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Inadequate environment and fragile self

Guntrip was one of the earlier British psycho-analytic theorists to want to shift the focus of psychotherapeutic theory towards 'schizoid' problems — the problems some people encounter in trying to maintain a vital sense of self in a realistic relationship to other people, while feeling continually undermined by anxieties about falling apart. In his introduction to *Schizoid Phenomena, Object Relations and the Self* he wrote:

'It is necessary to bring out very clearly the fact that psychodynamic theory has moved on beyond the original classic theory of superego control, guilt and depression.'

(1969: 12)

And he quoted disapprovingly from a recently published book whose principal chapters bore such titles as 'Psychological Forces; Control of Desires, Derivative Desires . . . Deprivation of Desires; Aggression; The Super-Ego', commenting:

'Here is the old "moral psychology", all of it important but with no hint at all that the basic anxiety-producing conflicts in human beings are not over the "gratification of desires" but over the frightening struggle to maintain themselves in existence at all as genuine individual persons. . . .

Of course guilt is a real experience and must be accepted, and there is no therapeutic result unless feelings of guilt are cleared up, but I hope that this book will disprove conclusively

that guilt is the core of psychological distress. *Pathological guilt* is, as we shall see, a struggle to maintain object-relations, a defence against disintegration, and is a state of mind that is preferred to being undermined by irresistible fears. The core of psychological distress is simply elementary fear, however much it gets transformed into guilt: fear carrying with it the feeling of weakness and inability to cope with life, fear possessing the psyche to such an extent that "ego-experience" cannot get started.'

(ibid.)

Guntrip was a considerable scholar of the old school. Deeply respecting the thoughts of others, he characteristically wrote as if he were only clarifying what others had said: he is only gradually coming to be recognized as a thinker with a unique perspective of his own. Though often taking other people's theories as his starting-point, he based his ideas also on his experiences with the people he took into therapy, and on his experiences in his personal analyses: he was first analysed by Fairbairn, whose views influenced his own thoughts greatly, and later went to Winnicott through whose help he came to accept another part of his personality hitherto blocked off from consciousness. The story is told in a moving article (1975). The dating of his writing is relevant as being either post-Fairbairn or as after both Fairbairn and Winnicott, but I confine myself mainly to his later ideas.

Guntrip's theory is in the main about the adult experiences of people for whom things had gone badly wrong at the stages when 'I' and 'you' and 'us' are forming. These structures cannot develop properly when the baby is not adequately protected against distresses which might overwhelm and obliterate them. And if the baby has not been adequately protected, if 'I', 'you', and 'us' structures are not properly developed, it cannot develop adequate defences against later distresses. Moreover, 'us' can be a great consolation in distress, and it is much harder to bear pain when recourse to 'us' is not possible. It is exactly this us-relatedness which is lacking in the people Guntrip describes as schizoid. Without at least a modicum of us-relatedness, 'I' cannot be properly established as a strong structure and will remain unintegrated: fragmented.

We are now considering early relationships, between the infant and the environment or the mother, which allowed things to happen which the child just could not bear. The child feels 'I wait for her and she never comes', 'I need her and she is not there', or worse 'They do not care what happens to me', even 'They do not care if I die', even 'They are killing me'. (I have put these feelings into the present tense here, because the young self has not yet a strong sense of the flow of time, and so whatever is happening then may persist in later object-relations as though it were forever happening – an experience on which such notions as hell might be based. I have also used third-person pronouns. There is no sense of 'us' – no sense of being held by another in a relationship. It is 'I' versus 'they'.) Such experiences leave lasting traces of pain and vulnerability.

The need for contact and support

The sources for this subsection and the next come mainly from Chapter 6 of *Schizoid Phenomena, Object Relations and the Self* (1969), and from Chapter 5 of *Psychoanalytic Theory, Therapy and the Self* (1971).

Guntrip used Winnicott's concepts of maturational processes and of the facilitating environment to underpin his own ideas on how the biology of the infant relates to the environment which will enable it to survive. Maturational processes govern the infant's biologically given potentialities, causing them to unfold in a biologically determined way. But these innate potentialities do not mature inevitably 'in sublime indifference to the outer world'. The infant is dependent on the opportunities which the environment offers; its potentialities flourish best in an environment that understands, supports, and encourages individual growth. If the environment is unsatisfactory, development may be distorted or arrested. The True Self is as yet only potential; it will not be realized in unfavourable circumstances.

Guntrip then looked at Winnicott's concept of ego-relatedness (a pre-condition for us-relatedness, see pp. 280 and 262f.). He considered ego-relatedness to be similar to, though perhaps more characteristically human than, the concepts of attachment-behaviour and separation-anxiety with which Bowlby was working at much the same time in a different corner of the field:

'Vulnerability to separation-anxiety exists when the human being is not ego-related' (1969: 223).

Ego-relatedness allows the young child to be protected by the presence of others without being impinged on by them. Given this, the vulnerable child is able to develop in its individual way, without fear either of devastating loneliness or of devastating damage.

'Birth is mere separation, and will speedily result in isolation, in the snuffing out of the sense of self, unless good mothering at once restores "connexion" of such a kind that it can lead to the evolution or realisation of the potential self of the infant.'
(1969: 222)

In Guntrip's view, ego-relatedness is Winnicott's way of describing the process by which an infant who started life in total emotional identification with its mother can begin to experience its separateness from her, without losing its sense of security. 'The infant's ego-immaturity is naturally balanced by ego-support from the mother.' The sense of belonging, of being securely in touch, that grows in the baby by virtue of the mother's living reliability, becomes an established property of its own psyche. We have seen that there is a subtle transitional stage between feeling securely related when the mother is holding it, and feeling securely related when the mother is absent (see pp. 281–83). This can happen because of those moments when the baby who is actually with the mother can forget about her being there, because it feels totally secure – invulnerable. The baby gains proof that its trust is justified by finding, when it remembers the mother again, that she is still there (Guntrip 1971: 118ff.). This is the context for the development of us-relatedness which will replace the biologically-based sense of oneness. Clearly all this can only come about if the mother or other attachment figure is capable of experiencing us-relatedness. Not all (m)others are in this fortunate position.

People who have not had enough of this good experience are, in Guntrip's view, excessively vulnerable to even the slightest loss of support. Their chronic overdependence is a genuine compulsion which they cannot evade by effort, will-power, or intellectual understanding. Their only hope is to find someone

who can understand them and help them grow out of it. That is what psychotherapy is.

The help Guntrip had in mind is only partly intellectual or dependent on insight given by a shrewd interpretation; rather it is mainly emotional – the need is for a relationship in which people can experience being securely held while they venture to be in touch with thoughts, feelings, or parts of the self from which fear has long kept them estranged. To this process, the final two chapters of the present book are devoted.

The inadequate environment: love made angry and love made hungry

Guntrip distinguished two types of reactions to the moment when the infant feels unprotected and uncared for. Which reaction occurs, depends on how much strength and confidence (or shame and fear) the budding 'I' has already accumulated. The stronger and safer-feeling personality reacts with anger and with the kind of depression that comes with anger. The less fortunate personality reacts with hopelessness and the kind of depression that comes with hopelessness. Here are two different kinds of depression arising from different sources. Guntrip (1969: 24) referred to these two types of reaction as 'love made angry' and 'love made hungry'. In his view, Freud's interest and focus lay more in understanding the former, which has to do with guilt, while Fairbairn (and other later writers) brought new understanding to the latter, which involves more schizoid reactions.

'Love made angry' is what happens when you want love from a person who is not giving it – you become angry with them in an attempt to force them to give you what you want. This is Bowlby's 'coercive anger'. Obviously, at some point this anger must lead to worry that your anger will drive away the very person you need, and for some this will lead on to guilt at having hurt the feelings of someone they care about. Not getting what you want, worrying about losing a loved person, having to live without love and mutual concern, makes you depressed as well as angry. On the bright side, however, you may in your anger turn to another person in the hope that they will love you better, and so you have another chance.

