Six Steps in the Treatment of Borderline Personality Organization

The Second Split Transference

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e-Book 2016 International Psychotherapy Institute

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Step Four: The Second Split Transference

ATTEMPTS AT INDIVIDUATION

After our "skins" were separated, Pattie caught cold, coming to one session with Kleenex and cold medicine and declaring, "I think I'm dying." She reported a brief dream of the previous night in which she had dreamt of her birthday. I made the formulation that she perceived this as killing her fragmented personality in order to give birth to a new one.

The next night she dreamt of constantly passing gas, and then she dreamt of being in a warehouse with solid walls where she began rearranging furniture. She saw a desk of her mother's, which, in reality, was in the room of Pattie's older sister. In this dream she summoned up enough courage to ask the saleswoman, who wore a wig, if the furniture was hers. The woman, who seemed made of plastic (bad mother?), refused to give Pattie the desk because of "the nasty expression on her face." Upon this, Pattie loaded a gun but woke up at once, feeling anxious.

I explained that she was now working on an intrapsychic separation from the representation of her mother. I thought that passing gas represented her wish to exorcise her bad self- and object representations, and an expression of hostility in the hope of asserting herself. I also asked her to consider that by passing gas, by becoming offensive, she might be protecting herself from something. She said she was protecting herself from the mother who would not give her the desk.

What was important, however, was Pattie's curiosity about her dreams, and her trying to utilize them to gain more insight into her psychic functioning. After being unable to get the desk from her mother in the dream, she openly examined her jealousy of her siblings. She spoke of how her parents lacked empathy with her needs, and of how I did as well, something, she said, she had seen in me for a long time. Her parents were made of plastic, but I had acted just like a computer. Now, she saw that I was not just a machine: "You have empathy!" she declared.

A Budding New Self

That night she dreamt of being a beautiful woman enjoying the envy of other women. This dream expressed her wish to deny her needy aspect and to hold on to the split all-good and idealized aspect. She wanted a rebirth—if it would make her a glamorous woman. She had found a turtle on the farm; she thought it was in trouble and said she had saved it. I thought it represented a cocoon, a container of her budding new self. At this stage of her treatment she was still engaged in object relations conflicts, so when I spoke to her I noted the possibility that she wanted a new self, and protection within a shell. When the turtle died Pattie expressed much anxiety about dying herself and reported eating oranges to get an adequate intake of vitamin C.

Although she was no longer having one-night stands with strangers, she was having sexual relations with several young men, sometimes with those working on the farm, with whom she had at least some acquaintance. From time to time she would refer to one of these men as "a steady boyfriend." The staff member from the hospital where she had stayed occasionally visited her although, now married, he lived elsewhere. I refrained from advising her to drop him, but when she spoke of having to end this affair, I made approving sounds and commented that she seemed now to want to protect herself.

Pregnancy Reflecting Sibling Rivalry

One day she reported with bravado that she was pregnant. She spoke like a veteran and began making plans for an abortion. She had had to ask the putative father for money to have it. I did not get involved in the management of this crisis, but when we began work again after the abortion, I began exploring the meaning of what had happened. Different condensed elements were involved in her perception of aborting her fetus, but she connected it with her desire to rid herself of Mary, of whom the fetus had become a symbol. This time she did not place the blame entirely on the outside world but acknowledged some responsibility herself, even at times displaying a glimpse of appropriate feelings of remorse and the ability to look inwardly. Her dreams contained a body of water that I took to represent her and her mother's womb. There were dangerous leeches and cobras in this water, and she kept beating them over the head, at times seemingly aware that they represented her siblings. She exhibited no genuine mourning over the aborted fetus.

In one dream she and her elder sister pulled a trailer containing a horse. The trailer turned into a boat that she and her parents took to a family reunion, leaving the elder sister on the shore with the horse. Her mother turned to her and asked, "How about your sister? Should we go back and get her and the horse?" Pattie said, "No! She can take care of herself!"

