's papers, "A contribution to the psychogenesis of manic-depressive states" (1935) and "Mourning and its relation to manic-depressive states" (1940) reflected a significant aspect of Klein's innovative theoretical contribution to the field of object relations (Grosskurth, 1986; Mitchell, 1986; Petot, 1990; Schwartz, 1999).

### 3.8.2. Depressive states during the course of human development.

Klein's unique theoretical contribution did not lie in her description of depressive states as these had been well documented and accepted within the psychoanalytic community (Deutsch, 1935/1965; Fenichel, 1945; S. Freud, 1917; Rado, 1927; Segal, 1978). Her original contribution lay in her ability to integrate psychoanalytic thinking regarding depressive states with her own ideas regarding the implication and importance of such states in human development (Monte, 1999; Schwartz, 1999; Segal, 1978).

Klein proposed that depression is not a rare anomaly in adult mental life but rather an unavoidable part of being human. In addition, it is a state initially experienced by all adults in their infant years and is expressed in the common process of weaning (Klein, 1946/1975). Aspects of the depressive state in adults, such as splitting of the good and bad elements of the object, introjection, ambivalence and other related mechanisms are quite normal if seen in the

context of the initial processes observed during infantile development. Therefore, Klein suggested that depression can be experienced at the most primitive level of human existence although the experience of that loss is not as refined as the experience of loss in adulthood (Klein, 1946/1975).

Once again, as with many of Klein's other assertions, associating adult depressive states with primitive infantile experience was not well received by the psychoanalytic community as Freudian views on mental development were upheld (Petot, 1990; Schwartz, 1999; Segal, 1992). In particular, special emphasis was re-directed to the Oedipal triangle which in Freudian theory reflected a loved and good parent and a hated and bad parent, rather than as Klein suggested, the infant's ability to contain the implication of both rather than just one of his parents (Klein, 1945/1975).

Klein's thinking led her to reiterate that due to the primitive nature of the infant's discerning abilities, he experiences powerful and momentary bouts of goodness which fade under the influence of further experiences (Monte, 1999; Scharff, 1992; Segal, 1978). The ability to successfully preserve a sense of the object's goodness in the midst of other experiences, sometimes quite contrary to goodness, becomes a life-long conflict which all human beings are confronted with on a continual basis. The conflict is expressed in the sorrow felt in the infantile depressive position (Klein, 1935/1975). As part of the psychic processes of this position, Klein described the infant's effective introjection of the good primary object, the breast, as the means of establishing a core for his very delicate and unintegrated ego. This would be seen as the foundation and the prerequisite for healthy development (Klein, 1935/1975).

As in the case of adult depressive patients, Klein (1940/1975) stated that the infant experiences disillusionment in the object but still wants it and loves it. Conflict between these feelings of love and disillusionment increase as the infant becomes caught up a web of ambivalence between the powerful states of love and hate towards the object. She suggested that these periods of ambivalence are important events which the infant conquers during the course of healthy development. His increasing sense of reality and growing mental capacity helps him to see that the mother who is continually sadistically attacked in phantasy, in reality nevertheless comes back to him, unharmed (Klein, 1940/1975). Repeated reassurance eventually enables him to conquer his hostility and an inner sense of goodness can now be retained and provide him with a

lasting source of emotional safety (Klein, 1940/1975). In retaining the inner sense of goodness, Klein suggested that the depressive position although affectively painful, can be negotiated with the help of two intrapsychic processes namely, reparation and a second process associated with mourning (Klein, 1935/1975; 1940/1975).

Reparation is the process whereby the infant is able to restore his mother in phantasy to her former healthy and loved state subsequent to a spell of sadistic attacks and mistrust (Klein 1935/1975). The intrapsychic process associated with mourning helps the infant in phantasy work through a sense of loss associated with his perception of a non-ideal mother (Klein 1940/1975). According to Klein, both of these processes are critical if the infant during the course of healthy development is to successfully conquer the depressive position (Klein, 1935/1975; 1940/1975).

In this regard, one way in which Klein's theory challenged the status quo of the time, was to debate the accepted view that adult depression was activated by narcissistic vulnerability and disillusionments which the adult had to confront and conquer (Monte, 1992; Segal, 1978; St Clair, 1986). In addition, further opportunity for Klein's contribution related to Abraham's perceptions of a fixation point in primitive oral sadism which although critical, still needed further clarification (Likierman, 2001). Klein's further conceptualisation of adult depression suggested that the depressed adult was in effect a person who in infancy had not been able to adequately and successfully conquer the depressive position (Klein, 1935/1975).

The importance of linking adult mental illness to infantile depressive states particularly those recognised by depressive and manic-depressive symptomatology, saw the completion of Klein's first stage of her key theoretical advancement in the field of object relations (Monte, 1999; Schwartz, 1999; Segal, 1992; St Clair, 1986). In this manner, human sorrow and grief in numerous forms could be traced back to primitive infantile life which reinforces the defiant manner in which human beings respond to the initial awareness of life's restrictions and tragedies (Klein, 1935/1975).

At this point we resume our discussion of infantile ambivalence in the depressive position, followed by sorrow, morality and primordial guilt.

### 3.8.3. Infantile ambivalence in the depressive position.

Klein perceived infantile ambivalence as an inexplicable antagonism towards a disappointing but also much needed and loved object. Although being able to identify and relate to the mother as a whole, loved and needed object, the infant is at first increasingly intolerant of his mother's imperfections and limitations (Klein, 1945/1975). Initially, the infant experiences intense forceful fluctuations between hatred and love and intense states of primitive anxiety which are concentrated around his dread of losing the good object. Therefore ambivalence slowly progresses from a primitive state of fragmentation and splitting and remains connected to these primitive states (Klein, 1945/1975).

As infantile aggression is reduced during the course of development, sadism is seen to feature at the start of the depressive position with increased fierceness. The “.....paranoiac mechanism of destroying the objects....persists , but still in a lesser degree and with a certain modification due to the change in the subject's relations to his objects” (Klein, 1935/1975, p.265). Momentary bouts of sadism cause the infant to attack the object and destroy it in phantasy and when loving feelings triumph, the infant recalls his latest attacks and is shattered by a sense of a “loss of the loved object” (Likierman, 2001, p. 106), therefore becoming depressive. In addition, Klein proposed that during this stage an experience of all consuming greed is manifested. She described this concept as “.....felt to be uncontrollable and destructive and to endanger the loved external and internal objects” (Likierman, 2001, p. 122).

Klein therefore suggested that infantile ambivalence is symbolized by fluctuating states where sadism and greed regularly overwhelm the infantile mind, jeopardizing love and therefore eliciting intense, psychotic anxiety. (Klein, 1935/1975). She was also of the opinion that within the infant's earliest framework each aspect of the ambivalent relationship is a whole situation that engulfs him in turn (Klein, 1935/1975). As the infant grows, the influence of aggressive instances become more lasting after the aggression itself has subsided and trickles into the new instances of object love, influencing their character (Klein, 1935/1975). This implies that ambivalence is an emotional experience rather than an act of reasoning. The root of sorrow is therefore drawn from the processes of primitive ambivalence (Klein, 1935/1975; Likierman, 2001).

#### 3.8.4. Sorrow, morality and primordial guilt in the depressive position.

As previously mentioned, Klein regarded psychic integration during the early infantile years as critical to an increasingly organised as opposed to a previously fragmented and infantile ego. Consequently, once the ego is able to function in an organised manner, there is equivalent development in the infant's ability to make sense of external reality. Part-object relationships are synthesized into whole objects and in addition the infant's mother is perceived as a whole, good and bad mother (Klein, 1935/1975). It is important to emphasise at this stage of the discussion however, that Klein did not associate the depressive position with psychic integration. Rather, as proposed by Ferenczi, she was of the opinion that psychic integration was predetermined. Drives and psychic instincts could promote or deter development but were not inherently fundamental to psychic integration (Klein, 1921/1975; Monte, 1999; St Clair, 1986).

Furthermore, Klein's main focus in her conceptualisation of the depressive position was also not the infant's increasing ability to recognise an imperfect reality. She believed that the most critical aspect in describing the depressive position was the intense response that integration elicits in the infant (Klein, 1935/1975). Hostility, ambivalence and depressive states were among these reactions which Klein had previously started portraying and she continued to elaborate on her earlier findings in this regard (Petot, 1990; Schwartz, 1999).

