

*BORDERLINE PSYCHOPATHOLOGY AND ITS TREATMENT*

# DEVELOPMENTAL ISSUES

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## Developmental Issues

Developmental findings played a large part in the formulation of the thesis that I have put forward as an explanation for borderline psychopathology. Indeed, the borderline patient's relative or total inability to maintain positive introjects of sustaining figures in his present or past life can always be traced, in my experience, to real loss, relative neglect, or overindulgence alternating with neglect in the patient's history. Accordingly, this chapter is devoted to a discussion of developmental issues and their relevance to the fundamental psychopathology of the borderline disorder.

### Development of the Structural Components of the Inner World

Normal development results in the individual's achieving significant autonomy in maintaining a sense of basic security. In this, two qualities of developmental experience are especially involved. One is narcissistic, having to do with feelings of personal value. The other, more fundamental quality of experience is described by the terms "holding" and "soothing." In infancy the subjective sense of being soothingly held requires the caretaking of a "good-enough mother" (Winnicott 1953, 1960). To some extent, real interpersonal relationships always remain a resource for psychological holding, but with development certain intrapsychic structures play an increasingly prominent role. The advent of object representations provides a means by which resources of holding-soothing can be recognized and, eventually, sought out in the environment. Transitional objects are "created" (Winnicott 1953) in part from intrapsychic components. Later on, the holding function of external objects (and transitional objects [Tolpin 1971]) is internalized in the form of introjects. Finally, identifications with these functions of external objects and introjects yield structural components of the ego that serve the same purpose. In these ways infant, child, adolescent, and adult become increasingly able to provide a subjective sense of security to themselves from their own intrapsychic resources, depending less and less on the environment for it.

### OBJECT REPRESENTATIONS

"Object representations" constitute the substrate for introject formation and the foundation for

structural development of the ego. They are conceived here as constructions with purely cognitive and memory components, not in themselves containing affective, libidinal, or aggressive qualities and performing no active functions (Sandler and Rosenblatt 1962, Meissner 1971). Such representations correspond to Sandler's (1960) concept of "schemata": intrapsychic "models" of objects and self (p. 147). He ascribes formation of schemata to the "organizing activity" of the ego (pp. 146-147).

## **HOLDING INTROJECTS**

I follow Meissner (1971, 1978) in viewing "introjection" as a means of internalizing object relationships, especially as they play a part in gratifying instincts and fulfilling survival needs. Introjects are the internal structures thus created for the purpose of carrying on these functional qualities of external objects in relationship to the self. For the purposes of this study, a simplified view of introjects, likening them to internal presences of external objects, is adopted. Introjects, as such, are experienced as separate from the subjectively sensed self (Schafer 1968), functioning quasi-autonomously in relation to the self, and exercising influence on the self, with the self in a dynamic relationship with them.

Concepts of introjection and introjects are in fact quite complex, especially as they involve projective processes that endow introjects with qualities derived from the self as well as from external objects, and as they relate to internal modifications of the self. Since the focus here is on a particular kind of introject—one that promotes in the self a feeling of being soothingly held—and because, in dealing with the borderline personality, we are concerned with levels of development at a time in infancy when the inherent capacity for self-soothing is very slight and can provide little resource for a projective contribution, we can adopt the more simplified view of introjects as straightforwardly internalized structures that act as resources to the self for holding—"holding introjects." Later on in normal development, and in definitive treatment of the borderline personality, introjective processes, and identificatory processes as well, promote modifications of the self such that it takes on attributes of its holding resources. In this way internal resources are developed for holding, which are more or less integrated with the subjective ego core. These can then serve as contributions via projection to the further formation of holding introjects.

## INCORPORATION AND FUSION

“Incorporation” and “fusion” are modes of internalization developmentally prior to introjection that can have an important influence on structuralization. Incorporation designates the mode by which one person, while in the presence of another, experiences the other person as if “inside” himself, yielding a sense of that person’s qualities, for example, warmth or inspired thinking, as if they were merging into his own self. Meissner (1971) writes of incorporation as “the most primitive, least differentiated form of internalization in which the object loses its distinction as object and becomes totally taken into the inner subject world” (p. 287). Operationally, this would be accomplished through volitional suspension of attention to the delimiting contours of the other person’s psychological, and perhaps even physical, self. While incorporation can be described as primitive in terms of modes of internalization, in the mature adult it constitutes, along with fusion, a means by which the experience of intimacy—and thereby holding-soothing security—is attained.