She had this dream after seeing her sister's new baby. Their mother showered affection on it, while no one in the family knew that Pattie had undergone an abortion. This dream suggested that by becoming pregnant she had competed with her sister, and that she wanted to be alone with her mother —in her womb—and without her sister or her baby (the horse). She now understood that the horses represented, among other things, her siblings, and that she cared for them in order not to face her aggression toward them. But she sometimes beat them and was bitten and kicked in return. She did not yet show any remorse over the two horses she had shot when they had hurt their legs and which had become closely associated with Mary; nor was she remorseful over the flare-up of her aggression. (See A. Freud 1965, Volkan 1979b, and Schowaiter 1983 on the uses and intrapsychic meanings of horses in the psychoanalytic literature.)

HEARING INTERPRETATIONS

Pattie still split her self- and object representations after her regressive experience in the third step and continued to be involved with issues of separation-individuation, although not in the same way as in the second step. Now she had a functional observing ego that could see with me the meaning of her behavior patterns. What was more important, she could see unfinished business from her childhood in her present activities. A childhood event she could now hear interpreted; her observing ego dealt with reactivation of her feelings toward Mary as a sick infant. Pattie mentioned that her "steady boyfriend" had complained one night of an upset stomach for which he wanted special food, including milk. The two went to a nearby store to buy it, and while there Pattie temporarily experienced herself as ugly and bad—the "big bad blob" self-representation had returned. After returning to her friend's apartment she felt she could not sleep with him that night. The idea made her very anxious, so she left him and went to a bar to find an all-good stranger. She found one, but now her observing ego told her she was repeating her old penis/breast-collecting pattern. She then saw the stranger as a bad man and left the bar. While driving to her apartment, she fantasied that she was my child, my *only* baby. The dominant meaning of this incident is that the boyfriend, by becoming ill and wanting to be given milk, became for Pattie her sister Mary, who was physically handicapped as a young girl and who had robbed her of her mother's milk. Pattie envied her and wanted to murder her. Her sensing herself as bad and ugly was because she retained the derivatives of aggressive drive within herself. She could not sleep with her boyfriend for fear that she might murder him (her baby sister). She externalized her bad self-image onto the stranger in the bar, and later activated a good self-image and a good mother image in her fantasy of being my child. However, the idea that she was my *only* child represented her wish that the sick infant sibling had never been born. I interpreted this for Pattie. Patients like Pattie can make use of such interpretations in this phase of treatment.

FURTHER WORK ON SEPARATION-INDIVIDUATION

After three years of treatment with me Pattie said, "Now I know, I really know. It is true. My mother had a basic deficiency—she could not tolerate her children being loving and sharing toward one another. When my elder sister's husband goes away for a business trip, she comes home to my mother. No child ever really left home, psychologically speaking."

Her sessions became calm, and she made efforts to lead a more organized life. She bought folders to organize her papers and tried to keep her quarters clean. She finally gave up her apartment near my office and went permanently to the farm, driving the long distance to her sessions. She could not stay away from the horses. Although she spoke of unwashed dishes piling up, and the outrage of her parents when they came on weekend visits, I had not been able to learn whether she really kept the house like a pigpen.

She tried to become a horse trainer. Her father let her draw on her trust fund to buy a horse, which she stabled on the farm with her father's animals. Although it was hers, she was ambivalent about it, much as, she thought, her mother had been ambivalent about her in her childhood, but she gave it special care nonetheless.

In one of her dreams she was trying to escape from an orphanage to avoid being raped. I was beginning to understand more fully how separation-individuation struggles were frustrated when she felt rejected (raped) by the oedipal father. Her reality testing was still blurred, and splitting and projective and denial mechanisms still strong. She got nowhere with her effort to obtain a job. Pattie did take some positive steps forward, however: Her hours were no longer chaotic, and she was observing the therapeutic process with me and showing evidence of progressive moves.

