Object relations theory
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Object relations theory is a psychodynamic theory within psychoanalytic psychology. The theory describes the process of developing a psyche as one grows in relation to others in the environment.

The theory suggests that people relate to others and situations in their adult lives as shaped by family experiences during infancy. For example, an adult who experienced neglect or abuse in infancy would expect similar behavior from others who remind them of the neglectful or abusive person from their past (often a parent). The infant's images of people and events turn into Objects in the subconscious that he or she carries into adulthood. People use these Objects to understand their current relationships and predict people's behavior.

The Self (or subject) relates to Objects in the unconscious to make sense of the people and events around a person. "Objects" are usually internalized images of one's mother or father. Objects can also be parts of a person, for instance an infant relating to the breast. Objects may be both real or things in one's inner world (one's internalized image of others). Object relationships are initially formed during early interactions with primary care givers. Later experiences can reshape these early patterns, but Objects often continue to exert a strong influence throughout life.\[citation needed\]

Otto Rank, Coiner of the term "pre-Oedipal," was the first to create a modern theory of "object relations" in the late 1920s. It was later independently formulated by Ronald Fairbairn in 1952,\[2\] but the line of thought being referred to first emerged in 1917, beginning with Ferenczi and, later, Rank.\[3\] Although first formulated in the 1920s by Otto Rank, object relations theory was extended in the 1940s and 50s by British psychologists Ronald Fairbairn, Melanie Klein, Donald Winnicott, Harry Guntrip, Scott Stuart, and others.

Objects are initially comprehended in the infant mind by their functions and are termed "part objects."\[citation needed\] The breast that feeds the hungry infant is the "good breast." The hungry infant that finds no breast is in relation to the "bad breast."\[citation needed\]

Internal objects are formed by the patterns emerging in one's repeated subjective experience of the care taking environment. These internalized images may or may not be accurate representations of the actual, external others. With a "good enough" "facilitating environment" part object functions eventually transform into a comprehension of whole objects. This corresponds with the ability to tolerate ambiguity, to see that both the "good" and the "bad" breast are a part of the same "mummy."

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While Fairbairn popularized the term "object relations," Melanie Klein's work tends to be most commonly identified with the terms "object relations theory" and "British object relations," at least in contemporary North America, though the influence of 'what is known as the British independent perspective, which argued that the primary motivation of the child is object seeking rather than drive gratification[^4], is becoming increasingly recognized. Klein felt that the psychodynamic battleground that Freud proposed occurs very early in life, during infancy. Furthermore its origins are different from those that Freud proposed. The interactions between infant and mother are so deep and intense that they form the focus of the infant's structure of drives. Some of these interactions provoke anger and frustration; others provoke strong emotions of dependence as the child begins to recognize the mother is more than a breast from which to feed. These reactions threaten to overwhelm the individuality of the infant. The way in which the infant resolves the conflict, Klein believed, is reflected in the adult's personality. [^5]

Freud originally identified people in a subject's environment with the term "object" to identify people as the object of drives. Fairbairn took a radical departure from Freud by positing that humans were not seeking satisfaction of the drive, but actually seek the satisfaction that comes in relation to real others. Klein and Fairbairn were working along similar lines, but unlike Fairbairn, Klein always held that she was not departing from Freudian theory, but simply elaborating early developmental phenomena consistent with Freudian theory.

Within the London psychoanalytic community, a conflict of loyalties took place between Klein and object relations theory (sometimes referred to as "id psychology")[^6], and Anna Freud and ego psychology. In America, Anna Freud dominated American psychoanalysis in 1940s, 1950s, and 1960s. American ego psychology was furthered in the works of Hartmann, Kris, Loewenstein, Rapaport, Erikson, Jacobson, and Mahler. In London, those who refused to choose sides were termed the "middle school," whose members included Michael Balint and Winnicott. The strong animosity in England between the school of Anna Freud and that of Melanie Klein was transplanted to the US, where the Anna Freud group dominated totally until the 1970s. Until the 1970s, few American psychoanalysts were influenced by the thinking of Melanie Klein.

Fairbairn revised much of Freud's model of the mind. He identified how people who were abused as children internalize that experience. Fairbairn's "moral defense" is the tendency seen in survivors of abuse to take all the bad upon themselves, each believing he is morally bad so his caretaker can be regarded as good. This is a use of splitting as a defense to maintain an attachment relationship in an unsafe world.