Incorporation allows the infant, toddler, or adult to experience an inner suffusion of soothing warmth from the presence of an external holding object. (Of course, prior to differentiation of self from object, this incorporative experience is not under elective control.) When memory capacities develop, these incorporative experiences can be remembered and can have, as Meissner (1971) noted, a structuralizing influence, structuralization conceived here as proceeding from memory schemata organized into merged self and object representations that can then, through introjection of the external object’s functional contribution to the incorporative experience, achieve introject status. Further structuralization can occur through identification, by means of which the ego develops a pattern of functioning like that of the introject.

Fusion is the counterpart of incorporation in that the self is felt as merging into the emotional, and perhaps physical, being of the other person. For persons who have achieved differentiation of self from objects, fusion would seem to involve volitional decaethesis of ego, and even physical body, boundaries. Like incorporation, it is a means of gaining a sense of intermixing with qualities of someone else. As phenomena of object relating, both incorporation and fusion are important in experiences of intimacy and can occur together.

These comments on incorporation and fusion are particularly relevant in discussion of the borderline personality because of the importance of both in sustaining the self, in influencing the formation of introjects, and, as will soon be discussed, in posing a seeming threat to survival.

## **THE INNER WORLD**

The concept of the inner world, as elaborated by Hartmann (1939) and Rapaport (1967), is useful in thinking about psychopathology and therapeutic work with borderline personalities. The concept holds much in common with that of the representational world, as described by Sandler and Rosenblatt (1962).

Although ideas about the inner world are very complex, it is viewed more simply here as a kind of psychological internal environment that contains, among other things, self and object representations and introjects. The inner world is not included in the subjective sense of self.

## **DEVELOPMENT OF MEMORY, TRANSITIONAL OBJECTS, AND THE INNER WORLD**

In my view, memory configurations are basic to the means by which the infant and toddler gain some autonomous capacity for providing themselves with a sense of being soothingly held. Piaget (1937) described six stages in the infant's development of an "object concept," two of which bear particularly on this discussion. Stage IV begins at age 8 months. At this point the infant first gains the capacity to recognize an object as familiar even though he cannot yet evoke the memory of the object without the aid of visual cues.<sup>1</sup> Fraiberg (1969) terms this capacity "recognition memory." Its development makes possible the beginnings of an inner world of object representations, one that allows the infant to recognize his mother as familiar and on that basis experience a sense of inner soothing. At the same time not-mother is now recognized as not familiar, resulting in "stranger anxiety" (Fraiberg 1969).

The development of recognition memory coincides chronologically with the beginning use of transitional objects (Winnicott 1953). It is, indeed, a prerequisite for such use—the creation of transitional objects depends upon recognition memory capacity. Because the holding function of the mother is especially effected through the medium of touch, it is hypothesized here that the infant is enabled to maintain ongoing awareness of the recognition memory schema of his soothing-touching



mother through actually holding and feeling the touch of a familiar object (the “cue”) that reminds the infant of mother’s touch. Simultaneously the transitional object serves as an actual resource, by way of the infant’s manipulations, of sensory stimulations that, when combined with the sustained memory of the mother, are adequate to induce actual soothing.

Stage VI of object concept development begins at about 18 months of age. At this time the infant gains the capacity to remember an object without being reminded of its existence by external cues. Fraiberg (1969) terms this achievement “evocative memory.” According to Sandler and Rosenblatt (1962), the development of the representational world depends on this degree of memory capacity; it might be said that at this time the formation of *continuously available* object representations commences. When the object representation is converted to introject status through internalization (introjection) of the influential functions (attitudes, affects, and impulses) of the person after whom the object representation is patterned, the former purely cognitive memory schema takes on a functional capacity: As an introject, it can perform for the self certain functions, such as holding, that previously were performed by external objects; at the same time, it takes on the affective qualities of the object associated with those functions. The development of evocative memory capacity is thus a prerequisite for introject formation and subsequent structuralization of the ego.

The holding introject derived from the relationship with the soothing mother enables the toddler to manage for a while out of the sight of and at some distance from his mother without suffering separation anxiety (Mahler, Pine, and Bergman 1975). Over time, holding introjects are progressively stabilized; to some extent they remain important resources throughout life against depression or anxiety that could result from separations.

The acquisition of enduring holding introjects also puts the toddler or child in a position to give up the tangible transitional object. According to Winnicott (1953), the transitional object then becomes to some extent diffused into certain areas of experience with the external world, especially the area of culture. Experience with the transitional object can also be internalized in the form of an introject or an identification—according to Tolpin (1971), by means of “transmuting internalization.”