'Love made hungry' describes Guntrip's view of the 'schizoid position'. When you cannot get what you want from the person you love and need, it may be that instead of getting angry you simply feel more and more needy, with an ever stronger craving to get total possession of the loved person, to ensure that you will never be left wanting. But then you may be visited by the terrible fear that your love has become so overwhelming and devouring that it will destroy your loved one, and that then there will be nothing left of them. And indeed, this can happen. The depression which comes with this craving brings aloofness with it: you withdraw from loving because loving destroys those you love. In this case, there is no second chance, because if this is what you believe to be the nature of love and this is what you do, you dare not love anyone for fear that it will lead to the destruction either of them or of you.

In Fairbairn's terms, the love-made-angry depressed person looks on his or her loved one as a hateful denier (a Rejecting Object), while the love-made-hungry schizoid person sees his or her beloved as a desirable deserter (an Exciting Frustrating Object) never to be fully possessed.

Fairbairn's Exciting/Frustrating and Rejecting Objects played an important part in the evolution of Guntrip's thinking. Fairbairn himself used the metaphor of the infant reaching out and 'finding nothing there': the infant's excitement about life meets with no response in the world of other people and things, so that it must turn back on itself and be satisfied with phantasies of what it wants, ceasing to look for satisfaction in a world devoid of interest. (In psycho-analytic language, cathexis is withdrawn from the object-world.)

This sense of emptiness and void may be experienced where there would normally be connection with people and things, so that the child feels it has nothing to hang on to and lacks any sense of secure attachment. In this case, the (m)other is experienced as void and emptiness. At other times, void and emptiness may be experienced as coming from the self, as a frequent experience of hunger, for instance – the child experiencing itself as hungry-empty-needy-urgent-demanding-greedy-tearing-emptying in relation to the (m)other.

It is Guntrip's special contribution to emphasize always the two-endedness of relationships. This is not less the case when

one end of a relationship is experienced as not there: the experience that 'the world is empty and does not hold anything for me' may be equivalent to 'I am empty and cannot hold anything or anyone securely'. Similarly 'I am empty and will destroy, swallow, overwhelm the world' may be experienced as indistinguishable from 'The world is empty and will overwhelm, destroy, swallow me'. People may experience all these possibilities, either simultaneously or in mood-swings up and down consecutively, however mutually contradictory they may seem to common sense (or rather to the 'Central Ego').

Needing people and fearing to need them: the in/out programme

Guntrip described in moving terms the plight of those who dread entering personal relationships which demand deep and genuine feeling on both sides. Such people may have felt compelled to withdraw their consciousness into a relatively small area because, although their need for love is as great as anyone's, it operates at the emotional level of absolute infantile dependence filled with need and greed and the terror of abandonment. At that level, dimly aware of their enormous need, they feel faced with the risk of total loss and destruction, both of themselves and of those they love. It is the form their own love has taken and they have little knowledge of any other. Loving, therefore, seems to present them with a terrifying choice, in which both alternatives lead to loss and destruction for someone. If they let themselves be loved, that means they must let themselves be swallowed up and taken over: they must be totally compliant and cease to be an individual. If they let themselves love other people, this means that they themselves will inevitably take them over, insisting on their total compliance and swallowing them whole. Then the loved ones will disappear as real people.

In this plight, some people try a compromise which Guntrip has called the in/out programme. Driven by their need to love and be with others, they go into a relationship but at once feel driven out again by their fear of exhausting the person they love with the demands they want to make on them, or by their fear of losing themselves through overdependence and compliance.

Others escape this painful oscillation by withdrawing from

feelings and relationships altogether. They then feel a dreadful meaningless emptiness. In Fairbairn's terms, their consciousness is confirmed to the unfeeling Central Ego, which relates only to idealized perfectly good and perfectly bad 'inner objects'. Such uncomplicated phantasy-figures are all that they (selectively) perceive of all that the varied world of people and things has to offer. Libidinal relationships are quite disowned, though anti-libidinal ones may be used to keep libidinal strivings down. We can imagine such an effect transmitted down the generations if we imagine parents who feel like this being emotionless and unresponsive when their children try to relate to them. We can imagine the children's greed for love and their fear of needing it. We can imagine the children summoning up all their strength, in turn, to avoid evidence of feeling, and growing up, and becoming parents, and so on down the generations.

When dependence is painful

The problem about being dependent on others is that infants need (m)others whether these are adequate or not. For many reasons, realistic and unrealistic, the infant (in us all) may construct a concept of being trapped in a relationship with a bad absent disobliging (m)other, the witch of many fairy tales.

Guntrip writes that in the first discussion he ever had with Fairbairn, the latter said that the basic neurotic conflict was between dependence and independence; when the person one turns to is the person one must get away from (1971: 116). How are we to rely on others without feeling trapped, and how are we to feel free from others without feeling cut off? Again we are reminded of Balint's philobats and ocnophils, who represent the fear of being committed versus the fear of belonging nowhere and having no attachment-figure. For both Fairbairn and Guntrip, the origins of schizoid traits lay in some failure of the early environment to provide combinations of support and freedom in an acceptable form, a form which would foster both relationship and individuality, and which would make it possible to feel comfortable both with 'I + You = Us' and with 'You and I disagree'.

When we are weak, we are vulnerable and need protection, and so we are necessarily dependent on whoever will protect us

and look after our needs. Suppose now that the people on whom we are dependent resent our dependence. Then we will feel we are rejected *because* of our dependence, about which we are helpless to do anything. Our very situation makes us contemptible.

Some people are constantly afraid for this reason. Their experience of vulnerability and dependence has made them so: afraid of being dependent on people who dislike their dependence on them, afraid of appearing weak, afraid of looking a fool in other people's eyes. People committed to this internalized object-relation are in the more dire a plight because they regard themselves with the same hostile gaze which they experience from others. They feel shamed and disgraced by their own dependence and weakness and terror, believing that other people despise them for it. Guntrip had a patient who

> 'whenever she made any slight mistake, would begin shouting at herself at the top of her voice: "You stupid thing! Why don't you think! You ought to have known better!" and so on, which were in fact the very words her mother used against her in daily nagging. We see in an unmistakeable way the anti-libidinal ego as an identification with the angry parent in a vicious attack on the libidinal ego which is denied comfort, understanding and support, treated as a bad selfish child, and even more deeply feared and hated as a weak child.'
>
> (1969: 191)

In this frame of mind, people feel that the whole world is against them and waiting to humiliate them, yet they feel too weak to do without these hostile people. They are trapped. 'I need them but they don't want me; even my being here with them annoys them.' They may then make an effort not to feel those needs which make them dependent on the people who resent their dependence. In these circumstances, a person's sense of inadequacy does not come from doing this or that imperfectly; it is an 'unremitting state' of feeling in the wrong and in the way (Guntrip 1969: 175ff.).

To keep anxiety at bay, some people then develop a marked interest in competence and self-sufficiency, rather as the space-bats do. They may try to run their life so that their need for others is minimized. This is how the premature ego-functions of

'doing' rather than 'being' develop, with emphasis on adequacy and skills. But in the depths there is still terror, and the memory of being unable to cope, of being unable to keep 'them' friendly and concerned, and of the passionate overwhelming need for the forbidden dependence.

'I' split from 'me' lest they find and hurt me

The experience that 'I depend on a mother who does not care' or that 'I depend on another who does not care' will, in relatively mild circumstances, lead the child (in us) to the sense that 'I cannot direct my hopes towards this (m)other'. In more severe circumstances, there is likely to be a sense that 'the (m)other in whose power I am, is against me'. I believe that in truly severe cases, not only does the child feel 'You and I are not us', but the sense of 'us' does not develop at all. Hence neither does the sense of you-as-part-of-us, nor the sense of me-as-part-of-us. The child then has to live by relationships between 'I' and 'them', 'him', 'her'. There is no real 'you'. The (m)other can then be experienced only as impinging and exploiting, never as protecting or sharing.

When there is no 'us' in which 'I' and 'they' are embedded, it must seem natural that others should resent any reminder that I have feelings and needs of my own in competition with theirs. The other disappears except as a menace: 'I must not leave myself open to attack – I must not be found. I must keep myself safe from the (m)other.' (We need perhaps to be reminded again at this point that we are not considering the (m)other as known by other people – we are here considering how a child may experience the world. But perhaps we need also to remind ourselves that there are many more desperate and occasionally out of control (m)others than we dare publicly acknowledge.)