**Kleinian object relations theory**

**Unconscious phantasy**

Klein termed the psychological aspect of instinct unconscious *phantasy* (deliberately spelled with 'ph' to distinguish it from the word 'fantasy'). Phantasy is a given of psychic life which moves outward towards the

world. These image-potentials are given a priority with the drives and eventually allow the development of more complex states of mental life. Unconscious phantasy in the infant’s emerging mental life is modified by the environment as the infant has contact with reality. [7]

From the moment the infant starts interacting with the outer world, he is engaged in testing his phantasies in a reality setting. I want to suggest that the origin of thought lies in this process of testing phantasy against reality; that is, that thought is not only contrasted with phantasy, but based on it and derived from it. [7]:45

The role of unconscious phantasy is essential in the development of a capacity for thinking. In Bion’s terms, the phantasy image is a preconception that will not be a thought until experience combines with a realization in the world of experience. The preconception and realization combine to take form as a concept that can be thought. [8][9][10] The classic example of this is the infant’s observed rooting for the nipple in the first hours of life. The instinctual rooting is the preconception. The provision of the nipple provides the realization in the world of experience, and through time, with repeated experience, the preconception and realization combined to create the concept. Mental capacity builds upon previous experience as the environment and infant interact.

The first bodily experiences begin to build up the first memories, and external realities are progressively woven into the texture of phantasy. Before long, the child's phantasies are able to draw upon plastic images as well as sensations—visual, auditory, kinesthetic, touch, taste, smell images, etc. And these plastic images and dramatic representations of phantasy are progressively elaborated along with articulated perceptions of the external world.[11]

With adequate care, the infant is able to tolerate increasing awareness of experience which is underlain by unconscious phantasy and leads to attainment of consecutive developmental achievements, "the positions" in Kleinian theory.

**Projective identification**

As a specific term, projective identification is introduced by Klein in “Notes on some schizoid mechanisms.”[12]

[Projection] helps the ego to overcome anxiety by ridding it of danger and badness. Introjection of the good object is also used by the ego as a defense against anxiety. . . .The processes of splitting off parts of the self and projecting them into objects are thus of vital importance for normal development as well as for abnormal object-relation. The effect of introjection on object relations is equally important. The introjection of the good object, first of all the mother’s breast, is a precondition for normal development . . . It comes to form a focal point in the ego and makes for cohesiveness of the ego. . . . I suggest for these processes the term ‘projective identification’. [12]:6-9

Klein imagined this function as a defense which contributes to the normal development of the infant, including ego structure and the development of object relations. The introjection of the good breast provides a location where one can hide from persecution, an early step in developing a capacity to self-soothe.

Ogden[13] identifies four functions that projective identification may serve. As in the traditional Kleinian model, it serves as a defense. Projective identification serves as a mode of communication. It is a form of object relations, and “a pathway for psychological change.”[13]:21 As a form of object relationship, projective identification is a way of relating with others who are not seen as entirely separate from the individual. Instead, this relating takes place “between the stage of the subjective object and that of true object relatedness”. [13]:23
The positions

The positions of Kleinian theory, underlain by unconscious phantasy, are stages in the normal development of ego and object relationships, each with its own characteristic defenses and organizational structure. The paranoid-schizoid and depressive positions occur in the pre-oedipal, oral phase of development.

In contrast to Fairbairn and later Guntrip,[14] Klein believed that both good and bad objects are introjected by the infant, the internalization of good object being essential to the development of healthy ego function.[12]:4 Klein conceptualized the depressive position as “the most mature form of psychological organization”, which continues to develop throughout the life span.[15]:11

The depressive position occurs during the second quarter of the first year.[12]:14 Prior to that the infant is in the paranoid-schizoid position, which is characterized by persecutory anxieties and the mechanisms of splitting, projection, introjection, and omnipotence—which includes idealizing and denial—to defend against these anxieties.[12]:7 Depressive and paranoid-schizoid modes of experience continue to intermingle throughout the first few years of childhood.