## Fundamental Psychopathology of the Borderline Personality

The fundamental psychopathology of the borderline personality is in the nature of developmental failure: *Adult borderline patients have not achieved solid evocative memory in the area of object relations and are prone to regress in this area to recognition memory or earlier stages when faced with certain stresses.* The result is relative failure to develop internal resources for holding-soothing security adequate to meet the needs of adult life. To repeat, the formation of holding introjects—of both past and present figures—is quantitatively inadequate, and those that have formed are unstable, being subject to regressive loss of function. As might be expected, object representations of sources of holding are also vulnerable to regressive loss. The developmental failure appears to result from mothering that is not good-enough during the phases of separation-individuation (Mahler, Pine, and Bergman 1975). Although the toddler is ready for the neuropsychological development of memory needed to form representations and introjects, the environment does not facilitate it.

### GOOD-ENOUGH MOTHERING AND DEVELOPMENT OF MEMORY

In this regard, Bell's (1970) important study suggests that those children who seem to have had the most positive maternal experience developed the concept of person permanence—for example, “mother permanence”—before the concept of object permanence—for example, “toy permanence”—and achieved earlier mastery of the stages of permanence for both persons and objects than did children whose mothers were rejecting. These latter children, in contrast, tended to develop object permanence before person permanence, and were delayed when compared to the former group in achieving the highest stage of permanence for both objects and persons. Let us consider the reasons why this should be so.

Achievement of the capacity for evocative memory is a major milestone for the 18-month-old child and a most significant step in his developing capacity for autonomy. No longer does he depend so fully upon the actual presence of mother for comfort and support. Instead, he has acquired some capacity to soothe and comfort himself with memories and eventually introjects of his mother and of his interactions with her. But this is a *developing* capacity: It is fragile in the 18-month-old child and readily lost at least transiently if he is stressed by too long a period of separation.

Robertson and Robertson describe, in their film (1969) and commentary (1971), a 17-month-old boy, John, who was left in a residential nursery for nine days while his mother was having a baby. John had had a good, healthy relationship with his mother. Although the staff of the nursery to which John was entrusted cared about children, no one staff member took responsibility for any one particular child. Moreover, the staff came and went, with changing shifts and days off. When John, with his background of good individual mothering, attempted repeatedly to reach out to various staff members for the consistent individual care he needed, he was unable to obtain it, in large part because the other children there—chronically institutionalized—had become expert in aggressively seeking out whatever attention there was to be had. Over the nine days of his stay, John changed from a friendly child to one who cried and struggled to return home when his father visited. Later he grew sad and forlorn, then angry; finally he withdrew into apathy, ate little, and could not be reached by anyone who tried to comfort him. He took solace, often desperately, and with inadequate results, in a large teddy bear.

I would argue that, at 17 months, John was well on his way to achievement of evocative memory capacity. With the loss of his mother, however, he suffered a regression from this nearly achieved capacity to an earlier level of development: recognition memory and nearly exclusive reliance on a transitional object—the teddy bear, with which he tried to evoke the experience of being soothed. I shall return to the case of John in Chapter 3, giving further evidence in support of my view. For now it is enough to examine the relationship it suggests between consistent mothering and the development of memory.

For the infant with only recognition memory capacity, the presence of the transitional object is necessary in order to activate and maintain an affectively charged memory of the soothing mother; he is unable to evoke an image of his mother without the aid of visual or tactile cues. At the same time, of course, the use of transitional objects represents a significant step forward in the development of autonomy: The infant can soothe himself in the mother's absence for longer and longer periods by using the transitional object to evoke memories of her holding-soothing qualities. Use of the transitional object thus represents a "prestige," as it were, of the capacity to *abstract* the mother's qualities from her actual person. But it is *only* a prestige, in the sense that these qualities must still be embodied in an object temporally connected with the mother's recent presence. When this temporal connection becomes sufficiently attenuated—when the mother is not available often enough—the relationship between her

qualities and the qualities of the transitional object is itself attenuated, and the child can no longer make effective use of it to soothe himself. Conversely, when this relationship is reinforced by the mother's consistent availability, the embodiment of her qualities in the transitional object is solidified. Although her qualities do not yet have abstract existence in the mind of the infant, they are more and more abstracted *from* her.

