

Psychoanalytic Studies of the Personality, by W.R.D. Fairbairn

a. Quotes:

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b. General Notes:

- Introduction, by D. Scharff & E. Birtles (pg. ix)
 - "...Fairbairn held that the family formed the context for each person's growth" (pg. ix)
 - "The total dependence of the newborn takes a gradual maturational path to the mature dependence of the adult personality. **Development is unattainable in isolation, so the individual is necessarily dependent upon relationships with other individuals in the external world.** The beginning for each person of dependence on the parents extends to the dependence we all have on culture, education, political order, law and nature. Fairbairn describes mature dependence as 'a capacity on the part of the differentiated individual for cooperative relationships with differentiated objects' (Psychoanalytic Studies of the Personality, p. 145). This occurs when the individuals are able to accept the integrity of other selves on a par with their own integrity. In this paper, Fairbairn goes on to describe various syndromes as varying personal techniques of handling internal object-relationships during the transition from infantile dependence to adult dependence." (pg. xv)
 - "The beginning of the Oedipal problem, he noted, was based upon the original deprivation of the abandoned baby on the hillside (1954: 116ff), associated with the capacity of the parents to thwart and frustrate the child. The development of sexuality depends not on ideas phantasied narcissistically by the child, but upon the living reality of the dependence relationship as understood by the child to involve sexual relatedness, and exciting and rejecting objects projected into sexual parts of the body. Gender and sexual orientation are dependent upon a blend of identification and object-seeking. Maturity for Fairbairn is no longer a matter of a genitality which sexually infuses the personality, but of a mature individual with a capacity to relate to a whole other person who is understood to have genitals. In consequence, it is the parent's own mature responsiveness to the child's needs which predisposes that child to future mental health and well-being, rather than a relatively isolated aspect of sexual development." (pg. xvi)
 - "As every individual could be a participating member of society as a mature individual, the way in which the society accommodates the psychological needs of the developing individual will affect the society. Thus a society which is either governed by individuals who have themselves not advanced to mature dependence, or one which reproduces deprivation analogous to the conditions of infantile dependence and deprivation, will be a society which fosters the preponderance of immature individuals with stunted potential. Such situations are exactly those which cause frustration and therefore reactively violent aggression in the society. Moreover, societies in which immaturity of individuals predominates will enhance the tendency towards treating others as part-objects or things, as in the case of anti-semitism" (pg. xvi)
 - "[F]or Fairbairn, **[personality] development is always in concert with actual experience, and the drives only achieve meaning within the structure of experience. Inner reality and therefore personality are the outcome of continuous evolution through a dialectic of encounter with external reality.**" (pg. xvii)
- Chapter 1 - Schizoid Factors in the Personality (pg. 3)
 - "...the following may be selected for special mention: (1) Since schizoid conditions constitute the most deep-seated of all psychopathological states, they provide an unrivalled opportunity for the study not only of the foundations of the personality, but also of the most basic mental processes. (2) The therapeutic analysis of the schizoid case provides an opportunity for the study of the widest range of psychopathological processes in a single individual; for in such cases it is usual for the final state to be reached only after all available methods of defending the personality have been exploited. (3) Contrary to common belief, schizoid individuals who have not regressed too far are capable of greater psychological insight than any other class of person, normal or abnormal—a fact due, in part at least, to their being so introverted (i.e. preoccupied with inner reality) and so familiar with their own deeper psychological processes (processes which, although not absent in individuals who would ordinarily be classified as simply 'psychoneurotic', are nevertheless excluded from the consciousness of such individuals by the most obstinate defences and stubborn resistances). (4) Again contrary to common belief, schizoid individuals show themselves capable of transference to a remarkable degree, and present unexpectedly favourable therapeutic possibilities." (pg. 3)
 - "...it becomes possible to recognize as essentially schizoid not only such phenomena as full-fledged depersonalization and derealization, but also relatively minor or transient disturbances of the reality-sense, e.g. feelings of 'artificiality' (whether referred to the self or the environment), experiences such as 'the plate-glass feeling', feelings of unfamiliarity with familiar persons or environmental settings, and feelings of familiarity with the unfamiliar." (pg. 5)
 - "When the connotation of the term 'schizoid' is extended through an enlargement of our conception of schizoid phenomena in the manner indicated, the denotation of the term inevitably undergoes a corresponding extension; and the resulting schizoid group is then seen to become a very comprehensive one. It is found, for example, to include a high percentage of fanatics, agitators, criminals, revolutionaries, and other disruptive elements in every community. Schizoid characteristics, usually in a less pronounced form, are also common among members of the intelligentsia. Thus the disdain of the highbrow for the bourgeoisie and the scorn of the esoteric artist for the philistine may be regarded as minor manifestations of a schizoid nature. It is further to be noted that intellectual pursuits as such, whether literary, artistic, scientific, or otherwise, appear to exercise a special attraction for individuals possessing schizoid characteristics to one degree or another. Where scientific pursuits are concerned, the attraction would appear to depend upon the schizoid individual's attitude of detachment no less than upon his overvaluation of the thought-processes; for these are both characteristics which readily lend themselves to capitalization within the field of science. **The obsessional appeal of science, based as this is upon the presence of a compulsive need for orderly arrangement and meticulous accuracy,** has, of course, long been recognized; but the schizoid appeal is no less definite and demands at least equal recognition." (pg. 6)
 - "Among the various characteristics common to the apparently conglomerate group of individuals who fall under the schizoid category as now envisaged three are of sufficient prominence to deserve special mention. These are **(1) an attitude of omnipotence, (2) an attitude of isolation and detachment, and (3) a preoccupation with inner reality.** It is important, however, to bear in mind that these characteristics are by no means necessarily overt. Thus the attitude of omnipotence may be conscious or unconscious in any degree. It may also be localized within certain spheres of operation. It may be overcompensated and concealed under a superficial attitude of inferiority or humility; and it may be consciously cherished as a precious secret. Similarly the attitude of isolation and detachment may be masked by a façade of sociability or by the adoption of specific roles; and it may be accompanied by considerable emotionality in certain contexts. So far as the preoccupation with inner reality is concerned, this is undoubtedly the most important of all schizoid characteristics; and it is none the less present whether inner reality be substituted for outer reality, identified with outer reality or superimposed upon outer reality." (pg. 6-7)
 - "**The fundamental schizoid phenomenon is the presence of splits in the ego;** and it would take a bold man to claim that his ego was so perfectly integrated as to be incapable of revealing any evidence of splitting at the deepest levels, or that such evidence of splitting of the ego could in no circumstances declare itself at more superficial levels, even under conditions of extreme suffering or hardship or deprivation (e.g. under conditions of grave illness, or of Arctic exploration, or of exposure in an open boat in mid-Pacific, or of relentless persecution, or of prolonged subjection to the

- horrors of modern warfare). The all-important factor here is the mental depth which requires to be plumbed before evidence of splitting of the ego declares itself. In my opinion, at any rate, **some measure of splitting of the ego is invariably present at the deepest mental level** - or (to express the same thing in terms borrowed from Melanie Klein) **the basic position in the psyche is invariably a schizoid position**. This would not hold true, of course, in the case of a theoretically perfect person whose development had been optimum; but then there is really nobody who enjoys such a happy lot. Indeed it is difficult to imagine any person with an ego so unified and stable at its higher levels that in no circumstances whatever would any evidence of basic splitting come to the surface in recognizable form. There are probably few normal people who have never at any time in their lives experienced an unnatural state of calm and detachment in face of some serious crisis, or a transient sense of 'looking on at oneself' in some embarrassing or paralysing situation; and probably most people have had some experience of that strange confusion of past and present, or of phantasy and reality, known as déjà vu. And such phenomena, I venture to suggest, are essentially schizoid phenomena. There is one universal phenomenon, however, which proves quite conclusively that everyone without exception is schizoid at the deeper levels — viz. the dream; for, as Freud's researches have shown, the dreamer himself is commonly represented in the dream by two or more separate figures. Here I may say that the view which I myself have now come to adopt is to the effect that all figures appearing in dreams represent either (1) some part of the dreamer's personality, or (2) an object with whom some part of his personality has a relationship, commonly on a basis of identification, in inner reality. Be that as it may, the fact that the dreamer is characteristically represented in the dream by more than one figure is capable of no other interpretation except that, at the level of the dreaming consciousness, the ego of the dreamer is split. **The dream thus represents a universal schizoid phenomenon**. The universal phenomenon of 'the super-ego' as described by Freud must also be interpreted as implying the presence of a split in the ego; for, in so far as 'the super-ego' is regarded as an ego-structure capable of distinction from 'the ego' as such, its very existence ipso facto provides evidence that a schizoid position has been established." (pg. 8-9)
- "The conception of splitting of the ego, from which the term 'schizoid' derives its significance, can only be regarded as an illuminating conception when it is considered from a psychogenetic standpoint. It is, therefore, necessary to consider very briefly what is involved in the development of the ego. The function of the ego upon which Freud has laid most stress is its adaptive function - the function which it performs in relating primal instinctive activity to conditions prevailing in outer reality, and more particularly social conditions. It must be remembered, however, that the ego also performs integrative functions, among the most important of which are (1) the integration of perceptions of reality, and (2) the integration of behaviour. Another important function of the ego is discrimination between inner and outer reality. Splitting of the ego has the effect of compromising the progressive development of all these functions, although, of course, in varying degrees and varying proportions." (pg. 9)
 - "**The ego of the infant may be described as above all a 'mouth ego'**; and, whilst this fact exercises a profound influence upon the subsequent development of every individual, the influence is particularly marked in the case of those who subsequently display schizoid characteristics. So far as the infant is concerned, the mouth is the chief organ of desire, the chief instrument of activity, the chief medium of satisfaction and frustration, the chief channel of love and hate, and, most important of all, the first means of intimate social contact. The first social relationship established by the individual is that between himself and his mother; and the focus of this relationship is the suckling situation, in which his mother's breast provides the focal point of his libidinal object, and his mouth the focal point of his own libidinal attitude. Accordingly, the nature of the relationship so established exercises a profound influence upon the subsequent relationships of the individual, and upon his subsequent social attitude in general. When circumstances are such as to give rise to a libidinal fixation in **the early oral situation** in question, the libidinal attitude appropriate to the early oral phase persists in an exaggerated form and gives rise to far-reaching effects; and the nature of these effects may perhaps best be considered in the light of the chief features which characterize the early oral attitude itself. These may be summarized as follows: (1) Although the emotional relationship involved is essentially one between the child and his mother as a person, and although it must be recognized that his libidinal object is really his mother as a whole, nevertheless his libidinal interest is essentially focused upon her breast; and the result is that, in proportion as disturbances in the relationship occur, the breast itself tends to assume the role of libidinal object; i.e. the libidinal object tends to assume the form of a bodily organ or partial object (in contrast to that of a person or whole object). (2) The libidinal attitude is essentially one in which the aspect of 'taking' predominates over that of 'giving'. (3) The libidinal attitude is one characterized, not only by taking, but also by incorporating and internalizing. (4) The libidinal situation is one which confers tremendous significance upon the states of fullness and emptiness. Thus, when the child is hungry, he is, and presumably feels, empty; and, when he has been fed to his satisfaction, he is, and presumably feels, full. On the other hand, his mother's breast, and presumably from the child's point of view his mother herself, is normally full before, and empty after suckling—maternal conditions which the child must be capable of appreciating in terms of his own experience of fullness and emptiness. In circumstances of deprivation, emptiness comes to assume quite special significance for the child. Not only does he feel empty himself, but he also interprets the situation in the sense that he has emptied his mother—particularly since deprivation has the effect not only of intensifying his oral need, but also of imparting an aggressive quality to it. Deprivation has the additional effect of enlarging the field of his incorporative need, so that it comes to include not simply the contents of the breast, but also the breast itself, and even his mother as a whole. The anxiety which he experiences over emptying the breast thus gives rise to anxiety over destroying his libidinal object; and the fact that his mother customarily leaves him after suckling must have the effect of contributing to this impression. Consequently his libidinal attitude acquires for him the implication that it involves the disappearance and destruction of his libidinal object—an implication which tends to become confirmed at a later stage when he learns that food which is eaten disappears from the external world, and that he cannot both eat his cake and have it. These various features of the libidinal attitude which characterizes the early oral phase become intensified and perpetuated in proportion as a fixation in this phase occurs; and they all operate as factors in determining schizoid characterology and symptomatology. In what follows consideration will be given to some of the developments to which each of these factors in turn would appear to give rise." (pg. 10-12)
 - "Here it may be remarked that the orientation towards partial objects found in individuals displaying schizoid features is largely a regressive phenomenon determined by unsatisfactory emotional relationships with their parents, and particularly their mothers, at a stage in childhood subsequent to the early oral phase in which this orientation originates. The type of mother who is specially prone to provoke such a regression is the mother who fails to convince her child by spontaneous and genuine expressions of affection that she herself loves him as a person. Both possessive mothers and indifferent mothers fall under this category. Worst of all perhaps is the mother who conveys the impression of both possessiveness and indifference - e.g. the devoted mother who is determined at all costs not to spoil her only son. **Failure on the part of the mother to convince the child that she really loves him as a person renders it difficult for him to sustain an emotional relationship with her on a personal basis; and the result is that, in order to simplify the situation, he tends regressively to restore the relationship to its earlier and simpler form and revive his relationship to his mother's breast as a partial object.**" (pg. 13)
 - "**This type of regressive process may perhaps best be described as *Depersonalization of the Object***; and it is characteristically accompanied by a regression in the quality of the relationship desired. Here again the regressive movement is in the interests of a simplification of relationships; and it takes the form of a substitution of bodily for emotional contacts. It may perhaps be described as *De-emotionalization of the Object-relationship*." (pg. 14)
 - "In conformity with the predominance of taking over giving in the early oral attitude, individuals with a schizoid tendency experience considerable difficulty over giving in the emotional sense. In this connection it is interesting to recall that, if **the oral incorporative tendency is the most fundamental of all tendencies**, those **next in importance for the organism are the excretory activities** (defaecation and urination). The biological aim of the excretory activities is, of course, the elimination of useless and noxious substances from the body; but, although, in conformity with their