A further reaction which Klein observed in the infant, during the turmoil of ambivalence was the manifestation of primordial guilt, the source of which is the loved object's loss as a result of his destructiveness and hostility (Klein, 1933/1975). The whole yet imperfect mother replaces the primary loved object, the breast, which in infantile phantasy was endlessly nourishing, accessible and quite perfect. The infant attributes his loss of the loved object to his hostile and sadistic oral attacks on the breast. Furthermore, the whole mother is initially not perceived as sufficient replacement for the primary nurturing relationship as she brings with her an increasingly real sense of ambivalent discord and pain (Klein, 1933/1975).

The depressive position continued to evolve in Klein's thinking but although the element of primordial guilt had been included, she felt the need to clarify further aspects relating to the position (Likierman, 2001; Segal, 1978). The first aspect was that of aggression, which Klein

believed contributes to the formation of psychic manic defences which strive to attack, deny and eventually eradicate depressive states as well as the increased sense of awareness that they bring (Klein, 1930a/1975). Therefore, rather than experiencing a sense of failure or desertion by the loved, lost object the infant grows defensively manic and rejecting, changing the depressive state into an invincible phantasy of power and influence over the object (Klein, 1935/1975). These manic defences are seen to alleviate the infant's sorrow and anger when they become excessive and therefore during the course of development they offer the individual a temporary haven from pain. However, should these defences be employed over a long-term period, they can be detrimental to healthy mental development (Klein, 1930b/1975).

Klein (1935/1975) came to the conclusion that during the course of healthy development an extended process exists whereby the primitive psyche explores a path which eventually and successfully leads the infant away from depressive and defensive turmoil. This process entails changes between depressive and manic defensive states until an eventual reduction of sorrow and guilt becomes possible.

In addition, the infant simultaneously starts accepting the imperfect nature of the whole object and is able to relate to it in an increasingly complex, mature and forgiving manner. This is reinforced by processes which restore and save the internal object, preserving it mentally as chiefly benign and having a permanent presence that can be conserved (Klein, 1935/1975).

Klein believed that integration is also a process that is present throughout the changes in psychic conditions of the depressive position and eventually helps love to reduce the power of hate, thereby placing the loved, good object at the centre of the infant's inner world. Consequently, Klein was led to believe that the depressive position, characterised by ambivalence is overcome in infancy but remains a part of development and can be triggered in adulthood, for instance in the event of mourning (Klein, 1940/1975).

Although Klein's conceptualisation of the depressive position was a major contribution to object relations, she was still working within an incomplete theoretical framework of infant development (Grosskurth, 1986; Petot, 1990; Schwartz, 1999). It was only in 1946 that Klein came to the realisation that the depressive position was in effect not the first but the second

largely significant experience of childhood. The first was an even more complicated position, namely, the paranoid-schizoid position. This Klein discovered after re-evaluating her ideas on fragmentation as the forerunner to integration, and considering the depressive position. She concluded that the infant's most primitive functioning represents a paranoid-schizoid position, marked by primitive persecutory anxiety and splitting mechanisms (Klein, 1946/1997).

In texts written on these two positions however, there is a tendency to imply that the infant needs to progressively move from the sadistic and "psychotic" perils of the negative paranoid-schizoid position to the more integrated and mature, positive depressive position (Segal, 1978; Spillius, 1988; Steiner, 1990/1992). This however was not what Klein had envisaged in her thinking on infantile psychic development as attempting to imply progress and development by describing the two positions in a linear fashion, led to critical elements being disregarded (Klein, 1935/1975).

As initially conceptualised by Klein (1935/1975), the depressive position was explained as being increasingly positive as the infant develops but at the same time, it was also a hazardous interface which triggered ambivalence, acute psychic defences and disturbing anxieties as well as introducing a shattering sense of loss into the infant's world. Klein had previously suggested that the infant needs to surmount these aspects of the depressive position, for further development to take place.

However, a progressive view from the paranoid-schizoid to the depressive position regarding Klein's two positions is still upheld in present-day Kleinian theory (Likierman, 2001). Whilst Klein emphasised the first six months of the infant's life as the context in which the depressive position is created, modern-day psychoanalysts considered it to be a central and lasting feature of adult mental functioning. Furthermore, due to the depressive position being redefined as a method of "intersubjective relating" (Likierman, 2001, p. 116), it was also suggested that its occurrence in psychic functioning implied therefore that it did not need to be surmounted (Greenberg & Mitchell, 1983; Steiner, 1990/1992).

One of the alternative views of the depressive position was proposed by Bion in 1963. He felt that the two Kleinian positions are carried through into adult life and are a lifelong characteristic

of mental functioning. There are as such continual changes between a depressive, intersubjective method of functioning and a more primordial ego-centred, paranoid-schizoid method of functioning. He portrayed such changes as PS $\leftrightarrow$ D (paranoid-schizoid – depressive) which has been widely accepted as the underlying principle which constantly directs adult psychical functioning (Likierman, 2001). Forward and backward fluctuations between these two positions occur on all levels of daily mental experience and the significance of these changes between the two positions gave rise to much discussion and analysis of Kleinian clinical technique.

In particular, Joseph (1989) in his consideration of Kleinian clinical technique proposed that the depressive position includes a sense of responsibility in addition to the distinctive features noted in depressive states. By implication, therefore the added emphasis on responsibility in the depressive position reflects a progression towards moral achievement (Segal, 1978).

In drawing these conclusions, the view of a human being's progression from the paranoid-schizoid position to the depressive position is thought to indicate the start of intersubjective awareness in the infant's psychic development (Segal, 1978). This is apparent in the infant's increasing capability to recognize and display consideration and caring for a whole object as egocentricity reduces and is replaced by an object-centred state (Meltzer, 1988). Therefore, the depressive position was seen as the fundamental base for internal moral structures. The idea of moral achievement as a feature of the depressive has been widely accepted by Klein's followers in their description of both infantile and adults states (Meltzer, 1988; Segal, 1978; Steiner, 1990/1992). Further clarification regarding morality in the depressive position is required and is discussed in the following paragraphs.

#### 3.8.5. Morality and tragedy in the depressive position.

Likierman (2001) suggests that Klein's conceptualisation of the depressive position promotes two central but contradictory themes which may be regarded as moral and tragic. The tragic theme focuses on the experience of permanent loss or injury and is brought about by the infant's aggressiveness.

The moral theme on the other hand, focuses on the infant's ability to feel guilty as a result of his assaults on the imperfect and exasperating object and consequently accept personal responsibility for his aggression (Likierman, 2001; Segal, 1978). The infant also develops the ability to make amends for his sadistic attacks during the process of reparation whereby the internal object is saved from annihilation and re-instated to its former loved and nurtured state (Klein, 1937/1975). Moral achievement therefore indicates caring and consideration which the infant displays towards the object. Furthermore these moral processes include the infant's ability to forgive an imperfect object and to entertain its shortcomings. In this manner, the infant develops from being egocentric to object-centred (Klein, 1937/1975).

Klein also emphasised that the caring mother in reality constantly protects the infant from the destruction of catastrophic anxieties. Even though the mother at times is not always accessible to the infant either internally through his infantile sadistic attacks or externally as a result of temporary absences, she is also repeatedly recovered (Klein, 1937/1975). Importantly however, Klein added that although situations which provoke catastrophic anxieties are not permanent, these anxieties are initially overwhelming in nature and are subjectively experienced as a highly compelling reality comprising loss and despair. Consequently, the ordered structure of morality which represents hope, stability and reparation, conceals the catastrophic anxieties of the infant's experience of devastation and loss that leads to despondency and dissociation (Klein, 1930a/1975; 1933/1975; 1934/1975).

Within the Kleinian vision, the two psychical realities of morality and tragedy suggest that in the socialized individual, a constant fundamental base of catastrophe guarantees that the secondary level of morality maintains its good judgement, since morality must constantly presume the probability of permanent damage or loss (Likierman, 2001; Segal 1978).

Klein's position at the time of developing her theory however indicated that it was critical to the healthy development of the individual that the depressive position should be surmounted rather than merely endured. In particular she emphasised the depressive states such as sorrow, depression and feelings of loss which need to be surmounted, and placed less emphasis on the anxieties associated with the paranoid-schizoid position. When considering mental illness

however, Klein emphasised that both depressive and paranoid-schizoid anxieties if excessive could be held accountable for mental illness (Klein, 1935/1975; 1940/1975). Subsequent clinical observations supported these suggestions which are also reflected in her last works before her death in 1960 (Klein, 1946/1997; 1958/1997).

Klein continued her unique theoretical contribution by extending her views on the concept of internal objects. Previously she had described the notion of images as observed in her clinical work however, as she was lead to greater insights in her descriptions of the depressive position, her description of the infant's internal images took on an advanced form (Likierman, 2001; Schwartz, 1999; Spillius, 1988). A discussion of Klein's conceptualisation of internal objects follows. In addition the concept of fear in the depressive position is also included in this discussion with reference to the infant's internal objects.