A CRISIS IN THE ANALYST'S LIFE

At about this time I became preoccupied with the illness of my sister, who is six years my senior. Mental representations of external events can affect not only the patient's but also the analyst's participation in the therapeutic process. My sister, on a visit from her home in the Turkish Republic of Northern Cyprus, was to have undergone minor surgery when it was discovered that she had a brain tumor. Although it proved to be benign, its excision was risky and complicated, and many subsequent surgeries were necessary. She was in a coma for weeks; for about five months we did not know whether she would live or die, or, if she lived, whether she would have severe mental problems or be vegetative. As her brother and one of her two relatives in this country, I was deeply involved in her situation, which at one point seemed so hopeless that we talked of funeral arrangements. A memory from my teen years kept coming to mind. With my family I had gone to a Cypriot village where a play was being staged. We stayed in the home of a man involved in staging this play, which had a shooting scene. When I picked up a revolver I thought it was a prop for the play, and in fun I pointed it at my sister's head and pulled the trigger. Luckily, it did not fire, but to my horror I learned that it was a real weapon, and loaded. Now my own analysis of my dreams made me aware that I felt some guilt for the surgical invasion of my sister's head. My own psyche constructed a drama that resembled Pattie's intrapsychic story of guilt over wanting to have her siblings dead. Having had an experience so closely recalling hers, I found it hard to be neutral and distant enough to analyze her material.

During my sister's illness it was necessary to cancel a few of Pattie's sessions. I was outwardly undisturbed and was sure I could function as usual in my analytic role, so I decided not to burden Pattie with my personal preoccupations. She sensed my distress, however. My notes at that time make it clear that I was not aware of her reaction to my distress. I was not only denying my state, but was denying my patient's ability to understand me. Just as her mother probably did not know that young Pattie had been disturbed over her preoccupation with Mary, her ailing child, so I did not recognize Pattie's conscious and unconscious reactions to my acute grief over my sister. Once she brought a bunch of wild flowers, which she left on my table in an effort to save me from my distress, just as she had tried, at great cost, to save her mother. At the time I gave the flowers no thought but to regard them as a feminine gesture.

In retrospect I think that my getting her to verbalize her recognition of my distress, and my brief acknowledgment of it, supplemented with my supportive statement that I would keep on working with her, might have been helpful to us both. In any event, the important thing to do when something unusual happens to either the patient or the analyst in the course of treatment is to bring the event into the therapeutic process.

After a while I could not fail to see that Pattie was feeling that I had abandoned her. She had another dream about trying to escape from an orphanage, in which she did escape, was raped, and was returned to the institution. In the dream she looked like Shirley Temple as a child. Shirley Temple represented herself in search of new parents, seeking to be loved and as happy as the typical Shirley Temple character usually succeeded in being. Memories of the analyst she had had before coming to me, who had seemed to sleep through their sessions, returned. I was like her in failing to understand Pattie.

Pattie dreamt of being terrified at finding one of her stallions blind. There were no valuable associations to this dream, and it did not occur to me at the time that the blind horse might represent me. In another dream, a woman with bleached (plastic) hair, supposedly an expert fencer, was demonstrating but using the wrong maneuvers. Pattie wanted to correct her but asked herself, "Should I care?" and then awakened. She went to the bathroom and then returned to her bed. A few hours later she awakened herself by wetting her bed and was shocked by what she had done. She wet the bed again the following night. I knew she was regressing again but now this regression was not in the service of reorganization and progress. I described her therapeutic regression in Step Three, from which she emerged with delusions about bugs and itching, a phenomenon we both observed, especially me. But the present regression was accompanied by extreme anxiety, and I was of little help. Recalling that her horses stood for various people and things, I feel now that in the transference I might well have been represented by the blind stallion who had been so good but who now could not see where he was going, or the expert fencer who was performing badly. But I failed to see such meanings at the time. Pattie's loss of bladder control reminded her of an attack of colitis she had had when she was 18. Her fear of a return

of her colitis made me anxious as well, but I tried to conceal my anxiety.

Three weeks after Pattie lost bladder control for the second time, my sister had a crisis and I had to cancel a session with Pattie. At our next meeting she openly verbalized her recognition of my anxiety over my sister. This time I acknowledged that there was illness in my family and that I might be preoccupied with it. I went on to say that things had taken a turn for the better, which was true, and that I was fully able to work with her. I supplied no details and she asked for none.