- biological aim, the child soon learns to regard them as the classic means of dealing with bad libidinal objects, their earliest psychological significance for him would appear to be that of creative activities. They represent the first creative activities of the individual; and their products are his first creations— the first internal contents that he externalizes, the first things belonging to himself that he gives. In this respect the excretory activities stand in contrast to oral activity, which essentially involves an attitude of taking. This particular contrast between **the two groups of libidinal activity** must not be taken to preclude the coexistence of another contrast between them in an opposite sense; for there is, of course, also a respect in which the oral incorporative attitude towards an object implies valuation of the object, whereas the excretory attitude towards an object implies its devaluation and rejection. What is relevant for the immediate purpose, however, is the fact that, **at a deep mental level, taking is emotionally equivalent to amassing bodily contents, and giving is emotionally equivalent to parting with bodily contents**. It is further relevant that, at a deep mental level, there is an emotional equivalence between mental and bodily contents, with the result that the individual's attitude towards the latter tends to be reflected in his attitude towards the former. In the case of the individual with a schizoid tendency, accordingly, there is an over-valuation of mental contents corresponding to the overvaluation of bodily contents implied in the oral incorporative attitude of early childhood. This over-valuation of mental contents shows itself, for example, in the difficulty experienced by the individual with a schizoid tendency over expressing emotion in a social context. For such an individual, that element of giving which is involved in expressing emotion towards others has the significance of losing contents; and it is for this reason that he so often finds social contacts exhausting. Thus, if he is long in company, he is liable to feel that 'virtue has gone out of him', and that he requires a period of quiet and solitude afterwards in order that the inner storehouse of emotion may have an opportunity to be replenished. Thus one of my patients felt unable to make dates with his prospective fiancée on consecutive days on the grounds that, when he met her too often, he felt his personality to be impoverished. In the case of those with whom the schizoid tendency is marked, defence against emotional loss gives rise to repression of affect and an attitude of detachment which leads others to regard them as remote - and, in more extreme cases, even as inhuman. Such individuals are commonly described as 'shut in personalities'; and, in view of the extent to which they keep their emotional contents shut in, the description is singularly apt. Anxiety over emotional loss sometimes manifests itself in curious ways." (pg. 14-15)
- **"This process of internalization is promoted, if not actually instigated, by the very nature of the oral attitude itself; for the inherent aim of the oral impulse is incorporation.** The incorporation in question is, of course, originally physical incorporation; but we must believe that the emotional mood accompanying incorporative strivings has itself an incorporative colouring. Hence, when a fixation in the early oral phase occurs, an incorporative attitude inevitably becomes woven into the structure of the ego. In the case of individuals with a schizoid component in their personality, accordingly, there is a great tendency for the outer world to derive its meaning too exclusively from the inner world. In actual schizophrenics this tendency may become so strong that the distinction between inner and outer reality is largely obscured. Such extreme cases apart, however, there is a general tendency on the part of individuals with a schizoid component to heap up their values in the inner world. Not only do their objects tend to belong to the inner rather than to the outer world, but they tend to identify themselves very strongly with their internal objects. This fact contributes materially to the difficulty which they experience in giving emotionally. In the case of individuals whose object-relationships are predominantly in the outer world, giving has the effect of creating and enhancing values, and of promoting self-respect; but, in the case of individuals whose object-relationships are predominantly in the inner world, giving has the effect of depreciating values, and of lowering self-respect. When such individuals give, they tend to feel impoverished, because, when they give, they give at the expense of their inner world." (pg. 18)
 - **"Another important manifestation of preoccupation with the inner world is a tendency to intellectualization; and this is a very characteristic schizoid feature.** It constitutes an extremely powerful defensive technique; and it operates as a very formidable resistance in psychoanalytical therapy. Intellectualization implies an over-valuation of the thought processes; and this over-valuation of thought is related to the difficulty which the individual with a schizoid tendency experiences in making emotional contacts with other people. Owing to preoccupation with the inner world and the repression of affect which follows in its train, he has difficulty in expressing his feelings naturally towards others, and in acting naturally and spontaneously in his relations with them. This leads him to make an effort to work out his emotional problems intellectually in the inner world. It would appear that, so far as conscious intention is concerned, his attempts to solve his emotional problems intellectually are meant in the first instance to pave the way for adaptive behaviour in relation to external objects; but, since emotional conflicts springing from deep sources in the unconscious defy solution in this way, he tends increasingly to substitute intellectual solutions of his emotional problems for attempts to achieve a practical solution of them within the emotional sphere in his relationships with others in the outer world. This tendency is, of course, strongly reinforced by the libidinal cathexis of internalized objects. The search for intellectual solutions of what are properly emotional problems thus gives rise to two important developments: (1) The thought processes become highly libidinalized; and the world of thought tends to become the predominant sphere of creative activity and self-expression; and (2) ideas tend to become substituted for feelings, and intellectual values for emotional values. Where actual schizophrenics are concerned, the substitution of ideas for feelings is carried to extreme lengths. When feelings do assert themselves in such cases, they are usually quite out of keeping with ideational content, and quite inappropriate to the occasion; or alternatively, as in catatonic cases, emotional expression assumes the form of sudden and violent outbursts. The adoption of the term 'schizophrenia' was, of course, based in the first instance upon observation of this divorce between thought and feeling, suggestive as it is of a split within the mind. It must now be recognized, however, that the split in question is fundamentally a split in the ego. What manifests itself on the surface as a divorce between thought and feeling must accordingly be construed as the reflection of a split between (1) a more superficial part of the ego representing its higher levels and including the conscious, and (2) a deeper part of the ego representing its lower levels and including those elements which are most highly endowed with libido and are hence the source of affect. From the dynamic psychoanalytical standpoint, such a split can only be explained in terms of repression; and, on this assumption, we can only conclude that it is a case of the deeper and more highly libidinal part of the ego being repressed by the more superficial part of the ego, in which thought processes are more highly developed. In the case of individuals in whom schizoid features are only present to a lesser degree, the divorce between thought and feeling is, of course, less marked. Nevertheless, there is a characteristic tendency not only towards a substitution of intellectual for emotional values, but also towards a high libidinalization of the thought processes. Such individuals are often more inclined to construct intellectual systems of an elaborate kind than to develop emotional relationships with others on a human basis. There is a further tendency on their part to make libidinal objects of the systems which they have created. 'Being in love with love' would appear to be a phenomenon of this nature; and schizoid infatuations often have just such an element in them. Infatuations of this kind may lead to unpleasant enough consequences for the ostensible love-object; but, when we find a really schizoid personality in love with some extreme political philosophy, the consequences become more serious, because the toll of victims may then run into millions. Such a personality, when he is in love with an intellectual system which he interprets rigidly and applies universally, has all the makings of a fanatic—which indeed is what he really is. When, further, such a fanatic has both the inclination and the capacity to take steps to impose his system ruthlessly upon others, the situation may become catastrophic—although at times it may admittedly be potent for good as well as for evil. However, not all those who are in love with an intellectual system have either the desire or the capacity thus to impose their system upon the outer world. Indeed it is far commoner for them to stand aside, in some measure at least, from the life of the everyday world, and to look down from their intellectual retreats upon common humanity with a superior attitude (the attitude adopted, for example, by members of the intelligentsia towards the bourgeoisie). At this point it is appropriate to draw attention to the fact that, where individuals with a schizoid tendency are concerned, a sense of inner superiority is always present in some degree, even when, as is commonly the case, this is largely unconscious. Quite commonly a considerable resistance has to be overcome before its presence is revealed in the course of analytical treatment; and an even more formidable resistance is encountered when efforts are made to analyse the sources from which it springs. When its sources are uncovered, however, this sense of superiority is found to be based upon: (1) a general secret over-valuation of personal contents, mental

as well as physical; and (2) a narcissistic inflation of the ego arising out of secret possession of, and considerable identification with, internalized Libidinal objects (e.g. the maternal breast and the paternal penis). Here it would be difficult to exaggerate the importance of the element of secrecy. It is this that accounts for the secretive and mysterious air so commonly displayed by markedly schizoid individuals; but, even in the case of those in whom the schizoid component plays a relatively minor part, it still remains an important factor in the unconscious situation. The inner necessity for secrecy is, of course, partly determined by guilt over the possession of internalized objects which are in a sense 'stolen'; but it is also in no small measure determined by fear of the loss of internalized objects which appear infinitely precious (even precious as life itself), and the internalization of which is a measure of their importance and the extent of dependence upon them. The secret possession of such internalized objects has the effect of leading the individual to feel that he is 'different' from other people - even if not, as often happens, actually exceptional or unique. When this sense of difference from others is investigated, however, it is found to be closely associated with a sense of being 'the odd man out'; and, with individuals in whom it is present, dreams embodying the theme of being left out are a common occurrence. Such an individual is only too frequently found to have been the boy who, although apparently his mother's boy at home, was anything but a boys' boy at school, and who devoted to personal achievement in study the energy which more ordinary boys devoted to participation in school games. Sometimes, it is true, personal achievement may have been sought within the realm of sport. Even so, however, there is usually evidence to show that there has been difficulty over emotional relationships within the group; and, in any case, it remains true that it is towards attainment within the intellectual sphere that attempts to circumvent such difficulties are more commonly directed. Here we can already detect evidence of the operation of the intellectual defence; and it is remarkable how often the previous history of an actual schizophrenic reveals that he (or she) was regarded as a promising scholar during some part at least of his (or her) school career. If we look still further into the sources of that sense of difference from others which characterizes individuals with a schizoid element in their personality, we find evidence of the following among other features: (1) that in early life they gained the conviction, whether through apparent indifference or through apparent possessiveness on the part of their mother, that their mother did not really love and value them as persons in their own right; (2) that, influenced by a resultant sense of deprivation and inferiority, they remained profoundly fixated upon their mother; (3) that the Libidinal attitude accompanying this fixation was one not only characterized by extreme dependence, but also rendered highly self-preservative and narcissistic by anxiety over a situation which presented itself as involving a threat to the ego; (4) that, through a regression to the attitude of the early oral phase, not only did the libidinal cathexis of an already internalized 'breast-mother' become intensified, but also the process of internalization itself became unduly extended to relationships with other objects; and (5) that there resulted a general over-valuation of the internal at the expense of the external world" (pg. 20-23).