### **3.9. Internal objects.**

The concept of internal objects was such a core part of Kleinian theory that between 1934 and 1943, it was perceived as practically an essential feature of her theory and therefore played a critical part in Klein's following of loyal supporters (Hinshelwood, 1997). However, Klein was also faced with the confusion and scepticism of the non-Kleinian psychoanalysts which her conceptualisation of and usage of the term "internal object" created. Passionate debate within the British Psychoanalytic Society followed and Klein, although concerned, once again firmly stood her ground (Likierman, 2001). A central difficulty in their acceptance of the term "internal object" focused on the fact that Klein, unlike Freud did not discriminate between a theoretical construct and a subjective description. She described the subject's experience of the introjected object as a real organism within the self and consequently accentuated subjective phantasy (Klein, 1927a/1975; 1934/1975; 1935/1975; 1940/1975).

Furthermore, Klein had not theoretically defined the construct in a paper which could throw light on the exact nature of her assertions. Under pressure to attribute some form of theoretical value to the term, Klein eventually provided a brief definition for an "internal object" but this was never published:

“My reason for preferring this term to the classic definition, that of “an object installed in the ego”, is that the term “inner object” more specific since it exactly expresses what the child’s unconscious and for that matter the adult’s deep layers, feels about it. In these layers it is not felt to be part of the mind in the sense, as we have learned to understand it, of the super-ego being the parents’ voice inside one’s mind. This is the concept we find in the higher strata of the unconscious. In the deeper layers, however, it is felt to be a physical being, or rather, a multitude of beings, which with all their activities, friendly and hostile, lodge inside one’s body, particularly inside the abdomen, a conception to which physiological processes of all kinds, in the past and in the present, have contributed” (Likierman, 2001, p. 109).

Klein (1927a/1975) stressed the infant’s active contribution to the formation of himself and his internal world of object relations. By continuously using both the mechanisms of projection and introjection he confronts the cycles of gratification and frustration in order to control his inner needs as well as to establish object relations (Klein, 1948/1997). In this manner, the infant turns his emotions and energies to the outer world and attributes these virtues to objects, generating his first object relations (St Clair, 1986). The initial objects according to Klein are the split-off aspects of the self which are projected onto an external object and then introjected as internal objects (Grotstein, 1982; Klein, 1948/1997; St Clair, 1986).

Introjection and projection form an intimate bond between internal- and external objects, inner instincts and the environment. Projections of inner feelings colour the infants’ perceptions of the external world and introjection builds up an inner world that partly reflects the external world (Klein, 1948/1997; St Clair, 1986). When trying to defend itself, the infant attempts through the process of phantasy to impose his own inner world on the outer world and then re-internalise that world. In essence then, the infant creates his or her own world (Klein, 1948/1997).

Internal objects are a combination of the self and external objects. The importance of the external object however lies in its ability to modify the projection rather than emphasising its

role as an external object. According to Klein (1946/1997), internal objects are greater reflections of the id than of external objects and the inner world of the infant emphasises the outer world's modification of the infant's emotions instead of emphasising the outer world as external factor (Klein, 1946/1997). Traditionally, psychoanalytic thinking around objects indicates an object representation as being an image of external objects which is modified by instincts. In this instance object representation mirrors the external world rather than the id (Grotstein, 1982, Scharff, 1992; St Clair, 1986).

Kleinian theory therefore emphasises the implication of nature and instincts rather than the modifying role of external objects such as caring parents who control the instinctual demands of infants (Greenberg & Mitchell, 1983; Grosskurth, 1986; Scharff, 1992; St Clair, 1986). This perspective invited further criticism from her peers and the psychoanalytic community as she paid little attention to the significance of parental objects in the environment. Instead, Klein focused on the significance of the internal world of the infant which if unstable, is the result of his instinctual nature rather than the result of external influences (Ogden, 1992).

During the earliest two to three months of life, the infant is only able to interact with part-objects which fill his internal world with persecuting and aggressive fragments as well as gratifying parts and fragments. This world of phantasy and dissociation is produced by the infant's own destructiveness as well as from the death instinct (Spillius, 1988). However, during the course of healthy development, the infant becomes progressively capable of relating to whole objects. Relationships are less distorted by the infant's own rage, love and greed and the mother is perceived as a whole and loving being. He also starts experiencing pleasure in her as a whole object (Bacal & Newman, 1990; Klein, 1935/1975; Ogden, 1992; Segal, 1992; St Clair, 1986). In this manner the infant gains confidence and is able to extend his increasing ability of relating to whole objects in the outer world. Kleinian theory therefore suggests that every other relationship is built on the fundamental primary relationship which the infant has with the mother's breast (Klein, 1959/1997; Segal, 1978).

Lastly, the phantasies which the infant experiences are preserved and remain active throughout life. As with all individuals, these infantile emotions and phantasies have a constant affect on the emotional and relational life of the person and are for instance expressed in the psychotherapeutic transference relationship (Klein, 1959/1997; St Clair, 1986).

Klein also thought that the individual could feel and experience the internal object as if it were a permanent tenant, inhabiting his inner world. The significant role that the internal object plays in the individual's life needs to be recognized as this lays the foundation for increased understanding of the depressive position. Consequently when faced by loss of the internal object in the depressive position the effect on this inner world is shattering and disastrous (Likierman, 2001).

### **3.10. Surmounting fear in the depressive position.**

Klein (1946/1975) was convinced that once the infant had firmly introjected the good object within his inner world, he eventually matures beyond his unpredictable emotional swings of unbridled aggression and subsequent anguish. Primitive ambivalence, anxieties and an intense dread of inner annihilation lessens in the growing knowledge of the object's lasting goodness as well as in the goodness of other external objects. In addition, the hope that the infant has for his ability to protect and conserve his "good" objects and his ego, intensifies. The infant is also exposed to the experience of being concerned about the object's safety (Klein, 1935/1975). This concern illustrates the infant's developmental progress in being able to preserve the impact of devastating attacks and therefore predict them rather than being immobilised and overwhelmed by them when they occur. The infant simultaneously develops an increasing ability to recognize internal threats to the object and an acceptance that the psyche might not be able to protect the object when these threats are rife (Klein, 1935/1975).

The recognition of fear although at first an archaic, overpowering occurrence also points to the onset of moral concern. When the infant's aggression is still unaltered, the good and desired object is constantly experienced as being exposed to threats. Consequently, the anxiety generated by this experience, is felt to be persecutory (Klein, 1935/1975).

Within the primitive depressive mind, Klein clearly describes continual fear which the infant experiences on behalf of the good object. Disillusionment and hostility laced with ambivalence towards the object, indicates a incessant flood of aggressive and sadistic attacks on the object resulting in an experience of the whole psyche as being toxic. In this manner the object's continued existence both internally and externally is threatened, therefore phantasies of driving

out or internalising the object do not address the problem (Klein, 1935/1975; Likierman, 2001). According to Klein, these primordial fears of approaching disaster are also conquered during the course of development. The most important of these being the ability to acquire psychic control over the belief in goodness.

Klein considered the process of “overcoming” as ongoing and continuing throughout early childhood. In this regard she states: “It takes the child years to overcome his persecutory and depressive anxieties. They are again and again activated and overcome in the course of the infantile neurosis” (1952b, p.260).

### **3.11. Klein’s concept of phantasy.**

“We seen then that the child’s earliest reality is wholly phantastic. As the ego develops, a true relation to reality is gradually established out of this unreal reality” (Klein, 1930a/1975, p. 221).

Klein first introduced her concept of unconscious phantasy to the British Psychoanalytic Society in 1943, once she had formulated much of her theoretical foundation. However, in the light of the mounting professional tensions evoked by the Controversial Discussions, Klein initially deferred the writing and presentation of an article entitled “The nature and the function of phantasy”, to one of her avid supporters Susan Isaacs (Isaacs, 1943/1991; Likierman, 2001). Although well received, the British Society, considered the validity of Klein’s concept of phantasy for four months whilst conceding that it was not possible within a psychoanalytic framework to either reject or accept her theoretical findings (Likierman, 2001; Segal, 1992; Steiner, 1990/1992). In response Klein emphasised the developing nature of psychoanalysis as a science and requested and was afforded their patience whilst she continued to explore the concept of phantasy (Segal, 1992; Steiner, 1990/1992).

