The Connection Between the Infant’s Development of Dimensionality and the Adult’s Capacity to Dream

A Hermeneutic Literature Review

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Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which, to a substantial extent, has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

Susan Blyth
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Abstract

This study explores the origins of what is an underlying issue in the world today of the feeling of being constrained rather than vital, that is of being creative rather than conformist. The exploration is of how infants develop emotionality in perception and experience and the development of perception of self and object (Meltzer 1975b) and how this links to the adult capacity to dream and think (Bion, 1962a, 1962b).

The method is a hermeneutic literature review. I examine the development of dimensionality and the role of truth and the enjoyment of the pursuit of knowledge seen as Bion’s “K” (Fisher, 2006) and consider the connection between truth and the ability to dream.

I propose that a connection between dimensionality and dreaming is the ability to experience emotional and psychic truth and discuss the consequences of what happens when full dimensionality is not achieved, considering Meltzer’s claustrum (2008) and Stern's psychic retreats (1993) which can develop when the mind experiences fragmentation (Bion, 1957).

The work of repairing from a fragmentation or holding back from crisis, current or historical, is significant and challenging. We strive to travel alongside our patients who want to rediscover themselves and find the words to describe their state of mind, memories and feelings. If we can help patients locate and symbolize the liminal they may start to feel their own truth and take a place again in the world.
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Chapter 1

Introduction

Context

I have always dreamed deeply and found it to be a relaxing and interesting experience. At times it has seemed to me that my dreams contained more of me than did my waking life. Sometimes I have gone to bed thinking, “I wonder what is going to happen tonight!” For many years I had no idea of the deeper purpose or function of dreams and did not think of analyzing them until I read Jung’s autobiography (1993) when I knew I had made a friend for life and began to understand something about the life of psyche and the unconscious.

I was similarly aware of but had not thought about the powerful effect the role of arts and of crafts had in my life. I am talking about the sensual communication in the surfaces of carvings, embroideries and tapestries. I felt but could not articulate that somehow there was an emotional current in these objects beyond the colours and the fables and stories they referred to. There was also a story in the spaces between the different levels of the surfaces which I found deeply moving. For me there was a whole life in the indentations between the surfaces in the relief work of architecture, masonry and metal fretwork. I tried to explain this and to find out what it was but it was not until I read the psychoanalysts Meltzer (2008, 1975a) and Bick (1968) that I began to understand what my experience was.

Earlier research

There was something visceral in these writings that connected to my actual sense of things. This was exciting because I felt I was on a good path but did not know where it would lead me. I didn’t hurry because I found each discovery satisfying but didn’t really know what I was finding out. An earlier piece of research of specialist readings I undertook provided an opportunity to work through and draw together the clinical psychotherapeutic meaning of adhesive attachment and the trauma that seems to be a precursor to it (Meltzer, 1975a). My deep fascination with
fibres and with stone and how we work with them seemed to be connected to the intellectual processes of reading and writing. Both are types of mouldings and weavings and this became clearer to me as I read more of Meltzer and I sat for a long time connecting my experience of reading of early object relations and with my own experience of sewing and weaving and tapestry. Further, I had always noticed the particular ways people pat and caress their pets and animals however somehow I didn’t know that that I was interested in all these hand gestures and that they symbolized something.

**Key Point of Concern**

This study asks a question that comes from all of this: what is the connection between the child’s development of dimensionality and the adult’s capacity to dream? The question is, I think, linked to a deep concern about creativity and vitality. How can we be creative today? What makes one person more creative than another? The opposite question might be also asked: what is the experience of being stifled? By this I am referring to the sense of not feeling fully oneself but somehow going through the motions, or of being constrained or conforming rather than creative and expressive. To me this is a question of some urgency and I have undertaken this study to try to find out. In this I intend to link what seem to me at this stage to be largely unconnected factors.

**Dimensionality of mental functioning**

When I first read Meltzer (1975b) I was intrigued by his term “dimensionality of mental functioning,” but its meaning is not self-evident. As it is central to my study I will explore it by way of introduction here although I also discuss it in the next chapter. Meltzer (1975b) refers to the four dimensions of life which we know to be time, and space which has three dimensions which are length, width and depth (Geometry, 2016). Meltzer (1975b, p.223) uses these terms to describe the sources of emotionality in perception and experience by which he addresses the emotional development of splitting and the development of perception of self and object. The development of dimensionality of space from one to three dimensions is a way of talking about
emotional development through the incorporation of the understanding of time. I will address this further in the next chapter.

From the object relations point of view there is an established line of enquiry and developmental theory linking autistic-type presentations including being “frozen with shock, numb and dumb,” (Tustin, 1988, p. 97) as well as the conceptualization of impediments to dimensionality and temporality to a disrupted maternal dyad (Donald Meltzer, 1975a, 1975b; Esther Bick, 1968; Frances Tustin, 1969). Birksted-Breen (2009) makes a connection between time and dreaming in infancy by drawing on Bion’s alpha function theory (1962), and the parallel he draws between the maternal containment of the infant with the dream’s containment of the unbearable in the unconscious. The links between the ideas are made but not directly. The enquiry I make is important because of the mental health issues identified by Meltzer and Bick (Meltzer, 1975a, p.296) of the shallow external values in their clients that are a kind of conformity. Meltzer believed them to be “adhesively identified” and I wonder if the different types of identification a child experiences determines to some extent whether they feel vital or stifled.

**Types of identification**

Waddell, (2008, p.101) contrasts and compares the three types of identification, adhesive, projective or introjective as types of learning noting that there is constant movement between them. She asks whether a child’s primary identifications with their externally significant figures or later internal representations are of an adhesive, projective or an introjective kind. She goes on to argue that adhesive identification is a type of learning that is parroting, or mimicking; that projective identification is a type of learning that involves the child anxiously seeking out to be someone they are not, projectively experiencing themselves as though they are the other; or by introjective identification, that is, learning from experience, having introjected desired qualities and finding them in oneself. Because adhesively identified patients do not fully introject a good object they have no sense of inside and outside and so no sense of depth. This means they are two dimensional: emotionally shallow with externalised values. Meltzer asserts that in order for a child to introject she requires a sense of space which these children did not have. Winnicott (1960, p.590) used the word “indwelling” in the phrase “indwelling of the psyche in the soma” to express the developmental achievement of dimensionality that allows for depth of thinking and
feeling. Birksted-Breen (2009) proposes that the maternal ability to connect with the child and support them emotionally is the basis for the capacity to dream, which she views as an essential basis for good mental health. Her ideas chime with Meltzer’s ideas (1975b) on the infant’s development of perceptions of time and space as a result of maternal containment.

Aim and Scope

My aim is to explore where and how in infant development the sense of place and time develops into the ability to dream. Bick (1968), Tustin (1969, 1988) and Meltzer (1975a, 1975b) as mentioned above have used clinical work to establish theories about such development. I would like to explore whether there is any connection the development of the capacity for dimensionality and functional health. So much of infancy is necessarily unspoken and in therapy we can go back to fundamental situations which provide us with what might seem to be liminal, a sense of what Klein (1957, p.233) called “memories in feeling.”

According to Mitchell and Black (1995, p.85), “Melanie Klein (1882-1960) has had more impact on contemporary psychoanalysis than any other psychoanalytic writer since Freud.” Mitchell and Black (1995,p.258) contend that Freud’s theories of early mental life were derived from extrapolating backwards from adult neurotic patients and that Klein’s aim (1995,p.85) was to validate and extend his hypotheses through direct observation and clinical work with children. From the perspective of this study one of Klein’s most important discoveries was that children can symbolise. Her 1930 paper “The importance of symbol formation in the development of the ego,” led to Segal’s further work on the role of symbolisation discussed in this study in Chapter 4.

I am curious about the transformation of sense into words which is what Segal studied in her work on symbolism so in that sense I am looking for an articulation of an inchoate experience. It seems that here the question that needs to be asked is whether the link between the infant’s development of dimensionality and the adults capacity to dream lies in symbol formation. Segal, (1991), clarifies that true symbol formation is only possible in the depressive position.
The depressive position

Segal, (2008), refers to Klein’s definition of the depressive position as the time when the infant begins to recognise their mother as a whole object, not a series of hands or a face or a breast. The infant understands that both good and bad experiences come from one person. Because the infant now sees the mother as a whole person he also sees that she is an individual with her own life. This brings with it an understanding of his own helplessness and dependence on her. The depressive aspect refers to the necessary mourning over the mother’s separateness and over the realisation that the person the infant had negative feelings about is also the person he loves and is good. I will discuss this further in Chapter 5.

Segal (1991) links thinking with dreaming as does Bion (1962). Segal addresses issues of the problems that occur when an ego cannot dream. She asserts (1957, p. 393) that symbol formation starts very early, probably as early as object relations, but changes its character and functions with the changes in the character of the ego and object relations, thus indicating a process that relies on the development of dimensionality for dreaming. The philosophical question I am asking is how do we know our own truth or our own experience if we cannot speak it and how do we speak if we cannot symbolise? Klein (1930) believed language and thinking require symbolisation.

Significance of the study

Waddell, (2008, p.106) points out that the importance of the link between the different learning modes of infants and the different types of identification which represent them is that the link characterises and illuminates fundamental developmental processes. Waddell identifies something very close to what is the purpose of this study in commenting on her intention of identifying different types of learning, and, “the possible consequences for the personality when one mode takes precedence over another,” because essentially what is of importance for me is the consequences of not developing full dimensionality, that is a full embodied understanding of
the depth, height and width of relationship with self and other. This level of lived experience is a form of knowledge of the truth of relationship both with significant others and the world.

My own standpoint regarding the nature of what truth is contained in Klein’s work is that Waddell is right when she says how we learn is through identification because identification is a form of symbolisation. This means that we learn by seeing two things as being similar. In her work using the scientific method of observation and supporting that with her immense imagination I think that Klein introduced a method of learning about the developing mind that still holds great usefulness today. The work of all the writers gathered here is based on years of acute observation of patients. It rings true for me in my consideration of my own life and I find it deeply holding in sessions with patients as a beginning psychotherapist. We cannot know completely what is conscious and we can only wonder and imagine about the unconscious but I find a calmness in sitting with patients that increases as I learn more from these writers.

Many patients come with trauma, known or unknown, articulated or inchoate and it is our work as wounded healers to know ourselves and help patients to know their own experience and thus to reach their potential. Klein (1957, p.233) as mentioned above contends that while for some infants negative experiences are such that even gratifying experiences cannot counteract their persecutory anxiety however even in “the worst cases” in psychotherapy the development of the capacity for introjection of a good object lessens resentment and can revive some pleasant memories. This, she says, is possible because the ego is strengthened. As a beginning practitioner I find this a very useful way of understanding what happens between psychotherapist and patient. It sets a scene for quiet acknowledgement, empathy, encouragement and patience in the relationship. What joy in being part of a such a primary maturational development for a patient into acknowledgement of the travails and joys of taking up one’s rightful place the world with enjoyment and gratitude! As Klein insists, hate is mitigated by love and negative impulses lose power. The understanding of how we can work to overcome trauma experienced by such innocents is central to our endeavor.