Paranoid-schizoid position

Main article: paranoid-schizoid position

The paranoid-schizoid position is characterized by part object relationships. Part objects are a function of splitting, which takes place in phantasy. At this developmental stage, experience can only be perceived as all good or all bad. As part objects, it is the function that is identified by the experiencing self, rather than whole and autonomous others. The hungry infant desires the good breast who feeds it. Should that breast appear, it is the good breast. If the breast does not appear, the hungry and now frustrated infant in its distress, has destructive phantasies dominated by oral aggression towards the bad, hallucinated breast.[12]:5

Klein notes that in splitting the object, the ego is also split.[12]:6 The infant who phantasies destruction of the bad breast is not the same infant that takes in the good breast, at least not until obtaining the depressive position, at which point good and bad can be tolerated simultaneously in the same person and the capacity for remorse and reparation ensue.

The anxieties of the paranoid schizoid position are of a persecutory nature, fear of the ego’s annihilation.[12]:33 Splitting allows good to stay separate from bad. Projection is an attempt to eject the bad in order to control through omnipotent mastery. Splitting is never fully effective, according to Klein, as the ego tends towards integration.[12]:34

Depressive position

Klein saw the depressive position as an important developmental milestone that continues to mature throughout the life span. The splitting and part object relations that characterize the earlier phase are succeeded by the capacity to perceive that the other who frustrates is also the one who gratifies. Schizoid defenses are still in evidence, but feelings of guilt, grief, and the desire for reparation gain dominance in the developing mind.

In the depressive position, the infant is able to experience others as whole, which radically alters object relationships from the earlier phase.[12]:3 “Before the depressive position, a good object is not in any way the same thing as a bad object. It is only in the depressive position that polar qualities can be seen as different
Of the same object." Increasing nearness of good and bad brings a corresponding integration of ego.

In a development which Grotstein terms the "primal split", the infant becomes aware of separateness from the mother. This awareness allows guilt to arise in response to the infant’s previous aggressive phantasies when bad was split from good. The mother’s temporary absences allow for continuous restoration of her “as an image of representation” in the infant mind. Symbolic thought may now arise, and can only emerge once access to the depressive position has been obtained. With the awareness of the primal split, a space is created in which the symbol, the symbolized, and the experiencing subject coexist. History, subjectivity, interiority, and empathy all become possible.

The anxieties characteristic of the depressive position shift from a fear of being destroyed to a fear of destroying others. In fact or phantasy, one now realizes the capacity to harm or drive away a person who one ambivalently loves. The defenses characteristic of the depressive position include the manic defenses, repression and reparation. The manic defenses are the same defenses evidenced in the paranoid-schizoid position, but now mobilized to protect the mind from depressive anxiety. As the depressive position brings about an increasing integration in the ego, earlier defenses change in character, becoming less intense and allow increasing awareness of psychic reality.

In working through depressive anxiety, projections are withdrawn, allowing the other more autonomy, reality, and a separate existence. The infant, whose destructive phantasies were directed towards the bad mother who frustrated, now begins to realize that bad and good, frustrating and satiating, it is always the same mother. Unconscious guilt for destructive phantasies arises in response to the continuing love and attention provided by caretakers.

[As] fears of losing the loved one become active, a very important step is made in the development. These feelings of guilt and distress now enter as a new element into the emotion of love. They become an inherent part of love, and influence it profoundly both in quality and quantity.

From this developmental milestone come a capacity for sympathy, responsibility to and concern for others, and an ability to identify with the subjective experience of people one cares about. With the withdrawal of the destructive projections, repression of the aggressive impulses takes place. The child allows caretakers a more separate existence, which facilitates increasing differentiation of inner and outer reality. Omnipotence is lessened, which corresponds to a decrease in guilt and the fear of loss.

When all goes well, the developing child is able to comprehend that external others are autonomous people with their own needs and subjectivity.

Previously, extended absences of the object (the good breast, the mother) was experienced as persecutory, and, according to the theory of unconscious phantasy, the persecuted infant phantisizes destruction of the bad object. The good object who then arrives is not the object which did not arrive. Likewise, the infant who destroyed the bad object is not the infant who loves the good object.

In phantasy, the good internal mother can be psychically destroyed by the aggressive impulses. It is crucial that the real parental figures are around to demonstrate the continuity of their love. In this way, the child perceives that what happens to good objects in phantasy does not happen to them in reality. Psychic reality is allowed to evolve as a place separate from the literalness of the physical world.