'I' keep 'myself' safe from 'them'. This sentence, which is grammatically correct, is full of splits and sharp boundaries. It might indeed describe a peson's mind correctly, but a person on whose map such splits and boundaries are very marked could not be a happy and rich and psychologically integrated personality. The 'I' regions are cut off from 'myself', and both are cut from 'them'. 'We' and 'you-as-part-of-us', both integrating structures, are not established.

Such splits would cut off a person's conscious 'I' from much that is going on with 'me' at the level of the body — the level of feelings and emotions, needs and impulses. In order to survive, I may have to make a habit of disregarding or disowning my feelings and my needs — I may have to alienate some regions of my self from other regions which have to do with feelings and needs. (In the theory propounded in this book, it is assumed that needs and feelings and impulses and hopes were originally part of my 'self' regions as these got established, so that a major effort has to be made to separate them out, a deliberate disintegrative effort of the kind discussed in the next chapter.)

One of Guntrip's patients, very like the one quoted on p. 312, shows the depths at which 'a cruel despising of weakness' can maintain a dramatic split between an active 'I' and a suffering 'me'.

> 'She would rave against girl children and in fantasy would describe how she would crush a girl if she had one, and would then fall to punching herself (which perpetuated the beatings her mother gave her). One day I said to her, "You must feel terrified being hit like that". She stopped and stared and said, "I'm not being hit. I'm the one that's doing the hitting".'
>
> (Guntrip 1969: 191)

This woman achieved an almost complete split of 'I' from 'me' and withdrew consciousness from those regions of herself which were 'me'.

Differentiation between self-regions is obviously a necessary ego-function. We all have to establish a split between 'I' and 'me'. When I say 'I can see what is happening to me', I reveal a split between 'I' and 'me', but it is a necessary one, not a dangerous one. It is clear that I am not unconscious of 'me', rather that my consciousness can cover both 'I' and 'me'. But sometimes there is too great an erosion of the natural connections between regions, as when someone says, 'I don't know what is happening to me'.

Withdrawing from the unmanageable world of others

When most of life is frightening, and I usually feel inadequate, I may decide that being an onlooker is safer than being a doer: it is

less obtrusive and hence less likely to attract hostile notice in my direction. When the watching 'I' is out of touch with emotions, feelings, and impulses, I develop something like Fairbairn's Central Ego, one of whose functions is to keep me out of situations so painful that I cannot cope.

Being wounded and terrified, people may withdraw into themselves in order to avoid further hurt. The danger is that they will withdraw so far that they will be left totally bereft, and get so far out of touch with their needs and feelings that they get no signals from them: it appears to such people that they have no needs — they don't feel anything. Paradoxically that may be a terrible feeling! The memory of having had feelings once, the capacity for which seems now lost, can fill a person with distress and longing. And in the present, I may want to keep in touch with the signals which come to me, yet be afraid of being overwhelmed by them if I do attend to them. I may oscillate in and out of my feelings because I do not have the energy or strength to contain them at a practical level.

We find in Guntrip further examples of the kind of people Fairbairn also described, people to whom messages from the world of others come only in very shadowy form, people not much in touch with what happens in the world of living-rooms, streets, or media. At first sight, this may not be obvious. However, slowly we realize that we are listening to someone who is not talking about people as we know them, in the round, but about 'them'. We are listening to someone who can perceive only a few highly selected aspects of the world of people and things. 'They', the others, are not realistically perceived, but are experienced only in terms of their imagined capacity to aid, threaten, or frustrate. Sometimes, 'they' are selectively perceived in such a way that the speaker can be both in touch with feelings, and yet able to keep them remote. 'Don't be silly' or 'Don't be so depressing' are examples of people speaking repressively to another person, while perhaps at the same time also disowning their own unacceptable notions. Similarly 'He's out for what he can get' or 'She sets her sights too high' may be said principally to enable the speaker to keep his or her own ideas isolated and disowned. Such people sometimes give us the impression that we and others are not experienced as independent people who existed before they walked into the room and

who will continue to exist after they are out of sight; we are known only as experiences which must be controlled and kept away from contact with the self-image.

Small wonder that such people complain, in Guntrip's words, of feeling unreal, cut off, out of touch, out of focus, futile, the point having gone out of life, things seeming shadowy and meaningless. Guntrip (1969: 18) writes that, though they certainly complain of depression, this depression 'lacks the heavy, black, inner sense of brooding, of anger, and of guilt, present in classic (object-related) depression'. Schizoid depression is a state in which objects have been renounced:

> '*Patient:* I'm very depressed. I'd just been sitting and couldn't get out of the chair. There seems no purpose anywhere: the future is blank. I'm very bored and want to change but I feel stuck. . . .
>
> *Therapist:* Your solution is to damp everything down, don't feel anything, give up all real relationships to people at an emotional level and just "do things" in a meaningless way, like a robot.
>
> *Patient:* Yes, I felt I didn't care, didn't register anything. Then I felt alarmed, this was dangerous. If I hadn't made myself do something, I'd just have sat, not bothered, not interested.
>
> *Therapist:* That's your reaction in analysis to me. Don't be influenced, don't be moved, don't be lured into reacting to me.
>
> *Patient:* If I were moved at all, I'd feel very annoyed with you. I hate and detest you for making me feel like this. The more I'm inclined to be drawn to you, the more I feel a fool, undermined.'
>
> (Guntrip 1969: 19)

Cut off from the external world and living in my own phantasy, I cannot feel for others, for they are not real to me. My therapist and the other people around me are no more than stick figures which enable me to act according to the phantasies in my head which do seem real to me. I can imagine some of them to be so powerful that I must keep an eye on them and manipulate them to keep things smooth for myself. Or I may act compliant and

behave nicely to them because I imagine that is what they want, and I imagine that I must do what they say because they are always right. Or I may imagine them as needing my consideration and concern. What I fear to do is to know them as they are, to 'discover' them. So I am left with the choice of either feeling well but rather unreal, or feeling real but terrible. I may veer between these two in an attempt to get some relief from each in turn.

Bad relationships may be better than none

It is hard to do without other people altogether. I may cling compulsively (and to other eyes tiresomely) to a loved person or valued idea, in order to keep unconscious my feelings about some of their more hateful aspects. Worse, I may cling to a relationship with an unloving or hating or unloved person, in order to keep at bay the sense of hopelessness, meaninglessness, and futility which would result from giving them up and being without anyone at all.

Some people may be able to keep anxieties at bay by relating mainly to causes and ideas, and interacting with other people mainly through these.

> 'If I stop believing in what holds me together and gives meaning to my life, only constant and unremitting self-monitoring will keep me from falling apart.
> 'I shall believe in psycho-analysis or monetarism or Adam and the Ants – they make life worth living.'

Somewhat better off are those people who can relate to others more directly, provided everyone's duties and roles are carefully and minutely defined. They relate to others mainly in the meticulous execution of tasks, not risking more unpredictable and spontaneous contacts.

Then there are people who prefer some kind of in/out compromise. However weakened they may be by the continual advance and retreat, it is better than nothing.

Yet others may be able to make relationships, albeit tainted by fear and suspicion because they cannot help feeling that people are dangerous and easily cruel or mean.

It is hard to do without people and relationships. When I fear

and avoid them, something happens to myself, the self which needs to be attached to and in touch with others. Void and emptiness threaten me. My very identity feels as though it is disintegrating – it lacks boundaries where I should be in touch with others. I mobilize a host of defences. I look depressed, I feel depressed. Guntrip, however, argues that this depression may be what I hold on to as a defence against feeling overwhelmingly anxious. And indeed, the anxieties which a person is willing to know about may be a cover to conceal anxieties about falling apart or ceasing to be a person at all (Guntrip 1969: Chapter 8).

The defences against falling apart may be strong enough to be called False Selves; they may be the only parts of the personality that a terrified person dare show. One of the attractive things about Guntrip is his insistence on a person's need for defences. He does not speak of the False Self in condemnatory terms; he sees it as a necessary defensive organization, a survival kit, a caretaker self, the means by which a threatened person has managed to survive. It is worth reminding oneself, when exasperated by someone who acts flighty, irresponsible, dishonest, evasive, or snooty, that these are all defensive ploys.