I hope that this study will be helpful in contributing in some small way to an understanding of the truth that is contained in our experiences and the importance of assisting patients to know who
they are and thus how they might live their lives. It is also with some passion that this master’s level study draws our attention to the thinking and clinical experience of psychoanalysts regarding the connection between the ability of the infant to develop dimensionality so they can dream, and good mental health. It will provide some modest opportunity to remember the very serious nature of post-natal care of infants and mothers and its long term impact on society.

**Overview of the structure of the dissertation**

Chapter 2 describes the qualitative methodology and method used in the research. Chapter 3 is the literature review of the first theme of the development of dimensionality and Chapter 4 discusses the second theme of the literature review, that is, symbolism and dreaming. Chapter 5 discusses the findings and Chapter 6 concludes with final thoughts, and the limitations of the study as well as implications for further research.

**Chapter summary**

In this chapter I have introduced my question for this study. I have provided a personal context and discussed my earlier research. The key point of concern, about creativity and vitality is introduced followed by a brief introduction of the connection already made in object relations between a disrupted maternal dyad and autistic –type presentations. I introduce the concept of a link between object introjection and the idea of internal space and maternal containment. I discuss briefly the aim and scope of the study and the development of symbolisation before finally I address what I consider to be the significance of the study using Waddell’s idea of identification as a type of learning and how that impacts the personality. I briefly iterate my point of view on the status of the truth and role of Klein’s theories and her method of research.
Chapter 2
Methodology and Method

Introduction

This chapter contains a discussion of the methodology and method that frame my research into the question: what is the connection between the child’s development of dimensionality and the adult’s capacity to dream? I initially consider how I think about this question before I outline my understanding of interpretive hermeneutics particularly the position of the researcher and the purpose of this type of methodology compared with others, before analysing how this fits with my research question. I then discuss philosophical hermeneutics including ideas such as the role of questions and answers, the link with existentialism and ontological foreunderstandings as being essential rather than problematic to understanding. In discussing my method I link the literature review, the hermeneutic circle and the relationship between individual texts and the whole body of literature with my method of searching, reading and note taking.

The capacity to dream

My thinking about how we develop and what we need to develop includes an idea about the role of the imagination which I have merged with dreaming. An ongoing existential preoccupation connects both the research and my clinical work, which is ‘how do I live in this?’ What has to happen in order to psychically survive? The process has been to experience what is being said/read from both points of view while observing the ongoing personal dialogue. It seems the answer I have always come up with is that I have to imagine and dream which means not only to come up with new images and ideas but to find a way of understanding what is around me that connects me to others and myself. The literature I have drawn upon here has provided theory based on clinical observations about how we develop into people who can dream and it has also expanded my ideas about the process of dreaming itself. This small paragraph is by way of introducing and linking to more robust, established and articulated ideas about the
philosophy and method I have chosen to explore and what we need to experience in order to dream.

Methodology

Understanding that a methodology contains the philosophical underpinnings of the research process (Grant & Giddings, 2002), I have been aware that I would be looking for a way of exploring psychoanalytical ideas that allowed me to stay true to my own experience of knowing the world and experiencing myself in it, and also one that chimed with the object relations psychoanalytical approach. This meant the research would be qualitative as I am interested in people’s experiences and how they make meaning. I was needing a methodology that allowed for a nuanced approach and also for close, meditative reading of texts and ways of being. Qualitative interpretivistism allowed for this and is to be contrasted with the quantitative approach which measures causal relationships (Denzin and Lincoln, 2000, p.9) and claims to be value free. I am a psychoanalytically oriented psychotherapist in training who is interested in the relationship between value and meaning and how that is seen in our ability to feel and think rather than in measuring. Further I do not want to draw general conclusions but to feel and sense in individual experiences.

The interpretive paradigm provides for this as it looks at understanding rather than explanation. Interpretivism is interested in what it means to be human and what meaning we place on different actions, because there could be many, (Schwandt, 2000, p. 191). I am interested in different ways of perceiving and how we perceive and so when it became clear to me that the interpretivist stance was linked to existentialism I was drawn to this. Ponterotto, (2005, p. 128) contrasts interpretivism with positivism which he says asserts that the world is objectively knowable. My experience is that the world is not that stable but that it is constantly in flux and positivism does not resonate with my clinical or personal experience.

The hermeneutic researcher is interested in the self-understanding of participants which fits closely with my existential and psychoanalytic stance that by knowing ourselves we can
understand more about the world. A hermeneutic point of view asserts that the researcher is affected by and is part of the process, (Smythe & Spence, 2012) which means that the researcher’s interpretation of the data collected is ‘forefronted’, (Grant & Giddings, 2002, p.17).

Looking beneath the surface in research and psychotherapy

I have been thinking about how appropriate this methodology is for my research. From a psychotherapeutic viewpoint, there may be a basic alignment of approach in the way of understanding. Hermeneutics seems similar to a psychotherapy perspective in that both rigorously attend to and focus on what lies underneath the surface communication and what the countertransference might be. Smythe, Ironside, Sims, Swenson & Spence, 2007, talk about the need for a careful attunement to the texts. Both practices seem to require not only intersubjectivity but also a need for a third position. In these ideas I look to Benjamin’s perspective of intersubjectivity as an aspect of natural development:

The engagement is in reciprocal recognition of the other as growing out of the experience of being recognised by the other, as a crucial componement of attachment responses that require mutual regulation and attunement, thus a pleasure and not a chore. (Benjamin, 2004).

Other ways of looking

Grant and Giddings (2002) refer to Kuhn (1970) who points out that the value of a particular paradigm lies in practitioners’ recognising its ability to solve a particular problem, or address a particular question, more successfully than another. My question is what is the connection between the child’s development of dimensionality and the adult’s capacity to dream. My texts require me to follow deeply and use my imagination to understand what they are saying. There is no objectivity in this endeavour no right or wrong, beginning or end but a requirement for a lot of space for reflexivity and interpretation in terms of what I experience. For this reason I might
have followed a purely phenomenological path to “lay bare” what I see however this is a
literature review, with no clinical observation, and I have time and space constraints. Further I
might have undertaken a use of critical theory and applied it to the literature, but that would
have required me to add a layer of intellectual thinking to my experience while I am more
interested in exploring the ontology of intersubjectivity with a base concept of where do I end
and another person/text begin? This is central to my research and connects with the issues
particularly explored by the seminal work on dimensionality of Bick, Tustin, and Meltzer. How
can we use time and space to achieve thirdness and begin to dream? Britton (1989) draws on
the oedipal concept to explain how we can observe ourselves and simultaneously be ourselves.
In hermeneutic methodology a basic idea is the “giving over” (Porter and Robinson, 2011) to the
event or to the text. Benjamin (2004) uses the same term but her difference is that the giving
over is to each other in order to create a ‘thirdness’. Thus ‘thirdness’ means not having the
intention to control or coerce, and her interest is in how we build the relational systems and
develop the intersubjective skills for such a co-creation. A hermeneutic approach to my question
thus fits well with the underpinning thinking of the literature and the method.

Philosophical Hermeneutics

Hans Georg Gadamer is the philosopher associated with hermeneutics where we ask what is
involved in the process of understanding and this is very useful for my endeavour in this
research because I am posing the question what is it that is or is not understood about
ourselves and the world if we cannot dream? Gadamer believed that question and answer into
which one brought the self was the primary method for approaching such a truth and this with
his commitment to the dialectic shows his Platonic roots (Malpas, 2015). He also draws on
Aristotle’s notion of “practical wisdom” which helps us understand ourselves existentially (for
example to understand what does this mean for me? What is its value to me?). As mentioned
above a key idea is giving ourselves over to what we want to understand and this means that to
understand something we need a prior ontological understanding or that first we need to
understand our own way of being in the world.
Truth and Art in Hermeneutics

Furthermore, Gadamer reflected Heidegger's ideas on truth and art which I have found very helpful in their content as well as a way to progress in this research. Malpas (2015) tells us that Heidegger saw art as disclosing the world and that truth was an event through which what is said about the world and the world itself are revealed simultaneously. Thus the truth is made up of the concealed and the unconcealed and the movement between these is a kind of playing which is the essence of art. This is reminiscent of Winnicott's discussion on playing and reality (1971) as well as the role of art and culture for adults (Winnicott, 1953). The experience of art reveals precisely because of what it conceals, just as understanding is possible because of the prior involvement of understanding. It is, it seems to me, this tiny glimpse of in-betweenness that is both understanding and the play itself. It is as though we slide between the two for a second. In this sense our partiality is not a barrier to understanding but is its enabling condition.

Malpas (2015) suggests the Gadamerian idea of prejudgements is itself a type of hermeneutic circle. This reflects the idea in prejudgements that if we are fully open and given over to the matter being reflected on then our prejudgements can be changed and so we enter another hermeneutic circle. Another change can occur in dialogue which is the nature of our horizon of understanding. Gadamer saw our understandings as being historically situated and that history determines a lot about how we see things, thus our consciousness is historically situated but through dialogue this horizon can change.

Method

My method is a literature review which will be underpinned by the hermeneutic circle. The validity of the method is contained within the epistemology of hermeneutics of understanding human action rather than explaining causal relationships (Schwandt, 2000, p.195). The validity is produced by the method of ongoing reflection and discussion of the matter at hand which is comprised of the phenomena and of my foreunderstandings and the changes in my perception.
Literature Review

A hermeneutic literature view is not a systematic literature review which is structured, rigorous and objective leading to it being replicable. The hermeneutic is original and intellectual, flexible and iterative and allows for understandings that produce new questions. Because of this a predefined literature search is not helpful, (Boell & Cecez-Kecmanovic, 2014). The searching I have used is a snowballing method of following references when a particular idea, phrase, title of an article or particular author whom I may or may not heard of, chimed with me somehow. This following up often seemed immediately important or critical to advance my understanding or it might just sit as my expectations were that this reading was not directly in line with my research. These expectations were and were not met, in a random and inexplicable manner. I am also drawn to poetry and found myself attracted particularly to the romantics, to their drama and to their modern ideas of democracy and human rights mixed with awe of the unknowable in each of us.