As indicated by Isaacs (1943/1991), Klein developed the concept of phantasy by associating it with the infant’s hallucinatory wish-fulfilment. She suggested that phantasies serve as the imaginative representations of bodily instincts and urges as well as the infant’s active responses to intense drives and emotions. In a manner of speaking, phantasies therefore, are a form of

dream life. Klein's idea of phantasy needed to be distinguished from the accepted train of psychoanalytic thought around conscious daydreaming and Isaacs (1943/1991) suggested that its unconscious nature could be illuminated by the spelling of "ph" rather than "f".

In addition, Freud had initially suggested that dreaming in infantile mental life was an inherent form of hallucinatory thinking. The newborn infant practically from the beginning of life, makes connections between enjoyable experiences and the gratifying object. The gratifying object is retained as a visual and sensory memory and is automatically looked for by the sensory organs when the infant has an aching need. Therefore, because the primitive mind is not restricted by a sense of reality, the infant can in essence experience his enthusiasm so acutely and clearly as to summons the longed for gratification in the form of an hallucination. Hallucinations help the infant to mentally retain the over-riding pleasure principle during the earliest months of infancy although they additionally determine his idiosyncratic, initial sense of reasoning (S. Freud, 1901; Likierman, 2001).

Furthermore, Isaacs suggested that phantasy is "the primary content of all mental processes" and consequently the unrefined material of the psyche which is "latent in impulse affect and sensation" (1943/1991, p.272). In this regard, Klein (1952a/1997) proposed that as early as primitive infancy, the infant has the ability to discriminate quality in his interaction with his mother by using his emotional and sensory systems. Quality according to Klein, could only be interpreted within by means of some structure of representation no matter how undeveloped. Consequently phantasy is a process which shapes an inner reality in a precise fashion (1952b/1997).

Klein proposed that the infant can not differentiate at the primitive stage between its phantasy life and reality. Consequently these phantasies and inner objects appear extremely vibrant and genuine. The dependent infant therefore experiences psychological occurrences as physical (Segal, 1992). In addition, while Klein recognised the impact of a frustrating or gratifying environment on object relations and growth, there factors are mainly seen to be "...modifiers of unconscious phantasy, which is the central determinant" (Bacall & Newman, 1990, p. 58). She had stated that the specific situation which comprises a phantasy each time relates to an object relationship, and is portrayed in the way in which an object is either treated or in the way the

object treats the infant (Klein, 1936/1975). This assertion once again reiterates Klein's observation that the fundamental nature of a human being's mental functioning is relational in nature and meaning occurs within the context of interaction between a subject and an object (Likierman, 2001).

In her work with her son Erich at the ages of four and five years, Klein found that he saw her and other people through "phantasies". These phantasies were modified by his own emotions and existing beliefs and knowledge. When Erich was angry, he perceived Klein to be a threatening witch who wanted to poison him. On the other hand, when he was happy and acted affectionately towards her, he perceived her as a princess he wished to marry (Segal, 1992). Consequently, Klein concluded that every perception of the world is influenced by some variant of unconscious fantasy: building, colouring and contributing meaning to it (Klein, 1952b/1997; Klein, 1959/1997; Segal, 1992).

Furthermore, during the course of her clinical experience and further observations, Klein gained the insight that unconscious phantasy could be viewed as consumed parts of the world or consumed aspects of the mother which are continually taken in by the psyche through interaction with the real mother and immersed into the infant's developing individuality (Klein, 1959/1997).

In summary, the concept of unconscious phantasy elucidated Klein's conceptualisation of projection and introjection as well as her ideas on the inner experience of loss and the process of mourning which this elicits with regard to the loved object (Likierman, 2001).

After re-evaluating the stage of primitive infancy and the mental state that heralds the depressive position, Klein termed this stage the paranoid-schizoid position (Klein, 1946/1997). Inherent to her conceptualisation of this position was the notion that phantasy can occur in primitive infancy, can function in extreme infantile, impulsive ways, mentally express instincts and in addition, can function as an effective connection between instinctual urges and the most primitive defences of the psyche, which Klein (1946/1997) now considered to be particularly schizoid in character.

The next stage of the journey towards Klein's integrated theory of object relations, points to her conceptualisation of the first of the two key developmental positions in her namely the paranoid-schizoid position. A discussion of this concept follows.

### **3.12. The paranoid-schizoid position.**

In Klein's influential paper, "Notes on some schizoid mechanisms" written in 1946, she proposed that a paranoid-schizoid position precedes the depressive position and occurs at the most primitive level of infantile development. Furthermore, she suggested that the paranoid-schizoid position is characterised by infantile mental life which progressively evolves from primitive disorder and which is intertwined with destructive tendencies (Klein, 1946/1997). In reaching this stage of her theoretical formulation, Klein had previously concluded that part-object relationships mature into "a total situation" which infers a relation to a whole object (Likierman, 2001, p.120). However, she also asserted that periods of constancy which the infant reaches are not permanent and continuously under threat from both external and internal sources, including acute instinctual activity starting from birth (Klein, 1946/1997; Segal, 1992).

In addition, Klein's perception of infantile defences suggested the presence of sufficient ego activity to elicit an anxious reaction in the infant. In the event of an overwhelming amount of anxiety, the infant employs archaic defence mechanisms (Klein, 1952a/1997). These defence mechanisms are essentially paranoid as they are easily set off and driven by random aggression. Their objective is to destroy actual pain and anxiety as well as the consciousness which leads to them and their aim is to cut off sections of any painful experience from the self and in addition, eliminate the vindictive part of the loved object (Klein, 1948/1997). Consequently, these defence mechanisms are both paranoid and schizoid (Likierman, 2001; Segal, 1992).

The paranoid-schizoid position is characterized by the splitting of an object into good and bad part objects due to an inability to formulate a whole object having both good and bad qualities. These objects are often contained in the phantasies of the mother's good or bad breast or the father's good or bad penis (Klein, 1946/1997). In addition, the most basic and primitive anxiety of the paranoid-schizoid position is a fear of annihilation from within the personality and that in order to survive, the individual projects this fear into the external object as a defensive measure (Klein, 1946/1997).

From the infant's framework then, the external object is seen to be bad and the object is likely to be attacked. Often however, the idea of the external object, somewhat distorted by projection,

becomes internalised and the infant then feels he is being attacked by an internal persecutor (Klein, 1946/1997). As a result, in early infancy and in the most primitive layers of the adult mind, extreme fluctuations occur between good and bad in an attempt to keep them separate. Splitting, projection, introjection and denial are the main defences of the primitive mode of functioning characteristic of the paranoid-schizoid position (Anderson, 1992; Britton, 1992; Klein, 1946/1997).

Once again Klein's observations and thinking needed theoretical substantiation (Schwartz, 1999). As in her conceptualisation about depressive pathology and infancy, which she refined using the work of Karl Abraham, she once again needed to substantiate her observations and thinking on her conceptualisation of "schizoid". In so doing, Klein needed to draw from a solid theoretical framework as well as from relevant psychiatric experience which was not available to her (Grosskurth, 1986; Segal, 1978). She found that both these limitations could be addressed using the work of two of her colleagues, Fairbairn and Winnicott (Bacal & Newman, 1990; Likierman, 2001; Schwartz, 1999).

At this stage, we pause briefly to turn our attention to Fairbairn's influence on Klein's concept of schizoid mechanisms. After referring to Fairbairn, Winnicott's conceptualisation of "primary unintegration" is presented as well as a discussion on how this aspect of his theory played a critical role in the evolution of Kleinian theory (Fairbairn, 1940/1952; Winnicott, 1945/1992).

### **3.13. Fairbairn's influence on Klein's concept of schizoid mechanisms.**

During the period 1940-1945, Ronald Fairbairn, a Scottish psychoanalyst came to the conclusion based on his psychiatric experience that "the basic position in the psyche is invariably a schizoid position" (Fairbairn, 1940/1952, p.8). Not having thought of schizoid phenomena prior to that time, Klein became aware of the impact of this statement on her own theoretical framework (Schwartz, 1999; Segal, 1978). By that time, Klein had started considering the disintegrative processes in Fairbairn's theory as important to her own thinking but now in particular, she began considering his conceptualisation of an underlying mechanism, the schizoid defence, which designated the main position taken up by the infant at the most primitive level of development (Fairbairn, 1940/1952; Segal, 1978).

Furthermore, Klein had already substantiated her conceptualisation of the paranoid position as mentioned in the preceding paragraphs but in being exposed to Fairbairn's stimulating ideas, Klein reached the awareness that the most primitive phases of infancy were not fully explained by the idea of the paranoid position. However, she remained convinced that albeit restricted in content the paranoid position had a firm theoretical base and she did not relinquish her conclusions on this position. Nevertheless Klein acknowledged that anxiety as a solitary entity could not explain the disintegration and limitations of early infantile mental life. Consequently, Klein retained her concept of a paranoid position but added Fairbairn's inference of a schizoid defence to it (Fairbairn, 1940/1952; Klein, 1946/1997).