Even before the development of neuropsychological capacity for evocative memory, then, the infant is "primed" by his experience with the transitional object for the eventually full abstraction of his mother from her person that is the hallmark of evocative memory. Neuropsychological maturation and the use of transitional objects thus go hand in hand in the development of solid evocative memory. When both have developed to a sufficient degree, the child can begin to evoke the memory of mother without the aid of external cues. But the capacity for evocative memory is itself only imperfectly achieved at this stage. The good-enough mother must still be available often enough to provide actual holding and soothing security to whatever extent evocative memory remains insufficient for that purpose. In the mother's too-prolonged absence, the child is liable to seek consolation in the transitional object. But since the effective use of the transitional object depends, as we have seen, on the mother's consistent availability, *and* since its effective use is a prerequisite for the development of evocative memory, the mother's too-prolonged absence leads to a breakdown in whatever capacity for evocative memory has already been achieved. The *foundation* of evocative memory in the use of transitional objects is compromised, as evidenced by the child's inability to achieve holding-soothing security from the object itself. John's case is an example: His use of the teddy bear did not, finally, console him.

There is no better evidence for the initial instability of evocative memory, and the contribution of good-enough mothering to its eventual stabilization, than that afforded by Mahler's description of the rapprochement subphase (Mahler, Pine, and Bergman 1975). At about 15 months of age, she points out, or three months before the achievement of solid evocative memory, the child becomes particularly sensitive to the absence of mother. Whereas previously he could explore the environment with confidence and vigor, returning to mother only for food, comfort, or emotional "refueling," he now becomes increasingly concerned about her exact whereabouts. His subsequent behavior alternates between stout independence and clinging. Apparently, the development of upright locomotion, which allows the child to travel some distance from the mother, when combined with the beginning

development of evocative memory, brings clearly to the toddler's attention the fact of his psychological separateness from her. But since the capacity for evocative memory is not yet sufficiently established to provide holding-soothing security in the mother's absence, she must still be available for that purpose. Her presence, in turn, facilitates the further development of memory capacity. In the absence of good-enough mothering, in contrast—whether because of unavoidable traumatic separation, inconsistency of supportive presence, aversive anger, or purposeful abandonment—solid evocative memory capacity does not develop. To whatever extent it *has* been achieved, it constitutes an inadequate basis for the formation of object representations, holding introjects, and subsequent structuralization, and remains vulnerable, throughout life, to regression in the face of stress.

## **ANNIHILATION ANXIETY**

In my clinical work, I have generally been able to document one or a series of traumatic events in the second or third year of life that has led to the borderline patient's failure to develop solid evocative memory. In my view, the borderline patient's pervasive fear of abandonment by significant figures in his adult life can usually be traced, in a dynamic as well as a genetic sense, to this failure (although failures at other stages of separation-individuation can compound his vulnerability). To put the matter as briefly as possible, since holding introjects of present and past figures are functionally inadequate by virtue of the instability of the memory basis for their formation, the borderline patient lacks the capacity to allay separation anxiety through intrapsychic resources. In other words, in the absence of such resources, separation threatens the loss of holding-soothing security. In order to appreciate more fully what separation means for the borderline patient—what is at stake for him—let us first consider his experience at the very earliest stage of infant development.

At about 4 weeks of age, Mahler (1968) states, most infants break out of the condition of "normal autism" into which they are born. For the next three to four months the newborn's survival and continued well-being depend on a condition of "symbiosis" with the mother. By such a condition Mahler refers to "that state of undifferentiation, of fusion with mother, in which the 'I' is not yet differentiated from the 'not I,' and in which inside and outside are only gradually coming to be sensed as different" (1968, p. 9). The mother, in this connection, functions as the infant's "auxiliary ego" (Spitz 1965). Her ministrations augment the infant's rudimentary faculties through what Mahler terms "the emotional

rapport of the mother's nursing care, a kind of social symbiosis" (1968, p. 9). From a functional standpoint, the symbiotic bond replaces the infant's inborn stimulus barrier; it becomes the functional means of protecting the infant from stress and trauma. Infant and mother, in the mind of the infant, constitute "an omnipotent symbiotic dual unity" (Mahler, Furur, and Settlege 1959, p. 822), and the infant tends to project all unpleasurable perceptions—both internal and external—outside the protective symbiotic "membrane."