Hermeneutic Circle

In the hermeneutic circle of the literature review understanding is a fusion of the horizons of the researcher and the text. The text, like the researcher, carries its own historical situatedness and context. We see from this that the focus is at a much finer level of granularity where language and possible meanings come to play in the term "understanding". This fusion is a dialogical encounter, where different levels of reading provide further elucidation both of what each brings and what the process of understanding is, in fact that the two are entwined. This is the hermeneutic circle. Excellent, but remember to keep the reader in touch with the research question!

Another process essential to a literature review and articulated by hermeneutics is the relationship between the body of literature and the individual text, each influencing the other. The reader slowly encircles relevant texts, and to get from the whole to the parts the researcher
is searching and to move from the part to the whole they are reading so with this movement the whole is changing together with the meaning of the parts, (Boell & Cecez-Kecmanovic, 2010).

Reading and Finding Meaning

I have found I need to read most text four times to have a sense both of what the meaning is to me and what it means intellectually. The emotional and historical meaning of a text is a combination of my history and what is happening today and this tends to be embodied in the sense of feeling it in a part of my body. The text also has a meaning that connects with what it is saying to other texts. It is also part of my building intellectual and theoretical knowledge and it links with my clinical work as I find resonance with my experience in sessions or clinical supervision and this is embodied at times as well. Here my experience is different to hermeutical theory which suggests that understanding is only cerebral. For me it can be visual or sensual. These different opportunities for understanding come out of the four readings I undergo. Part of the process for reading and finding meaning is talking with supervisors, colleagues and with my psychotherapist. There is also reading fictional literature, discovering new artists and artworks and watching documentaries all of which confirms for me the fun element of play and its relationship with context. While I am preoccupied with one element of my topic, it seems to pop up in serendipitous ways in different mediums. When I connect with these “explanations” in different mediums I feel encouraged to continue with my line of thinking. These experiences feed into my understanding of the core texts and function as a kind of translation into my own sense of myself from which I can further understand the texts and continue in the hermeneutic circle. I think these activities help to keep my process loose and open and might prevent what Gadamer refers to as “arbitrary fancies” or superficial interpretations based on unreflected conceptions because of hidden foremeanings (Schuster, 2013). I wonder if hidden foremeanings might relate to preconscious or unconscious beliefs or wishes. This points to the significant role dreaming at night has played in my process where the associations between the concerns of my unconscious self and the material at hand are definite but not necessarily direct. The connection between the unconscious revealed in dreams at night and what I am doing during the day is irrational and deeply significant at deeper levels of
understanding. Notetaking (and journaling) is another aspect I have found essential to progress in the circle, transcending horizons while remaining oriented to the phenomenon (Fleming, Uta & Robb, 2003).

Achieving distance

Schuster (2013) points out that the unreflective responses of the first reading are important aspects of the process in beginning with foremeanings. This is an emotional response to the text and is a precondition to openness. At the second reading she quotes Ricoeur (1998) who suggests that it is both the familiar and unfamiliar that need to be considered because we need to understand the other and oneself. This level of reading is analytical and from a distance and creates space between the researcher and the text however, she says, overall she follows emotional pathways created by the emotional encounter (p.202). My reading at this stage of the project has been a journey to understand intellectually what is understood but which like many emotional experiences is (almost) impossible to articulate. The reading and rereading brings the concepts of theory to the fore and the notes reflect the ideas that I want to focus on. Distancing myself and adopting a critical stance provides the opportunity to reach out to the entire body of knowledge the literature is using the foremeanings to see more deeply. These provide the context for notes and the journal holds the emotional story of encountering the loved, the hated, the strangeness of the text.

The later reading reflects continued efforts to circle into what is important in the article I am reading and to begin to read between texts and understand this dialogue. Now I can begin to link parts of the article to others and the parts of article to its whole. Now I am beginning to put together my foremeanings and understand what I have experienced in this reading. This is when I can begin to understand themes or what I "see in a text which is signalling where further thinking and discussion will occur," (Smythe, Ironside, Sims, Swenson & Spence, 2007).
Summary

This chapter has outlined the methodology and method that I will use to consider my research question. Initially, I focussed on questions of moral philosophy. I have presented my chosen interpretive methodology, highlighting the importance of intersubjectivity. The hermeneutic literature review method has been introduced, including practical application. I have specified my positioning more towards the phenomenological end of the hermeneutic spectrum than the positivist.
Chapter 3

Research findings: The development of dimensionality

Introduction

In this chapter the main topic is the development of dimensionality in the first six months of the life of the clinical infant. Most of the clinical work quoted here is with children or even adults and the theoretical statements are extrapolated back to early infancy. My aim in this chapter is to explore the child’s development of dimensionality using the pioneering work of Bick and Meltzer. I will then consider the ideas of Bion. Bion is considered to have contributed so fundamentally to modern Kleinian thinking that it is called “Kleinian/Bionic” according to Mitchell and Black (1998, p. 102). Bion’s contributions are considered by Grotstein (2009) to define the psychoanalytic zeitgeist. I think he is particularly relevant to this study because of some of his most famous work on “container contained” (on the relationship between mother and infant) and the emotional origins of thinking. I notice that Bion’s and Bick’s work both centre on the internal function of the containing parts of the self being dependent on the introjection of an external object which is experienced as able to fulfil this function. All these writers shed light on the beginnings of consciousness. Within this the idea I am interested in is about the infant being able to understand time and space and later to consider how that is connected to dreaming.

Bick, Meltzer and Bion were all students of Klein and thus their work is derivative of hers, although they all made significant extensions to her ideas argues Grotstein, (2009). I will begin this chapter by placing Melanie Klein’s work in context and considering her status in psychotherapy.

Melanie Klein

I find Klein’s writing to be visceral and deeply affecting. I wonder if her originality means that her work cannot be broken down and this is why it is so powerful. “Melanie Klein (1882 -1960) has had more impact on contemporary psychoanalysis than any other psychoanalytic writer since
Freud,” (Mitchell and Black 1995, p.85). Her intention, Mitchell and Black add, was to validate Freud’s hypotheses through direct observation and clinical work with children and yet she had a different view of the mind to Freud. Her descriptions of infants and of developmental activities seem to me to be very real and like real life dramas. Possibly this is because her theories were drawn from so many hours of direct observation of children that the drama of the playing she observed is embedded in her theorising. This is true to a lesser extent of all the writing be it theoretical or clinical case studies explored in this study. I find myself deeply caught up in the epic life drama depicted which is the ring of truth of real experience. As an example:

…the infant may have a grievance that the milk comes too quickly or too slowly; or that he was not given the breast when he most craved for it and therefore when it is offered, he does not want it any more. He turns away from it and sucks his fingers instead… (Klein,1957, p.185).

Babies and their mothers in Klein’s world are very alive, full of foibles and very human. The humanity in her work is commented on by Mitchell and Black (1995, p.113) asserting that she had in mind a distinctly human infant who is born with the knowledge of the breast, “Just as the infant’s mouth is anatomically shaped to fit the mother’s nipple, the infant’s instinctual impulses are shaped to fit the distinctly human world into which she was born.”

Clearly there is criticism of object relations. I say this by way of placing this area of psychotherapeutic theory in context as part of my introduction to the discussion of an infant’s dimensionality. If the reading material is unbearable then it could be that it is triggering an unwelcome message. This surely is the grist for the psychoanalytic mill which formulates and offers new things to be afraid of, what they stem from and what we might do about it. In psychotherapy we are dealing with the unconscious which by definition does not fit in, (Phillips, 1997). Criticism of Klein also refers to her inappropriate negative vision of human nature and overly complex view of infant mentality. Likierman (2001, p.11-12) places the criticism into the context of Klein’s professional life, that after the harsh rebuttal she received for her ideas in Berlin, in London she met with great success which “released Klein’s (sic) inhibitions,” so that what resulted was a “torrent of excess” between 1926 and 1930. Likierman (ibid) argues that
this is one early period of Klein’s work yet is not her final one but that it arrests attention “at the expense of deeper and more subtle shifts in her outlook,” particularly her exploration of primitive mental processes which underpin and function simultaneously in the adult rational mind.

After Klein’s death Meltzer and Bick were “terribly lonely” and trying to orient themselves as she had “shouldered the load” for many years (Meltzer, 1975a, p.289). I take this to mean that Klein had taken the responsibility for progressing development of object relations in providing leadership not only, I imagine, because of the strain of “Controversial Discussions” of 1942-1944 with Anna Freud over the nature of psychoanalytic theory but also because of the difficulties in disseminating her ideas. Likierman (2001) believes that Klein was mainly ignored for most of the twentieth century and that only a few of her ideas (such as projective identification) were circulated through word of mouth in professional usage. The impact of this was that her wider oeuvre was not read or understood and thus, her reputation suffered.

**The concept of projective identification**

I will briefly introduce the concept of projective identification which was first noticed in young children by Klein (1946) who described it as a defence and developed by others such as Bion (1962a) who redefined it as a form of communication. Quinodoz (2010) describes it as best understood in the non-verbal communications between mothers and infants. When infants cry they know something is wrong or uncomfortable but not much else about their distress. Listening to the cries the mother will intuitively understand inside herself what the problem is and will discuss this with the baby. Quinodoz says that once the baby is calm they will have learned what the meaning of the unpleasant feeling was. This is how babies begin to learn about themselves and how to communicate with their mother. I think what is also very important is that Quinodoz points out that even if the baby cannot be completely soothed, that through the mother’s words its distress becomes meaningful. The baby is thus not left with a undefined or mysterious bad feeling. The words, I suggest Quinodoz is saying, put the infant in relationship to its pain, they provide context for its discomfort. I discuss this in more detail later.
A world of sensations

Meltzer’s idea of dimensionality, (1975a,1975b) comes not only from Klein’s projective identification (1946) but also from Bick’s idea of second skin (1968, 1986). Bick was known as a teacher and as a pioneer in infant observation. Her observational methods which began in 1948 spread to France, Italy, Norway, Spain, Australia, and South and North America, (Piontelli, 1985). The idea of second skin can be seen in earlier writing where she argues that the observer’s notes demonstrate convincingly that the infant expressed his love and his anger towards his mother and the breast, by his handling of her body: “We noted that although the mother was very vocal herself, the baby remained relatively silent, with a preference for tactile and kinaesthetic modes of relationship and communication,” (Bick, 1964, p.183).

Meltzer (1975a, p.296) reports Bick as saying that her child clients “stick” and adds that Bick would push her hands together but she didn’t seem to know more than that. I am quite excited by the creativity in this vignette as it gives a window into the discovery-experience which I link with the creation of artworks as expression of perception of experience which I am interested in. It is a type of exploration.