With the integration of a part of Fairbairn's theory into her own work, Klein was faced with changes which influenced the whole of her existing theoretical framework. She was eventually able to achieve such integration by formulating a paranoid-schizoid position (Klein, 1946/1997). In her formulation of this position, she also included the work of Donald Winnicott who had simultaneously stated exploring schizoid states (Winnicott, 1945/1992). In discussing Winnicott's contribution Klein (1946/1997), stated: "So far, we know little about the structure of the early ego. Some of the recent suggestions on this point have not convinced me: I have particularly in mind Glover's concept of ego nuclei and Fairbairn's theory of a central ego and two subsidiary egos. More helpful in my view is Winnicott's emphasis on the unintegration of the early ego" (p. 4).

### **3.14. Winnicott's concept of "primary unintegration".**

Klein (1946) had earlier shown support for Winnicott's assertion that the early infantile ego is unintegrated (Winnicott, 1945/1992), preferring his conceptualisation above Glover's who emphasised the presence of several ego nuclei at the start of life (Grosskurth, 1986). In his paper, "Primitive emotional development", Winnicott (1945/1992) suggested that an early developmental process of "integration" occurs which is imperative to infantile mental life and is initially primarily unintegrated. He suggested that characteristics associated with primary unintegration could be indirectly associated with dissociative states in particular adult psychiatric illnesses. However, he took caution in explaining that these dissociative states were not connected to fragmentation in

early mental life. He stressed that they mainly were “the manifestation of a breakdown in adult functioning” (Likiermann, 2001, p. 164). In addition he considered such fragmentation to reveal prior elementary styles of psychical functioning.

According to Winnicott (1945/1992), disintegration is a deficit in an individual’s ability to work through primary unintegration towards positive integrative experiences. He noted that two features of psychotic disintegration are important in relation to primary unintegration. Firstly, the psychotic patient’s ego is unable to adequately and coherently structure the relationship between self and external reality, thereby compromising his ability to comprehend experiences. The second feature relating to deficits in ego functioning refers to the patient’s inability to group and link temporal experience (Phillips, 1990). These patients experience life largely in a disjointed manner and attempt to find their integration in the mind of the analyst (Winnicott, 1945/1992).

The notion of temporal splitting concurs with Klein’s formulation of the infant at first only being able to connect to either gratifying or aggressive parts of external reality. During the course of development the infant comes to realise that external reality as well as his object is a whole phenomenon made up of many various elements that are linked temporally (Klein, 1946/1997). However, Klein’s thinking did not reflect the temporal feature of primitive mental experience at this time. She interpreted Winnicott’s (1945/1992) concept of primary unintegration as the “...early ego largely lacks cohesion”, so that, “a tendency towards integration alternates with a tendency towards disintegration” (Klein, 1946/1997, p.4).

Klein could in particular associate with Winnicott’s conclusion that the infant has a primitive ego which exists before a more mature and organised ego in later development (Klein, 1946/1997). Furthermore, she extended Winnicott’s description of primary unintegrated states which focused mainly on clinical illustrations about fragmented psychotic states, by including the mechanisms of projection and introjection to explain the process (Klein, 1946/1997; 1960/1997).

In addition, during 1946 Klein indicated that the most basic mental structure is an ego which at any time is made up of either states of gratification or persecution when the good object has been introjected and the bad object projected or re-introjected respectively. Klein’s formulation of the

depressive position explains how a primitive state of instability progressively becomes more stable as increasingly permanent personality characteristics are formed by continual introjection and introjective identifications, most favourably with the good object prevailing (Klein, 1946/1997; 1959/1997).

Winnicott's influence on Klein's thinking regarding primary unintegration led her to a further avenue of exploration. In considering the infant's unstable mental state which oscillates between instances of integration and fragmentation, Klein concluded that this is indicative of a dual process. Consequently she suggested that an additional component should be included in the conceptualisation of benevolent primary unintegration namely, regressive primary disintegration (Klein, 1946/1997; 1952a/1997; Likierman, 2001).

Klein substantiated the idea of primary disintegration with Freud's conceptualisation of the death instinct which she had accepted earlier. She stated that primitive disintegrations of the infant's mind are generated by the death instinct. Early in life the infant experiences the death instinct as a disintegrating pressure and this explains the inclination to disintegrate and re-organise itself to a previous state of primary unintegration (S. Freud, 1920).

In addition, Klein proposed that the death instinct generates a primordial and intense persecutory anxiety which manifests as an anxiety of being internally annihilated. Consequently she concurred with Winnicott's (1945/1992) conclusion that secondary disintegration was an essential element in adult psychotic states, but she supplemented this conceptualisation by ascribing the origin of disintegration to psychotic anxieties produced by the death instinct which was experienced internally (Klein, 1946/1997; 1958/1997).

Further influence of Winnicott's theory is seen in Klein's perception of the infant mind as a "self-organizing entity" that displays an instant leaning towards structuring itself around anything that could offer a cohesive core (Likierman, 2001; Phillips, 1990). Klein identified this core as the introjected good object generated by feelings of love and gratitude which once projected onto the nourishing breast is reintrojected to create a cohesive core. It is also within this context that splitting processes manifest themselves in order to protect the good experiences and keep the bad experiences at bay (Klein, 1935/1975; 1946/1997).

In addition, the presence of a cohesive core, reinforced by nourishment and care enables progressive integration in the face of unstable mental states and ego-parts. In this manner, Winnicott's (1945/1992) idea regarding the need for primitive, positive integration experiences is captured by Klein in her conclusion that these benevolent experiences help the infant to feel centred and offer him protection from the beginning of his life (Klein, 1946/1997). Also, this conceptualisation of progressive integration in the face of benevolent experiences clarifies the distinction between adult schizoid states and infantile schizoid mechanisms (Likierman, 2001). The first, symbolizes an extremely damaging process within an individual and the second, a fierce defence of good experiences which ensures the formation of the ego's core (Klein, 1946/1997). Therefore, it would be inaccurate to generally perceive the Kleinian infant as an annihilating, schizoid being. The schizoid processes are a means to an end and only in instances of unwarranted torment and anxiety does the infant become hardened to them (Klein, 1946/1997; Segal, 1978).

In summary, in her attempt to solve the connection between adult psychosis and infantile mental states, Klein incorporated aspects of Fairbairn's and Winnicott's theories as discussed in the preceding paragraphs (Likierman, 2001). She stated that elements which contributed to adult psychotic illness have their origins in the primitive stages of healthy development. In addition, she concluded that these elements are characteristic of a primordial psyche and its processes (Klein, 1952b/1997).

At this stage of Klein's evolution of an integrated object relations framework, we turn our focus to her conceptualisation of the schizoid state.

### **3.15. Klein's perception of the schizoid state.**

Although Klein never penned a definition of the term "schizoid", she described a clinical case with an adult male patient in which she refers to "some schizoid defences" in her paper, "Notes on some schizoid mechanisms"(1946/1997). Here she illustrates how a previously integrated ego ultimately reaches a state of fragmentation as a result of devastating schizoid processes.

In addition, Klein emphasizes the emotional impoverishment of the schizoid individual which manifests in the manner in which he disengages himself from a reactive, affective component. In

this regard, Klein's observation of the schizoid individual includes "...their withdrawn, unemotional attitude, the narcissistic elements in their object relations" and "a kind of detached hostility that pervades the whole relation to the analyst" (Klein, 1946/1997, p. 18). Klein adds: "...considerable parts of the patient's personality and of his emotions are not available" (1946/1997, p.18).

Klein's perception of the schizoid states supports Fairbairn's view of an inherent schizoid process as characteristic of "an attitude of isolation and detachment" (Fairbairn, 1940/1952). Furthermore, Fairbairn suggested that the apparent emotional disengagement of the schizoid patient, essentially "emphasises a process of a de-emotionalisation of the object relationship" (Fairbairn, 1940/1952, p. 14). In addressing the de-emotionalization of object relationships which Klein observed in the analysis of a schizoid patient, she comments on a further form of splitting which differs from the early infantile process of separating the good and bad features of the object (Klein, 1946/1997). However, in the schizoid patient's object relations, Klein additionally observed the manifestation of "narcissistic elements". Her conclusions were based on the formulations of both Freud and Abraham with specific reference to the beginning of schizoid disengagement (Klein, 1946/1997).