Through repeated experience with good enough parenting, the internal image that the child has of external
others, that is the child's internal object, is modified by experience and the image transforms, merging experiences of good and bad which becomes more similar to the real object (e.g. the mother, who can be both good and bad). In Freudian terms, the pleasure principle is modified by the reality principle.

Melanie Klein saw this surfacing from the depressive position as a prerequisite for social life. Moreover, she viewed the establishment of an inside and an outside world as the start of interpersonal relationships.

Klein argued that people who never succeed in working through the depressive position in their childhood will, as a result, continue to struggle with this problem in adult life. For example: the cause that a person may maintain suffering from intense guilt feelings over the death of a loved one, may be found in the unworked-through depressive position. The guilt is there because of a lack of differentiation between phantasy and reality. It also functions as a defense mechanism to defend the self against unbearable feelings of sadness and sorrow, and the internal object of the loved one against the unbearable rage of the self, which, it is feared, could destroy the internal object forever.

Further thinking regarding the positions

Wilfred Bion articulates the dynamic nature of the positions, a point emphasised by Thomas Ogden, and expanded by John Steiner in terms of "The equilibrium between the paranoid-schizoid and the depressive positions". Ogden and James Grotstein have continued to explore early infantile states of mind, and incorporating the work of Donald Meltzer, Ester Bick and others, postulate a position preceding the paranoid-schizoid. Grotstein, following Bion, also hypothesizes a transcendent position which emerges following attainment of the depressive position. This aspect of both Ogden and Grotstein's work remains controversial for many within classical object relations theory.

Death drive

Sigmund Freud developed the concept object relation to describe or emphasize that bodily drives satisfy their need through a medium, an object, on a specific locus. The central thesis in Melanie Klein's object relations theory was that objects play a decisive role in the development of a subject and can be either part-objects or whole-objects, i.e. a single organ (a mother's breast) or a whole person (a mother). Consequently both a mother or just the mother's breast can be the locus of satisfaction for a drive. Furthermore, according to traditional psychoanalysis, there are at least two types of drives, the libido (mythical counterpart: Eros), and the death drive (mythical counterpart: Thanatos). Thus, the objects can be receivers of both love and hate, the affective effects of the libido and the death drive.

Influences on art

_Destruction of the Father_ by Louise Bourgeois speaks of her experience with a male dominated household, in which she was not allowed to speak her mind freely. The work, abstracted and unobvious, is about her physically wanting to eat her father because of the frustration he caused her as a child. This relates to the part of the theory in which the infant will exhibit biting and chewing tendencies as an act of frustration.

Kelly Jacobson's _Origin of Mouthstones_ exhibited bits of teeth and fossilized bite marks embedded in sand and stone. That paired with her silent video of inaudible speech point to lack of communication resulting in frustration.

Continuing developments in the theory
Attachment theory, researched by John Bowlby and others, has continued to deepen our understanding of early object relationships. While a different strain of psychoanalytic theory and research, the findings in attachment studies have continued to support the validity of the developmental progressions described in object relations. Recent decades in developmental psychological research, for example on the onset of a "theory of mind" in children, has suggested that the formation of the mental world is enabled by the infant-parent interpersonal interaction which was the main thesis of British object-relations tradition (e.g. Fairbairn, 1952).

While **object relations theory** grew out of psychoanalysis, it has been applied to the general fields of psychiatry and psychotherapy by such authors as N. Gregory Hamilton [21][22] and Glen O. Gabbard. In making **object relations theory** more useful as a general psychology N. Gregory Hamilton added the specific ego functions to Otto F. Kernberg's concept of object relations units.[23]

### See also

- Attachment theory
- Jointness (psychodynamics)
- Family therapy
- Psychoanalysis
- Relational psychoanalysis
- Reparation
- Transference focused psychotherapy
- Unthought known

### Individuals:

- Otto Rank
- Melanie Klein
- Joseph J. Sandler
- Ronald Fairbairn
- D. W. Winnicott
- Wilfred Bion
- Ignacio Matte Blanco
- John Bowlby

### Notes

5. ^ Gomez, 1997 p. 12
References and further reading


External links

- Object Relations Theory, Psychology Department, Sonoma State University (http://www.sonoma.edu/users/d/daniels/objectrelations.html)
- Object Relations Theory and Therapy (http://www.objectrelations.org)


Categories: Freudian psychology | Psychoanalysis | Neopsychoanalytic schools | Psychological theories | History of mental health in the United Kingdom

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