Tustin’s (1969, p.31) writing creates an understanding of the experience of a tiny infant where the body is not experienced as a body but as separate organs: “At times he is likely to feel all mouth or all belly,” (Tustin,1969). She explains that it is a passive state in which body parts are undifferentiated until they are experienced as being contained by a skin and at this state there is no sense of self or not self, of inside or outside.

Binding function of the skin

Bick’s primary idea in her 1968 paper is that in their primitive form the parts of the personality need the skin to bring them together where the skin functions as a boundary. But the binding and containing needs the introjection of an external object. Later the baby’s identification with the binding function of the object takes over from the unintegrated state and the baby now has a sense of inner and outer spaces. She explains that what the child understands is that their body
finishes here and their mother’s begins there. This awareness gives the infant a sense of time and space in the sense of beginnings and endings, (Bick, 1968, p.483). In terms of my question of how does dimensionality connect with dreaming, these writers explore what is necessary to have a sense of self and to understand bodily separation which supports the sense of beginnings and endings and thus time as well.

The patients of these writers described here introject a good object (Meltzer 1975, p. 307) but do not know how to make use of it and so have no sense of inside and outside, (Meltzer, 1975, p.298). Bick says:

The need for a containing object would seem, in the infantile unintegrated state, to produce a frantic search for an object – a light, a voice, a smell or some other sensual object – which can hold the attention and thereby be experienced, momentarily at least, as holding the parts of the personality together. The optimal object is the nipple in the mouth together with the holding and talking and familiar smelling mother. (Bick, 1968, p.483).

The term “object”

I will briefly here comment on the term “object”. Bick above refers to the baby who seeks so urgently some “sensual object” like a light or a voice or a smell which will hold his attention and thus hold himself together. An object is an internalisation of an emotionally significant figure or relationship. Internal objects are experienced as relating to each other within the self. They may be identified with and assimilated, they may be felt as separate from but at the same time as existing within the self. The state of the internal object is considered to be of significant importance to the development and mental health of the individual. Damaged internal objects cause enormous anxiety and can lead to personality disintegration, whereas objects felt to be in a good state promote confidence and well-being, (Bott Spilius, Milton, Garve, Couvey & Steiner, 2011).
When the object is "faulty" (Bick, 1968), and cannot hold like a skin the infant develops its own "second" skin which is a false sense of independence, described in detail by Bick (1968), Tustin (1969;1980;1984;1988) and Meltzer (1975a, 1975b). This phenomenon is referred to by Tustin as adhesive equation and is an autistic response to traumatic separation (1984, p.282). She says:

In Bick’s terms, bodily separateness seems to have been experienced before the containing function of the skin had become firmly established. These children seem to have been forced into becoming independent too soon. No alive and thinking person seems to have been experienced as separate from this loosely assembled self. (Tustin, 1969, p.34)

A geography of the mind based on time and space

In this dissertation I will be considering a model of the mind and what happens when it goes awry in the face of infantile trauma. It seems that so far I have discovered that dimensionality is about infantile comprehension and use of time and space. The most important aspect of this is the baby’s learning about being a separate being and about inside and outside which is learned by the experience of regular repeated maternal nursery care which leads to and produces the ability to introject a good object.

In my own process of wrestling with the material I have noticed I find it to be a slippery subject for some reason and my problem has been uncertainty about understanding how we get ideas of space and time inside us and what does this really mean. A key moment was when I began to understand the concept of an embodied idea of inside and outside through introjecting a good object from outside. The experience of understanding this was less words and more a feeling almost as though I was shoring up an idea that was a little shaky in me. I saw in my mind’s eye a line going from my mother’s head into my head and then a cube appeared in my head. I wondered if it was a graphic representation of introjecting an object.
Phantasy

Meltzer’s depiction of dimensionality as a developmental concept stems from his idea of a geography of the mind. He describes a map of the mind (1975) which is a metaphorical way of exploring how the invisible neurological processes work. The dimensions of space are height, breadth and depth and time. Meltzer (p.223) explains that these components are our “life space” which itself is part of our geographical phantasy (of the mind). Here Meltzer is referring to Klein’s concept of phantasy which stemmed from Freud’s idea. Segal (1991) argues that while Freud considered phantasy the psychic reality, he did not write a whole paper or book about it. Segal observes, “One could say that generally for Freud phantasy is pretty close to daydreaming,” (1991, p.16). Observing children Klein (1936), took the idea further. She expostulated that phantasy is an unconscious process which dominates the child’s life from the start, beginning with the satisfaction of being fed which itself is comprised of the alleviation of hunger and the pleasure of sucking. Phantasy, she argues, (Klein, 1936, pp.290-292) is the most primitive mental activity, and further, all external and internal stimulations are responded to by either aggressive or pleasurable phantasies and for a tiny baby most of these phantasies are about their mother’s breast. Klein points out that at this time the baby in experiencing discomfort with a breast will project his bad feelings onto the now “bad” breast. Similarly the baby will take in milk and also in phantasy introjects what he perceives in the outside world and swallows it, possessing both the good and the bad in his unconscious phantasy inside him. Initially the infant introjects the breast, then the whole mother (both good and bad) and so on. It is the infant’s experience of painful external and internal stimuli that provide the basis for phantasies about painful internal and internal objects. The phantasies are initially based on the experience of good or hostile breasts each which are part of circles involving the interplay of environmental and internal psychical factors. Lessening the amount or intensity of painful stimuli helps to decrease the strength of the frightening phantasies. The more the infant is involved in the benevolent circle the more his emotional development is supported.

In Meltzer’s phantasy of the geographical phantasy of the mind, we are viewing space or height, breadth and depth on the dimension of time. I think this means we are looking at these ideas about how the mind works developmentally which is to say this thing happens after another as
an aspect of growth. The actual way time operates in this phantasy is that it is first circular, then it is oscillating and then it is linear, that is from conception to death. Meltzer is saying is that in each of these developmental periods, time is experienced in a particular way and height, breadth and depth sit within that way of experiencing time.

The infant who is developing full dimensionality will move along the dimension of time and experience the other three dimensions of space from that perspective and my question is how does this development connect with the capacity to dream? I still feel a long way off from this but my interest in dreaming is also an interest in imagination and why are some people more imaginative than others, in the sense of why can some people dream and create imaginatively more effectively than others? So far I have understood that Meltzer has further developed an imaginative developmental model for the geography of the mind based on Klein's object relations. Meltzer (1975, p.292) mentions this referring to Freud’s response to Little Hans’ story of the stork box:

That was the evidence that Mrs. Klein didn't sweep aside and which put her onto this whole question of spaces, spaces inside the self, spaces inside objects and a place where concrete things happened that had relentless and evident consequences...

Meltzer is making an important point about the number of times Little Hans refers to spaces within spaces which Klein picked up on as an aspect of phantasy and symbolisation. Little Hans was a child (Freud, 1909) who talked about his fear of horses. In doing this he also talked about his life including his relationship with his baby sister Hanna. According to Freud, Little Hans expressed a wish that the family should pay the stork money not to bring any more babies “out of the big box” where the babies are. Later Little Hans saw a box in their hallway and remembered that before Hanna travelled to their holiday house in the railway carriage with the family she always travelled in travelled in the box which Mummy had. The box was full of babies, Little Hans said. Hanna was brought by the stork and put into the bed by the midwife but she was alive when she lived with the stork who itself got her from the red stork box. Hans said that Hanna could run around in the stork box as well as eat meals. He later revealed that he himself also travelled in a box. The stork, itself, has a pocket in its beak where it keeps its latch
key. Summarised like this it is evident that spaces are a significant aspect of living and being that Little Hans explored and attempted to understand in his imaginings. It is apparent that there is a depth to life and that everything is contained and contains other things.

Meltzer divided the life space into inside and outside the self, inside and outside internal objects, and in addition the nowhere of the delusional system which, continuing the spatial metaphor, he describes as “outside the gravitational pull of good objects” (1975, p.223). There are thus four dimensions to the life space and in Meltzer’s idea the development along the track of time consists of experiencing all these dimensions, eventually simultaneously. This seems to be a model then of the organising of the experience of self in relation to objects and he says that inherent in it is differentiation of self and other. He correlates the development of dimensionality with Klein’s developmental stage of splitting and schizoid-paranoid saying that splitting and idealisation of the object comes between the establishment of two dimensionality and three dimensionality.

**A description of dimensionality**

In my process I found it very hard to imagine one and two dimensionality, particularly adding in the idea of time either being circular or oscillating. I wondered if I could continue to locate these ideas in my own mental geography when I considered dimensionality until I came across a description of one and two dimensionality (Maiello, 2017) which discusses an 1884 satire called “Flatland – A Romance of Many Dimensions” by a philosopher and mathematician named Edwin A. Abbott. Flatland is a two dimensional place inhabited by geometrical shapes. The hero is a square who meets a sphere and they travel to three dimensional Spaceland. According to Maiello the narrative is about the square’s exploration of three dimensionality during the day and at night his dreams about his own one and a-half dimensionality.

Maiello links Meltzer’s descriptions of different types of dimensionality with the square’s real and dreamt experiences and it is the novel’s descriptions written more subjectively that I connect
with imaginatively. The square dreams of a one dimensional place called Lineland. For the Linelander:

the Straight Line . . . constituted the whole of the world, and indeed the whole of Space. Not being able either to move or to see, save in his Straight Line, he had no conception of anything out of it . . . . Outside his World, or Line, all was a blank to him; nay, not even a blank, for a blank implies Space; say, rather, all was non-existent. (Maiello, 2017,p. 55).

Maiello provides us with a view of two dimensionality (2017, p.37). Referring to Abbott she says: "The author writes that, in Flatland, shapes 'move freely about, on or in the surface, but without the power of rising above or sinking below it, very much like shadows'."

Meltzer describes this phenomenon in his paper Adhesive Identification:

Another child, for instance, tended to draw pictures of houses, in which there was a house on this side of the paper, and there was a house on the other side of the paper, and when you held it up to the light, you saw that the doors were superimposed, you know, a kind of a house where you open the front door and step out the back door at the same time. (Meltzer, 1975, p.299)

In Abbott's Flatland, life is monotonous; symmetry and regularity are the guarantees of safety. Meltzer says that the self in a two dimensional world experience time as circular since this self would be unable to conceive of enduring change or development. "Circumstances which threaten this changelessness would tend to be experienced as break-down of surfaces, cracking, tearing, supuration, dissolution, lichenification …" (Meltzer, 1975b, p. 225.)

Maiello (2017, p.37) notices that Abbott's Flatlanders are "wholly devoid of brainpower, and have neither reflection, judgment nor forethought, and hardly any memory."
Meltzer (1975b, p. 255) says that two-dimensional functioning suffers from a lack of imagination and thinking capacity because of “the lack of an internal space within the mind in which phantasy as trial action and therefore experimental thought could take place.”