A frightened person may make a show of anger as a way of hiding weak, scared feelings. It is easy for others to see such a person as an angry person (and to attempt a therapy on the basis of the hidden anger and the guilt which goes with it – after all, hidden anger and guilt form part of the psychoneurotic personality which was the first to be analysed and restored to relative well-being by Freud nearly a hundred years ago). But anger and hidden guilt are not at the root of all distress, and it is possible to use the appearance of hidden anger as a defence against even more unacceptable feelings. Guntrip writes eloquently about our culture's preference for these 'strong' feelings.

'In a word, the core of psychological distress is not *guilt* but *fear*. Guilt is itself a form of fear, but it arises at the stage when the child is becoming socialised and capable of realising the effect of actions on other people, and the nature of their reactions of anger and condemnation. The child feels ashamed, sad and frightened to find that he has hurt those he loves and needs. There are much more primitive fears than that, fears not of the effect of our *strong* and dangerous needs and

impulses, but of our infantile *weakness*, littleness, and helplessness in the face of an environment which either fails to give the support we needed as infants or else was positively threatening. Human beings all prefer to be bad and strong rather than weak. The diagnosis of guilt allows us to feel that the source of our troubles with ourselves and others is our possession of mighty and powerful instinctive forces in our make-up, which take a great deal of controlling and civilising. The philosophies of Nietzsche and Machiavelli, and the "power politics" of the present age, all make it plain that human beings feel at least a secret and often an openly admitted admiration for the ruthless strong man, however bad his ideas and actions may be. In our competitive Western culture (including communism which is every bit as competitive as capitalism) contempt is felt for weakness. We have always known that sympathetic care for the weak and suffering, fostered by Christianity, had to fight its way forwards, and survive on the basis of much compromise; as in the often cited cases of Victorian capitalists who made fortunes by the most ruthless business methods on the one hand, and endowed churches, charities and hospitals on the other. The main stream of the world's active life has been carried on in the tradition of the struggle for power in which the weakest go to the wall. The superman is the criminal who has the courage to fight and does not mind hurting other people. The Christian with his slave-morality of self-sacrifice to save others is weak and gets crucified. A diagnosis which traces psychological troubles to our innate strength supports our self-respect and is what is today called an ego-booster. A diagnosis which traces our troubles to deep-seated fears and feelings of weakness in the face of life has always been unacceptable.'

(1969: 31)

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Basic faults as the cause of splits

In this chapter we are interested in ways in which the integrity of the personality can be disrupted by splits which come about after a period of what had seemed to be normal integration. Psychic structures which were at one time organized together may lose their interconnections and fall apart. This return to simpler structures is variously called 'dissociation', 'de-differentiation', 'disintegration', 'regression' to a simpler state of mind. It is how we feel – to a mild extent – when we feel not very well, as in a bad bout of flu. Everything is simplified, we do not have the energy to maintain a highly differentiated set of responses. We feel surprisingly fretful and in need of in-dulgence. We revert to childish comforts which we thought we had outgrown – sweet, mouth-filling, warm, relaxing things. Ego-functioning is slack; we are more child-like, more easily distracted, more vulnerable to slights and hurts we can usually take in our stride. The controls are weaker.

> 'Turning and turning in the widening gyre
> The falcon cannot hear the falconer;
> Things fall apart; the centre cannot hold;
> Mere anarchy is loosed upon the world.'

The values at the centre do not feel connected with the impulses demanding expression.

> 'The best lack all conviction, while the worst
> Are full of passionate intensity.'

And yet, as the final lines suggest, new and very constructive things may come from such anarchic states.

> 'And what rough beast, its hour come round at last,
> Slouches toward Bethlehem to be born?'

Yeats's poem 'The Second Coming' describes deep and mysteri-ous processes of dissolution and renewal relevant to many kinds of creative work. Nina Coltart (1985) used it to illustrate the work of psycho-analysts. Ehrenzweig (1967) based his whole theory of art on similar premises. We cannot create anything new if we cannot tolerate incoherence, disorganization, splitting. For a more general discussion of breakdown, we therefore return to the metaphor of personality-structure as landscape. In parti-cular, Balint's concept of the Basic Fault (1968) helps us to understand the kind of splits which may fragment structures that had seemed integrated until a moment of stress caused disruption. Balint likened the personality to a landscape with a geological history. In this landscape are features caused by long-ago events: mountains and oceans, scarps, crags, and valleys left behind after major upheavals; millennia of weather and the slow grind of glaciers have had their effects. Now, plants cover the earth; not immediately apparent in the landscape are faults in the geological structure – faults not in the sense of errors or sins, but weaknesses in the terrain, where the ground may crumble and crack in times of strain.

A number of writers have contributed to our understanding of the causes and development of such faults. I shall try to list what each has to say without arguing. Each of them may have seen, or been impressed by, a different kind of weakness. In the present state of knowledge it is certainly pointless to try to argue them into consistency.

Bodily damage

One kind of fault or permanent weakness is the result of bodily damage. Regardless of a parent's loving wishes, it may happen that a child is left for long periods in extreme conditions of

hunger, heat, cold, sensory deprivation, or whatever. Or it can happen that a child is born with a physical handicap. Or permanent damage may be done by disease, or when a child is accidentally badly hurt in wars or famines or earthquakes – or modern traffic. The effect of disaster at a bodily level may be to inflict so great a wound on the self-image – 'a narcissistic wound' – that the memories of it are kept isolated for ever, and the rest of the personality develops out of touch with those memory-traces. That is where the weakness will be, the fault. Hannah Green's *I Never Promised You a Rosegarden* (1964) gives an example of a traumatic bodily event leading to a later breakdown. In this story, the trauma happened when the child was four. She was not helped to recognize, put into words, express, or accept the pain and outrage she had experienced at the time of a surgical operation. On the contrary, all around her denied that anything bad had been happening. The experience remained so isolated that the girl had no *idea* of it, but she did feel the feelings associated with it. She tried to be good, living in a family which was certainly 'good enough' in spite of some shortcomings, but she battled ineffectually with the sullen resentment, hatred, and contempt which kept rising up in her, which no one could understand.

To me, it seems urgent to have more research into the consequences of injury to the body before body-imagery is stabilized. Body-imagery is the precursor of self-imagery, with which the sense of identity is closely connected. It is surely important to know more about the psychological effects of the incubators used to protect very premature or very ill infants, who necessarily must put up with an abnormal amount of sensory deprivation. And how are those infants affected, whose eyes are treated with a tincture at birth, as a medically approved preventative measure – a procedure which blinds them for the first few days of life?

There must be many 'ways in which the normal gradual development of imagery about what it means to be a bodily person – and of imagery about what the world has to offer – is so disrupted as to leave ill effects which we do not know how to eradicate. Moreover, we must do more research on damage caused, not by bodily distress or injury, but by other bodily circumstances. Who can tell the good and bad effects of leaving

infants on their own in cots for long periods, instead of letting them be in touch with a human being much of the time? Who can tell the psychological advantages and disadvantages of the rocking cradle?

Separation anxiety and the loss of attachment – Bowlby

Bowlby has presented some convincing arguments from the animal world that attachment and separation-anxiety are biological phenomena, and he and his colleagues have provided both theoretical and factual (even visual) evidence of the sufferings of little children ill-prepared for separation from those to whom they are attached (Robertson 1952). According to this viewpoint, the infant animal has built-in as well as built-up expectations that its needs will be met by what Bowlby called an attachment-figure, normally the mother. If there is a delay in having these needs met, two kinds of distress result: first, distress caused by the unmet need – hunger, cold, pain, or whatever, and second, distress at the loss of the attachment-figure. According to Bowlby, the crying of the young of the species is biologically bound to create tension and anxiety in adults who hear it, and this does not abate until the distress-signals cease. The adult comforts the infant both by meeting its needs and by relieving the fright it got when it found itself unattached and subject to unmanageable distress. It is this distress which one of Tustin's little patients described as a black hole – a hole where there should be a button to attach the infant to what Kohut called the selfobject and Winnicott the facilitating environment; it is distress caused when the illusion of omnipotence has to be given up.