The splitting process Klein describes in this instance is that of damaging impulses which are directed at the ego resulting in an unconscious phantasy of partial annihilation of the personality. Due to his aggressive impulses, anxiety is generated within the patient which when overwhelming, results in an assault on his own ego in order to obliterate those parts of himself which experience anxiety. In this manner he also obliterates any capacity for experience and emotion and is left in a state of de-emotionalization and withdrawal (Fairbairn, 1940/1952; Klein, 1946/1997). With this added knowledge of schizoid processes, Klein could suggest that unconscious phantasy is the functional connection between instinct and psychic mechanisms. Phantasy is used to trigger psychic mechanisms as well as enabling the schizoid individual to relate to parts of himself. In this way he promotes and looks for ways in which he can destroy and obliterate parts of his ego structure (Klein, 1946/1997).

Although Klein's description centred around the manifestation of schizoid processes in her adult patient, this was not considered totally appropriate to the activity and healthy development of the

infant psyche (Segal, 1978). As before, Klein's formulation of infantile schizoid mechanisms required additional features which she was able to contribute once she had conceptualised her thinking on "projective identification", splitting processes and unintegrated states. In the following section, these mechanisms will be discussed. Our first point of departure is the mechanism of projective identification, followed by splitting and disintegrated states.

### **3.16. "Projective identification".**

Klein's concept of projective identification made a major contribution to developments in psychoanalytic technique and continued to evolve after her death (Klein, 1946/1997; Spillius, 1988). Bion in his work on beta and alpha elements and the containing function of the mother and the analyst, continued to refer to projective identification as a crucial mechanism in both the primary object relationship and the psychotherapeutic encounter (Bion, 1962, 1967; Steiner, 1990/1992).

Within a Kleinian therapeutic setting, projective identification is considered to be important in working through transference and counter transference (Klein, 1957/1997). Klein's conceptualisation of transference emphasised events within the setting of an analytic relationship rather than Freud's idea of a reconstruction of a past relationship which is projected onto the analyst (Klein, 1952a/1997; 1957/1997). According to Klein, transference within the analytic relationship, exhibited all the psychic mechanisms, anxieties, guilt and phantasies of the patient's behaviour in interacting with the outer world. These forms of behaviour can be projected onto or into the analyst and the setting and worked through in the analysis so that their harshness is alleviated (Heimann, 1950). Furthermore, during this process, detrimental characteristics can become more benign and be tolerated in conjunction with constructive characteristics (Klein, 1952c/1997).

Mainly concerned with unconscious communication of internal objects on a large scale, projective identification is aptly described by Segal (1978) as: "... the result of the projection of parts of the self into an object. It may result in the object being perceived as having acquired the characteristics of the projected part of the self but it can also result in the self becoming

identified with the object of its projection” (p.126). Ogden (1992) notes that what is projected in projective identification are parts of the self felt to be either endangering to the self (aspects of aggression) or parts felt to be endangered (victims of one’s own aggression). The counterpart mechanism, introjective identification, also an unconscious communication of internal objects, occurs “.... when the object is introjected into the ego which then identifies with some or all of its characteristics” (Segal, 1978, p. 126).

Klein regarded the occurrence of projective identification as an amalgamation of splitting-, projection- and identification processes. In this regard, she perceived splitting as a separation of emotions and thoughts which if not curbed by a mental process, would result in total disintegration (Klein, 1946/1997). Observations of Dick, her child patient enabled Klein to refine her concept of projective identification. She realised that this psychic mechanism enables a healthy child to experience splitting processes without total disintegration of the mind whereas in an ill child like Dick, this ability is lacking (Klein, 1957/1997; Segal, 1992).

In conjunction with splitting and projection, identification infers that whatever is detached from consciousness is not permanently obliterated but rather rediscovered in the object. In this way, projective identification divorces the experience of a painful event which is consciously known and simultaneously only partially implied, until greater amounts of the experience can be tolerated (Likierman, 2001; Spillius, 1988).

### **3.17. Splitting and disintegrated states.**

Klein’s established perception of primitive infantile ego activity was of disintegration. The infant protects itself by splitting its ego and the object into good/loved and bad/hated aspects in order to manage anxieties around predisposed states of disintegration. In this manner structure is afforded to cope with the states of disintegration whereby two objects are formed that become the target of the infant’s separate libidinal or aggressive reactions (Klein, 1946/1997).

Furthermore, Klein (1946/1997) proposed the presence of a primitive state that paves the way for additional psychic organisation through vigorous splitting processes. She suggested that both the inactive, unintegrated states of early ego activity and dynamic splitting processes are present in primitive infantile development.

In reaching these conclusions, Klein drew on Fairbairn's theory to formulate her stance on the dynamic pole of the splitting process and she referred to Winnicott's theoretical framework for refining her thoughts regarding the inactive, unintegrated states of early ego activity (Likierman, 2001).

At this stage we turn to one of Klein's most significant contributions to the field of object relations namely primitive envy. In one of her last and most influential papers published in 1957, entitled "Envy and gratitude", Klein (1957/1997) portrays the pathos of an infant who remains a sorrowful human organism and who generates some of the most disastrous barriers to his own effective development as a result of the manifestation of primitive envy (Likierman, 2001; Schwartz, 1999; Spillius, 1988; Steiner, 1990/1992).

### **3.18. Primitive envy and jealousy.**

Klein's conceptualisation of envy which she presented at the 1955 International Psychoanalytic Congress in Geneva was seen to have taken on quantum leaps in reasoning. Consequently this caused both disagreements, major rifts and abandonment by some of her adherents within her own circle. On the other hand, a number of Klein's supporters embraced her innovative thinking (Grosskurth, 1986; Segal, 1978; Jones, 1955). In this paper she stresses the infant's primary object relationship with the good breast and the mother and expands on additional attributes of the good object. However, Klein indicates that by implication the breast is more than just a gratifying and nurturing object. It also holds a distinctive place in mental life throughout the individual's life span as he maintains his dependency on the self-nurturing resourceful core which was introjected in infancy (Klein, 1957/1997).

In her thinking up until this stage, Klein had hypothesised that the infant brutally attacks the primary object due to the start of a premature Oedipus complex as well as due to additional drives to infiltrate, control and own his mother's body. However she re-considered these conclusions and suggested that the infant's peculiar drive to attack the primary nurturing source although primitively Oedipal, originated from particular components of mental life (Klein, 1945/1975). Consequently Klein suggested that one origin of attack could be the infant's basic envy towards

the primary good object. Envy is generally applicable to all human beings at the start of life and therefore places large barriers in the infant's capacity to introject nourishment and goodness from the breast. It disturbs the equilibrium of what should be a gratifying and emotionally rewarding primary relationship with a good object (Klein, 1957/1997). In addition, envy compromises the infant's ability to generate a progressive sense of security in relation to his external environment and is considered to be rooted in the death instinct. For Klein therefore, envy conveys the fundamental nature of human destructiveness (Klein, 1945/1975).

On the other hand, as noted in the evolution of her theory, Klein usually emphasised psychic mechanisms from a dual perspective, namely basic and contradictory. Consequently, she proposed that envy should be viewed in relation to its opposite feature namely gratitude. Envy in this sense consequently decreases the infant's primary gratifying experiences and gratitude increases these experiences (Klein, 1957/1997).

Klein's next challenge lay in explaining these two primitive infantile processes in psychoanalytically correct language. She also had to clarify her conceptualisation that envy was not the only primitive cause of brutal attacks but should be seen as part of many other processes at work (Grosskurth, 1986; Likierman, 2001). Particularly in the light of Klein's conceptualisation of the early Oedipal situation, the notion of primary envy as a source of these attacks could be theoretically viable (Klein, 1945/1975). However primary envy as a unique entity did not explain these attacks adequately (Likierman, 2001).

In the Oedipal situation, the most prominent process which is inferred is jealousy and not merely envy and a distinction between the two concepts is important within a Kleinian theoretical framework. Firstly, Klein proposed that in relationships which involve a couple, jealousy may be elicited by a covetous desire for a loved object who is inaccessible and perceived as belonging to someone else (Klein, 1952a/1997; 1955/1997). Furthermore, Klein suggested that jealousy appears prior to the stage when the infant has the ability to unmistakably identify both of his parental objects, due to his basic psychic capacity for being aware of adversaries who have carried off the breast and the mother (Klein, 1952a/1997).