**Three dimensionality: the experience of containment**

Meltzer implies here that this level of perception cannot dream and it is at the third level of dimensionality when the development is such that phantasy and imagination appear. He tells (1975, p.226) us that the infant discovers it cannot penetrate the object and thus experiences a “new level of complexity, the three dimensional one, of objects, and, by identification the self, as containing potential spaces”. The inside of the object has the meaning of a prior state of mind because according to Meltzer (1975, p.226) the experience of containing is predicated on the experience of being contained. Effectively also this is felt and then that is felt which implies an experience of time. This movement is from inside to outside the object. Meltzer says the phantasy of projective identification can now develop and so there is a sense of differentiation from the object as well as reversing back to identification thus implying time can move in both directions. The release of projective identification allows for time becoming one directional. Connected with the idea of an internalised good object and the beginnings of projective identification in three dimensionality is Bion’s (1962a) idea of “container/contained” which I will now examine.

**Container/Contained**

Melanie Klein’s (1946) concept of projective identification can be seen, (O’Shaughnessy, 1981, p.181) as the germinating force behind Bion’s development of his theory of the container/contained. Klein saw projective identification (discussed earlier) by the infant not merely as an attempt to rid itself of unpleasure (with little regard as to its final destination), but as an attempt to project the intolerable fragments “into the mother” (Klein, 1946, p.183). From the perspective of understanding the connection between dimensionality and the adult’s
capacity to dream it might be useful to view container and contained from the perspective of the maternal dyad. An initial idea that Bion proposed is that the infant is born with an innate capacity for a rudimentary type of thinking: he has the expectation of a breast. (1962a, p.306).

Fisher (2006) argues that containing expresses a K state of mind, where K is part of Bion’s structure of emotional links representing knowing or a desire to know as opposed to an acquisitive or materialist approach to gathering up information. The other links are L and H (love and hate). Fisher sees the emotion of K as similar to the emotional experience of feeling curious such as when we cannot wait to hear the end of a story (2006, p.1221). Britton (1998, p.11) is quoted by Fisher as arguing that “…the drive for knowledge is an innate, ego instinct,” and Fisher (2006, p.1224) also refers to Bion’s claim that being starved of the emotional truth of one’s situation is analogous to physical starvation, particularly because truth is essential for psychic health. This point is important for my question because it suggests that to be able to dream we need to know our own emotional truth. Truth would seem to be part of dimensionality.

Bion (1962a, p. 310) in paragraph xvii follows his comment about the need for conjoining sense data to facilitate “the conjunction of one set of sense-data with another” (i.e the understanding by the mother of the infant’s distress), as an aspect of mental health, with the statement in the following paragraph that the relationship of the emotions to the psyche is the same as that of the senses to objects in time and space: that senses or emotions give the psyche or objects meaning by providing a view of what is and what isn’t. He goes on to say a sense of truth is experienced if we can see, for example, that an object can be experienced as both loved and hated. This is a correlation and this is the purpose of communication. In reading this aspect of Bion’s theory I notice a sense of profound gratitude and have felt moved to tears. I realise that I feel met (contained) by him in my need to think deeply. In Bion’s theory I feel that this part of myself is found and understood which is relieving and permissive.

I wonder if the process involved in container and contained could be seen to be withstood because of K. This is the emotional desire to know. According to Wadell (2002, p.30) the authenticity of the quest for the truth of one’s experience is lodged in the capacity to have the experience, in the sense of staying with it rather than avoiding it. This is a helpful idea for my interest into the connection between dimensionality and dreaming because it would seem that
Waddell is saying that in order to really want to know how we feel in an experience we have to be able to actually have the experience and the feeling about it. It would seem that we have to be able to tolerate the experience in order to actually have a feeling about it. So how do we do that? Waddell says that the capacity to have the experience came from the mother’s ability to bring her thinking and ability to encompass her infant’s psychic chaos to the infant which established a precondition for more integrated capacities. This is seen in the mother’s ability to keep thinking and engaging with her infant and not jump to resolutions reflecting her own reluctance or impatience. This means, for our purposes that it is the baby learns from the mother to tolerate frustration and to stay with difficult feelings and so to be able to be gratified by understanding. According to Waddell (2002, p.32) this is the maternal reverie which Bion refers to (1962a and 1962b.) Maternal reverie is the state of mind that the infant requires of the mother that is in a state of calm receptiveness to take in the infant's own feelings and give them meaning.

**Reverie**

The mother gives the baby back his experience in a way that is understandable to him. The mother is the container and the baby the contained. Bion shows this in (1959, p.295) where, describing a client who experiences Bion as hostile and defensive. The client’s mother Bion feels was dutiful but impatient with him as an infant. Bion deduces that the mother needed to respond more fully rather than just by being present, that the infant was trying to communicate his dread and fear by projective identification. Bion says that from the infant’s point of view she should have taken into her the baby’s fear that he was dying. An understanding mother can take such a feeling in and retain a balanced outlook.

Meltzer maintains that, in normal development, “the feeling of being adequately contained is a precondition for the experience of being a continent container . . .” (1975b, p. 226).
Summary

In this chapter I briefly introduce the status and place of the work of Melanie Klein and her students and associates in psychoanalysis. I introduce the ideas of Esther Bick on the binding function of the skin and its role in the beginnings of the concept of time. I follow this with a discussion of different types of dimensionality including the problems of two dimensionality and the achievement of three dimensionality that a sense of containment provides. I link this to the experience of time and the beginnings of Bion’s development of Klein’s idea of projective identification before I discuss Bion’s idea of K and truth, which I posit might connect truth with the ability to dream. I then consider the role of container and container with the ability to withstand having an experience before briefly looking at the nature of maternal reverie.
Chapter 4

Research findings: Symbols, creativity, phantasy and dreaming

Introduction

In Notes on Symbol Formation (1957, p.391) Hanna Segal says that the understanding and interpretation of unconscious symbolism is one of our main therapeutic tools. She goes further, “We may be faced with the task of understanding and recognizing not only a symbol but also the whole process of symbol formation.” Hanna Segal was a Klein analysand and “One of the most noteworthy representatives of Klein’s thinking,” (Quinodoz, 2008, p.1).

Segal’s comment encapsulates so much of the kind of theory I am particularly drawn to at this stage because it is about the birth of thinking and the imagination which I believe is associated with robust mental health, something about what I feel is “good strong imagining” where “strong” indicates clarity or the capacity to become clear enough and “good” is connected with, but not bound to, reality. She goes on to directly connect types of symbols with different development levels in the infant. This, as I see it, is central to my question of the connection between dimensionality and dreaming.

In the previous chapter I considered the development of the infant and the different types of dimensionality they may achieve in their early days and weeks and what lies behind that. In this chapter I want to explore the relationship between three dimensionality and dreaming.

The beginning of the process of symbol formation occurs about the same time as the infant’s use of projective identification, argued Segal (1957) which is during the first three or four months of life (Klein,1952, p. 61) while the infant is in the paranoid-schizoid position.

Segal describes projective identification as a subject which in phantasy projects parts of herself into the object so that the object becomes identified with parts of the self that it is felt to contain. She (1957, p.393) says further that the subject projects internal objects outside and identifies them with parts of the external world that come to represent them. While this is the beginning of
the process of symbolization she notes that, “The early symbols, however are not felt by the ego to be symbols or substitutes, but to be the original object itself,” (ibid.) Segal calls them “symbolic equations” and refers to the non-differentiation between the thing symbolized and the symbol as a part of the disturbance between the ego and the object. Here she is referring to projective identification as being symptomatic of Klein’s paranoid schizoid position which I will describe below.

**The paranoid – schizoid position**

Klein (1952, p.61) argues that that from the beginning of external life the baby is subject to pain and frustration due to the birth process itself as well as the loss of the uterine environment. These experiences are understood to be persecutory attacks which remain a way of interpreting the privations of life throughout life. Klein supported Freud’s dual drive theory (1952, p.62) where the interaction between libidinal and aggressive human instincts is always at play, even in infants. Where the aggressive instinct is strong an infant will experience greater persecutory anxiety. How that anxiety is managed is central to the defensive processes of the paranoid-schizoid position the infant is in for the first four or so months of his life (1957, p.191).

**Splitting the object**

Splitting the object is a significant phantasy activity or defence during this time. Splitting separates good from bad experiences, thus simplifying or dispersing the intensity of the experience and protecting the good experiences. Klein identified splitting the object as a way of preserving the fragile ego which lacks any cohesion in the early months from coping with an object that while good is also bad. Klein was particularly interested in the splitting of the breast. The baby experiences love (gratification) and hatred (frustration) towards the mother’s breast and separates, in phantasy these feelings of good and bad, evoking a good breast and a bad breast. However she says that there needs to be a capacity for love which prompts both integration and primal splitting. Splitting protects the good object and allows the ego to integrate. Klein posits that a weaker capacity for love involves a split that occurs between an
idealised object and a persecutory object (1957, p.192). Here the deep division indicates destructive impulses and the idealisation is actually a defence against these emotions.

**Splitting the ego and fragmentation**

Splitting the object may be accompanied by the splitting of the ego (Klein 1946, p.100) leading to a sense of a destructive force within but does not have to be. The infant may feel it is falling to bits or is fragmented as an aspect of schizophrenic processes, however (Klein, 1957, p.102) in normal development the infant again and again finds the good object and so passes through this experience of fragmentation. The infant who suffers too much, Bion contends (1957) splits both objects and ego into minute fragments and then projects them outwards where they penetrate objects. The client or infant phantasies that that now the fragmented objects and ego:

… continue to exercise their functions as if the ordeal to which they have been subjected had served only to increase their number and provoke their hostility to the psyche that ejected them. (Bion, 1957, p. 267)

In anxiety the infant may in phantasy draw on its aggressive instinct and attack the bad breast which is then felt to be in bits inside the infant, while the good breast is felt in phantasy to be whole inside the infant unless the anxiety is too great and the good breast is in bits too. “Therefore the phantasies and feelings about the state of the internal object influence vitally the structure of the ego,” (Klein, 1946, p.100)

The term phantasy is used to mean “the mental expression of instincts,” (Segal, 1973, p.13). Unconscious phantasies occur on deep unconscious levels and accompany all the infant’s experiences, for example a hungry baby can hallucinate a breast to comfort itself or it can feel unhappy and irritable when it phantasies an unsatisfying breast. Phantasies will continue in mental life throughout development, (Klein, 1952, p.251). At his stage, Segal argues, the infant going to sleep sucking his fingers, phantasies that he is “sucking or incorporating the breast and goes to sleep with a phantasy of the milk-giving breast inside him.” Similarly the screaming infant phantasies he is attacking the breast and experiences his own screams as attacking him inside, (Segal, 1973, p.13).
In my process I notice a move towards some sense of gratification as I understand Klein saw the paranoid schizoid position as a normal defence against anxiety in early childhood. It supports the primitive ego and allows development to the depressive position. Its processes of projective identification, splitting and idealisation create structure and order out of sensory chaos while introjection (the taking in and internalising) of an idealised good object offers the child protection against persecutory anxiety from which develops a stronger and integrated ego. Thus the tendency to split good and bad lessens as the fear of bad objects diminishes.