Premature loss of the selfobject state – Kohut

There is a time in infancy, when body-experiences and other processes have not yet integrated into a coherent and whole self; there is not yet a single dominant self-image, nor yet a set of interrelated ego-functions. For Kohut, the development of an identity is 'the growth of self-experience as a physical and mental unity which has cohesiveness in space and continuity in time'.

'The mother's exultant response to the total child (calling him by name as she enjoys his presence and activity) supports, at the appropriate phase, the development from auto-erotism to narcissism – from the stage of the fragmented self to the stage of the cohesive self.'

(Kohut 1971: 118)

The mother's (and other people's) love of the baby is the beginning of the baby's self-love. Empathic, competent, loving people generate a selfobject state of mind which enables the infant to experience itself as whole, lovable, in control and capable – 'grand'. It is love that causes integration – 'cathexis' – between the different experiences which happen to an infant, so that it feels itself to be 'grand'. 'A fragmented self is the consequence of a poorly cathected self' and falls more easily apart. The cause of such disintegration lies, in Kohut's view, in the unmanageable loss of the selfobject state: the infant abruptly loses the sense that it is whole, lovable, and competent – a sense which good care would normally provide – before it can cope with such a discovery by looking after itself. This is Kohut's formulation of a basic fault.

'While a relationship to an empathically approving parent is one of the preconditions for the original establishment of a firm cathexis of the self, and while in analysis disturbances in this realm are once more open to correction, the opposite sequence of events (from a cohesive self to its fragmentation) can often be observed both in analysis and in a child's interplay with its pathogenic parents. The fragmentation of the self, can, for example, be studied in patients who, with the aid of the analyst's presence and attention, have tentatively re-established a feeling of the cohesiveness and continuity of the self. Wherever the mirror-transference cannot be maintained, the patient feels threatened by the dissolution of the narcissistic unity of the self.'

(1971: 120)

An empathic and competent mothering figure (or therapist) will understand and provide for the baby's needs in such a way that the child (in us) can begin to build on a foundation of self-confidence and trust in the goodness of the world. But the abrupt

failure or loss of the selfobject state damages the child's sense of itself as a whole person: to be cut off from one's selfobject, before one has grown out of this state in a natural way, must be like being cut off from one's arm or leg, certainly as traumatic. Thereafter the person is prey to a host of related anxieties, all to do with what it feels like when you fall apart:

- fear of loss of the reality-self, caused by longing for ecstatic merging with an idealized parent-figure;

- fear of loss of contact with reality and fear of permanent isolation because of experiences of unrealistic grandiosity;

- frightening experiences of shame and self-consciousness, caused by the intrusion of exhibitionism;

- hypochondriacal worries about physical or mental illness due to obsessional interest in disconnected aspects of the body or the mind.'

(Kohut 1971: 152–53)

These are commonly interpreted in psycho-analysis as castration fears. Kohut explicitly warns against this: *these* fears come from earlier breaks in integrity. In general, his views on instinctual drives take the whole of life as their context:

'Let me emphasize again that rage and destructiveness are not primary givens but arise in reaction to the faulty empathic response of the selfobject. . . . An isolated striving to search for an outlet for rage and destructiveness is not part of the primary psychological equipment of man, and the guilt with regard to unconscious rage that we encounter in the clinical situation should not be regarded as a patient's reaction to a primal infantile viciousness.'

(1977: 123–24)

'It will bear repeating at this point that the tenets I propose with regard to the experiences of aggression and rage also apply to the libidinal drives. The infantile sexual drive in isolation is not the primary psychological configuration – whether on the oral, anal, urethral or phallic level. The primary psychological configuration (of which the drive is only a constituent) is the experience of the relation between the self and the empathic selfobject.'

(1977: 121–22)

In Kohut's view, drives are normally integrated into the personality in the course of development. But when there is fragmentation, when the person falls apart, they become important in isolation from the self-organization, which no longer provides a context which transcends and contains them. Healthy drive-experiences, writes Kohut, always include both self and self-object. But if the self is seriously damaged or destroyed, then the drives become powerful in their own right. 'Such drive manifestations only establish themselves in isolation after traumatic and/or prolonged failure in empathy from the selfobject.'

$x + y + z$ amount of desolation – Winnicott

Bowlby's attachment figure and Kohut's selfobject are very like Winnicott's facilitating environment and 'good-enough mother'. None of these concepts is exactly like the others, but they have a common core of meaning. A facilitating environment allows a child to notice its needs and wishes, and to begin to imagine what would make it happy, and then to find its wish answered. For this to happen, the mother or other care-taking persons need not be there all the time, but they must not be away so long that the baby feels abandoned. They can safely be away for a little while and the baby will not mind, picking up the thread of its phantasy of their continued care at the point where it loses the sensory stimulus of their actual presence but still retains the remembered sense of their presence (= care). There may, however, be a brief delay between the first arousal of the need and the coming of the mother (or other care-taking person). When this happens, the baby may cry, and this will bring, let us say, the mother, to do what is needed.

Winnicott invented a mathematical metaphor for the amount of frustration or desolation an infant may be able to tolerate. The baby can recover without ill-effects from x amount of delay before someone comes to cope. Winnicott says the baby may even be able to stand an absence for $x + y$ amount of time, and still be able to pick up the threads of its good phantasy. But sometimes there may be a yet longer interval: $x + y + z$. This is too long, says Winnicott, and the infant becomes traumatized – wounded, damaged.

This is where Winnicott would locate the basic fault. The environment has now been irrevocably experienced not as

facilitating but as indifferent at best, hostile at worst. The infant is now forced to develop ego-functions, so that it can look after itself – before it has reached the phase of development where a self arises naturally out of play experiences. A problem has had to be faced prematurely – how to get along in an unhelpful environment. A False Self (for Winnicott a set of cognitive functions disconnected from the life of feelings and emotions) begins to develop and to manage the environment so that further traumatic experiences may be avoided. When help finally comes, the whole experience is shut away. But the sense of indwelling may have been impaired by repeated bad experiences, and a rather lifeless self will develop, in which thinking and feeling and doing are dissociated from each other, with no strong sense of being or of being whole. Here is the place of the basic fault, where the break may come.

> 'Trauma implies that the baby has experienced a break in life's continuity, so that primitive defences now become organised to defend against a repetition of "unthinkable anxiety" or a return of the acute confusional state that belongs to the disintegration of the developing self-structures.'
>
> (Winnicott 1974[1971]: 114)

A break in being is different from a frustration, and here again we see a writer warning us that it is not castration-anxiety he is thinking of. Frustration belongs with 'male-element' drive-satisfaction-seeking. 'To the experience of being belongs something else, not frustration but maiming.' Something should be there which is not there – the indwelling self.

The pain of $x + y + z$ amount of desolation may have created a practically permanent break, with an accompanying practically permanent agony, of which a person may not be continuously aware, but which is nevertheless there all the time, sapping the capacity for work and happiness. In an important article, published posthumously, called 'The Fear of Breakdown' (1974), Winnicott made the point – important to those who live with this agony and to their therapists – that the fear of breakdown may in fact be a fear of reviving the memories of a previously experienced breakdown: there is a basic fault. In other words, there was a time when the process of integration was devastatingly interrupted and the infant had to remain in its distress; it

could not return to the safety of a mother's enveloping and holding presence, but was left with the chaos of half-individuated processes not properly synchronized with one another. Winnicott called this state an agony. He thought the pain so great that 'anxiety' did not seem a strong enough word. He listed five 'primitive agonies' as examples, the first – the fear of returning to an unintegrated state – being the most basic, while the others in one way or another represent memories of later developmental disasters:

- failure of indwelling, when the body seems not to be the place where 'I' dwell,
- loss of the sense of reality,
- loss of the capacity to relate to other people and things,
- the sense of falling for ever with nothing to hold on to.

Winnicott sometimes writes in what seems to me a surprisingly optimistic vein.