RESCUE FANTASIES

Her next hour found Pattie well dressed and without anxiety. She looked like a young lady and spoke of being grateful to me. "I see you more and more as a person. You are not Volkan the computer any more." She spoke of feeling like an adult—"no longer helpless" and "what a relief to be grown up!" I was struck by her brave attempt to get well overnight. She seemed to be getting well and to be considerate, which in turn allowed me to relax a bit. The patient was becoming the analyst's therapist (Searles 1975).

She had probably behaved this way when she wanted to help her mother when the latter was disturbed over Mary's problem. I felt close to Pattie and appreciative of her efforts. I was mentally competing with her mother, who, I thought, had probably not understood her daughter's attempts to be helpful. I did not want to belittle her responding to my grief by making cold interpretations, so during this session I responded to her appreciation and her declaration of feeling well with the approving sound "Uh-huh, uh-huh." But at the next hour, to which she came again rather well dressed, she wanted to discuss *our* relationship. She recalled that she had been physically ill for a short time during the first year of our work, and that she had asked me to take care of her. I had agreed that it would be well for her to take care of her physical problems, but I had not looked after her nor had I recommended a specific physician. She said she now understood why. If I recommended someone, she would be depending on me. She said that because of me she had learned at last to take care of herself. "You forced me to teach myself how to take care of myself."

I responded that my recent preoccupation with personal matters might have played a part in forcing her to take care of herself, but that I was not sure how therapeutic I had been during the time and

had been unaware that my preoccupation might be interfering with our work. I quickly mentioned my appreciation for her concern and her demonstrations that she was gaining control over her life. I suggested, however, that neither of us would want her apparent "wellness" to cover over any unresolved issues. I assured her again that my personal crisis was over, which was true since my sister had left the hospital and was slowly recovering at home. We resumed our work.

RETURNING TO THE FIXATION POINT

The very next day, Pattie dreamt the repeating dream of being a child and having gum stuck in her mouth. Her "wellness" had gone, and she had returned to her fixation point. In associating with this dream this time, I heard more details of her early life. Her mother had become pregnant when Pattie was teething. Pattie had kept a pacifier until she was 4, when her mother bribed her with a doll to give it up. She recalled nightmares in which she had been afraid of being gobbled up and afraid to eat. As a child she named the creatures that peopled her nightmares "mouth monsters." It was one of these that she had seen in the design on my couch before lying on it. She had "ripped out" her baby teeth before they were loose enough to fall out and had tortured herself by adopting the old trick of tying a string to the tooth and attaching the string to a doorknob and waiting for someone to close the door suddenly.

She could now understand, with my help, that the gum in her dream represented her being stuck in a kind of limbo. Symbiosis with the mother (swallowing the gum) and separation from her (spitting it out) were both perceived as dangerous, so she kept on chewing it.

A NONANALYTIC TRANSFERENCE

As we resumed work we seemed to have a symbolic beginning: My practice was moved to a new and more private office not far from my old one. I made the move for practical reasons, but I wonder now if the timing coincided with my motivation to fully commit myself to work again after my personal crisis.

Continuing on the road to health, Pattie said she wanted to try something she hadn't as a teenager. She thought that young girls usually became infatuated with entertainers, and she had seen a young male singer named Ken at a local nightclub. She often went to the club and fancied herself in love with him. I knew that her being "in love" was at least partly a resistance to therapy. She was finding a new love object because of her recent perception that I was rejecting her. Although I thought we had cleared the air about our relationship, she might still be unconsciously seeking a displaced transference love figure.

She seemed surprised when Ken noticed her. He was divorced, and they soon became lovers, with me a kind of spectator. I began to hear less and less that pertained directly to transference. My effort to explore with her the possible resistance aspect of her new relationship incited little response or curiosity. On the positive side, she was trying to have a relationship with only one man. Her parents disapproved of him, but when they were away he stayed with her.