I am wondering about this theory of development and the enormous energy that the infant seems to expend in order to develop. What sits at the back of my mind is the question of where does the infantile vulnerability and volatility of the paranoid-schizoid position that creates and requires so much energy go? The painful developmental system described seems to need a purpose beyond normal development.

The role of the breast and the ego in the development of a good object

Reflecting on the series of nervous crises that this period of early development that the paranoid-schizoid position seems to be, Klein comments (1957) that the child who has been well loved withstands the temporary states of anxiety and grievance and re-finds the good object each time and time again which is an essential factor in establishing and in laying the foundation of stability and a strong ego (Klein, 1957, p.187). This indicates what seems to be emerging in the relationship between the development of the relationship between space and time and the capacity to dream. These comments come after a discussion on the child’s relationship to the breast which I find very moving and clarifies my understanding of “the good object” which is so central to my enquiry into the connection between dimensionality and dreaming. Klein (1957, p.177) tells us that in this piece of work: “Here I intend to make some further suggestion concerning the earliest emotional life of the infant and also draw some conclusions about adulthood and mental health.” Klein tells us (p.178) that if the breast:
…this primal object, which is introjected, takes root in the ego with relative security, the basis of satisfactory development is laid. Innate factors contribute to this bond. Under the dominance of oral impulses, the breast is instinctively felt to be the source of nourishment and therefore, in a deeper sense, of life itself. This mental and physical closeness to the gratifying breast in some measures restores, if things go well, the lost prenatal unity with the mother and the feeling of security that goes with it.

Here Klein is describing the process by which the mother, as she says, is turned into a loved object if the infant attaches strongly enough to the breast. She suggests a possible beginning of object relations and its defences such as projective identification as a precursor to symbol formation when she says (1957, p.179):

It may well be that his having formed part of the mother in the prenatal state contributes to the infant’s innate feeling that there exists outside him something that will give him all he needs and desires. The good breast is taken in and becomes part of the ego, and the infant who was first inside the mother now has the mother inside himself.

Klein makes clear here that the new situation of being outside the womb is reinterpreted by the infant as providing the security of the womb if all goes well. Later in the article she says that gratitude is a derivative of the feeling for love. It helps build up a relationship with the good object and a feeling of goodness in self and others. I wonder if this cathexis is enough to balance, for me, the extremities of nervous anxiety that I feel that sits in my paranoid-schizoid position in relation to this piece of work.

I sense a real struggle for the infant from the locked in two-dimensional world of the primitive or pathological paranoid-schizoid position to the three-dimensional world of full symbol formation. The shut-down world uncomfortable and essentially devoid of meaning, is described by Meltzer in his work on the claustrum (2008) where he describes the forceful projection by the infant (in phantasy) into the unresponsive mother where the experience is then spatially of being in dark, and confined spaces such as the mother’s anus.
The depressive position

In the second half of the first year, as the baby's internal and external worlds become less polarised, both good and bad are perceived in whole objects. The baby has a wider sense of gratification, her world grows more differentiated and her capacity to express and communicate with her world increases (Klein, 1952, p.72). Klein is describing a more integrated experience where shades of grey exist and the baby moves into the depressive position. Fully formed symbols occur at the same time as the depressive position which also correlates with the oedipal stage (Britton, 1989). Segal (1957) describes symbolisation as an integral aspect of the development from paranoid–schizoid position to the depressive position. This mood of regret and ambivalence and conflict about bad feelings to the now whole object appear in a period when symbols operate in a new way, (Segal, 1957). She says (1957, p.394) aggression felt by the infant towards from the original object is displaced onto the symbol and so the guilt associated with fear and loss in relation to the object is reduced. The aim of displacement is to save the object and the guilt experienced by the infant's ego in relation to it. The symbols are created in the internal world as a means of restoring, recreating and owning again the original object. A new increased reality sense allows the infant to feel as if the symbols are created by the infant's ego and therefore never completely equated with the original object. The symbols created internally can be re-projected into the external world endowing it with symbolic meaning. Segal's thinking seems to echo Klein's comments on reparation (1963) that it is the reparative function of the depressive position from which real creativity springs and that it is symbol formation that lies at the heart of this.

Notes from dissertation diary on reading this:

"--am so glad to have found this. There is a feeling that someone has been here and done the work before hand and is helping me. I do not have to do all the work. Someone knows. There is a mind here already. This is a cumulative feeling. Similar to my feeling about Bion of the loneliness of thinking deeply and not discussing those thoughts which is not as bad as the loneliness of not thinking deeply when you need to. There is something in this about being held
in the process even if not in the content. Here I feel held in both. Experientially the work of Klein, Bick and Meltzer is highly evocative, Klein’s “memories in feeling” in Envy and Gratitude. Klein’s work is upsetting with some kind of visual memory for me but also it is highly intellectually stimulating as it is not descriptive but analytical and assertive like riding a huge wave. It is also incantatory and repetitive like the nursing routine of the mother. She is unsentimental which is refreshing and I find myself released from some of my constant neurotic asking about certain behaviours when I already know why. But she gives a lot of interesting explanations that sit behind these behaviours. I find that reassuring and freeing.”

**Envy and other bad feelings in the infant**

Segal tells us (1991, p.29) that fantasy is a kind of hypothesis that is expressed by symbols. From the point of view of exploring the link with dreaming and three-dimensionality which allows us to symbolize, what I understand here is as Klein (1931) says that the ability to fantasize is innate, however to symbolise the infant needs to have introjected a good object and thus go through the paranoid schizoid position in order to tolerate the confusion of the good and bad experiences splitting and projective identification occur. It seems that she is saying that the child’s entire world is the breast including the infant’s responses are to the breast and these may be rage, love, dissatisfaction and disappointment as well as envy or hatred. As the mother’s reverie translates the infant’s experiences into something tolerable for them gradually they experience the mother as one object and thus experience guilt and anxiety as their bad feelings and aggressiveness to what is now experienced as another person. The child was curious about the mother’s body initially as separate parts but now recognizes it as a whole. This is the depressive position and it is this level of guilt that leads to displacement, endowing the world with symbolic meaning. Segal (1991, p.56) equates symbolization with Bion’s concept of alpha function and tells us that Bion said alpha function is part of dream thoughts, myth and symbolism.
**Alpha function and dreaming**

Bion (1962a) said we were all actually dreaming all the time. He thought that (1962a, p.15) the client who can convert emotional experiences into alpha experiences and so produce dream thoughts can remain asleep (or unconscious) of certain elements that cannot penetrate the barrier represented by the dream. Thanks to the dream barrier he can remain asleep to alpha elements and dream thoughts but awake to daily activity. He is protected from a barrage of unconscious beta and alpha material. Only some material comes through to consciousness.

I will briefly summarise some elements of Bion’s ideas on alpha function. Bion (1962a) considered that alpha function turns sense experience into alpha elements which can then be turned into thoughts and that this happens whether we are awake or asleep. The contact barrier sits between the dream and reality which stops our conscious mind being flooded by sensory perception (p.27), and represents the contact between unconscious and conscious mind, (p.17). It is the dream which makes material accessible to the dreamer because when he wakes up he can describe the emotional experience as a narrative. If we have a defective alpha function then sensations cannot be turned into alpha elements. What is produced is what he calls beta elements. These are unprocessed sensations.

To look at this in more detail, Bion (1962a, p.6) says:

> An emotional experience occurring during sleep...does not differ from the emotional experience occurring during waking life in that the perceptions of the emotional experience have in both instances to be worked on by alpha-function before they can be used for dream thoughts.

This seems to imply that my feelings are processed before I dream them and they then come into consciousness as a thought during the day or as a memory of a dream on waking. This is the alpha function translating sensations into wishes or desires which explains something about the move from physical sensation via symbolism into words. Bion says alpha function produces the images in our dreams and it is another layer of symbolism combined with continuity that provides the narration of telling a dream (1962 p.15). It seems to me that this chimes with the
Bick’s idea of time (1968) connecting with the understanding of the beginning and ending of the mother’s body and with Meltzer’s (1975a) idea of the understanding of time moving from being circular to linear that enables the use continuity and narration to bring dreams into conversation.

Bion goes on to say that if a person cannot transform emotional experiences into alpha elements he cannot dream. He says, “As alpha function makes the sense impressions of the emotional experience available for conscious and dream thought, the patient who cannot dream cannot go to sleep and cannot wake up. The psychotic patient shows this state,” (1962a, p.15).

I think he is saying here that the psychotic patient is essentially subject to unprocessed sensations which is a flow of beta elements. There is a lack of processing and so a lack of real thinking but also a lack of differentiation between unconscious and conscious. It is the alpha function which brings sensations to symbolisation and consciousness but also relegates some thinking to the unconscious. Bion argues (1962a, p.8), “If there are only beta elements which cannot be made unconscious, there can be no repression, suppression or learning.” The reference to learning reminds me of the role of alpha function in the maternal reverie in helping the infant understand and cope with their unprocessed feelings and sensations which are in fact beta elements. As the mother “translates” the infant’s distressing beta elements, a K link (also referred to above) is formed in the sense that the infant may understand from the mother something about her own infant feelings.

**Beta screen**

Bion (1962a, p.20) also refers to the “beta screen” which can be experienced in session with clients when the client seems to be pouring out a series of sense impressions which may be the client’s need to “unburden the psyche of an accretion of stimuli,” (1962a, p.24). Bion describes his experience of receiving the client’s beta elements: “I tested the supposition that I contained the non-psychotic part of his personality, and then began to be aware that I was supposed to be conscious of what was going on while he was not. I was (contained) his ‘conscious.’”. He says sometimes the client appeared to be like a fetus to whom the mother’s feelings were
communicated but about which he knew little. Also the client may have a little idea of what was going on but no idea how he actually felt. I think this is a good description of working with psychotic clients and gives a clear impression of a lack of alpha function. It also might give an idea of how K links rely on alpha elements being present if one considers the length of time needed in work with psychotic people. Bion refers to such situations. He (1962a, p.22) at first thought the client was dreaming which was why the client did not know what was really going on but then he realized it was more a situation of the client not being able to dream because of a lack of alpha elements and therefore an inability to be awake or asleep, unconscious or conscious. The beta screen, made up of beta-elements, prevents connection between unconsciousness and consciousness and may appear to be like a dream. After describing four states of psychotic clients which might resemble dreaming, Bion says, (1962a, p.22), “All four states are related to fear lest the depressive position should precipitate a murderous superego and therefore to the need to have the emotional experience in which this might occur in the presence of the analyst.”