The concept of jealousy is well known within a psychoanalytic framework due to the Oedipal situation, whereas envy is less well known (Likierman, 2001, Mitchell, 1986; Segal, 1992). In distinguishing between these two processes, Klein states that jealousy is essentially competitive and focuses on obtaining the loved object. Envy on the other hand aims to attack the object itself rather than any perceived adversaries and symbolizes a fierce hatred for the object's goodness. Therefore, jealousy is elicited by an external disturbance, for example the consciousness of an adversary and envy is internally generated, voracious and will each time seek out an object on which to concentrate (Klein, 1957/1997).

Even though Klein differentiated between envy and jealousy she realised the need to clarify a further hostile process in the primary relationship. Consequently she suggested that the additional component in the infant's primitive attacks on the object was greed. Klein emphasised that contrary to envy and jealousy, greed justified the vicious phantasies of "scooping out" the inside of the breast and callously extorts all benevolence from the object. Also regarded as hostile, greed is a manipulative preference which reinforces the human organism's desire to steal and destroy. In addition, Klein (1952a/1997) suggested that although greed was distinct from envy, it could well be motivated by it.

Although Klein (1952a/1997) attributed the annihilation caused by human ferociousness to envy, jealousy and greed, she concentrated mainly on envy and believed this characteristic to embody human destructiveness. She stated that both jealousy and greed are aggressive in nature and ultimately lead to possessiveness. By implication, therefore, they rest on the psychic ability to entertain the idea of a good object. Envy on the other hand, is solely annihilating and is symbolized by destructive drives and death-instinct tendencies (Klein, 1957/1997).

During the time of conceptualising envy, gratitude, jealousy and greed, Klein diverted her thinking from psychic mechanisms and focused on specific affective indications that mould mental life (Grosskurth, 1986; Monte, 1999; Segal, 1992). She emphasised the manner in which the affective life of the infant reinforces personality in the healthy adult and the significance of such primitive affectivity in mental growth (Klein, 1957/1997). This diversion in Klein's thinking however, did

not detract from her adherence to Freud's drive model. Rather, Klein emphasised the infant's libidinal enjoyment of the nourishing breast but highlighted the importance of emotions as well in a pleasurable feeding experience. Similarly, she indicated that gratitude also increases the infant's pleasure because he feels he has progressed as a result of benevolent exchanges. Gratitude therefore frustrates the manifestation of envy (Klein, 1957/1997).

An important point which is often overlooked is that Klein spoke of two forms of primary envy (Likierman, 2001). As mentioned in the preceding paragraphs, the first form of envy is destructive in nature and seeks an object towards which it can direct its aggression in order to rob that object of its goodness and therefore bring about deprivation (Klein, 1957/1997). The second form of envy to which Klein alludes is elicited by the unavailable breast and by the anguish of deprivation. In describing this form of envy Klein justifies the aggressive nature of envy. The infant experiences an escalation in his greed and persecutory anxiety if he is unsatisfactorily fed, resulting in resentment towards the breast. Consequently, the infant perceives the breast to be withholding and bad (Klein, 1936/1975; 1957/1997; Segal, 1992).

In offering this alternative view, Klein introduces the significance of the external world in shaping infantile aggression which can also be envious in nature. An important consequence of this line of Klein's thinking is that she could connect paranoid processes and envy (Segal, 1992). She gained the insight that the developmental stage of the infant was important in determining whether he would make paranoid interpretations portraying deficiency as premeditated malice meted out by others. If deprivation were experienced in primitive infancy, the likelihood of persecutory paranoid interpretations would increase (Klein, 1957/1975). In addition, Klein came to these conclusions from her clinical experience with adult patients who manifested a recurring paranoid resentment towards others as they matured. In this manner, she was able to connect this form of resentment to indefinite periods of deprivation which these patients suffered during childhood (Klein, 1957/1975). Due to its relevance to deprivation, the concept of envy receives further attention in the following paragraphs.

### **3.19. Deprivation and envy.**

In her conceptualisation of envy and deprivation Klein was faced with major complications. Other than having to consider the source of the envy, she also observed that in the unconscious archaic

levels of the mind, damaging phantasies accompany envy which give rise to a primitive feeling of having powerfully attacked and destroyed the object (Klein, 1957/1997). However, to acknowledge this would result in guilt and self-criticism and therefore these feelings have to be avoided by means of defences. In addition, defences against envy are directed at decreasing the worth of the object resulting in the subject being deprived (Likierman, 2001). Klein suggested that defences against envy ranged from including “devaluation of the self and object”, “confusion” and greed to increasing hatred. These defences however do not indicate psychic mechanisms which change the structure of the mind or the working of the ego. Rather, they are more emotional and cognitive strategies which are used to elude an experience of envy (Klein, 1957/1997).

Of all the descriptions of defences against envy, Klein’s suggestion of the devaluation of the object is the most informative (Likierman, 2001; Segal, 1978). An individual who is questioning and condescending in manner for example, is more than likely envious as opposed to simply displaying an overly confident personality. Here Klein’s thoughts emphasised the significance of conceit and disdain as characteristic reactions to envy. She suggested that these characteristics may in essence indicate a hidden lack of self-confidence rather than an overly confident personality manifested in object relationships (Klein, 1957/1997).

In gaining further insight into the defences against envy, Klein was able to acknowledge the significance of gratitude and the drawback of a deficiency in gratitude. A person who is enviously is not able to identify the benevolence that is received from others and is deprived of enjoyment and personal enhancement. A derisive depreciation of the object is therefore reinforced by profound envy, an inability to take pleasure in what is being offered, a covert desire to annihilate the object and a subsequent sense of deprivation (Klein, 1957/1997; Likierman, 2001). These insights into her evolving theory substantiated Klein’s conceptualisation regarding primary envy as being accountable for a defensive depreciation of the object which results in self-deprivation. Only then does the second form of envy elicited by deficiency appear (Klein, 1957/1997).

Klein’s intention in her description of envy and gratitude was to concentrate on inner barriers to growth and on internally derived damaging forces. She wanted to emphasise that a person’s specific communication of envy is an innate pattern of self-damaging predispositions. As a result,

each person contributes varying degrees of the death instinct to the world (Klein, 1957/1997). In addition, Klein wanted to illuminate these individual variations and focus on the unfathomable fact that some persons seem to be more adept at managing suffering and deprivation. In this regard, she noted that under stress, it is to be expected that all individuals will experience some non-belief and distrust in good objects. However, "...it is the intensity and the duration of such states of doubts, despondency and persecution that determine whether the ego is capable of reintegrating itself and of reinstating its good object securely" (Likierman, 2001, p. 187).

In Klein's formulation of envy and gratitude however, she considers a further source of inherent aggression in human beings, other than envy which may be summonsed. She refers to these varying degrees of maliciousness in human nature as being rooted in an inherently predisposed "fragile ego" (Klein, 1957/1997, p 372). In this instance, Klein describes the infant who for various reasons is born with a "fragile or weak ego" and therefore requires more caring and nurturance. These infants experience disruptions in nurturance more intensely and are more persecuted by everyday problems in their lives. They may mature to be individuals who are easily angered by minute oversights in the external world and who are also easily prone to envy (Klein, 1957/1997). In describing this aspect of her theory, Klein implies that inherent ego-strength or weakness determines the proportion of envy to which a person will surrender. She concludes that "...a constitutionally strong ego does not easily become a prey to envy" (Klein, 1957/1997, p.372).

The notion of an inherent "fragile ego" had already appeared in Klein's paper on the Oedipus complex (Klein, 1945/1975). In the two instances of Richard and Rita whom Klein described in this paper, she attributed inherent weaknesses to both of them. In addition, she illustrated how inherent features in individuals co-operated with unfavourable external circumstances. Therefore, a "fragile ego" is determined by exchanges between internal and external environments and in relation to the differing levels of deficit in such exchanges (Klein, 1945/1975).

With the introduction of Klein's theory on envy in 1957, her conceptualisation of a "fragile ego" was adequate in explaining an inherent measure of individual envy. She substantiated her observations and findings by continuously asserting the need for patients to introject good experiences and in this manner reinforce themselves until they are able to function independently of envy (Klein, 1957/1997).

We have reached the final stage of Klein's journey towards an integrated theory of object relations. From her hospital bed, having experienced loss, disappointment, longing and loneliness, it was therefore appropriate for Klein to reflect on these aspects of an individual's life as her own drew to a close. In her last theoretical contribution to object relations theory, Klein's conceptualisation of loneliness emphasises the human need for others (Klein, 1963/1997; Likierman, 2001).