> 'We must assume that the vast majority of babies never experience the $x + y + z$ quantity of deprivation. This means that the majority of children do not carry with them for life the knowledge from experience of having been mad. Madness here *means* simply a *break-up* of whatever may exist at the time, of a *personal continuity of existence*. After "recovery" from $x + y + z$ deprivation, a baby has to start again permanently deprived of the root which could provide *continuity with the personal beginning*.'
>
> (1974[1971]: 114–15, Winnicott's italics)

I am less optimistic than Winnicott about what happens to us in infancy, and believe that many of us have had this experience, quite often perhaps. But if we base ourselves on what we have learned from him and others, I also believe we can afford more hope. It is permissible to think that, while some parts of the developing structure fall into chaos and terror, other parts of the growing order remain intact and make a rebuilding of the destroyed connections possible. Only repeated deprivation in major areas of development would be likely to wipe out the possibility of reconnecting with the early roots of experience, the True Self. Winnicott himself actually goes on to say as much:

babies are 'constantly being cured' of the effects of $x + y + z$ degree of deprivation by the mother's comforting, her 'localised spoiling that mends the ego-structure'.

This is an important issue for psychotherapists: can this person be helped to find enough associations of goodness, and to bring them into operation often enough to have them contribute to greater ego-strength? If not, is there any point in helping him or her to become more aware? Or will such efforts leave the unfortunate person as disabled as ever?

Lack of fit and the unempathic environment – Balint

Balint was one of the earlier writers to consider seriously the point at which one becomes aware that there is a world of other people and things – the point of individuation. At this point, there may be either a more home-loving or a more space-loving orientation, but either way, if all goes well, a person will emerge with an integrated personality. However, all may not go well. Paraphrasing Balint, a person may be struck by a trauma, after which development will be fundamentally influenced by the method which that person invented to cope with the trauma. The Basic Fault is at the point at which people begin to have to 'cope'.

How Balint would have liked the use of the English 'coping' to refer to ego-functioning! It gives recognition to our ability to survive and to deal with people and things in order to survive, not necessarily with much regard to the moral dimension. 'Coping' has two independent and equally relevant roots, according to the *Shorter Oxford English Dictionary*: A. From the Old French *coper*, Modern French *couper*, to strike (a blow), to cut. From this root we get our meanings (1) to strike; to come to blows; encounter; engage; (2) to be or prove oneself a match for, contend successfully with; (3) to have to do with; (4) to meet, to come in contact (hostile and friendly) with; (5) to match a thing with another equivalent. B. From Middle English *kopen* – to buy (cf. cheap). From this root we get (1) to buy; (2) to exchange, barter; (3) to make an exchange, bargain. There is even a third root, from cope meaning cape: to cover with a cope, to hang over like a coping. All very appropriate.

To return to our theme after this linguistic digression, Balint does not think of trauma as necessarily a single event. Trauma is

more likely to be caused by a long-standing situation in which there was some painful misunderstanding — a lack of fit — between the child and the adults around it. 'True, despite the general lack of fit, in some cases some adult may be on the child's side, but much more often, immature and weak individuals have to cope on their own with traumatic situations: either no help is available, or the only help is of a kind that is hardly more than a continuation of the misunderstanding, and thus useless.' For lack of the right support, the child is forced to find its own method of coping, 'a method hit upon in a time of despair or thrown at it by some un-understanding adult who may be a well-wisher, or just indifferent, or negligent, or even careless or hostile'. This method will be incorporated in the child's personality, and therafter 'anything beyond or contrary to this method will strike the person as a frightening and more or less impossible proposition'. 'The individual's further development will then be prescribed or at least limited by this method which, although helpful in some respects, is often costly, and above all, alien' (1968: 82n).

> 'Most patients cannot tell us what causes their resentment, lifelessness, dependence, what the fault or the defect in them is ... some can express it by phantasies about perfect partners, perfect harmony, untroubled contentment. ... Over and over they repeat that they feel let down, that nothing in the world can ever be worth while unless something they were deprived of is restored to them.'
>
> (Balint 1968: 88–9)

Balint notices the influence of the theories of his time. 'Sophisticated patients may express this something irretrievably lost or gone wrong as the penis or the breast, usually felt to have magical qualities, and speak of penis or breast envy, or castration fear.' However, says Balint, in nearly all cases this is coupled with an unquenchable and incontestable feeling that if the loss cannot be made good, the patient himself will remain no good.

Ontological insecurity – R. D. Laing

It is largely to R. D. Laing and his associates that we owe the popular growth in sympathetic understanding of what it is to

feel 'schizophrenic' and of the concepts of the False Self. The publication in 1960 (paperback 1965) of Laing's *The Divided Self* made an enormous impact on the intelligent public of those days. He argued that our lack of understanding of many confused people is due to our own unconscious *unwillingness* to understand them (and ourselves), and that they are confused because we need to keep them (and us) confused. This was a revelation at the time. The crucial passage is a re-examination of what Kraepelin (1905) described as the typical behaviour of a patient 'in an excited condition', when being displayed to a lecture-hall full of students.

> 'The patient I will show you today has almost to be carried into the room, as he walks in a straddling fashion on the outside of his feet. On coming in, he throws off his slippers, sings a hymn loudly, and then cries twice (in English), "My father, my real father!" He is eighteen years old, tall, rather strongly built, but with a pale complexion on which there is often a transient flush. The patient sits with his eyes shut, and pays no attention to his surroundings. He does not look up even when he is spoken to, but he answers beginning in a low voice, and gradually screaming louder and louder. When asked where he is, he says, "You want to know that too? I tell you who is being measured and is measured and shall be measured. I know all that, and could tell you, but I do not want to." When asked his name, he screams, "What is your name? What does he shut? He shuts his eyes. What does he hear? He does not understand; he understands not. How! Who! Where! When! What does he mean! When I tell him to look, he does not look properly. You there, just look! What is it! What is the matter! Attend: he attends not. I say, what is it, then? Why do you give me no answer? Are you getting impudent again? How can you be so impudent! I'm coming! I'll show you! You don't whore for me. You mustn't be smart either: you're an impudent lousy fellow, such an impudent lousy fellow I've never met with. Is he beginning again? You understand nothing at all, nothing at all; nothing at all does he understand."

Kraepelin notes here among other things the patient's "inaccessibility": "Although he undoubtedly understood all

the questions, *he has not given us a single piece of useful information. His talk was ... only a series of disconnected sentences having no relation whatever to the general situation"* [1905: 79–80, Laing's italics].

Now there is no question that this patient is showing signs of excitement. The construction we put on this behaviour will, however, depend on the relationship we establish with the patient, and we are indebted to Kraepelin's vivid description which enables the patient to come, it seems, alive to us across fifty years. What does this patient appear to be doing? Surely he is carrying on a dialogue between his own parodied version of Kraepelin, and his own defiant rebelling self.

"You want to know that too? I tell you who is being measured and is measured and shall be measured. I know all that, and I could tell you but I do not want to." This seems to be plain enough talk. Presumably he deeply resents this form of interrogation which is being carried out before a lecture-room of students. He probably does not see what it has to do with the things that must be deeply distressing him. But these things would not be "useful information" to Kraepelin except as further "signs" of a "disease".

Kraepelin asks him his name. The patient replies by an exasperated outburst in which he is now saying what he feels is the attitude implicit in Kraepelin's approach to him: What is your name? What does he shut? He shuts his eyes. ... Why do you give me no answer? Are you getting impudent again? You don't whore for me? (i.e. he feels that Kraepelin is objecting because he is not prepared to prostitute himself before the whole classroom of students), and so on ... such an impudent shameless, miserable, lousy fellow I've never met with ... etc.

Now it seems clear that this patient's behaviour can be seen in at least two ways, analogous to the ways of seeing vase or face [see also pp. 46–7]. One may see his behaviour as "signs" of a "disease"; one may see his behaviour as express-ive of his existence. ... What is the boy's experience of Kraepelin? He seems to be tormented and desperate. What is he "about" in speaking and acting in this way? He is objecting to being measured and tested. He wants to be heard?'
(1965[1960]: 29–31)

Laing and his associates differ from the other writers in this chapter, in not going back to events in childhood or infancy to demonstrate the existence of splits in the personality. For a variety of theoretical reasons, they do not need to. In particular they do not assume that the personality must once have been a whole which subsequently split. Rather, they see each person presenting different facets to each other person, according to the expectations which have evolved between them.

'Let us suppose that Jill has a father and mother and brother, who all live together. If one wishes to form a complete picture of her as a family person, let alone as a person outside the family, it will be necessary to see how she experiences and acts in all the following contexts:

Jill alone
Jill with mother
Jill with father
Jill with brother
Jill with mother and father
Jill with mother and brother
Jill with father and brother
Jill with mother, father and brother.