- "Emptying of the object is an implication of the incorporative quality of the early oral attitude; and, when attention was drawn to this feature earlier, some account was given of its psychological consequences for the child. Thus it was pointed out how, in circumstances of deprivation, the anxiety which arises in the child's mind over his own emptiness gives rise to anxiety over emptiness affecting his mother's breast. It was also pointed out how he comes to interpret any apparent or actual emptiness of his mother's breast as due to his own incorporative strivings, and how he thus comes to entertain anxiety over being responsible for the disappearance and destruction, not simply of his mother's breast, but of his mother herself - anxiety considerably increased by the effect of deprivation in imparting an aggressive quality to his libidinal need." (pg. 23-24)
- "It is important to bear in mind the distinction between the situation which arises in the early oral phase and that which arises during the late oral phase, when the biting tendency emerges and takes its place side by side with the sucking tendency. In the late oral phase there occurs a differentiation between oral love, associated with sucking, and oral hate, associated with biting; and the development of ambivalence is a consequence of this. The early oral phase is pre-ambivalent; and this fact is specially important in the light of the further fact that the oral behaviour of the child during this pre-ambivalent phase represents the individual's first way of expressing love. **The child's oral relationship with his mother in the situation of suckling represents his first experience of a love relationship, and is, therefore, the foundation upon which all his future relationships with love objects are based. It also represents his first experience of a social relationship; and it therefore forms the basis of his subsequent attitude to society.** Bearing these considerations in mind, let us return to the situation which arises when the child who is fixated in the early oral phase comes to feel that he is not really loved and valued as a person by his mother, and that she does not really appreciate and accept his love as good. What happens in these circumstances is that the original traumatic situation of the early oral phase becomes emotionally reactivated and reinstated; and the child then feels that the reason for his mother's apparent lack of love towards him is that he has destroyed her affection and made it disappear. At the same time he feels that the reason for her apparent refusal to accept his love is that his own love is destructive and bad. This is, of course, an infinitely more intolerable situation than the comparable situation which arises in the case of a child fixated in the late oral phase. In the latter case the child, being essentially ambivalent, interprets the situation in the sense that it is his hate, and not his love, that has destroyed his mother's affection. It is then in his hate that his badness seems to him to reside; and his love is thus able to remain good in his eyes. This is the position which would appear to underlie the manic-depressive psychosis, and to constitute the depressive position. By contrast the position underlying schizoid developments would appear to be one arising in the pre-ambivalent early oral phase the position in which he individual feels that his love is bad because it appears destructive towards his libidinal objects; and this may be appropriately described as the schizoid position. It represents an essentially tragic situation; and it provides the theme of many of the great tragedies of literature, as well as providing a favourite theme for poetry" (pg. 24-25)
 - "He also keeps his love shut in because he feels that it is too dangerous to release upon his objects. Thus he not only keeps his love in a safe, but also keeps it in a cage. The matter does not end there, however. Since he feels that his own love is bad, he is liable to interpret the love of others in similar terms. Such an interpretation does not necessarily imply projection on his part; but, of course, he is always liable to have recourse to this defensive technique." (pg. 26)
- "When, accordingly, an individual with a schizoid tendency makes a renunciation of social contacts, it is above all because he feels that he must neither love nor be loved. He does not always rest content with a mere passive aloofness, however. On the contrary, he often takes active measures to drive his libidinal objects away from him. For this purpose he has an instrument ready to hand inside himself in the form of his own differentiated aggression. He mobilizes the resources of his hate, and directs his aggression against others—and more particularly against his libidinal objects. Thus he may quarrel with people, be objectionable, be rude. In so doing, he not only substitutes hate for love in his relationships with his objects, but also induces them to hate, instead of loving, him; and he does all this in order to keep his libidinal objects at a distance. Like the Troubadours and perhaps also the dictators), he can only permit himself to love and be loved from afar off. This is the second great tragedy to which individuals with a schizoid tendency are liable. The first is, as we have seen, that he feels his love to be destructive of those he loves. The second arises when he becomes subject to a compulsion to hate and be hated, while all the time he longs deep down to love and to be loved." (pg. 26)
- Chapter 2 - A Revised Psychopathology of the Psychoses and Psychoneuroses (pg. 29)
 - **"The fundamental feature of an overly schizoid state is a splitting of the ego"** (pg. 29)
 - "[M]y own findings leave me in equally little doubt that the paranoid, obsessional, and hysterical states—to which may be added the phobic state - essentially represent, not the products of fixations at specific libidinal phases, but simply a variety of techniques employed to defend the ego against the effects of conflicts of an oral origin. The conviction that this is so is supported by two facts: (a) that the analysis of paranoid, obsessional, hysterical, and phobic symptoms invariably reveals the presence of an underlying oral conflict, and (b) that paranoid, obsessional, hysterical, and phobic symptoms are such common accompaniments and precursors of schizoid and depressive states. By contrast, it is quite impossible to regard as a defence either the schizoid or the depressive state in itself—each a state for which an orally based aetiology has been found. On the contrary, these

- states have all the character of conditions against which the ego requires to be defended." (pg. 30)
- "...classic libido theory would have to be transformed into a theory of development based essentially upon object-relationships. The great limitation of the present libido theory as an explanatory system resides in the fact that it confers the status of libidinal attitudes upon various manifestations which turn out to be merely techniques for regulating the object-relationships of the ego. The libido theory is based, of course, upon the conception of erotogenic zones. It must be recognized, however, that in the first instance erotogenic zones are simply channels through which libido flows, and that a zone only becomes erotogenic when libido flows through it. The ultimate goal of libido is the object; and in its search for the object libido is determined by similar laws to those which determine the flow of electrical energy, i.e. it seeks the path of least resistance. The erotogenic zone should, therefore, be regarded simply as a path of least resistance; and its actual erotogenicity may be likened to the magnetic field established by the flow of an electrical current." (pg. 31)
 - "In infancy, owing to the constitution of the human organism, the path of least resistance to the object happens to lie almost exclusively through the mouth; and the mouth accordingly becomes the dominant libidinal organ. In the mature individual on the other hand (and again owing to the constitution of the human organism) the genital organs provide a path of least resistance to the object - but, in this case, only in parallel with a number of other paths. The real point about the mature individual is not that the libidinal attitude is essentially genital, but that the genital attitude is essentially libidinal. There is thus an inherent difference between the infantile and the mature libidinal attitude arising out of the fact that, whereas in the case of the infant the libidinal attitude must be of necessity predominantly oral, in the case of the emotionally mature adult libido seeks the object through a number of channels, among which the genital channel plays an essential, but by no means exclusive, part. Whilst, therefore, it is correct to describe the libidinal attitude of the infant as characteristically oral, it is not correct to describe the libidinal attitude of the adult as characteristically genital. It should properly be described as 'mature'. This term must, however, be understood to imply that the genital channels are available for a satisfactory libidinal relationship with the object. At the same time, it must be stressed that it is not in virtue of the fact that the genital level has been reached that object-relationships are satisfactory. On the contrary, it is in virtue of the fact that satisfactory object-relationships have been established that true genital sexuality is attained." (pg. 32)
 - "The conception of fundamental erotogenic zones constitutes an unsatisfactory basis for any theory of libidinal development because it is based upon a failure to recognize that **the function of libidinal pleasure is essentially to provide a sign-post to the object.** According to the conception of erotogenic zones the object is regarded as a signpost to libidinal pleasure; and the cart is thus placed before the horse. Such a reversal of the real position must be attributed to the fact that, in the earlier stages of psychoanalytical thought, the paramount importance of the object-relationship had not yet been sufficiently realized. Here again we have an example of the misunderstandings which arise when a technique is mistaken for a primary libidinal manifestation." (pg. 33)
 - "Thumb-sucking thus represents a technique for dealing with an unsatisfactory object-relationship; and the same may be said of masturbation." (pg. 33)
 - "Autoerotism is essentially a technique whereby the individual seeks not only to provide for himself what he cannot obtain from the object, but to provide for himself an object which he cannot obtain. The 'anal phases' and the 'phallic phase' largely represent attitudes based upon this technique. It is a technique which originates in an oral context, and which always retains the impress of its oral origin. It is thus intimately associated with incorporation of the object - which is, after all, only another aspect of the process whereby the individual attempts to deal with frustration in oral relationships. In view of this intimate association it will be seen that at the very outset thumb-sucking, as an autoerotic (and erotic) activity, acquires the significance of a relationship with an internalized object. It is no exaggeration to say that the whole course of libidinal development depends upon the extent to which objects are incorporated and the nature of the techniques which are employed to deal with incorporated objects. These techniques are about to be discussed. Meanwhile, it is sufficient to point out that the significance of the anal and phallic attitudes lies in the fact that they represent the Libidinal aspects of techniques for dealing with objects which have been incorporated. It must always be borne in mind, however, that it is not the libidinal attitude which determines the object-relationship, but the object-relationship which determines the libidinal attitude." (pg. 34)
 - "It is one of the chief conclusions to which I have been led by the study of cases displaying schizoid features that **the development of object-relationships is essentially a process whereby infantile dependence upon the object gradually gives place to mature dependence upon the object.** This process of development is characterized (a) by the gradual abandonment of an original object-relationship based upon primary identification, and (b) by the gradual adoption of an object-relationship based upon differentiation of the object. The gradual change which thus occurs in the nature of the object-relationship is accompanied by a gradual change in libidinal aim, whereby an original oral, sucking, incorporating and predominantly 'taking' aim comes to be replaced by a mature, non-incorporating and predominantly 'giving' aim compatible with developed genital sexuality. The stage of infantile dependence contains within it two recognizable phases - the earlier and later oral phases; and the stage of mature dependence corresponds to Abraham's 'final genital phase'. Between these two stages of infantile and mature dependence is a transition stage characterized by an increasing tendency to abandon the attitude of infantile dependence and an increasing tendency to adopt the attitude of mature dependence. This transition stage corresponds to three of Abraham's phases—the two anal phases and the early genital (phallic) phase." (pg. 34-35)
 - "The transition stage only begins to dawn when the ambivalence of the later oral phase has already commenced to give way to an attitude based upon dichotomy of the object. Dichotomy of the object may be defined as a process whereby the original object, towards which both love and hate have come to be directed, is replaced by two objects - an accepted object, towards which love is directed, and a rejected object, towards which hate is directed. It should be added, however, that, in accordance with the developments which have occurred during the oral phases, both the accepted and the rejected objects tend to be treated largely as internalized objects. In so far as the transition stage is concerned with the abandonment of infantile dependence, it is now seen to be inevitable that rejection of the object will play an all-important part. Consequently, the operation of rejective techniques is a characteristic feature of the stage; and it is upon this feature that Abraham seems to have fastened when he introduced the conception of the anal phases. In its biological nature defaecation is, of course, essentially a rejective process; and in virtue of this fact it naturally lends itself to be exploited psychologically as a symbol of emotional rejection of the object, and readily forms the basis of rejective mental techniques. At the same time it readily lends itself to acquire the psychological significance of an exercise of power over the object. What applies to defaecation also applies to urination; and there is reason to think that the importance of urination as a function of symbolic rejection has been underestimated in the past, especially since, for anatomical reasons, the urinary function provides a link between the excretory and genital functions. In accordance with the point of view here adopted, paranoia and the obsessional neurosis are not to be regarded as expressions of a fixation at the earlier and later anal phases respectively. On the contrary, they are to be regarded as states resulting from the employment of special defensive techniques which derive their pattern from rejective excretory processes. The paranoid and obsessional techniques are not exclusively rejective techniques, however. Both of them combine acceptance of the good object with rejection of the bad object. The essential difference between them will be considered shortly. Meanwhile it may be noted that the paranoid technique represents a higher degree of rejection; for in externalizing the rejected internal object the paranoid individual treats it as unreservedly and actively bad—as a persecutor indeed. For the obsessional individual, on the other hand, excretory acts represent not only rejection of the object, but also parting with contents. In the obsessional technique, accordingly, we find a compromise between the predominantly taking attitude of infantile dependence and the predominantly giving attitude of mature dependence. Such an attitude of compromise is completely alien to the paranoid individual—for whom excretory acts represent nothing but rejection." (pg. 35-36)