Clients approaching a depressive position might indicate the fear of the ferocious superego when they apologise for what they have said or they indicate they need to be reassured that they come back inspite of what they have said.

Bion says that the real intention of the beta screen is to evoke a real emotional response from the therapist. The response needed from the therapist via the beta screen is emotional involvement beyond counter transference because the manifestation of the beta screen is a symptom of the analyst’s unconscious. In the beta screen the alpha function is reversed and the contact barrier is replaced by its destruction. The reversal of the alpha function does violence to the ego structure associated with the alpha function. In session (1962a, p.26) Bion says that the contact barrier is like being in a dream as it permits a relationship and a sense of being in a dream as an event in actuality without being overwhelmed by emotions. Also it permits the emotions to exist without being crushed by reality.
Summary

I begin this chapter with a discussion of the beginning of symbol formation and its relationship with projective identification within the paranoid schizoid position. I argue that the good object is central to the capacity to dream and consider the role of this in the process of building up the ego. I then consider the movement to the depressive position in the second half of the first year of the baby and along with it reparation following the baby’s sense of guilt over its hostile impulses as an aspect of its necessary splitting in the paranoid-schizoid position. I discuss how symbols now operate in a new way, following which I introduce the idea of alpha function and Bion’s concept of dreaming as thinking where alpha function makes sense experience available for dreaming and where unprocessed sensations are beta elements. I link the continuity necessary for the narration of a dream with the idea of time as referred to by Meltzer and Bick.
Chapter 5
Discussion

Introduction

This discussion chapter will call on the ideas discussed in the previous chapters to answer my research question which is “what is the connection between the child’s development of dimensionality and the adult’s capacity to dream?” An idea I want to explore is that the connection between the two states of being is that people who experience these states have the ability to experience emotional and psychic truth in either state. I will discuss four aspects of this connection.

The first and seminal connection I believe is that the connection is the ability to experience emotional and psychic truth.

The second area of discussion in this chapter is that the connection is a sense of linear time which contains in it the sense of something finishing and something else starting which is the continuity of the dream narrative or the making sense of the dream. This in itself is a grasping after truth.

My third point is that the connection is a connection between two healthy mental functions and to understand this I need to examine what the connection is not. This is an examination of what the mind does when things go badly wrong, how it attempts to create a repair or a mental holding pattern prior to development. I suggest that the work by Steiner (1993) and Meltzer (1992) provides detail and descriptions on the clinical implications of Segal’s idea of symbolic equation (1957) and Bion’s idea of pathological fragmentation (1957). I will look at my suggestion first because it provides a dramatic context for the rest of the discussion.
The clastrum

To understand the progression referred to in the movement to the depressive position I want to briefly explore Meltzer’s clastrum which is a development from his ideas on internal spaces and dimensionality (Cassesse, 2002) and provides a spatial metaphor for the safe but emotionally bullied and uncomfortable, muffled experience of life without depth and without real change in a constant circular present. A part of very early infantile experience is of being trapped in a claustrophobic space. This is what it is like not to symbolize fully. This is a concrete experience. There is no mourning for the loss of the equated symbol and so no move to the real symbol which is something the subject has created. Symbolic equation is the necessary defence against fragmentation, of intrusive projective identification which allows the uncontained, unacknowledged infant to push itself in phantasy into its internal (part) object.

Meltzer (2008) divides the inside of the internal object into four compartments. The pathology and distortions experienced in the different compartments are a result of having to intrude into the internal object rather than experiencing an exchange with the external object of experiences and phantasies. This is, I think a description of life without maternal reverie. The distortions are to good maternal qualities, for example the compartment of the head/breast in the internal object is essentially a quality of richness:

Generosity becomes quid pro quo, receptiveness becomes inveiglement, reciprocity becomes collusion, understanding becomes penetration of secrets, knowledge becomes information, symbol formation becomes metonymy, art becomes fashion.

(Meltzer, 2008, p.73)

In the clastrum there is the anxiety of being an intruder, a trespasser, a fraud exiled from intimacy and from beauty, (Meltzer, 2008). I find this very moving as to me it feels like a form of psychic and social isolation close to death. The anxiety referred to by Meltzer above of being a kind of robber or intruder links to the excruciating not-understood experiences of the paranoid schizoid position.
**Psychic retreats**

Steiner draws on Klein’s (1952) idea of the pathological organisation between the paranoid schizoid position and the depressive position and describes a phenomenon of defending against the pain of both positions in a psychic retreat, as such a denial of psychic reality. Two-dimensionality can be a developmental failure or can be invoked as a defensive organization against anxiety. Referring to two-dimensionality as a defensive organization Meltzer says he is not making a comment on consciousness but on the organization of perceptual processes concerning self and the world. He defines a denial of psychic reality as straddling both impaired mental function and an impaired consciousness of mental events, (Meltzer 1975a, pp.237-238).

Steiner (1993) refers to Rey’s (1975) suggestion that in psychic retreats some clients feel trapped and claustrophobic, but as soon as they manage to escape they once again panic and return to their previous position. Psychic retreats, like the claustrum, seem to provide a semblance of stability against psychic reality, however, like the claustrum, “safety” in the psychic retreat is paid for at a cost of impoverished development and isolation. There is an illusion of something integrated.

Steiner acknowledges Bion’s (1957) idea of pathological fragmentation (discussed earlier) and uses it to refer to the pathological aspect of the paranoid–schizoid phase with normal splitting at the other end of the position (Steiner, 1993, p.29). Frequently the individual cannot tolerate the psychic distress and damaging defences are used. Under persecutory anxiety the individual may need to increase fragmentation so that minute splitting occurs and these fragments are projected. The feelings are of panic and of being assaulted by hallucinations or of being fragmented. If the original split can survive then the subject can have an awareness of good objects however if the original split is invaded by total anxiety and there are attacks on the good objects then confusion reigns. It is in this situation, Steiner says, that the defensive organisation is deployed to create order out of chaos.

Some patients, he says, are able to relinquish omnipotent control over the object, in psychic reality to let it die, and others “panic and return to the protection of the retreat,” (1993, pp. 83-84.) For those who move on the difficult emotions in relation to the object will include guilt and
some degree of hatred however there is movement to positive feelings to mitigate the pain and 
acknowledgement of destructive wishes will combine with loving feelings to create a desire for 
reparation.

**The protection of a defensive organisation or gang**

Steiner (1993) comments that in the clinical setting the client’s need for revenge on their object 
can get in the way of reparation particularly because it can easily connect and trigger the 
destructiveness of primitive envy which then itself creates a fear of retribution or a fear of guilt if 
the revenge took place. The client’s internal situation is that he cannot get redress for the sense 
of being wronged. The psychic retreat offers him the protection of a complex network of object 
relations which function as a ruthless, destructive gang expert in revenge and destruction. The 
gang operates in phantasy however its activities generate guilt and so the badness is projected 
into the external object. The client is then confronted by a very bad object who will not accept 
his badness. This is repetitive for the client who experiences badness being attributed to him by 
his objects who demand that he accept it and put right what is felt to be the object’s guilt. 
Steiner argues that some clients have an inner source of internal goodness that they can 
identify with. The sense of inner goodness can help them believe that they can be forgiven for 
their bad impulses. Such clients can work through this in cycles of emerging and returning to the 
retreat eventually acknowledging the damage done to their objects allowing greater periods of 
contact with depressive feelings.

Steiner (1993, pp.14 - 15) discusses a client Mrs. A. who outside of psychotherapy spent most 
of her time lying on her bed reading novels. Steiner does not refer to this directly however I infer 
from her focus on this activity that she reads about emotions which she is curious about but 
cannot authentically experience. When her organisation into a retreat broke down panic, 
fragmentation and persecution would ensue. His client seemed to extract a kind of gratification 
from using the retreat which meant the client had to keep any progress secret so as to maintain 
the retreat. In his discussion of clinical examples Steiner refers to dreams his clients bring. This 
appears to contradict the idea developed here regarding the ability to think and dream as a
result of introjecting a good object. He also says that because of the nature of a defensive
organisation as a retreat the client does not place value on dreaming. Steiner refers to the
Segal’s (1957) work, already discussed here, on the concrete nature (that is, not fully
symbolised) nature of paranoid-schizoid dreaming and thinking. This seems to allow for
dreaming and useful thinking to emerge outside of the psychic retreat. Steiner’s clinical
examples show quite clearly how in a session a misstep can send the client into the retreat. The
suggestion is that the clients spend most of their outside lives in the retreat yet they do bring
dreams. This is indicative of alpha function (Bion, 1962) operating at times.

Steiner posits that projective identification evident in defensive organisations is more rigid and
less reversible than in normal paranoid-schizoid situations whereas mentioned here earlier the
maternal reverie gives meaning to projections so that the infant can reintroject them (Bion,
1962). For those infants or clients labouring under the domination of a defensive organisation,
argues Steiner, the parts of ego projected cannot be reintrojected, leaving the subject depleted
and more under the control of the organisation. They permanently reside in the object,
unavailable. This seems to differ from what I had understood Segal wrote about symbol
formation as mentioned above as indicative of and part of alpha function, that it was a key
element in the movement from the paranoid/schizoid position to the depressive position.

Steiner, however, points out that Segal (1957) says that objects containing these elements of
the self have a particular concreteness and “make up the building blocks from which the retreat
is constructed,” (Steiner, 1993, p. 54). Steiner is saying that the concreteness felt by the subject
in the objects projected into is a reflection of the strong sense of reality in the experience with
the object in the early days so that symbolic equation is created. A symbolic equation “is used
to deny the absence of the ideal object, or to control a persecuting one. It belongs to the earliest
stages of development,” (Segal, 1957, p.395) This brings to my mind the concept of splitting.

Segal continues, “The symbol is used not to deny but to overcome loss. When the mechanism
of projective identification is used as a defence against depressive anxieties, symbols already
formed and functioning as symbols may revert to symbolic equations,” (Segal, 1957, ibid.) I
think this shows that Segal is a forerunner of Steiner’s thinking. She is essentially mapping out
the context for the pathological organisation with her wider concept of symbolic equation. It
seems what both Steiner and Segal are exploring here is the flux and constant change in the
ability to think and dream under the intense sensitivity to pressure experienced by those who have undergone pathological fragmentation.