When, at the oedipal age, she was disappointed with her mother she had turned to her father and had initially felt that he accepted her, but when he was depressed, he also disappointed her. I believed that if her turning from me as a representation of her mother to the singer, who represented her oedipal love object, was a repetition of her childhood experiences, her relationship with Ken would, in the long run, turn sour. Their relationship did last for a year, but then she withdrew from it, seeing Ken as a dreadful mistake, a person she had outgrown. During the time of her extreme infatuation with him I felt that her transference relationship to me was not active. It was as though she had left me (the mother representation) behind and had found a new love object. The oedipal father transference was being reenacted somewhere else. Although I usually refrain from interfering with such a development and wait for the process to take its course, I interpret the resistance involved in it and I know that eventually the father transference also has to come between patient and analyst and must properly be worked through in Step Five.

SECOND LOOK

As she embarked on her love affair with Ken, Pattie referred more often to important men in her life. At first she was curious not about her own father, but her mother's father. After moving some distance from the mother transference she was trying to understand what had led her mother to provide her with such deficient mothering.

I now heard, for the first time, that her mother's father was a rather eccentric millionaire living in

seclusion in Dallas. In his mid-nineties, he was arthritic, confined to a wheelchair, and attended by a nurse.

Pattie was now curious about why her mother could not handle her children when they were all with her. Her mother had experienced strong sibling rivalry, her older sister being her father's favorite. The sister had been married and divorced three times "because no one could fill my grandfather's shoes." Pattie's mother was treated like a baby by her father and only had her mother. Pattie's grandmother died when Pattie was 12. She recalled that her mother changed then and "became like my grandmother," appearing more confident than before and wearing her grandmother's jewelry. But her grandfather could still make her mother lose her confidence and cause her to cry. Behind her socially acceptable manner remained certain hidden weaknesses; the facade was impressive but there was something wrong inside. Pattie began to realize that her mother's personality had an "as if' quality. Pattie began planning to go to Dallas to visit her grandfather, with her mother and brother. I realized that more than wanting to see her grandfather she wanted to observe the interaction between him and her mother. Canceling two sessions, she flew to Dallas, and on her return she was greatly excited over her observations.

This visit represented her attempt to have a *second look*. Using this term, Novey (1968) speculated as to why some patients in psychoanalysis or psychoanalytic psychotherapy have an urge to explore old diaries and other family papers and to return to the physical settings and the people who had been important to them earlier in life. Aware that in some cases such behavior may constitute acting out, he held that "in many more they constitute behaviors in the interest of furthering the collection of affectively charged data and thus helping the treatment process" (p. 87).

Pattie had observed in Dallas that her mother was still nervous in the presence of her father, now a feeble old man. Pattie felt that her mother's conflicts with her father had militated against her (Pattie) getting to know him. Now, to her delight, Pattie felt comfortable with the old man, and even with her brother, who had also been in Dallas. Although the old man was rather eccentric, Pattie saw his sophistication and pioneering spirit. He had a fine gun collection and had given guns to the children of his favorite daughter, Pattie's aunt. Pattie and her brother spent hours cleaning his guns at his request, and in return he gave each a gun. Pattie felt that this gift reestablished contact with her roots. She was

angry at her mother for having failed to inculcate pride in her background.

It will be remembered that she had once wanted to be a man and had forbidden mention of penis envy lest it destroy her hope of having a penis. She carried herself like a male wrestler and shot horses with a gun her father had given her—a phallic symbol, she used it aggressively. Her reaction to the gun given to her by another important male figure, her grandfather, was different: She admired this valuable gun and as such she put it away (repressed it). Satisfied with the possession of a wished-for phallus, she could now move up on the developmental ladder and blossom as a girl. Soon after the Dallas trip she came to her sessions looking like an apache dancer in a red sweater, a beret, and a short skirt. Her attempted appearance as a woman on her grandfather's level of sophistication was a caricature. After giving a full account of her experiences while away, she declared that she would soon be 24 and felt "terribly ordinary." I said nothing to interfere with her effort to raise her self-esteem and to find "generational continuity" (Volkan 1981c) in herself.