- "Each of the various techniques in question may now be interpreted as a specific method of attempting to deal with the characteristic conflict of the transition stage in so far as this conflict has remained unresolved. **The conflict is one between (a) a developmental urge to advance to an attitude of mature dependence upon the object, and (6) a regressive reluctance to abandon the attitude of infantile dependence upon the object.**" (pg. 38)
 - ◆ "What has convinced me of the paramount importance of the object-relationship is the analysis of patients displaying schizoid characteristics; for it is in such individuals that difficulties over relationships with objects present themselves most clearly. During the course of analysis, such an individual provides the most striking evidence of a conflict between an extreme reluctance to abandon infantile dependence and a desperate longing to renounce it; and it is at once fascinating and pathetic to watch the patient, like a timid mouse, alternately creeping out of the shelter of his hole to peep at the world of outer objects and then beating a hasty retreat." (pg. 39)
 - **"Frustration of his desire to be loved as a person and to have his love accepted is the greatest trauma that a child can experience; and it is this trauma above all that creates fixations in the various forms of infantile sexuality to which a child is driven to resort in an attempt to compensate by substitutive satisfactions for the failure of his emotional relationships with his outer objects. Fundamentally these substitutive satisfactions (e.g. masturbation and anal erotism) all represent relationships with internalized objects, to which the individual is compelled to turn in default of a satisfactory relationship with objects in the outer world.** Where relationships with outer objects are unsatisfactory, we also encounter such phenomena as exhibitionism, homosexuality, sadism, and masochism; and these phenomena should be regarded as in no small measure attempts to salvage natural emotional relationships which have broken down. Valuable as it is to understand the nature of these 'relationships by default', such understanding is much less important than a knowledge of the factors which compromise spontaneous relationships. By far the most important of these factors is a situation in childhood which leads the individual to feel that his objects neither love him as a person nor accept his love. It is when such a situation arises that the inherent libidinal drive towards the object leads to the establishment of aberrant relationships and to the various libidinal attitudes which accompany them." (pg. 39-40)
 - "It emerges clearly from the study of individuals **with schizoid tendencies that the most characteristic feature of the state of infantile dependence is primary identification with the object.** Indeed, it would not be going too far to say that, psychologically speaking, identification with the object and infantile dependence are but two aspects of the same phenomenon. On the other hand, mature dependence involves a relationship between two independent individuals, who are completely differentiated from one another as mutual objects. This distinction between the two kinds of dependence is identical with Freud's distinction between the narcissistic and the anaclitic choice of objects. The relationship involved in mature dependence is, of course, only theoretically possible. Nevertheless, it remains true that the more mature a relationship is, the less it is characterized by primary identification; for what such identification essentially represents is failure to differentiate the object. It is when identification persists at the expense of differentiation that a markedly compulsive element enters into the individual's attitude towards his objects. This is well seen in the infatuations of schizoid individuals. It may also be observed in the almost uncontrollable impulse so commonly experienced by schizoid and depressive soldiers in wartime to return to their wives or their homes, when separated from them owing to military necessities. **The abandonment of infantile dependence involves an abandonment of relationships based upon primary identification in favour of relationships with differentiated objects.** In dreams the process of differentiation is frequently reflected in the theme of trying to cross a gulf or chasm, albeit the crossing which is attempted may also occur in a regressive direction. The process itself is commonly attended by considerable anxiety; and this anxiety finds characteristic expression in dreams of falling, as also in such symptoms as acrophobia and agoraphobia. On the other hand, anxiety over failure of the process is reflected in nightmares about being imprisoned or confined underground or immersed in the sea, as well as in the symptom of claustrophobia. The process of differentiation of the object derives particular significance from the fact that infantile dependence is characterized not only by identification, but also by an oral attitude of incorporation. In virtue of this fact the object with which the individual is identified becomes equivalent to an incorporated object, or, to put the matter in a more arresting fashion, the object in which the individual is incorporated is incorporated in the individual" (pg. 41-43)
 - **"The great conflict of the transition stage may now be formulated as a conflict between a progressive urge to surrender the infantile attitude of identification with the object and a regressive urge to maintain that attitude.** During this period, accordingly, **the behaviour of the individual is characterized both by desperate endeavours on his part to separate himself from the object and desperate endeavours to achieve reunion with the object—desperate attempts 'to escape from prison' and desperate attempts 'to return home'.** Although one of these attitudes may come to preponderate, there is in the first instance a constant oscillation between them owing to the anxiety attending each. The anxiety attending separation manifests itself as a fear of isolation; and the anxiety attending identification manifests itself as a fear of being shut in, imprisoned or engulfed (cribbed, cabined, and confined'). These anxieties, it will be noticed, are essentially phobic anxieties. It may accordingly be inferred that it is to the conflict between the progressive urge towards separation from the object and the regressive lure of identification with the object that we must look for the explanation of the phobic state. Owing to the intimate connection existing between primary identification and oral incorporation, and consequently between separation and excretory expulsion, the conflict of the transition period also presents itself as a conflict between an urge to expel and an urge to retain contents. Just as between separation and reunion, so here there tends to be a constant oscillation between expulsion and retention, although either of these attitudes may become dominant. Both attitudes are attended by anxiety - the attitude of expulsion being attended by a fear of being emptied or drained, and the attitude of retention by a fear of bursting (often accompanied or replaced by a fear of some internal disease like cancer). Such anxieties are essentially obsessional anxieties; and it is the conflict between an urge to expel the object as contents and an urge to retain the object as contents that underlies the obsessional state. **The phobic and obsessional techniques are thus seen to represent two differing methods of dealing with the same basic conflict;** and these two differing methods correspond to two differing attitudes towards the object. From the phobic point of view the conflict presents itself as one between flight from and return to the object. From the obsessional point of view, on the other hand, the conflict presents itself as one between expulsion and retention of the object. It thus becomes obvious that the phobic technique corresponds in the main to a passive attitude, whereas the obsessional technique corresponds in the main to an active attitude. The obsessional technique also expresses a much higher degree of overt aggression towards the object; for, whether the object be expelled or retained, it is being subjected to forcible control. For the phobic individual, on the other hand, the choice lies between escaping from the power of the object and submitting to it. In other words, whilst the obsessional technique is predominantly sadistic in nature, the phobic technique is predominantly masochistic. In the hysterical state we can recognize the operation of another technique for attempting to deal with the basic conflict of the transition period. In this case the conflict appears to be formulated as simply one between acceptance and rejection of the object. Acceptance of the object is clearly manifested in the intense love-relationships which are so typical of the hysteric; but the very exaggeration of these emotional relationships in itself raises a suspicion that a rejection is being over-compensated. This suspicion is confirmed by the propensity of the hysteric to dissociative phenomena. That these dissociative phenomena represent a rejection of the genitals need not be stressed; but, as was pointed out earlier, analysis can always unmask an identification of the rejected genitals with the breast as the original libidinal object during the period of infantile dependence. This being so, it is noteworthy that what is characteristically dissociated by the hysteric is an organ or function in himself. This can only have one meaning that the rejected object is an internalized object with which there is a considerable measure of identification. On the other hand, the hysteric's over-valuation of his real objects leaves little room for doubt that in his case the accepted object is an externalized object. The hysterical state is thus seen to be characterized by acceptance of the externalized object and rejection of the internalized object—or,

alternatively, by externalization of the accepted object and internalization of the rejected object. If the paranoid and the hysterical states are now compared, we are confronted with a significant contrast. Whereas the hysteric overvalues objects in the outer world, the paranoid individual regards them as persecutors; and, whereas the hysterical dissociation is a form of self-depreciation, the attitude of the paranoid individual is one of extravagant grandiosity. The paranoid state must, accordingly, be regarded as representing rejection of the externalized object and acceptance of the internalized object—or, alternatively, externalization of the rejected object and internalization of the accepted object." (pg. 43-45)