People have identities. But they may also change quite remarkably as they become different others to others. *It is arbitrary to regard any of these transformations or "alter" ations as basic" and the others as variations.*

Not only may people behave quite differently in their different alterations, but they may experience themselves in different ways. They are liable to remember different things, express different attitudes, even quite discordant ones, imagine and phantasize in different ways, and so on.'
(Laing and Esterson 1964: 6–7, my italics)

This is a theory of natural splits. It maintains that people will feel that they have integrity and identity, provided first that they are not under pressure to be wildly different in different role-relationships, and second that each role-relationship is fairly consistent from day to day. The examples given in *Sanity, Madness and the Family* (1964) are all of impossibly contradictory pressures. Here is 'Ruby', daughter of the Eden family:

'When Ruby, aged seventeen, was admitted to hospital she was in an inaccessible catatonic stupor. At first she refused to eat, but gradually she was coaxed to do so. After a few days she began to talk. She rambled in a vague and woolly way, often contradicting herself so that we could get no consistent story from her of her relationship with her family or with others. One moment she would say her mother loved her, and the next that she was trying to poison her. She would say that her family disliked her and wanted to get rid of her and abandon her in hospital, and then she would say that they were good and kind to her. . . .

She complained of bangings in her head, and of voices outside her head calling her "slut", "dirty", "prostitute". She thought that "people" disliked her and were talking disparagingly about her. She said she was the Virgin Mary and Cliff Richard's wife. She feared crowds and "people". When she was in a crowd she felt the ground would open up under her feet. At night "people" were lying on top of her having sexual intercourse with her: she had given birth to a rat after she was admitted to hospital: she believed she saw herself on television.

It was clear that the fabric of this girl's "sense of reality", of what is the case and what is not the case, was in shreds.

The question is: Has what is usually called her "sense of reality" been torn in shreds by others?'

(Laing and Esterson 1964: 118–19)

The authors then give an account of some of Ruby's background. (For the sake of clarity the names of her biological relatives have been printed normally, and the names by which she called them and/or by which they referred to themselves in quotation marks.)

'Ruby and her mother lived with her mother's married sister, this sister's husband ("daddy") and their son ("brother"). Her father ("uncle") who was married, with another family elsewhere, visited them occasionally. Her family violently disagreed about whether Ruby had grown up knowing who she was. Her mother ("mummy") and her aunt ("mother") strongly maintained that she had no inkling of the real state of

affairs, but her cousin ("brother") insisted that she must have known for years. They (mother, aunt, cousin) argued also that no one in the district knew of this, but they admitted finally that, of course, everyone knew that she was an illegitimate child, but no one would hold it against her. The most intricate splits and denials in her perception of herself and others were simultaneously expected of this girl and practised by the others.

She fell pregnant six months before admission to hospital and had a miscarriage at four months. . . . The family was haunted by the spectres of scandal and gossip, with what people were saying and thinking, and so on. Ruby's pregnancy intensified all this. Ruby thought people were talking about her, and her family knew that in fact they were, but when she told them about this they tried to reassure her by telling her not to be silly, not to imagine things, of course no one was talking about her.

This was just one of the many mystifications surrounding this girl. Here are a few of the others.

In her distracted state she said that she thought her mother, aunt, uncle, and cousin disliked her, picked on her, mocked her, and despised her. As she got "well" again, she felt very remorseful about having thought such terrible things, and said that her family had been "really good" to her, and that she had a "lovely family".

They in fact gave her every reason to feel guilty for seeing them in this way, expressing dismay and horror that she should think that they did not love her.

They told us, however, with vehemence and intensity, that she was a slut and no better than a prostitute. They tried to make her feel bad or mad for perceiving their real feelings.'

(Laing and Esterson 1964: 120–21)

In *The Divided Self*, written at much the same time, Laing helps us understand how Ruby comes to be feeling and acting as she does — she is protecting her inmost self from destruction.

'We have our secrets and our needs to confess. We may remember how, in childhood, adults at first were able to look right through us, and into us, and what an accomplishment it was when we, in fear and trembling, could tell our first lie,

and make, for ourselves, the discovery that we are irredeemably alone in certain respects, and know that within the territory of ourselves there can be only our footprints. There are some people, however, who never fully real-ize themselves in this position. This genuine privacy is the basis of genuine relationship; but the person whom we call "schizoid" feels both more exposed, more vulnerable than we do, and more isolated. Thus schizophrenic patients may say that they are made of glass, of such transparency and fragility that a look directed at them splinters them to bits and penetrates straight through them. We may suppose that precisely as such they experience themselves.'

(Laing 1965[1960]: 37)

'We can now state more precisely the nature of our clinical inquiry. People may have a sense of their presence in the world as real, alive, whole, and in a temporal sense, continuous. As such, they can live out into the world and meet others: a world and others experienced as equally real, alive, whole and continuous.

Such basically *ontologically secure* people will encounter all the hazards of life – social, ethical, spiritual, biological – from a centrally firm sense of their own and other people's reality and identity. It is often difficult for people with such a sense of their own integral selfhood and personal identity, of the permanency of things, of the reliability of natural processes, of the substantiality of others, to transpose themselves into the world of an individual whose experiences may be utterly lacking in any unquestionable self-validating certainties.'

(p. 39)

Laing makes it clear that both secure and insecure people may be tormented, sad, full of doubt and anguish and uncertainties. This is not what distinguishes ontologically secure people from others. Being secure does not mean being happy, only being secure.

Laing classifies three kinds of danger which characteristically beset the insecure.

1 *The danger of engulfment* – I may be taken over and swept away by someone or something.

2 *The danger of implosion* – I may be invaded and impinged upon and totally filled with whatever they put into me when I am empty. In reaction to these dangers, I may withdraw, which leads to

3 *The danger of depersonalization* – I may feel that nothing and no one is real any more: 'This is not happening to the "me" that matters.'

I may begin to think of my 'real' self as inviolable – no one can reach it. I may tell myself that whatever I am being forced to do, whatever roles they feel I must play, this is not happening to my real self. And indeed this is so – ontologically insecure people are not consenting to what they are saying or doing. Their true self is hidden away. Their behaviour and their bodies are being coerced, but somewhere is a 'me' that is not involving itself. Laing thinks of this as the 'unembodied self'. It is as though the person said, 'I must keep in mind that this is not happening to me, only to my body; it does not touch the real me.' As Laing puts it, 'Instead of being the core of his or her true self, the body is felt as the core of a false self which a detached, disembodied "inner", "true" self looks on at with tenderness, amusement or hatred as the case may be' (1965[1960]: 69).

However, this divorce of role from self destroys the integrity of the personality.

'We shall suggest that it was on the basis of his exquisite vulnerability that the unreal man became so adept at self-concealment. He learnt to cry when he was amused, and to smile when he was sad. He frowned his approval, and applauded his displeasure. "All that you can see is not me" he says to himself. But only in and through all that we do see can he be anyone (in reality). If these actions are not his real self, he is irreal: wholly symbolical and equivocal. He is a purely virtual, potential, imaginary person, a "mythical" man, nothing "really". If, then, he once stops pretending to be what he is not, and steps out as the person he has come to be, he emerges as Christ, or as a ghost, but not as a man: by existing with no body, he is no-body.'

(p. 37)

Here are people constantly reminding themselves 'This is not happening to the essential me', 'This does not touch the real me', 'What they say and do to me does not really matter', 'This is a dream'. What is happening to that part of the person which the person does experience as 'me'? What does 'touch me'? The answer is, nothing from the senses touches 'me'. That part of the person has retreated to the world of ideas. But the sense of self started with body-imagery, which, if all goes well, is refined and structured and in various ways continually confirmed by messages from the sensory world. If, now, there is a constant inhibition of messages from the senses which would confirm that the world exists, then the body-image, the self-image, and the very self are inevitably weakened. The experience of being connected with the body will be weakened and confused. But body-imagery has been connected with the sense of well-being from the early days on, when all well-being was physical, and so the sense of well-being is dissipated. Moreover, even when good things are happening (regular breathing, good digestion, regular heartbeat, the soft touch of clothes, the good taste of food), the effect does not enhance well-being as it would do in a less divided self.

