

Seattle Psychoanalytic Society and Institute
BRITISH OBJECT RELATIONS
Year Three Psychoanalytic Training
Instructor: Stan Case, MSW, Ph.D.
(425) 775-5678; stancase@msn.com
First Trimester 2016-17: September 9, 2016 – November 18, 2016

Learning objectives for this course:

1. Describe core ideas of Kleinian theory, including projective identification, part- and whole-object relating, and the paranoid-schizoid and depressive positions.
2. Describe the key concepts of Winnicott, including the spontaneous gesture, maternal holding, environmental impingement, true and false selves, and transitional phenomena.
3. Describe Bionian concepts including his modification of (communicative vs. defensive) projective identification, the container-contained, maternal reverie, alpha functions, beta elements, nameless dreads and attacks on linking.

Week 1: September 9, 2016

Transference: Mentalized and Unmentalized

Meltzer, D. (1992). "The Klein-Bion expansion of Freud's metapsychology." *Dream-Life*. Ch. 3. Perthshire: Clunie Press, pp. 36-47. **NOT available on PEP Web, will be provided.**

Klein expanded Freud's instinctual theories of development with her theory of an internal world, its geography as real as that of the outside world. She focused on the self's emotional growth from part- to whole-objects, both loved and hated, in bodily-anatomical terms. Bion emphasized the evolution of the capacity to think, described the mind's capacity to attack its own thinking functions, and on the links between objects.

Mitrani, J. (1995). "Toward an understanding of unmentalized experience." *A Framework for the Imaginary*. Northvale, N.J.: Aronson, pp. 205-247. **NOT available on PEP Web, will be provided.**

Primitive trauma can result from premature exposure to separations and losses experienced by the infant at a somatopsychic level. Untransformed by a mind that can mentalize them, unbearable and unborn states of mind turn to primitive mechanisms for psychic survival. Protective maneuvers such as autosensual cocoons, enactive memories, body memories, and memories in feelings encapsulate or evacuate the terror of a catastrophic psychological birth.

Week 2: September 16, 2016 (Guest Instructor, Maxine Anderson, M.D.)

The Self Comes Alive

Anderson, M. (2016). "Awakenings" and "Hallucinatory phenomena," Chs. 3 & 4 in *The Wisdom of Experience*. London: Karnac, pp. 47-80. **NOT available on PEP Web, will be provided.**

Chapter 3 suggests that we might be hard-wired by evolution and fetal experience to anticipate a caring environment, as well as other prenatal stirrings, which will shape subsequent

experience. The role of implicit (unrecallable) memory in shaping experience is reviewed, as is the role of explicit (conscious) memory with regard to the sense of lived experience.

Chapter 4, as part of the primacy of affect, looks at how much of our reality is really composed of hallucinatory phenomena. It also considers aspects of psychic trauma in terms of affective overwhelm and the crucial role of negation and cortical shaping as part of necessary regulation. The final part of that chapter reconsiders the fundamental nature of hallucinatory experience as a basis of lived experience, but also as primary to identity.

Learning objectives:

1. Describe the concept of innate anticipations of care and how it may be considered the roots of unconscious fantasy.
2. Describe the concepts of implicit memory and explicit memory as they apply to lived experience.
3. Describe the nature of hallucinatory phenomena as they apply to lived experience.

Week 3: September 23, 2016 (Guest Instructor, Robert Oelsner, M.D.)

Unconscious Phantasy

Bell, D. (2012). "Unconscious Phantasy: Historical and Conceptual Dimensions." Paper given to conference: 'Unconscious Phantasy Today' (unpublished) **NOT available on PEP Web, will be provided.**

Learning objectives:

1. The student will learn to identify unconscious phantasy among the three pivotal elements of psychoanalysis: repressed unconscious, transference and infantile sexuality.
2. The student will learn to differentiate unconscious phantasy as a content of the mind from a defense against mental pain.
3. The student will learn about the relation between unconscious phantasy and thought processes.

Week 4: September 30, 2016 (Guest Instructor, James Gooch, M.D., via GoToMeeting)

Alpha Function, Theory of Thinking, and Learning from Experience

Guidance will be offered in locating these readings on PEP Web, or will be provided.

Bion, W. (1957). "On arrogance," pp. 86-92 (especially bottom of 88, 90-92); (1959) "Attacks on Linking," pp. 93-109 (especially 102-109); (1962). "A Theory of Thinking," pp. 110-119. All in: *Second Thoughts (1967)*, London, Heinemann

Bion, W. (1962). "Learning from Experience," Maresfield Reprints (1985), especially 8, 16, 17, end of p. 35, top of 36, and 54--theory of consciousness

Bion, W. (1984) "Elements of Psychoanalysis." Karnac Books pp. 9-13, 31, 74-77.