- "Having interpreted both the hysterical and paranoid techniques in terms of the acceptance and rejection of objects, we can now obtain interesting results by applying a similar interpretation to the phobic and obsessional techniques. The conflict underlying the phobic state may be concisely formulated as one between flight to the object and flight from the object. In the former case, of course, the object is accepted, whereas in the latter case the object is rejected. In both cases, however, the object is treated as external. In the obsessional state, on the other hand, the conflict presents itself as one between the expulsion and the retention of contents. In this case, accordingly, both the accepted and the rejected objects are treated as internal. If in the case of the phobic state both the accepted and the rejected objects are treated as external and in the obsessional state both are treated as internal, the situation as regards the hysterical and paranoid states is that one of these objects is treated as an externalized object and the other as an internalized object. In the hysterical state, it is the accepted object that is externalized, whereas, in the paranoid state, the object which is externalized is the rejected object...The chief features of the stage of transition between infantile and mature dependence may now be briefly summarized. **The transition period is characterized by a process of development whereby object-relationships based upon identification gradually give place to relationships with a differentiated object.** Satisfactory development during this period, therefore, depends upon the success which attends the process of differentiation of the object; and this in turn depends upon the issue of a conflict over separation from the object—a situation which is both desired and feared. The conflict in question may call into operation any or all of **four characteristic techniques the obsessional, the paranoid, the hysterical and the phobic**; and, if object-relationships are unsatisfactory, these techniques are liable to form the basis of characteristic psychopathological developments in later life." (pg. 45-46)
- **"The outstanding feature of infantile dependence is its unconditional character. The infant is completely dependent upon his object not only for his existence and physical well-being, but also for the satisfaction of his psychological needs.** It is true, of course, that mature individuals are likewise dependent upon one another for the satisfaction of their psychological, no less than their physical, needs. Nevertheless, on the psychological side, the dependence of mature individuals is not unconditional. By contrast, the very helplessness of the child is sufficient to render him dependent in an unconditional sense. We also notice that, whereas in the case of the adult the object-relationship has a considerable spread, in the case of the infant it tends to be focused upon a single object. The loss of an object is thus very much more devastating in the case of an infant. If a mature individual loses an object, however important, he still has some objects remaining. His eggs are not all in one basket. Further, he has a choice of objects and can desert one for another. The infant, on the other hand, has no choice. He has no alternative but to accept or to reject his object - an alternative which is liable to present itself to him as a choice between life and death. His psychological dependence is further accentuated by the very nature of his object-relationship; for, as we have seen, this is based essentially upon identification. Dependence is exhibited in its most extreme form in the intra-uterine state; and we may legitimately infer that, on its psychological side, this state is characterized by an absolute degree of identification and absence of differentiation. Identification may thus be regarded as representing the persistence into extra-uterine life of a relationship existing before birth. In so far as identification persists after birth, the individual's object constitutes not only his world, but also himself; and it is to this fact, as has already been pointed out, that we must attribute the compulsive attitude of many schizoid and depressive individuals towards their objects. **Normal development is characterized by a process whereby progressive differentiation of the object is accompanied by a progressive decrease in identification.** So long as infantile dependence persists, however, identification remains the most characteristic feature of the individual's emotional relationship with his object. **Infantile dependence is equivalent to oral dependence**—a fact which should be interpreted, not in the sense that the infant is inherently oral, but in the sense that the breast of the mother is his original object. During the oral phases, accordingly, identification remains the most characteristic feature of the individual's emotional relationship with his object. The tendency to identification, which is so characteristic of emotional relationships during these phases, also invades the cognitive sphere, with the result that certain orally fixated individuals have only to hear of someone else suffering from any given disease in order to believe that they are suffering from it themselves. In the conative sphere, on the other hand, identification has its counterpart in oral incorporation; and it is the merging of emotional identification with oral incorporation that confers upon the stage of infantile dependence its most distinctive features. These features are based upon the fundamental equivalence for the infant of being held in his mother's arms and incorporating the contents of her breast. **The phenomenon of narcissism**, which is one of the most prominent characteristics of infantile dependence, **is an attitude arising out of identification with the object.** Indeed primary narcissism may be simply defined as just such a state of identification with the object, secondary narcissism being a state of identification with an object which is internalized. Whilst narcissism is a feature common to both the early and the late oral phases, the latter phase differs from the former in virtue of a change in the nature of the object. In the early oral phase the natural object is the breast of the mother; but in the late oral phase the natural object becomes the mother with the breast. The transition from one phase to the other is thus marked by the substitution of a whole object (or person) for a part-object; but it is also characterized by the emergence of the biting tendency. Thus, whereas in the early oral phase the libidinal attitude of sucking monopolizes the field, in the late oral phase it is in competition with an accompanying attitude of biting. Now biting must be regarded as being essentially destructive in aim, and indeed as constituting the very prototype of all differentiated aggression. Consequently the late oral phase is characterized by a high degree of emotional ambivalence. The early oral phase has been well described by Abraham as 'pre-ambivalent'; but this does not preclude simple rejection or refusal of the object without any of that aggressive biting which characterizes the late oral phase. Such rejection does not imply ambivalence; and I consider that the early oral urge to incorporate is essentially a libidinal urge, to which differentiated and direct aggression makes no contribution. The recognition of this fact is of the greatest importance for an understanding of the essential problem underlying schizoid states. It is true that the incorporative urge is destructive in effect, in the sense that what is eaten disappears. Nevertheless the urge is not destructive in aim. When a child says that he "loves" cake", it is certainly implied that the cake will vanish, and, ipso facto, be destroyed. At the same time the destruction of the cake is not the aim of the child's 'love'. On the contrary, the disappearance of the cake is, from the child's point of view, a most regrettable consequence of his 'love' for it. What he really desires is both to eat his cake and have it. If the cake proves to be "bad", however, he either spits it out or is sick. In other words, he rejects it; but he does not bite it for being bad. This type of behaviour is specially characteristic of the early oral phase. What is characteristic is that, in so far as the object presents itself as good, its contents are incorporated, and, in so far as it presents itself as bad, it is rejected; but, even when it appears bad, no attempt is made to destroy it. At the same time, under conditions of deprivation anxiety arises lest the object itself should have been incorporated together with its contents and so destroyed, albeit not by intention. In the late oral phase the situation is different; for in this phase the object may be bitten in so far as it presents itself as bad. This means that differentiated aggression, as well as libido, may be directed towards the object. Hence the appearance of the ambivalence which characterizes the late oral phase. In accordance with what precedes, it becomes evident that the emotional conflict which arises in relation to object-relationships during the early oral phase takes the form of the alternative, 'to suck or not to suck', i.e. 'to love or not to love'. This is the conflict underlying the schizoid state. On the other hand, the conflict which characterizes the late oral phase resolves itself into the alternative, "to suck or to bite", i.e. "to love or to hate". This is the conflict underlying the depressive state. It will be seen, accordingly, that the great problem of the schizoid individual is how to love without destroying by love, whereas the great problem of the depressive individual is how to love without destroying by hate. These are two very different problems. The conflict underlying the schizoid state is, of course, much more devastating

- than the conflict underlying the depressive state; and, since the schizoid reaction has its roots in an earlier stage of development than the depressive reaction, the schizoid individual is less capable of dealing with conflict than is the depressive." (pg. 47-49)
- "The devastating nature of the conflict associated with the early oral phase lies in the fact that, if it seems a terrible thing for an individual to destroy his object by hate, it seems a much more terrible thing for him to destroy his object by love. It is the great tragedy of the schizoid individual that his love seems to destroy; and it is because his love seems so destructive that he experiences such difficulty in directing libido towards objects in outer reality. He becomes afraid to love; and therefore he erects barriers between his objects and himself. He tends both to keep his objects at a distance and to make himself remote from them. He rejects his objects; and at the same time he withdraws libido from them. This withdrawal of libido may be carried to all lengths. It may be carried to a point at which all emotional and physical contacts with other persons are renounced; and it may even go so far that all libidinal links with outer reality are surrendered, all interest in the world around fades and everything becomes meaningless. In proportion as libido is withdrawn from outer objects it is directed towards internalized objects; and, in proportion as this happens, the individual becomes introverted. And incidentally it is the observation that this process of introversion is so characteristic of the onset of schizoid states that provides the basis for the conclusion that **the "introvert" is fundamentally schizoid.** It is essentially in inner reality that the values of the schizoid individual are to be found. So far as he is concerned, the world of internalized objects is always liable to encroach upon the world of external objects; and in proportion as this happens his real objects become lost to him." (pg. 50)
 - "...the basic attitude of the schizoid individual is essentially one of inferiority" (pg. 50-51)
 - "...the characteristic affect of the schizoid state is undoubtedly a sense of futility" (pg. 51)
 - "Amongst other schizoid phenomena which may be mentioned here are a sense of being wasted, a sense of unreality, intense self-consciousness and a sense of looking on at oneself. Taken together, these various phenomena clearly indicate that an actual splitting of the ego has occurred. This splitting of the ego must be regarded as more fundamental than the impotence and impoverishment of the ego already noted. It would seem, however, that withdrawal of Libido from external objects has the result of intensifying not only the effects of the splitting process, but the actual extent of the splitting process itself. This fact is particularly significant as evidence of the extent to which the integrity of the ego depends upon object-relationships as contrasted with libidinal attitudes." (pg. 51)
 - "In the case of the schizoid individual, of course, these tendencies are essentially oral. It is when this effort is within measurable distance of succeeding that the individual begins to tell us that he feels as if there were nothing of him, or as if he had lost his identity, or as if he were dead, or as if he had ceased to exist. The fact is that in renouncing libido the ego renounces the very form of energy which holds it together; and the ego thus becomes lost. Loss of the ego is the ultimate psychopathological disaster which the schizoid individual is constantly struggling, with more or with less success, to avert by exploiting all available techniques including the transitional techniques) for the control of his libido. In essence, therefore, the schizoid state is not a defence, although evidence of the presence of defences may be detected in it. It represents the major disaster which may befall the individual who has failed to outgrow the early oral phase of dependence." (pg. 52-53)
 - "In accordance with what precedes, we find ourselves confronted with **two basic psychopathological conditions,** each arising out of a failure on the part of the individual to establish a satisfactory object-relationship during the period of infantile dependence. The first of these conditions, viz. **the schizoid state,** is associated with an unsatisfactory object-relationship during the early oral phase; and the second of these conditions, viz. **the depressive state,** is associated with an unsatisfactory object-relationship during the late oral phase. It emerges quite clearly, however, from the analysis of both schizoid and depressive individuals that unsatisfactory object-relationships during the early and late oral phases are most likely to give rise to their characteristic psychopathological effects when object-relationships continue to be unsatisfactory during the succeeding years of early childhood. The schizoid and depressive states must, accordingly, be regarded as largely dependent upon a regressive reactivation, during subsequent childhood, of situations arising respectively during the early and late oral phases. The traumatic situation in either case is one in which the child feels that he is not really loved as a person, and that his own love is not accepted. If the phase in which infantile object-relationships have been pre-eminently unsatisfactory is the early oral phase, this trauma provokes in the child a reaction conforming to the idea that he is not loved because his own love is bad and destructive; and this reaction provides the basis for a subsequent schizoid tendency. If, on the other hand, the phase in which infantile object-relationships have been pre-eminently unsatisfactory is the late oral phase, the reaction provoked in the child conforms to the idea that he is not loved because of the badness and destructiveness of his hate; and this reaction provides the basis for a subsequent depressive tendency. Whether in any given case a schizoid or depressive tendency will eventually give rise to an actual schizoid or depressive state depends in part, of course, upon the circumstances which the individual is called upon to face in later life; but the most important determining factor is the degree to which objects have been incorporated during the oral phases. **The various defensive techniques which characterize the transition period (i.e. the obsessional, paranoid, hysterical, and phobic techniques)** all represent attempts to deal with difficulties and conflicts attending object-relationships in consequence of the persistence of incorporated objects. These defensive techniques may now also be seen to resolve themselves into differing methods of controlling an underlying schizoid or depressive tendency, and thus averting the onset of a schizoid or depressive state, as the case may be. Where a schizoid tendency is present, they represent methods designed to avert the ultimate psychopathological disaster which follows from loss of the ego; and, where a depressive tendency is present, they represent methods designed to avert the ultimate psychopathological disaster which follows from loss of the object." (pg. 55-56)
 - "It must be recognized, of course, that **no individual born into this world is so fortunate as to enjoy a perfect object-relationship during the impressionable period of infantile dependence, or for that matter during the transition period which succeeds it. Consequently, no one ever becomes completely emancipated from the state of infantile dependence, or from some proportionate degree of oral fixation; and there is no one who has completely escaped the necessity of incorporating his early objects. It may consequently be inferred that there is present in every one either an underlying schizoid or an underlying depressive tendency,** according as it was in the early or in the late oral phase that difficulties chiefly attended infantile object-relationships. We are thus introduced to the conception that every individual may be classified as falling into one of two basic psychological types—the schizoid and the depressive." (pg. 56)
 - Chapter 3 - The Repression and the Return of Bad Objects (pg. 59)
 - "In the earlier phases of his psychoanalytical thought **Freud was chiefly concerned with the nature and the fate of impulse**—a fact to which the formulation of his famous libido theory bears eloquent witness. Thus it came about that modern psychopathology was founded essentially upon a psychology of impulse; and Freud's libido theory has remained one of the cornerstones in the edifice of psychoanalytical thought, albeit this theory is now generally accepted only with such modifications as were introduced by Abraham in deference to developmental considerations. It was always foreign to Freud's intention, however, to convey the impression that all the problems of psychopathology could be solved in terms of the psychology of impulse; and in the later phases of his thought—from a time which may be conveniently dated by the publication of *The Ego and the Id*—his attention was predominantly directed to the growth and the vicissitudes of the ego. Thus a developing psychology of the ego came to be superimposed upon an already established psychology of impulse; and, whatever developments the psychology of the ego may have subsequently undergone in psychoanalytical thought, the underlying libido theory has remained relatively unquestioned. This is a situation which I have lately come to regard as most regrettable." (pg. 59)
 - "In my opinion it is high time that **psychopathological inquiry,** which in the past has been successively focused, first upon impulse, and later upon the ego, **should now be focused upon the object towards which impulse is directed.** To put the matter more accurately if less pointedly, **the time is now ripe for a psychology of object-relationships.** The ground has already been prepared for such a development of thought by the

work of Melanie Klein; and indeed it is only in the light of her conception of internalized objects that a study of object-relationships can be expected to yield any significant results for psychopathology. From the point of view which I have now come to adopt, psychology may be said to resolve itself into a study of the relationships of the individual to his objects, whilst, in similar terms, psychopathology may be said to resolve itself more specifically into a study of the relationships of the ego to its internalized objects." (pg. 60)