### **3.20. Longing and loneliness.**

In her last work "*On the sense of loneliness*" published posthumously in 1963, Klein elaborates on her earlier conclusions regarding the infant born with a fragile ego. Furthermore, she extends her illustrations of how an innate fragile ego predisposes the individual to major difficulties in facing life's challenges and tribulations. In this paper Klein focuses less on the instinctually driven, sadistic and envious nature of the human organism and more on basic human weakness and sources of internal, agonizing conflicts in the fight to survive (Klein, 1963/1997; Likierman, 2001; Segal, 1992).

Defined as the "yearning for an unattainable perfect internal state", (Klein, 1963/1997, p.300 ; Likierman, 2001), Klein suggests that loneliness is a human certainty in a psyche which forms associations with object relations from birth and relies on these relationships throughout life. For Klein, existence and being is a journey to alleviate loneliness and much of a human organism's inspiration is derived from the desire for a mind that is explicitly accepted by the individual and others (Klein, 1963/1997).

Klein's reflections on her earlier work regarding ego development and splitting mechanisms emphasised how essential splitting interacts with a drive to integration in the introjective process of the good object into the psyche. In this regard, she also accentuates the importance of the healthy core as a result of the introjection of the good object (Klein, 1946/1997).

In addition, Klein stresses the affective component in the primary object relationship which manifests as part of the enjoyable breast-feeding experience. In this instance, she also highlights the critical psychical intimacy between the unconscious of the mother as the good object and the infant. This initial psychical contact is the basis for the most absolute experience of being

understood and is fundamentally associated with the pre-verbal state (Klein, 1963/1997). The pre-verbal state however, is temporary and cannot be induced in a similar manner again. Consequently, loneliness is a direct result of the loss of the pre-verbal state. Klein also infers that a future yearning for intimacy is never adequately fulfilled, so that "...however gratifying it is...to express thoughts and feelings to a congenial person, there remains an unsatisfied longing for an understanding without words" (Klein, 1963/1997, p.301).

Furthermore, Klein proposed that the pain of loneliness is present at every stage of life. Initially, in the paranoid-schizoid position the object seeking infant battles with his own process of mental integration which he never experiences as having come to an end. Therefore, the individual cannot achieve an experiential state of "complete understanding and acceptance" of his emotions. In this turmoil both parts of the self as well as others feel inadequate in facilitating this self-awareness. As a result, the individual doesn't feel complete, longs for inaccessible parts of the self and experiences inner loneliness (Klein, 1963/1997; Likierman, 2001). Alternatively, in the depressive position, the individual may feel alienated and endangered due to his own amount of hatred resulting from ambivalence and grief. The individual feels worthless and abandoned by a good object which continually evades his tight grip, outwardly through absences and inwardly by means of sadistic tendencies (Klein, 1963/1997).

During the course of her paper, "*On the sense of loneliness*" Klein (1963/1997) introduces compassionate rather than disapproving nuances. She specifically cautions against a condemnatory super-ego attitude towards the "pain and suffering" of the schizophrenic and proposes that an individual's loneliness is aggravated by a "harsh super-ego". In addition she suggests that a critical super-ego discourages healthy development in the child. Although Klein by implication suggests that parents should be more tolerant of children's destructive impulses she does not encourage the parents to be passive (Likierman, 2001). Rather Klein proposes: "...the parents, by accepting the child's destructive impulses and showing that they can protect themselves against his aggressiveness, can diminish his anxiety" (1963/1997, p. 311). She continues to caution against a harsh super-ego in the child because it promotes destructive emotions which are rejected rather than worked through effectively.

As Likierman (2001) notes, Klein's increasingly tolerant stance in this paper converges on to her theoretical conclusions and is paralleled by an additional emphasis on the inherently disposed fragile or weak ego. When referring to the basic disadvantages of having a weak ego previously mentioned in the preceding paragraphs, Klein reiterates the inability of this individual to integrate experiences and process primitive anxieties as opposed to a strong ego which is able to obtain a degree of integration and a sound primitive relation to the primary object. In the latter instance, aggressive impulses are diminished which alleviates the severity of the super-ego (Klein, 1957/1975).

During the course of development, the child's tolerance for imperfections in the object and the external environment is increased, which facilitates a pleasurable relationship with the loved object as well as an appreciation of the mother's presence and love. In the context of such a favourable situation, introjective and projective mechanisms are bound to operate effectively and strengthen feelings of intimacy, understanding, and being understood, which alleviate loneliness (Klein, 1963/1997).

Klein perceived loneliness as being a fact which stretched across an individual's life span. Starting in early infancy, the struggle for integration and retaining the good object continues through to old age and culminates in death. In her reflections on loneliness in old age, Klein who was physically unwell at the time of writing this paper, suggested that the best way to tolerate old age is through "gratitude for past pleasures without too much resentment because they are no longer available (Klein, 1963/1997, p. 311). On the other hand, she comments realistically that old-age pensiveness occasionally symbolizes gratitude for good memories but from time to time uninteresting musings about the past symbolize a defence against admissions of current deficits and aggravations.

Although placing a strong emphasis on loneliness in her final paper, Klein did not reject her initial awareness and observations of human destructiveness. Instead, she implied that human beings are the victims of the worst part of their character. Therefore loneliness is to some extent poignant because a part of it is self-inflicted and because an infant's aggressive processes have created impassable barriers to establishing a secure and good inner object. As a result, loneliness strongly motivates the human organism's striving for social affiliations (Klein, 1963/1997; Likierman, 2001).

Klein's (1963/1997) portrayal of the lonely states is rooted in the lifetime conflict between love and aggressiveness. A further source of conflict however is the gregarious character of the human species which makes it vulnerable to varying degrees of rejection and disillusionment in its unending pursuit of external and accessible loving objects. The individual's aggressiveness is generated when he is unable to accept these disillusionments and not as a result of an egotistical desire to annihilate others in order to remain isolated.

### **3.21. Summary.**

Melanie Klein is regarded by many as one of the most innovative clinicians and theorists of the twentieth century. Originally inspired by Freud, and drawing from her experience as a mother and her own analysis, Klein's theoretical contributions were based on clinical observations made in her work with children, which she later extended to adult mental life (St Clair, 1986).

Although by the 1920's psychoanalysts had gained considerable insights into childhood through their own personal analyses and those of their patients, there were few mothers among them. Klein brought the insights of a mother to psychoanalysis and in this way, eventually laid the foundation for understanding children (Segal, 1992). She regarded information obtained from a child's play as important as an adult patients' free associations and a reliable measure of the symbolic manifestation of the child's unconscious phantasies, object relations and associated anxieties (Bacal & Newman, 1990; Spillius, 1988).

Throughout her professional career, Klein's work challenged existing psychoanalytic theories of the time and caused much controversial debate and rifts amongst the psychoanalytic community. Her play therapy techniques caused many disagreements and her developmental concepts were widely questioned and condemned (Brody, 1982; Jacobson, 1963; Kernberg, 1969; King & Steiner, 1991). However, there were also devoted followers of Klein in the persons of Joan Riviere, Susan Isaacs, Paula Heimann, Wilfred Bion, Herbert Rosenfeld and Hanna Segal whom all contributed to what is currently considered to be "Kleinian theory" (Heimann, 1950; Likierman, 2001; Schwartz, 1990; Segal, 1992).

Building and elaborating on the work of Freud, Klein's perceptiveness about a child's internal object relations is regarded as her most significant accomplishment. Her insights specifically into

primitive infantile mental life placed the beginnings of intrapsychic growth at a more primordial position than Freud had believed (Schwartz, 1999; Spillius, 1988). The ego was present at birth with the primitive Oedipal experience resulting in the structure of the superego.

In addition, Klein's conceptualisation of the paranoid-schizoid - and depressive positions was a further major contribution in understanding infantile mental life within an object relations context. She retained the Freudian emphasis on instinct but suggested that drives are relational rather than objectless as accepted by Freudian adherents. Consequently from the earliest beginnings of infancy, drives are object oriented and occur within an object relations context (Bacal & Newman, 1990; Monte, 1999; Scharff, 1992; Steiner, 1990/1992).

Klein's portrayal of much of the psychical life of a child depicts the voracious, sadistic and envious nature of a human being. However, towards the end of her career, Klein's compassionate exploration of parts of the life struggle in the light of an inherently predisposed healthy or fragile ego and external influences is also reiterated. The struggle therefore extends beyond human destructiveness to include Klein's conceptualisation of the inevitable pain which human beings have to endure in their quest for satisfying and reciprocal object relationships (Klein, 1963/1997; Likierman, 2001; St Clair, 1986).

In the following chapter of this thesis, the research method chosen for this study is described. Specifically, the methodological orientation, research design, data collection and data analysis, is presented. In addition, the question of reliability and validity in qualitative research is also addressed.