The frustration and rejection of excitement – Fairbairn

Fairbairn was the first great exponent of splits in a person's self-regions. His ideas were given extensive consideration in Chapter 8, but some will need to be summarized here because Guntrip based his own formulation on them, and the next chapter takes Guntrip's ideas further. Fairbairn was interested in the developments which issued from the infant's experience of the mother as Frustratingly Exciting and/or Rejecting. He thought of the infant as having needs governed by the pleasure-principle – Freud called these the Id, collectively, and Fairbairn the Libidinal Ego. Children whose experiences were dominated by phantasy relations with a Frustrating Exciting and/or Rejecting Object will come to feel more and more that it is no use wanting good things. They will eventually cease to reach out for what they cannot get. Eventually the phantasy of something good simply raises anxiety or anger rather than a wish to get it: an Anti-Libidinal Ego has

developed which protects the child from the pain of frustration, though it in turn may be painfully experienced. The Anti-Libidinal Ego is a set of reactions to the Libidinal Ego which ensure that the child's needs remain hidden; it remains unconscious of them. Thus the Anti-Libidinal Ego keeps the libidinal part of the personality out of touch with the world of potentially satisfying as well as frustrating people and things – there is a basic fault between Libidinal and Anti-Libidinal Ego.

A third personality-structure, which Fairbairn called the Central Ego, rather like Freud's Ego, comprises the set of calculating reactions through which currently incoming information is registered and evaluated and retained for future planning – a useful structure for survival purposes. There may not be much connection between this structure and the other two – another basic fault.

The regressed ego – Guntrip

Guntrip subscribed to Fairbairn's ideas about the structure of the personality. He added, however, an important concept of his own: the withdrawn 'regressed' ego (1971: 172). Guntrip considered that there were three stages in the process he called the withdrawal of the regressed ego.

1   At stage one, following Fairbairn, there is a deepening of the split between the (already existing) Central Ego (more in touch with the world of other people and things) and the (also already existing) Libidinal Ego (where a person's more bodily feelings originate). This is a true 'vertical' split.

2   At stage two, an Anti-Libidinal structure interposes between the Central Ego and the Libidinal Ego. This makes it additionally difficult for people to be in touch with their libidinal feelings, and for their libidinal needs to find expression in the world of other people and things. People then experience (rejecting) anger, because of the (frustrated) existence of these (excited) feelings, but they are not conscious of the source of their anger. The structure here under consideration is a repressive one, more a horizontal 'lid' than a vertical split.

3   At stage three, a further vertical split occurs, this time within

the Libidinal Ego, that is within the structures which involve libidinal feelings. This split ensures that, while some libidinal needs eventually find expression, however painfully they may be hampered by their connection with anti-libidinal anger and rejection, others are withdrawn from communication with any sources of pain. These latter are then out of touch with the realities mediated by the Central Ego, and out of touch with the moralities of the Anti-Libidinal Ego, and out of touch with other (libidinal) feelings, needs, hopes, wishes. They exist, but they are unknown to the person. The result is a (vertically) split-off personality of which the person is not usually conscious. This is Guntrip's 'passive regressed ego which seeks to return to the ante-natal state of absolute passive dependent security. Here, in quietude, repose, and immobility, it may find the opportunity to recuperate and grow to a rebirth, as Winnicott (1954) holds' (1969: 74).

The phenomenon Guntrip calls the regressed ego is a very important one. The next chapter considers it in detail, and depends heavily on Guntrip's insights. But before we get to it, we must take the opportunity to clear away some misconceptions about regression, about the meaning of Guntrip's three-phase sequence, and about Guntrip's and Fairbairn's belief that we start life with a unified self which sometimes splits later.

First then, we must clear up an ambiguity in the term 'regression'. Rycroft (1968) defines regression as 'a reversion to an earlier state of mode of functioning'. But what kind of a reversion? To an earlier state of feeling? Or to an earlier mode of personality organization? The answer is that there are two kinds of regression at least. One involves reversion to earlier feelings, and more generally *regression to an earlier way of experiencing self and others*. The other involves a *relaxation of integrating processes* and hence a reversion to an earlier and less integrated organization of structures, with more splits, more isolated regions, more 'islands'. Even in normal states of mind, as the following chapters show, some people have to make efforts to hold themselves together. When they relax in a therapeutic situation, they relax those efforts. This is the aspect of what is usually called regression which I shall call relaxation. Sometimes when

Guntrip believes people to be retreating to some earlier state of being, I believe them to be relaxing the connections which hold them together.

Secondly, we must note that Guntrip is here describing a sequence which, he implies, is a sequence of events in a child's life. We must not be misled by this; it is in fact a sequence of stages which some people go through in some kinds of psychotherapy. People do regress in an appropriately holding therapeutic environment. As they feel more and more secure with their therapist, they give up their self-protective devices more and more. This allows them to revive and express (and even act upon) more and more strongly protected thoughts, feelings, wishes, memories, phantasies. Many of these do indeed have their roots in childhood and infancy, and were part of our young minds, but they indicate more about how we felt then and feel now, than about the stages by which we got those feelings.

Thirdly, our troubles are aggravated by Fairbairn's and Guntrip's assumption that we start with a unified self which is destroyed by subsequent misfortunes, as for instance in the quotation below.

'Here, in this complex pattern of ego-splitting or loss of primary psychic unity, with all the weakness and internal conflict it involves, is the root cause of personality disorders in later life: and the most vulnerable part of the self is the most hidden part, cut off from all human relationships in the depths of the unconscious.'

(Guntrip 1971: 172)

This is beautifully put, and I believe it to contain an accurate description of how it is with some people. But it also contains the misleading assumption that the self has a primary unity and then splits. I think that Guntrip was misled by what he learnt in the consulting room. In a relationship of trust, as self-protective devices are abandoned, some people relax and show themselves to be less integrated than they at first appeared to be. In my view, they are then as they have always been, at heart. Many many people have a hidden, tender, vulnerable side, and it would be good if this were more in touch with the rest of the personality. But this hidden 'regressed' withdrawn ego is not necessarily the result of splits in a region or a structure which

was once whole. Although it is true that sometimes a more developed part of the self withdraws from involvement in everyday sensory life, it seems to me equally true that many people have parts which have never developed or which have never been allowed to come to the fore. These parts are hidden, but they have always been hidden – they have not retreated from a more visible position. I shall therefore not use Guntrip's terminology, but refer instead to the vulnerable tender part of the personality, having in mind something that is very sensitive, like a flower that shrinks at the slightest touch. Often this part has been split off or repressed, because it has been hurt. Shrinking, wincing, wounded, skinless, are the adjectives which best describe those regions then.

Guntrip, through his practice as a therapist, was familiar with these tender, vulnerable states of mind, none more so, but he was misled by what his adult patients said and did. He was not a paediatrician, like Winnicott, and this led him to over-reliance on the evidence he got from his adult patients. However, what he had to say on the structure of the personality, particularly as regards the vulnerable feelings, is absolutely valid if we disregard his developmental assumptions, and can be used to understand uniquely important aspects of the schizoid state of mind. This I hope to do in the next chapter.

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Being schizoid

Recap on structures

To recapitulate. Basic units of experience are organized, in the course of development, into more complex structures. At first, they are like islands: isolated mental and physical functions preceding the stage of the cohesive self. These complex structures are dynamic from the start, involving motivation and action as well as imagery: they are structures of functions. At first, they are isolated from one another because there has not as yet been enough experience to create the links and interconnections which create more extensive structures.

In Hayek's terms, at the beginning of life we have only crude, very general, and very unstructured 'maps'. Then comes the process of constructing more detailed maps from incoming experiences. With more and more experiences, our maps get clearer and more defined, though each succeeding message has relatively less impact on our increasingly strong structures. On these maps are various subregions or partial maps, each of which holds an emotionally meaningful and internally coherent dynamic image of some aspect of the self in connection with some other person or thing.

Maps are relatively enduring structures. They are dynamic perceptual and cognitive processes by means of which we encounter life. They are the means by which we locate where we are: our experiences are shaped by them. As a rule, we are not