- "Amongst the conclusions formulated in the above-mentioned paper two of the most far-reaching are the following: (1) that **Libidinal 'aims' are of secondary importance in comparison with object-relationships, and (2) that a relationship with the object, and not gratification of impulse, is the ultimate aim of libidinal striving**. These conclusions involve a complete recasting of the classic libido theory; and in the paper in question an attempt is made to perform this task." (pg. 60)
- "I now venture to formulate the view that what are primarily repressed are neither intolerably guilty impulses nor intolerably unpleasant memories, but intolerably bad internalized objects. If memories are repressed, accordingly, this is only because the objects involved in such memories are identified with bad internalized objects; and, if impulses are repressed, this is only because the objects with which such impulses impel the individual to have a relationship are bad objects from the standpoint of the ego. Actually, the position as regards the repression of impulses would appear to be as follows. Impulses become bad if they are directed towards bad objects. If such bad objects are internalized, then the impulses directed towards them are internalized; and the repression of internalized bad objects thus involves the repression of impulses as a concomitant phenomenon. It must be stressed, however, that **what are primarily repressed are bad internalized objects**." (pg. 62-63)
- "It is impossible for anyone to pass through childhood without having bad objects which are internalized and repressed. Hence internalized bad objects are present in the minds of all of us at the deeper levels." (pg. 64-65)
- "The earliest form of defence resorted to by the developing ego in a desperate attempt to deal with internalized bad objects is necessarily the simplest and most readily available, viz. repression. The bad objects are simply banished to the unconscious. It is only when repression fails to prove an adequate defence against the internalized bad objects and these begin to threaten the ego that the four classic psychopathological defences are called into operation, viz. the phobic, the obsessional, the hysterical, and the paranoid defences. There is, however, another form of defence by which the work of repression is invariably supported, and to which special attention must now be directed. I refer to what may be called 'the defence of the super-ego' or 'the defence of guilt' or 'the moral defence'." (pg. 65-66)
- "**However much he may want to reject them, he cannot get away from them [bad objects]. They force themselves upon him; and he cannot resist them because they have power over him. He is accordingly compelled to internalize them in an effort to control them. But, in attempting to control them in this way, he is internalizing objects which have wielded power over him in the external world; and these objects retain their prestige for power over him in the inner world. In a word, he is 'possessed' by them**, as if by evil spirits. This is not all, however. The child not only internalizes his bad objects because they force themselves upon him and he seeks to control them, but also, and above all, because **he needs them**. If a child's parents are bad objects, he cannot reject them, even if they do not force themselves upon him; for he cannot do without them. Even if they neglect him, he cannot reject them; for, if they neglect him, his need for them is increased." (pg. 67)
- "[I]t is time that we turned our attention once again to the moral defence. The essential feature, and indeed the essential aim, of this defence is the conversion of an original situation in which the child is surrounded by bad objects into a new situation in which his objects are good and he himself is bad. The moral situation which results belongs, of course, to a higher level of mental development than the original situation; and this level is characteristically a 'civilized' level. It is the level at which the super-ego operates, and to which the interplay between the ego and the super-ego belongs." (pg. 68)
- Chapter 4 - Endopsychic Structure (pg. 82)
 - "The basic conception which I advanced on that occasion, and to which I still adhere, is to the effect that **libido is primarily object-seeking (rather than pleasure-seeking**, as in the classic theory), and that it is to disturbances in the object-relationships of the developing ego that we must look for the ultimate origin of all psychopathological conditions." (pg. 82)
 - "How an individual is going to dispose of impulse-tension is, as already stated, clearly a problem of object-relationships, but equally a problem of the personality, since an object-relationship necessarily involves a subject as well as an object. The theory of object-relationships thus inevitably leads us to the position that, if 'impulses' cannot be considered apart from objects, whether external or internal, it is equally impossible to consider them apart from ego structures. Indeed it is even more impossible to consider 'impulses' apart from ego structures, since it is only ego structures that can seek relationships with objects. We are thus brought back to the conclusion, already recorded, that 'impulses' are but the dynamic aspect of endopsychic structures and cannot be said to exist in the absence of such structures, however immature these may turn out to be. Ultimately 'impulses' must be simply regarded as constituting the forms of activity in which the life of ego structures consists." (pg. 88)
 - "Freud's conception of the origin of the ego as a structure which develops on the surface of the psyche for the purpose of regulating id-impulses in relation to reality will thus give place to a conception of the ego as the source of impulse-tension from the beginning. This inclusion of the id in the ego will, of course, leave essentially unaffected Freud's conception of the function served by the 'ego' in regulating the discharge of impulse-tension in deference to the conditions of outer reality. It will, however, involve the view that 'impulses' are oriented towards reality, and thus to some extent determined by the 'reality principle', from the very beginning." (pg. 88-89)
 - "To content ourselves with saying simply that the infant becomes ambivalent would, however, be to give an incomplete and partial picture of the situation which now arises; for it would be a picture conceived exclusively from the point of view of the observer. **From the subjective point of view of the infant himself it is a case of his mother becoming an ambivalent object, i.e. an object which is both good and bad. Since it proves intolerable to him to have a good object which is also bad, he seeks to alleviate the situation by splitting the figure of his mother into two objects**. Then, in so far as she satisfies him libidinally, she is a 'good' object, and, in so far as she fails to satisfy him libidinally, she is a 'bad' object. The situation in which he now finds himself placed proves, however, in its turn to be one which imposes a severe strain upon his capacity for endurance and his power of adjustment. Being a situation in outer reality, it is one which he finds himself impotent to control, and which, accordingly, he seeks to mitigate by such means as are at his disposal. The means at his disposal are limited; and the technique which he adopts is more or less dictated by this limitation. He accordingly follows the only path open to him and, since outer reality seems unyielding, he does his best to transfer the traumatic factor in the situation to the field of inner reality, within which he feels situations to be more under his own control. This means that he internalizes his mother as a 'bad' object. Here I would remind the reader that, in my opinion, it is always the 'bad object' (i.e., at this stage, the unsatisfying object) that is internalized in the first instance; for (as already indicated in a footnote) I find it difficult to attach any meaning to the primary internalization of a 'good' object which is both satisfying and amenable from the infant's point of view. There are those, of course, who would argue that it would be natural for the infant, when in a state of deprivation, to internalize the good object on the wish-fulfilment principle; but, as it seems to me, internalization of objects is essentially a measure of coercion and it is not the satisfying object, but the unsatisfying object that the infant seeks to coerce. I speak here of 'the satisfying object' and 'the unsatisfying object', rather than of 'the good object' and 'the bad object', because I consider that, in this connection, the terms 'good object' and 'bad object' tend to be misleading. They tend to be misleading because they are liable to be understood in the sense of 'desired object' and 'undesired object' respectively. There can be no doubt, however, that a bad viz. unsatisfying object may be desired. Indeed it is just because the infant's bad object is desired as well as felt to be bad that it is internalized. The trouble is that it remains bad after it has been internalized, i.e. it remains unsatisfying. At this point an important consideration arises. Unlike the satisfying object, the unsatisfying object has, so to speak, two facets. On the one hand, it frustrates; and, on the other hand, it tempts and allures. Indeed its essential 'badness' consists precisely in

the fact that it combines allurements with frustration. Further, it retains both these qualities after internalization. After internalizing the unsatisfying object, accordingly, the infant finds himself in the quandary of 'out of the frying-pan into the fire'. In his attempts to control the unsatisfying object, he has introduced into the inner economy of his mind an object which not only continues to frustrate his need, but also continues to whet it. He thus finds himself confronted with another intolerable situation - this time an internal one. How does he seek to deal with it? As we have seen, in his attempt to deal with the intolerable external situation with which he was originally faced his technique was to split the maternal object into two objects, (a) the good and (b) the "bad", and then proceed to internalize the bad object; and in his attempt to deal with the intolerable internal situation which subsequently arises he adopts a technique which is not altogether dissimilar. **He splits the internal bad object into two objects (a) the needed or exciting object and (b) the frustrating or rejecting object; and then he represses both these objects (employing aggression, of course, as the dynamic of repression).** Here a complication arises, however; for his libidinal attachment to the undivided object is shared, albeit not in equal proportions, by the objects resulting from division. The consequence is that, in the process of repressing the resultant objects, the ego, so to speak, develops pseudopodia by means of which it still maintains libidinal attachments to the objects undergoing repression. The development of these pseudopodia represents the initial stage of a division of the ego. As repression of the objects proceeds, the incipient division of the ego becomes an accomplished fact. The two pseudopodia are rejected by the part of the ego which remains central on account of their connection with the rejected objects; and with their associated objects they share the fate of repression. It is in this way that the two subsidiary egos, the libidinal ego and the internal saboteur, come to be split off from the central ego, and that a multiplicity of egos arises." (pg. 110-112)