The ability to deal with emotional and psychic reality

Meltzer asserts that the limited surface to surface experience of the two-dimensional infant changes when the infant experiences that the object resists penetration (Meltzer, 1975b, p.226). I wonder here if Meltzer is referring largely to a physical understanding but then again I think that this idea also works as a reference to a psychic experience of being emotionally resisted because he goes on to say, “Once the object has been experienced as resisting penetration so that emotional problems no longer seem merely ones of being on one side or the other of a paper-thin object…” (Meltzer, 1975b, p. 226). Perhaps what he is saying is that the conception of trying to get into an object is predicated on the idea of there probably somehow being an inside and an outside and if there is no idea of an inside or an outside then emotional problems are at a level of being on one side or another of a paper thin object. Thus the problems are significant but basic. In this same discussion Meltzer says this the beginning of the idea of potential spaces. Here I am pondering that there is contained in this idea his reference to time. The development to three-dimensional, thus potential spaces and objects and phantasy and imagination, implies an earlier knowledge or experiences and thus subtly, the idea of progression of events, thus time. He clearly defines this in the following paragraphs before going on to say that omnipotence provides the energy to phantasise penetration by projective identification. This is the beginning of the maternal reverie.

I think this key issue of the role of truth is important. As the infant has discovered it cannot penetrate the object then it has a revelation of some kind of experience and of reality. I wonder if this is a kind of truth which triggers and propels the infant into progression in it development with the mother. If so, truth is then central to the ability to dream as an integral part of three-dimensionality.
I am connecting here with Fisher’s views (2006) referred to earlier. Bion’s K is expressed by the maternal function of containing, where K means a desire to know. Fisher’s idea ties together Meltzer’s highly condensed discussion on the move from two to three-dimensional requiring knowledge of being contained with Bion’s concept of the emotional links that comprise K. I wonder if this is actually expressing a morality or a value system where knowledge defined as the desire to know is an absolute good. This makes me uneasy as I sense something hidden if it is correct.

Bion (Fisher, 2006, p.1224) says that truth is necessary for psychic health and being starved of truth might be analogous to physical starvation. This is a claim of such immensity that it is too big for me to address here, however it is interesting because once again it places K on a moral plane. It does possibly lead to the proposition that truth is necessary for dreaming. In Bion’s terms alpha function cannot work without the known and truthful experience of containment propelling the infant into space, time and depth of the third dimension. Bion’s concept of learning from experience (1962a) can be seen as necessarily containing within it the connection between experience, truth and reality. As mentioned above he says that (1962a, p.310) the relationship of the emotions to the psyche is the same as that of the senses to objects in time and space – that they give meaning by producing a view of what is and what is not. In this paragraph Bion says that an important function of communication is to achieve “correlation”. In terms of the experience of truth as a way of developing three-dimensionality, thus the capacity to think and dream, Bion is saying that truth is experienced when mother and baby join in their understanding of sensory experiences. If this truth is not experienced then baby experienced a state of “mental debility” analogous to starvation of the body. He says the same happens in terms of emotions. That a sense of emotional truth can be felt when it is understood that the same object can be loved and hated.

This explains to me Meltzer’s statement (1975b, p.226), that the inside of an object has the meaning of a prior state of mind because both ideas are based on a concept of truth of experience. I wonder whether the essence of the depressive position is that a sense of truth is experienced if we can see that an object can be both loved and hated. Bion (1962a) advises that having the experience of calm receptiveness enables toleration of pain and frustration. The
infant is able to understand how to get meaning from feelings. I wonder if the experience of truth, as Bion and Fisher argue it, can also be seen in Klein and Segal’s discussion of guilt and reparation as the pathway to symbolism and dreaming.

Symbolism and dreaming as grasping after truth

Klein (1963) argues that reparation is a part of creativity and that symbol formation lies at the heart of this. Segal (2006, p. 286) posits that the infant recognises their own aggressive impulses “as omnipotent, and as destroying the good and needed object.” She argues that with this comes guilt and the capacity for mourning. Because of this, reparative feelings aimed at restoring the good object are mobilised. These feelings recreate what was destroyed through the bad feelings regarding the bad breast. I wonder if Segal is in fact describing here the same process referred to by Bion in the depiction of the process of alpha function (1962). Segal asserts that symbolisation is alpha function (1991, p.55) but in thinking through the move she describes above I have a real sense of the real meaning of her words as matching Bion’s. I think that Bion and Segal both grapple with a kind of turning point, that is what could in itself be called a realisation: that is when something becomes real. This is another way of describing the understanding of truth.

Segal also also asserts that the totality of the guilt forces a displacement which endows the world with symbolism. This again speaks of the power of the depressive development at this time such that the infant really knows itself and its own potential and this in itself demonstrates the depth of feeling in the three-dimensional level of Meltzer. Bion (1962, p.15) says that alpha function produces the images of the dream. This makes me reflect on the role of symbolism and of continuity which Bion refers to as providing the narration of telling a dream. This somehow is provided for in Meltzer’s references to the ability to experience change and the move to linear time, (Meltzer, 1975, p.225). Here I seem to be grappling with different ways of talking about one thing: the growth or the point of exponential growth when the infant’s find expands outwards but also inwards. The idea of links in time which is what makes up the idea of continuity could
also have been seen to be signalled by Bick’s (1968) concept of time edging its way into the baby’s mind as it understands the beginning and ending of its own and the mother’s body.

Summary

The discussion centres around the research question of the connection between dimensionality of the child and the capacity for dreaming of the adults. The initial approach to this is to examine the state of mind stemming from catastrophe where attempts at protection by the mind prevent any real development into the depressive position which indicates an introjection of a good object allowing for alpha function.

Together Steiner and Meltzer present a troubled picture of reaching our potential. Both discuss the complexity and subtlety involved in recovery from the mind’s repair process of pathological fragmentation and catastrophe and Meltzer indicates how at the broader level our society is affected and shaped by these phenomena. The literature reviewed seems to be in accord, taking Bion’s view of dreaming as an aspect of thinking, that the introjection of a good object opens the gateway to thinking and dreaming through reparation and mourning. I understand that the psychotic mind cannot differentiate between inside and outside and between dreaming and reality and that as such it cannot have fully introjected a good object. As Meltzer points out two-dimensionality indicates a catastrophe in infancy leading to an object not being introjected or, in adults, being introjected but not used. This latter situation would seem to indicate a periodic capacity to dream as objects are found, come into activity, and then are lost again.

In the context of repair from catastrophe I have considered the role of the experience of truth as the connection between development of dimensionality and dreaming and linked it with Bion’s concept of learning from experience. The material describes how those who have experienced pathological fragmentation are unable to learn from their experience because of the nature of psychic retreats to not know. In conclusion I have discussed the similarities in the process of symbolisation and the process of alpha function as aspects of dreaming.
Chapter 6
Conclusions

A key conclusion I draw from the project is about about the nature of the literature I have explored and about the nature of the experience we all go through as developing and thinking and dreaming creative beings. Each of these findings I feel is only a micro-fragment of the nature of what it is to be human. From this perspective the research process has been deeply moving and as I have struggled to recognize the meaning in the words and in the spaces between them too.

Reflecting now on what I have attempted to draw together in connecting the nature of how we develop a sense of time and space in the world and the ability to think and dream, I am filled with a sense of how miraculous the whole process of infant development is. For the infant to connect with the world via its understanding of its mother’s body and the inventive processes for repair and recovery the mind comes up with when the maternal dyad suffers a significant catastrophe reminds me of epic tales of ancient times. It is the stuff of myths and possibly brings me back to Jung. Myths, of course, may not have happened but they contain deep truths of human experience. I have also found that these descriptions of attempts to repair or withhold from further crisis are both frightening and it takes courage to stare in the eye. It makes me consider how important our work is to travel alongside a patient who wants to rediscover themselves and put some words around “feelings in memories”. If we can help patients locate and symbolize the liminal they may start to feel their own truth and find themselves and their symbols reflected in the landscape, thus taking a place in the world.

Another impact of the literature was its visceral effect on me. In this way it not only works through the meaning of the words—whatever meaning I have understood from them—but also through the structure of the sentences. I realized this in particular from reading Melanie Klein from whom many of the of the ideas in the later literature derive. This explains to me why her words stand so strongly and her writing is so powerful and so healing. I feel deep gratitude to such a compassionate yet rigorous thinker who observes so much from the infant’s point of view and allows so much freedom for a child’s potential and integrity. I also believe that another key
finding is in the work of Segal, whose ideas, drawing on Klein’s, influenced Bion and Meltzer.

Writing the dissertation has been a time of struggling to connect and being overwhelmed with what I have made sense of. My writing has seemed to me to be very dense as I have had to go into the body of the literature and write it from inside. I do not think it is a journey I could have undertaken on the outside.

**Limitations**

My study has been a journey of personal discovery and I have developed increased capacity for tolerating frustration, upset as well as increased ability to sit with not knowing and not understanding. The study in this sense has been very personal because my new understanding I have extrapolated in a sense from my gut feeling which may seem banal to others. So my understandings may not have been as significant for others as we each go on a personal journey.

The study has naturally then been limited by the limitations of who I am. This refers to my ethnicity and class and culture as a white middle class woman. What I feel that the literature does address quite explicitly is the need of the infant for others. Paradoxically the more an infant is met and received as an individual the more that infant is able to embrace a plurality of people, feelings and thoughts while maintaining a feeling of who they are. Thus the more we are met and known the more we meet and know others. I continue to move into ever spiraling hermeneutic circles and continue to go backward and further forward as I find more of interest and more possibilities. There is more to say, changes to make and papers and books to read and reread.

**Further Questions**

Reflecting on the nature of my progression in this research I am drawn to wondering about the transition between paranoid–schizoid and the depressive position and the nature of the need to mourn for our loss of our object to fully come into the world. How can we as psychotherapists...
recognize and work with the pain of the outcome of the infant catastrophe or pathological fragmentation? These are traumas that sit deep in the mind and require long term work in therapy to repair them. My concern is that as psychotherapists we may ourselves become caught up in the two dimensional world that seems to surround us. How do we then practice in depth feeling and thinking?

**Final Thoughts**

This study has encouraged me to feel more deeply and to reach in my thinking also. I have come much closer to contemplating the nature of extreme suffering which is what I believe the defences our minds engage in after catastrophe such as the claustrum and defensive organisations actually produce. The circles of hermeneutics invite me constantly to consider my own struggles between paranoid schizoid and the depressive position and my own experiences of two and three dimensionality. I have discovered that that there is on-going work to be done in psychotherapy with clients (and also myself of course) to look into what the world of articulated feeling and thinking holds for us. In the course of the study my fascination of dreams has changed and deepened. I feel I am now beginning another round of the hermeneutic circle.