Bion, W. (1983). "Attention and Interpretation." Jason Aronson, Inc. p. 11

Bion's works: selective readings

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Bion's epistemological inquiry expanded Klein's concept of projective identification, to include a normal communicative, not just an evacuative, defensive function. He revolutionized psychoanalysis with concepts such as container-contained, waking dream thoughts, maternal reverie, alpha-function, beta elements (raw emotional sensations), nameless dreads, and bizarre objects.

Bion's theory of containment is defined as the capacity of the object to receive projections from the subject--to sense, transform, and return them in a more tolerable and understandable form. The mother's reverie allows mental digestion of her infant's emotional experience. The infant/patient, in taking in the maternal transformation of projections of raw sensory emotions (beta elements) transformed into alpha elements, takes with it some of the maternal attitude and capacity to transform--introjecting the function as well as the content.

Bion focused more on the links--the emotional relatedness--between objects, than on the objects themselves. Three types of emotional links are loving (L), hating (H), and knowing (K). The mother's mind, in its capacity to understand the infant's anxieties, is a link which serves as a prototype of the mental functions of learning. This deemphasized Klein's anatomical-bodily language for part-objects, like the breast. Attacks on links are distinguished from attacks on objects.

Thinking, the emotional experience of knowing and being known by the object, precedes knowledge of the physical world. Projective identification, as the earliest model of communication between mother and infant, is the original thinking. If successful, the infant internalizes an object with the capacity to think. If not, omnipotence replaces thinking, and omniscience replaces learning from experience.

Week 5: October 7, 2016 (Guest Instructor, James Gooch, M.D., via GoToMeeting)
(continue Bion readings)

These readings are not available on PEP Web and will be provided.

Gooch, J. (2001). "Bion's perspective on psychoanalytic technique" (pp. 1-6) and "The unconscious in light of Bion" (pp. 1-6).

Wordsworth, W. (1799) Passage from "The Prelude."

Jalal-Din Muhammad Rumi (written sometime during his lifetime 1207-12/17/1273) "Guest House"

Week 6: October 14, 2016 (Guest Instructor, Robert Oelsner, M.D.)
The Dawn of Unconscious Phantasy

Oelsner, R. (2016). "The Dawn of Unconscious Phantasy," Ch. 17 in *Finding Unconscious Fantasy*. P. Ellman & N. Goodman, eds. Routledge, pp. 1-28. **NOT available on PEP Web, will be provided.**

Learning objectives:

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1. The student will learn about the precursors of unconscious phantasy early in life.
2. The student will learn the interrelation between early unconscious mental functioning and that of the assisting thinking mother.
3. The student will learn to identify the genesis of unconscious phantasy in the clinical hour in the work with young patients, in order to assess the progress in the psychoanalytic therapy.

Week 7: October 21, 2016

Triangular Space

Britton, R. (1998). "Subjectivity, objectivity and triangular space," Ch. 4 in *Belief and Imagination*. New Library of Psychoanalysis, Vol. 31. E. Spillius, ed. N.Y.: Routledge, pp. 41-58.

NOT available on PEP Web, will be provided.

The primal family triangle links the child with each parent in a primitive part-object, intersubjective dyad. To be the third wheel, the observer not the participant in the parental dyad, brings a third point of view. A nameless dread arises when dyadic subjectivity (empathic immersion with the maternal object) and third-person objectivity (identification with the paternal imposer of meaning) remain split off and unintegrated. If a malignant misunderstanding is attributed to the paternal third object in this primitive oedipal constellation, triangular space is foreclosed. Thin-skinned characters cling to dyadic intersubjectivity and are threatened by third-person objectivity, while thick-skinned characters identify with the distant third-person position and are threatened by dyadic intimacy.

Boswell, J. (2001). "The oedipus complex." Ch. 6, in Bronstein, C. (ed.) *Kleinian Theory: a Contemporary Perspective*. London: Whurr Publishers, pp. 77-92. **NOT available on PEP Web, will be provided.**

Klein revised Freud's concept of the oedipus complex; she dated it at the end of the first year of life, when the depressive position is worked through. The superego, consisting of the internalized phantasy of the "breast" coupled with the paternal "penis," evolves from birth. She added envy of the maternal breast and feminine fertility to Freud's penis envy. Contemporary Kleinians no longer use anatomical part-object language, but think more about mental functions. In the third position to the primary oedipal couple, the infant/patient has the painful task of relinquishing the phantasy of sexual possession of the parent.

Week 8: October 28, 2016

Winnicott

Winnicott, D. (1960). "Ego distortion in terms of true and false self." *The Maturational Processes and the Facilitating Environment*. Ed., J. Sutherland. London: Hogarth. pp. 140-152.

Available on PEP Web.

If a mother is not good-enough and repeatedly ignores the child's spontaneous gesture, substituting her own experience, the infant complies and develops a false self. It hides and protects the True Self, the creative and real self, from exploitation and annihilation.