In the first dream that she reported after her trip she had found herself in a house with a primitive kitchen and dirt floors like the house of an early settler. This no doubt represented her perception of her grandfather as a pioneer. "The kitchen was nice," she said, "even though it looked 200 years old." She concluded, however, that the kitchen housed unkempt people and contained no food.

In spite of her good experiences in Dallas, Pattie could not help recalling trouble in her grandfather's house. I later learned how ill he had been at the time of her visit, and that until she went to Dallas Pattie had perceived her grandfather as an eccentric who gave her nothing. "The trip was a test," she said. "I see things differently now." She collected all the pictures her mother had taken of her during the past three years and observed that in all of them she was pouting.

She then turned to her own father's background, seeking reasons for his depressive disposition. He had lost both his father and his best friend while in his early twenties.

Pattie was greatly excited over getting a letter from her grandfather asking if she liked the gun he had given her. Although she was aware of the possible sexual symbolism of the gun, it was important that she be acknowledged by the head of the family and have a sense of belonging. She dreamt of traveling alone with her grandfather and becoming sophisticated under his tutelage. Associating with the dream, she spoke of its transference implication, that is, getting "sophistication" from me: "I look around and watch people older than I. They don't know a thing! But I am undergoing psychoanalysis. I am discovering what is inside myself."

Preoccupation with Death as Psychic Liberation

Then she suddenly became preoccupied with death. She was especially afraid that her horses would die. I told her that horses stand for many things. I suggested that her fear about losing the horses might reflect her attempt to liberate herself; perhaps she wanted the death of her old self so that she could reach a higher level of autonomy and independence. She must have understood what I said because her preoccupation with death disappeared.

RETURNING TO THE VERMIN STORY

Pattie, as we recall in Step Three, had had a dramatic therapeutic regression in which she had been preoccupied with a delusion about "bugs," which led to her intrapsychic separation from me as the symbolic mother in the transference. Now, attempting to individuate further, her bug delusion returned. She reported that her wrists itched. Her symptoms were not as dramatic as they had been in Step Three. She spontaneously recalled her previous preoccupation with bugs. She saw a dermatologist, who reassured her, and within a few days her delusion disappeared.

Childhood Fantasy of Pregnancy

In speaking of her new preoccupation with bugs, she recalled having had acne as a teenager and speculated that she might be "visiting" her unresolved teenage problems. When she was 12, a boy had taken her behind some bushes and tried to engage in sex. "I was able to say no then," she said and recalled how upset she had been over the episode and how dirty it had made her feel, especially in her skin. This brought to mind a childhood fantasy that she could be made pregnant by skin contact. This time, then, following her preoccupation with death, her preoccupation with "bugs" and itching, although still in the service of separation-individuation and the establishment of body boundaries, included another condensed but higher meaning—one pertaining to childhood sexual fantasies and defenses

against them.

With bravado she invited Ken to the family farm when her parents were there. She wanted to prove that she was not dirty! Although her parents knew that she and Ken were lovers, they chose to ignore the fact, although they lectured Pattie on the importance of a young woman's reputation. A compromise was arrived at: Ken stayed in the house but the couple had separate rooms.

At her next session she declared that "adulthood means that you have one lover, no more casual sex." She had recently seen at some gathering one of the men with whom she had had casual sex and who had stolen money from her. She now said she could not remember his name.

When she was 12 she had gone to a fair and then to a party with other youngsters, and did not leave for home on time because she was enjoying herself. She had put on lipstick for the occasion. Her father had driven to the house where the party was taking place, insisting that she leave with him and humiliating her before her friends. Noticing her lipstick, he called her "a slut." Weeping, Pattie asked him to apologize, which he did reluctantly, without understanding how deeply he had hurt her. "I've never cried since then," she said.

RESOLUTION OF NONANALYTIC TRANSFERENCE

I found that another meaning of Pattie's appearance as an apache dancer was to test me to see if I would respond as her father had.