- "It will be noted that the situation resulting from the sequence of processes which has just been described has now assumed the structural pattern of what I have called 'the basic endopsychic situation'." (pg. 112)
- "It is natural for the child, not only to be impulsive, but also to express his feelings in no uncertain terms. Moreover, **it is through the expression of his feelings that he makes his chief impression upon his objects.** Once ambivalence has been established, however, the expression of feeling towards his mother involves him in a position which must seem to him singularly precarious. Here it must be pointed out that what presents itself to him from a strictly conative standpoint as frustration at the hands of his mother presents itself to him in a very different light from a strictly affective standpoint. From the latter standpoint, what he experiences is a sense of lack of love, and indeed emotional rejection on his mother's part. This being so, the expression of hate towards her as a rejecting object becomes in his eyes a very dangerous procedure. On the one hand, it is calculated to make her reject him all the more, and thus to increase her 'badness' and make her seem more real in her capacity of bad object. On the other hand, it is calculated to make her love him less, and thus to decrease her goodness and make her seem less real (i.e. destroy her) in her capacity of good object. At the same time, it also becomes a dangerous procedure for the child to express his libidinal need, i.e. his nascent love, of his mother in face of rejection at her hands; for it is equivalent to discharging his libido into an emotional vacuum. Such a discharge is accompanied by an affective experience which is singularly devastating. In the older child this experience is one of intense humiliation over the depreciation of his love, which seems to be involved. At a somewhat deeper level (or at an earlier stage) the experience is one of shame over the display of needs which are disregarded or belittled. In virtue of these experiences of humiliation and shame he feels reduced to a state of worthlessness, destitution or beggary. His sense of his own value is threatened; and he feels bad in the sense of 'inferior'. The intensity of these experiences is, of course, proportionate to the intensity of his need; and intensity of need itself increases his sense of badness by contributing to it the quality of 'demanding too much'. At the same time his sense of badness is further complicated by the sense of utter impotence which he also experiences. At a still deeper level (or at a still earlier stage) the child's experience is one of, so to speak, exploding ineffectively and being completely emptied of libido. It is thus an experience of disintegration and of imminent psychical death. We can understand accordingly **how precarious a matter it becomes for the child, when confronted with the experience of rejection by his mother, to express either aggressive or libidinal affect towards her.** Reduced to its simplest terms, the position in which he finds himself placed would appear to be one in which, if, on the one hand, he expresses aggression, he is threatened with loss of his good object, and, if, on the other hand, he expresses libidinal need, he is threatened with loss of his libido (which for him constitutes his own goodness) and ultimately with loss of the ego structure which constitutes himself. Of these two threats by which the child feels menaced, the former (i.e. loss of the good object) would appear to be that which gives rise to the affect of depression, and which provides a basis for the subsequent development of a melancholic state in individuals for whom the disposal of aggression presents greater difficulties than the disposal of libido. On the other hand, the latter threat (i.e. loss of libido and of ego structure) would appear to be that which gives rise to the affect of futility, and which provides a basis for the subsequent development of a schizoid state in individuals for whom the disposal of libido presents greater difficulties than the disposal of aggression. So far as the aetiology of depressive and schizoid states is concerned, views similar to those just indicated have already been developed by me at some length previously (1941). In the present instance, however, our immediate concern is with the measures adopted by the child to circumvent the various dangers which appear to him to attend the expression of affect, whether libidinal or aggressive, towards his mother when he is faced with the experience of rejection at her hands. As we have already seen, **he attempts to deal with the ambivalent situation successively (1) by splitting the figure of his mother into two objects, a good and a bad, (2) by internalizing the bad object in an endeavour to control it, (3) by splitting the internalized bad object in turn into two objects, viz. (a) the exciting or needed object, and (b) the rejecting object, (4) by repressing both these objects and employing a certain volume of his aggression in the process, and (5) by employing a further volume of his aggression in splitting off from his central ego and repressing two subsidiary egos which remain attached to these respective internalized objects by libidinal ties.** These various measures, based upon the techniques of internalization and splitting, serve to mitigate the asperities of the situation resulting from the child's experience of frustration in his relationship with his mother and his sense of rejection at her hands; but, except in the most extreme cases, they do not succeed in eliminating the child's need of his mother as an object in outer reality, or in robbing her of all significance - which, after all, is just as well. In conformity with this fact, his libido and his aggression are very far from being wholly absorbed in the processes so far described; and, consequently, the risks involved in the expression of libidinal and aggressive affect towards his mother as a rejecting object still remain to be met. The measures so far described thus require to be supplemented. Actually they are supplemented by a very obvious technique which is closely akin to the well-known principle of 'Divide et impera'. The child seeks to circumvent the dangers of expressing both libidinal and aggressive affect towards his object by using a maximum of his aggression to subdue a maximum of his libidinal need. In this way he reduces the volume of affect, both libidinal and aggressive, demanding outward expression. As has already been pointed out, of course, neither libido nor aggression can be considered as existing in a state of divorce from structure. Accordingly, what remains for us to decide is to which of the ego structures already described the child's excess of libido and excess of aggression are to be respectively allotted. This is a question to which the answer can be in no doubt. The excess of libido is taken over by the libidinal ego; and the excess of aggression is taken over by the internal saboteur. The child's technique of using aggression to subdue libidinal need thus resolves itself into an attack by the internal saboteur upon the libidinal ego. The libidinal ego in its turn directs the excess of libido with which it becomes charged towards its associated object, the exciting object. On the other hand, the attack of the internal saboteur upon this object represents a persistence of the child's original resentment towards his mother as a temptress inciting the very need which she fails to satisfy and thus reducing him to bondage - just as, indeed, the attack of the internal saboteur upon the libidinal ego represents a persistence of the hatred which the child comes to feel towards himself for the dependence dictated by his need. It should be added that the processes just described take place simultaneously with those which they are designed to supplement, although, in the interests of clarity of exposition, they have been described separately." (pg. 112-115)
- "In terms of the line of thought so far developed, **repression is a process originating in a rejection of both the exciting object and the rejecting object on the part of the undivided ego. This primary process of repression is accompanied by a secondary process of repression whereby the**

ego splits off and rejects two parts of itself, which remain attached respectively to one and the other of the repressed internal objects. The resulting situation is one in which the central ego (the residue of the undivided ego) adopts an attitude of rejection, not only towards the exciting object and the rejecting object, but also towards the split off and subsidiary egos attached to these respective objects, i.e. the libidinal ego and the internal saboteur. **This attitude of rejection adopted by the central ego constitutes repression; and the dynamic of the rejection is aggression.** So far so good. But this explanation of the nature and origin of repression is incomplete in so far as it has not yet taken into account what is involved in the technique of reducing the volume of libido and aggression available for expression towards external objects by employing a maximum of aggression to subdue a maximum of libido. As we have seen, this technique resolves itself into a process whereby (a) the excess of aggression is taken over by the internal saboteur and devoted to an attack upon the libidinal ego, and (b) the excess of libido is taken over by the libidinal ego and directed towards the exciting object. When the full significance of this process is considered, it becomes at once plain that the relentless attack of the internal saboteur upon the Libidinal ego must operate as a very powerful factor in furthering the aims of repression. Indeed, so far as dynamic is concerned, it seems more than likely that this is the most important factor in the maintenance of repression." (pg. 115-116)

- "These accounts have been formulated exclusively in terms of the measures adopted by the child in an attempt to cope with the difficulties inherent in the ambivalent situation which develops during his infancy in his relationship with his mother as his original object. The various measures which the child adopts in his attempt to deal with this ambivalent situation have all been adopted before the Oedipus situation develops. It is in the setting of the child's relationship to his mother that the basic endopsychic situation is established, that the differentiation of endopsychic structure is accomplished and that repression is originated; and it is only after these developments have occurred that the child is called upon to meet the particular difficulties which attend the Oedipus situation." (pg. 120-121)
- "In the first place, although Freud's whole system of thought was concerned with object-relationships, he adhered theoretically to the principle that libido is primarily pleasure-seeking, i.e. that it is directionless. By contrast, I adhere to the principle that libido is primarily object-seeking, i.e. that it has direction. For that matter, I regard aggression as having direction also, whereas, by implication at any rate, Freud regards aggression as, like libido, theoretically directionless. In the second place, Freud regards impulse (i.e. psychical energy) as theoretically distinct from structure, whereas I do not accept this distinction as valid and adhere to the principle of dynamic structure." (pg. 126)
- "In the light of considerations already advanced it will be understood, of course, that, although **the basic endopsychic situation** is the situation underlying hysterical states, **it is itself the product of a split of the original ego, and is, therefore, a schizoid phenomenon.** Thus, although the earliest psychopathological symptoms are hysterical, **the earliest psychopathological process is schizoid. Repression itself is a schizoid process; and splitting of the ego is a universal phenomenon,** although, of course, the degree of such splitting varies in different individuals. It is not to be inferred, however, that overt schizoid states are the earliest psychopathological states to develop. On the contrary, the earliest of such states are hysterical in nature. An actual schizoid state is a much later development—one which only materializes when the schizoid process is pushed to a point at which a massive repression of affect occurs and even an hysterical expression of affect is thereby precluded. Thus it is only when a massive repression of affect occurs that the individual becomes unduly detached and experiences a pronounced sense of futility. What is involved in the development of schizoid states cannot, however, be discussed further on the present occasion." (pg. 131)
- Chapter 5 - Object Relationships and Dynamic Structure (pg. 137)
 - "**The real libidinal aim is the establishment of satisfactory relationships with objects; and it is, accordingly, the object that constitutes the true libidinal goal.** At the same time, the form assumed by the libidinal approach is determined by the nature of the object. Thus it is owing to the nature of the breast that the infant's inherent incorporative tendency assumes the form of sucking with the mouth. Strictly speaking, of course, the mother's breast and the instinctive oral endowment of the infant have been evolved in mutual adaptation to one another; but this fact in itself implies that libidinal aims are inherently bound up with object-relationships. Actually some of the activities to which so-called Libidinal aims have been attributed are activities which I should hesitate to describe as primarily libidinal at all, e.g. anal and urinary activities; for the inherent aim of these activities, in common with that of vomiting, is not the establishment of a relationship with objects, but the rejection of objects which, from the point of view of the organism, constitute foreign bodies. This fact does not, of course, prevent such activities constituting a source of pleasure, since pleasure has no special connection with libido, but is a natural accompaniment of relief of tension irrespective of the nature of the forces whose tension is relieved. The conception of erotogenic zones raises other critical considerations, to some of which I must now refer." (pg. 138)
 - "**If, however, libido is primarily object-seeking, it follows that behaviour must be oriented towards outer reality, and thus determined by a reality principle from the first.** If this is not obvious in the case of the human infant, it is largely because, in man as contrasted with the animals, the patterns of instinctive behaviour are not rigid, but are only laid down in broad outline. Thus the instinctive drives of man only assume the form of general trends; and these only acquire a more rigid and differentiated pattern as the result of experience. What the child lacks above all is experience of reality; and it is this, rather than any lack of orientation towards reality, that gives the adult observer the impression that the child's behaviour is primarily determined by a pleasure principle. It must be recognized, of course, that with the child's inexperience goes a tendency to be more emotional and impulsive, i.e. less controlled, than the adult; and this, combined with the amount of frustration which he encounters, leads him to be more prone than the adult to resort to tension-relieving behaviour. In my opinion, however, it is erroneous to conclude that his behaviour is primarily determined by a pleasure principle which has later to be replaced by a reality principle. No such distinction between principles of behaviour can be drawn in the case of animals, whose instinctive behaviour follows rigid patterns relatively independent of experience, and for whom object-seeking thus represents little difficulty. The human child seeks his objects with no less insistence than the animal; but, in his case, the path to the object is only roughly charted; and he is thus liable to lose his way. At this point, the example of the moth seeking the flame may be cited as a critical instance. This may be regarded at first sight as an unfortunate instance for me to quote, since it may be said that, in seeking the flame, the moth displays a remarkable lack of reality sense. It can hardly be said, on the other hand, that the moth is guided to the flame by pleasure. On the contrary, its behaviour is essentially object-seeking. What it is seeking, however, is not the flame but the light. Thus it is not actuated by a pleasure principle, but by a reality sense which is severely limited, since it cannot differentiate between one source of light and another. The fact is that reality sense is essentially a matter of degree. Characteristically the child's sense of reality is of low degree compared with that of the adult; but he is none the less actuated by a reality sense from the beginning, even if he is all too liable, in face of frustration, to stray into tension-relieving sidetracks." (pg. 140-141)
 - "Throughout this sequence there is a gradual expansion and development of personal relationships with objects, beginning with an almost exclusive and very dependent relationship with the mother, and maturing into a very complex system of social relationships of all degrees of intimacy. These personal relationships are profoundly influenced by, but are not exclusively dependent upon, the relationships established with the appropriate biological objects, although, the younger the child, the greater the influence of the latter upon the former. From the social point of view, of course, personal relationships are of overriding importance; and, therefore, they must be taken into account in assessing the significance of the various stages. Further, their importance is such as to claim some recognition in nomenclature. At the earliest stage, the attitude of the child to the breast may, admittedly, be described as oral; but it is only oral because it is incorporative and the organ of incorporation is the mouth. The outstanding feature of the child's personal relationship to his mother is, however, one of extreme dependence; and this dependence is reflected in a psychological process of 'primary identification', in the light of which separation from his object becomes the child's greatest source of anxiety (as in my experience of war psychiatry it proved to be the greatest source of anxiety to the neurotic soldier). In the light of these various considerations, it seems most appropriate to describe the first stage as one of Infantile Dependence, without prejudice to the fact that this dependence is chiefly manifested in an attitude of