Winnicott, D. (1958). "The capacity to be alone." *IJP*, 39:416-420. **Available on PEP Web.**

The capacity to be alone is an achievement and a sign of emotional maturity. Derived from experiences of being alone as an infant in the presence of the mother, the capacity to be alone depends on the existence of an internalized good object--the introjection of an ego-supportive environment.

Winnicott, D. (1969) "The use of an object." *IJP*, 50:711-716. **Available on PEP Web.**

When the object (mother or analyst) can survive the destructiveness of the self, without retaliation or collapse, the object shifts from being a subjective (narcissistic) object into being an external object with its own separate existence. The object is in fantasy always being destroyed; destruction is the unconscious backcloth for love of the real object--an object outside of the subject's omnipotent control. Aggression is viewed less as a drive, and more as a force that creates externality. Interpretations best reveal the limits of the analyst's understanding.

Week 9: November 4, 2016 (Guest Instructor, Judy K. Eekhoff, Ph.D.)

Primitive Mental Processes

Klein, M. (1946). "Notes on some schizoid mechanisms." *IJP*, 27:99-110. **Available on PEP Web.**

Klein's seminal paper explores the earliest anxieties of the infant and the defenses developed to protect the infant from psychic overwhelm. These defenses include splitting both ego and object, externalizing the internal via projection, or taking in the external via introjection. This process may result in the infant's fear or paranoia of external objects. In addition, Klein describes the concreteness of primitive mental states.

Objectives are 1) to review these splitting and projecting processes as foundational in understanding primitive mental states, and 2) to be able to recognize projective identification in clinical examples.

Meltzer, D. (1975). "Adhesive Identification." *Contemporary Psychoanalysis*, 11:289-310. **Available on PEP Web.**

Meltzer describes narcissistic identifications that differ from projective identifications, using his work with autistic children and his collaboration with Ester Bick. He sees these as distortions of identity arising from a concrete terror of falling apart or what Bick describes as not being adequately held together by their psychic skin. In the absence of this holding, these patients found other ways of holding themselves together. These second skin phenomenon include muscular and somatic defenses.

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Objectives are to understand and be able to recognize second skin presentation.

Week 10: November 11, 2016 (Guest Instructor, Judy K. Eekhoff, Ph.D.)

Clinical Applications derived from Contemporary BOR Theory

Joseph, B. (1989). "The patient who is difficult to reach." Feldman, M. & Spillius, E., Ed's. in *Psychic Equilibrium and Psychic Change: Selected Papers of Betty Joseph*, New Library of Psychoanalysis 9:65 London: Tavistock. **NOT available on PEP Web, will be provided.**

Joseph's paper focuses on treatment of patients who do not respond as expected to interpretations. It is a technical paper that highlights aspects of the treatment that require the analyst to understand primitive mental states in patients who are not used to being understood. She "... concentrate(s) on some problems of technique, focusing on a particular group of patients, very diverse in their psychopathology, but presenting in analysis one main point in common. It is very difficult to reach them with interpretations and therefore to give them real emotional understanding.

Objectives are 1) to understand the fundamental difficulty with understanding and treating patients who are "difficult to reach," and 2) to explore techniques for reaching them.

Eekhoff, J. (2016), "Finding a Center of Gravity via Proximity with the Analyst," in *Spilling, Falling, Dissolving: Engaging Primitive Anxieties of the Emerging Self*. London: Karnac (to be published). **NOT available on PEP Web, will be provided.**

Patients, who are difficult to reach, struggle with overwhelming sensual experience that interferes with their introjective processes. Equivalency replaces identification as a primitive method of relationship (Tustin, 1986, p127.). Equivalency clouds the mind, much as fog surrounds and blurs objects, wiping out differentiations that mark opportunities for identification. Psychoanalytic treatment requires the analyst to pay attention to primitive expressions of presence and absence and to differentiate life affirming relational responses from suspension.

Objectives are 1) to understand the deepest level of contact and to make interpretations that describe, and 2) to accept the patients as they present themselves and speak to the deepest anxiety found in the session.

Week 11: November 18, 2016

Repeating and Remembering

Britton, R. (2003). "The unconscious in practice." In Britton, R., *Sex, Death and the Superego*. London: Karnac, pp. 75-85. **NOT available on PEP Web, will be provided.**

Unconscious beliefs underlie the feelings and actions that patients bring into analysis. If undetected and undisclosed, these beliefs may stay encapsulated, expelled, or enacted. Habitual modes of enactment can be discerned and understood by an "analysis of the analysis."

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Riesenberg, R. (1999). "Construction as reliving history." In Riesenberg, R., *On Bearing Unbearable States of Mind*. London: Routledge, pp. 71-83. **NOT available on PEP Web, will be provided.**

The continual construction of the meaning of what goes on between patient and analyst reconstructs, in the transference, something of the early history of the patient's relationships to his objects, the anxieties involved, and the way defenses were built up. Relived in the transference, history can be reconstructed. Reconstruction, whether about historical events remembered or not, helps the patient to distance himself from the transference, enriching his understanding of himself.