I passed her test in the most silent but effective way—by adhering to the therapeutic position.

We had been working together for three years and three months, and her sessions and her reports now seemed better organized. She was reporting more events from her childhood and teen years, but there was no "hot" transference story. I was still providing a holding environment and being treated in general as the mother who was left behind. Her relationship to Ken was "hot." Although aspects of the father transference involving me appeared from time to time, they had not evolved into a full-blown transference neurosis. I made the formulation that her separation-individuation was not fully complete as yet; she occasionally gave evidence of splitting her self and objects, which, before long was reflected in her relating to me and Ken. When Ken was "good," she made no reference to me, but when he was "bad" she would make me "good." However, on the surface most of her activity seemed in general to be "extratransferential."

I refrain from seducing patients like Pattie into speaking of transference-related issues. If such seduction occurs, the transference issues usually tend to become resistances, and their interpretation and resolution may prove to be false. One must maintain the classical analytic position and wait for the natural evolution of the transference neurosis.

The Analyst's Response to Persons in the Patient's Association

When Pattie said, "What I am learning here is growing up," I tended to agree. I offered no gratification of her wishes but explored them with interpretations, clarifications, and, sometimes, with suggestions. I actively kept the working alliance and mutual curiosity alive, taking care not to side with people who appeared in her stories. I very seldom used their names in talking to her, however much she offered them. My interpretations and clarifications dealt with my formulation concerning *her* perceptions, expectations, and unconscious wishes. In a sense I focused not on the characters of the drama but on the author's motives for "creating" them.

Oral Greed

She kept speaking of her Dallas visit two months after her return, telling how her grandfather's regard for her had boosted her self-esteem. She reported that Ken now wore a beret, and that she had dreamt he was speaking with a "pseudo-French accent." Even *he* seemed to join her in her new "sophistication." She now began seeing him as totally "bad" and began referring to him as a freeloader, as indeed he seemed in reality to be. My formulation of her present view of him showed him as a greedy "mouth" always raiding the refrigerator. It seemed Pattie's bad oral greedy self was deposited on him. She wanted to be rid of him, but, as in projective identification, she had an empathic connection with him as the bad object. Although she spent hour after hour with me deploring his evil nature, she resumed her life with him when she left my office, only to return later for another 50 minutes of criticism of him. Then, suddenly, he would be "all good," as though she had forgotten describing him on the previous day as

nothing but "a greedy, dirty mouth." Then she would talk of leaving the farm and the horses and beginning a new life in California with Ken.

I discussed with her the similarities between her current relationship with Ken and the relationship she had had with her mother in the earlier years of her treatment. Splitting her mother's image had led her to have a split image of her boyfriend. I explained my observation of her attempts to move away from her mother's orbit and to have successful relationships with men. She was cautious because of a fear of rejection by men (her father) and was still bringing into her relationship with men a model of her relationship with her mother. I explained without using technical terms how she had been a satellite (Volkan and Corney 1968) of her mother when she first embarked on her treatment with me, and how in recent months her sessions had been filled with an account of how she was orbiting around Ken. I told her that I had for some time seen her as the moth and her mother, and later Ken, as the flame. She listened intently and told me she understood that in spite of all the progress she had made symptomatically, she was once more settling into limbo. She wanted us to move on in our therapeutic work.

That night she dreamt of being in a car parked on a slope. She put the car in reverse and pulled the parking brakes. The car began sliding backward. Afraid of hitting someone, she awakened with anxiety. I connected her dream with my remarks about her satellite state, and suggested that she wanted to regress therapeutically in order to move away from limbo and to a higher plateau in her treatment. Something, however, probably the fear of aggression (hitting or killing someone), was inhibiting her. She responded by saying that she certainly would perceive a moth's meeting the flame as dangerous.

To "Kill" in Order to Individuate

After this session, Pattie left for a family celebration of Christmas. Returning in early January, she reported having felt left alone, rejected, and humiliated by her siblings. She observed again how unable her mother was to tame the siblings' rivalry and to protect her from the sadism of the others, especially the elder sister.