In this very earliest stage of development, then, the infant's sense of well-being cannot properly be spoken of as "subjective." It is only gradually—within the secure confines of the symbiotic relationship, and in the course of need gratification by the mother—that the infant comes to recognize an external reality—a "not I"—that extends beyond his self-boundaries and that is at first represented by the mother. Even then, he is unable fully to experience himself as differentiated from the mother; the mother necessarily remains a "part object" throughout the symbiotic phase (Mahler, Pine, and Bergman 1975, p. 49). In a crucial sense, then, the mother who is the first *object* of the infant's subjectivity remains an essential *aspect* of that subjectivity—is unified with it. Subjectivity is thus at risk in two senses when the child is separated from the mother: Not only is the object of subjectivity absent—the "not-I"—but also the dual unity that *is* the infant's psychological existence—the "I," to whatever extent we can speak of an "I" in this very early, relatively undifferentiated state.

Subjectivity in its earliest form is *intrinsically* connected with the mother's holding-soothing presence; it cannot exist without it. Thus can we understand what is at stake for the child who has not developed evocative memory capacity or who has lost it in consequence of regression: In the absence of any capacity to bring before the mind what is not actually present, the child's separation from mother threatens his very subjectivity—his sense of subjective being. That is to say, the mother's absence feels to him like a threat to his psychological *existence*, because, in its earliest form, that existence is intrinsically connected to the mother's holding-soothing presence.

This formulation allows me to account for two important aspects of my thesis. First, it explains the prominence of annihilation anxiety in borderline *regression*: For the borderline personality, the basic cause of anxiety is the threat of the loss of the self through psychological disintegration as a consequence of being abandoned. In regression, with the serious threat or condition of abandonment—with the

therapist's being insufficiently available, for example—the borderline personality's separation anxiety intensifies beyond the signal level and is experienced as a threat to his psychological self—a threat of annihilation. It remains only a threat, however. The serious compromises in subjectivity that are the outstanding feature of psychosis are rarely seen, and then only transiently, because borderline patients have generally had sufficient experiences of holding-soothing to develop a basic sense of subjective being—of psychological separateness, which eventuates in psychological selfhood. Although this sense of subjective being is less solid than ambivalence theory would have us believe—in that it is subject to the felt threat of annihilation—it is *more* solid than that of the psychotic—it only rarely breaks down *in fact*. Thus, whereas the regressed psychotic patient experiences the *collapse* of subjectivity (the fusion of self and object representations), the regressed borderline patient experiences the felt *threat* of its collapse. Indeed, the fact that the threat is subjectively experienced suggests the basic intactness of subjectivity in the borderline patient. My formulation, then, accounts for the differences between psychotic and borderline regression, and at the same time clarifies the comparability of the issues at stake in each—their identical *basis* in the area of subjectivity.

I am also prepared now to address an objection that might be raised against my larger thesis: If evocative memory capacity in the borderline patient is inadequate for the formation of sufficient, and sufficiently stable, holding introjects, then how can it be adequate to the formation of *hostile* representations and introjects, which are relatively *abundant* in the borderline personality's inner world? In this regard, I would note, first, that the inadequacy of holding introjects is relative. Evocative memory capacity has developed to sufficient extent to permit the formation of *some* holding introjects, however unstable and subject to loss they might be in the face of regression. The problem then becomes one of accounting for the relatively greater number of hostile introjects. And in this regard, I would refer the reader to the corollary of Mahler's conception of an "omnipotent symbiotic dual unity": that the infant tends to project all unpleasurable perceptions, both internal and external, outside the protective symbiotic membrane. The reason for the disparity, then, is that the infant's reactive hostility is a plentiful resource via projection for formation of negative representations and introjects. But since the infant possesses little *innate* resource for holding-soothing, and must rely on good-enough mothering for it, there is less experience available for formation of positive representations and introjects when mothering is inadequate.

## *Notes*

- 1 Piaget's stages III to VI trace the development of early memory capacity. In stage III (ages 5 to 8 months), a baby will make no attempt to retrieve a toy hidden behind a pillow even though the toy is placed there while the baby is watching. Apparently, no memory for the object exists. In stage IV (ages 8 to 13 months), the infant will look for a toy that has been hidden behind something while he is watching. He has gained the capacity to remember an object for a few seconds. With stage V (13 to 18 months), the infant will pursue and find a toy that has first been placed behind one pillow, then removed and hidden behind a second; however, the child must see the movement from one place to the other. If the second hiding is done by sleight of hand, he makes no effort to search beyond the first hiding place. Not seeing the changes in the object's location, he apparently loses his image of it. Finally, with stage VI (at 18 months), the infant will continue to look for the toy even when the second hiding is done without his seeing it. Piaget concludes that only when the child reaches stage VI does he possess a mental representation of the object as retaining permanent existence despite the fact that it leaves the field of his perception.