oral incorporation towards, and an attitude of primary emotional identification with the object. By contrast, the final stage appears best described as a stage of Mature Dependence— 'mature dependence' rather than 'independence', since a capacity for relationships necessarily implies dependence of some sort. **What distinguishes mature dependence from infantile dependence is that it is characterized neither by a one-sided attitude of incorporation nor by an attitude of primary emotional identification. On the contrary, it is characterized by a capacity on the part of a differentiated individual for co-operative relationships with differentiated objects.** So far as the appropriate biological object is concerned, the relationship, is, of course, genital; but it is **a relationship involving evenly matched giving and taking between two differentiated individuals who are mutually dependent**, and between whom there is no disparity of dependence. Further, the relationship is characterized by an absence of primary identification and an absence of incorporation. At least, this is the ideal picture; but it is, of course, never completely realized in practice, since there is no one whose libidinal development proceeds wholly without a hitch. The intermediate stage has already been described as Transitional; and it appears best so named, since it is a stage of vicissitudes arising out of the difficulties and conflicts of transition. As might be expected, therefore, **it is not only characteristically the stage of conflict, but also characteristically the stage of defensive techniques**. Among these techniques, **four classic techniques stand out conspicuously from the rest—the paranoid, the obsessional, the hysterical and the phobic**. As I see it, however, these four techniques do not correspond to any recognizable libidinal phases, but are **four alternative methods for attempting to deal with the difficulties of the transitional stage**. At this point it is necessary for us to remind ourselves of the importance of the part played by an incorporative attitude at the stage from which transition is being attempted. This incorporative attitude manifests itself, not only in the ingestion of milk, but also in the psychological internalization of objects, i.e. the psychological incorporation of representations of objects into the psychical structure. The result is that the great task of the transitional period comes to be one, not only of establishing relationships with differentiated external objects, but also of coming to terms with objects which have already been internalized. The situation is complicated by the fact that the task of the transitional stage also includes the renunciation of relationships established during the first stage. It is further complicated by the previous establishment of ambivalence and the splitting of the object into a good and a bad object. Consequently, attempts to get rid of objects become a marked feature of the transitional stage; and this applies not only to external, but also to internal objects. And it is for this reason, and not on account of the emergence of any inherently anal stage, that techniques based upon the expulsive, excretory processes come to be employed so freely, especially during the earlier phase of the transitional stage, when the attempt to get rid of early objects naturally plays a more prominent role than in the later phase. What must be emphasized, however, is that **the various techniques which form the basis of psychopathological developments during the transitional stage represent varying and alternative methods of dealing with internalized objects—really methods of trying to get rid of early objects, which have been internalized, without losing them.**" (pg. 144-146)

- Chapter 6 - Steps in the Development of an Object-Relations Theory of the Personality (pg. 152)
 - "The situation which I envisaged was one based upon a split in the internalized bad object. I have already explained how I reached the conclusion that repression of an internalized bad object led to repression of that part of the ego which was most intimately bound by libidinal ties to the object in question; but, if the object is split, it follows that two parts of the ego will also be split off from the central ego, one attached to each of the partial objects. According to my conception, the internalized bad object has two aspects - an exciting aspect and a rejecting aspect; and this duality of aspects forms the basis of a split of the object into an exciting object and a rejecting object. Repression of the exciting object is accompanied by the splitting off and repression of a part of the original ego, which I have described as the 'libidinal ego'; and repression of the rejecting object is accompanied by the splitting off and repression of another part of the original ego, which I have described as the 'internal saboteur'. The conception of the internal saboteur is by no means identical with that of the super-ego; but, being allied to the rejecting object, this part of the ego has aims contrary to those of the libidinal ego, which thus becomes subject to its hostility. This hostility of the internal saboteur to the libidinal ego operates in the same direction as the repression exercised over the libidinal ego by the central ego; and accordingly I have described it as a process of 'indirect repression'." (pg. 159-160)
- Chapter 7 - A Synopsis of the Author's Views (pg. 162)
 - See text
- Chapter 8 - Notes on the Religious Fantasies of a Female Patient (pg. 183)
 - See text
- Chapter 9 - Features in the Analysis of a Patient with a Physical Genital Abnormality (pg. 197)
 - See text
- Chapter 10 - The Effect of a King's Death Upon Fantasies Undergoing Analysis (pg. 223)
 - See text
- Chapter 11 - The Sociological Significance of Communism (pg. 233)
 - See text
- Chapter 12 - Psychology as a Science (pg. 247)
 - See text
- Chapter 13 - The War Neuroses (pg. 256)
 - "I have gradually found myself driven to the conclusion that **all psychopathological developments in the adult are ultimately based upon a persistence into later life of an exaggerated degree of that emotional dependence which is characteristic of childhood, and more particularly of infancy**. The all-round dependence which distinguishes childhood requires little emphasis. It is a biological fact bound up with the extreme helplessness of the human infant at birth, and embedded in the very structure of human society. It is a fact of which the institution of the law takes special cognizance; and it provides the rationale of that most basic of all social institutions, the family. In conformity with the fact that the family constitutes the primal social group, the dependence of the child is focused essentially upon his parents. It is upon his parents that he depends for the satisfaction of his psychological, no less than his physical, needs. It is to them that he looks for moral, no less than for physical, support; and it is upon them that he largely relies for the regulation of his behaviour and the control of his wayward desires. In particular, it is round his parents that his emotional life revolves; for his parents are not only his original love-objects, but also the original objects of his hate and the objects to whom his earliest fears and anxieties are attached. In the ordinary course of development the individual's dependence upon his parents (and upon parental figures who come to deputize for them) undergoes a progressive decrease throughout the phases of childhood and adolescence until the comparative independence of maturity is reached. It is uncommon, however, for the process of emotional emancipation to prove a smooth passage; for, even under the most favourable of conditions, there is always a certain conflict between (1) a progressive urge to abandon the state of infantile dependence on account of the many limitations which it imposes, and (2) a regressive urge to cling to it on account of the many advantages which it confers. Where conditions are unfavourable, this conflict assumes exaggerated proportions, is accompanied by marked anxiety and gives rise to exaggerated reactions. Whatever adjustments and compromises may issue from an acute conflict of this nature, its most significant consequence is the perpetuation of an attitude of infantile dependence in the emotional sphere—an attitude which is none the less present at deep levels of the psyche even when at more superficial levels it is over-compensated by an attitude of quasi-independence representing nothing more than a denial of the dependence which persists at a deeper level. It is the undue persistence of such an attitude of infantile dependence that I have come to regard as the ultimate factor predisposing to all psychopathological developments; and, in conformity with this view, all psycho-neurotic and psychotic symptoms must be interpreted as essentially either (1) effects of, or (2) defences against the conflicts attendant upon a persistent state of infantile

dependence." (pg. 259-260)

- **"The process in question is that of identification—a process in virtue of which the individual fails to differentiate himself from, and thus spontaneously identifies himself emotionally with those upon whom he depends. So intimate is the connection between identification and infantile dependence that, psychologically speaking, they may be treated as the same phenomenon.** So far as we can conceive the mental state of the child before birth, we must regard it as characterized by a degree of primary identification so absolute as to preclude his entertaining any thought of differentiation from the maternal body, which constitutes his whole environment and the whole world of his experience. The process of identification which subsequently characterizes the emotional relationships of childhood would thus appear to represent the persistence into extra-uterine life of an emotional attitude existing before birth. So far as it influences behaviour, it would also appear to represent an attempt to restore emotionally an original state of security which was rudely disturbed by the experience of birth. It requires little imagination to appreciate that the experience of birth must come as a profound shock to the child accustomed, while in utero, to a blissful state of absolute identification; and there is good reason to believe that birth constitutes not only an extremely unpleasant and painful experience, but also one fraught with acute anxiety. It may be presumed, further, that birth provides the occasion of the child's first experience of anxiety; and, since birth also represents the child's first experience of separation from his mother, birth-anxiety must be regarded as the prototype of all the separation-anxiety which is subsequently experienced. This being so, it can be readily appreciated that separation-anxiety will always retain the impress of the birth trauma by which it was originally evoked, and that any postnatal experience which provokes separation-anxiety will in some measure assume the emotional significance of the original birth trauma. It is not implied, of course, that any conscious memory of the birth trauma is retained; but that the experience is perpetuated at a deep mental level and is capable of reactivation under certain conditions may be inferred from a number of psychopathological phenomena." (pg. 275-276)
- "In the light of what has just been said it can now be stated that **separation-anxiety is a characteristic product of the tendency of individuals who have remained in a state of infantile dependence to make identification the basis of their emotional relationships with those upon whom they depend.** The figure with whom the dependent individual is originally identified is, of course, his mother; and, whilst it is not long before he begins to identify himself with other figures, particularly his father, the original identification persists underneath all others subsequently made. The extent to which this original identification persists, even in individuals who have relatively outgrown the state of infantile dependence, may be judged from the frequency with which the wounded soldier is known to cry for his mother in his agony. It remains true, nevertheless, that **the more emotionally mature an individual becomes, the less his emotional relationships are characterized by identification.** In the necessarily dependent phase of early childhood it is, of course, both natural and inevitable that identification should play a predominant role; but, when emotional development is satisfactory, there is a progressive decrease in identification throughout the years of childhood and adolescence until the relative independence of emotional maturity is reached. This progressive decrease in identification is accompanied by the progressive increase of a capacity on the part of the individual to differentiate himself from emotionally significant figures. At the same time the importance of the figures with whom he originally identified himself (parents and parent substitutes) tends to diminish. **Emotional maturity is consequently characterized, not only by a capacity to sustain relationships with other individuals on a basis of mutual independence, but also by a capacity to contract fresh relationships.** In the case of the individual who fails to outgrow the stage of infantile dependence both of these capacities are deficient. His capacity to sustain relationships with others on an independent basis remains inadequate; and so does his capacity to establish fresh relationships. The relationships which he is best able to sustain are such as conform most to the pattern of his early relationship with his mother; and the only relationships which he is able to establish with any measure of stability are relationships calculated to assume for him, by a process of transference, all or much of the significance of his original relationship. Such then is the condition of the individual who develops a war neurosis. He is an individual who has retained an undue measure of childish dependence upon his home and his loved ones; and he is too closely identified with them to be able to endure any great measure of separation from them. They still tend to constitute for him, as was the case in his childhood, not only his emotional world, but even, in a sense, himself. He tends to feel that he is part of them, and equally that they are part of him. In their absence his very personality tends to be diminished—and, in extreme cases, even his sense of personal identity may be compromised. Such being the case, it is not difficult to understand why a compulsion to return home should be so universal and characteristic a feature of the war neuroses—a feature no less universal and characteristic than the symptom of separation-anxiety, with which it is so intimately associated. The explanation of this compulsion lies in the process of identification as it is found to operate in an individual who has failed to emerge adequately from the state of infantile dependence. Unlike the emotionally mature soldier, such an individual, when placed under military conditions, finds it too difficult a task to establish himself as a separate personality within the framework of the military organization, subordinate himself to the aims of the military group without any surrender of independence, and maintain stable emotional bonds with the group whilst remaining differentiated from it. On the other hand, the dependent individual usually finds great difficulty either in establishing or in maintaining a reliable relationship with the military group on a basis of identification. This is due, of course, to the fact that his identification with his home and his loved ones does not readily admit of a competitor; and it is to the strength of this identification above all that the development of a war neurosis must be attributed." (pg. 276-278)

c. Further Readings:

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