She then allowed herself to reexperience the thoughts and feelings of her early teens. With

considerable affect she described in detail her attack on her mother with a serrated knife. "Hitting someone" in her dream was connected with her unconscious notion that her mother had to die if she were to become a completely separate individual. After the tense session in which she recalled the attack on her mother, she failed to keep her next appointment. When she did come, she admitted to being flooded with murderous fantasies, which were now directed toward me as well; she had skipped her previous appointment for fear of killing me. "I can't go backwards!" she screamed. I told her that the moth was examining the flame, and that if she could tolerate it, so could I.

Over the next few days she reported being ill and was overcome by laziness and sleepiness. I told her that her supposed illness was her way of protecting herself from realizing her need to "kill" her mother in order to individuate, and that there are different ways of "killing." The truth was that we were speaking of psychological (symbolic) killing rather than murder, even if she had intense and alarming emotions associated with it. If she chose not to go through this, she would stay in a state of limbo (satellite state). I told her: "I am not telling you to get well. I am telling you that if you want, you *can* get well. When you say you *can*'t go backward, or you can't go forward, I hear you meaning that you *won*'t regress or progress because you want to protect yourself from alarming feelings."

That night she dreamt of being with several girls who had been her classmates in elementary school. Their identities were confused and all were having oral sex with one another (lesbianism as a kind of symbiosis). They also grew penises they could suck. Then the dreamer smelled something burning and saw a fire. She woke up screaming. I thought that the moth had met the flame!

Drastic Changes

During the next few months she made some drastic changes in her life. She took a position at a horse farm, nominally to break in young horses, but actually to clean out the stables. She complained about this work, but finished out her contract, which took about a month. In the manner of a business proposal, she spoke to her father about building a stable on the family farm, and he consented to her plan. She bought another horse with her own money.

She had her ears pierced-a symbolic gesture toward becoming feminine-and became

preoccupied with repairing old furniture, working to make her quarters as charming as possible. I still could not determine whether her room in the farmhouse—and the farmhouse itself—were simply cluttered, or really sordidly dirty.

She finally moved to rid herself of Ken, who had been unemployed for a long time and continued to be "a greedy mouth." She dreamt of becoming a man and murdering him, holding the idea that she could not then be identified because of the sex change. Then she thought of her pierced ears and decided that her plan was not practical.

The same night she dreamt that her mare, which was in foal, had been hit by a car and had suffered a broken leg, so someone shot it. She awakened, screaming, "You have no right to kill her! Her leg could have been fixed!"

RECAPTURING CHILDHOOD DEPRESSION

We discussed once more Pattie's desire for separation-individuation, and her perception that she had to kill the representation of her mother and the corresponding representation of herself as "the greedy mouth" in order to achieve this. In her dream, the killing of the mare represented a combination of killing her pregnant mother and her sister Mary, who had leg problems. She again visited the psychogenetic aspect of her conflicts, which were precursors of her guilty feelings. This time her "murderer" self was displaced onto an unknown person, gratifying her superego. She finally confessed to feeling remorse for shooting the two horses earlier. It came out that one of them had been in foal.

Pattie seemed overwhelmed with childhood memories during her next sessions. "My rescuing some and simultaneously wishing to kill others is a very old syndrome, isn't it?" she asked. I agreed, and she *began to cry*. I was moved by this and remained silent in order to let her experience sadness at this level without interference from me. She was recapturing the childhood depressive affects that she had been unable to tolerate. She spoke of her constant pain as a child and her longing to be adopted to escape it. "Why do I feel all this again now?" she asked. "To master it!" I replied. Although this was true enough, I felt my remark to be inadequate in view of her emotional flooding (Volkan 1976).

She spoke of feeling her old emotions "as if I am starting all over," adding that, at the age of 7 or 8

when she realized that her father would be of no help to her in dealing with her problems with her mother, she had undergone a personality change. "Everything reminds me of when I was little," she explained. "I was so depressed, paranoid, and frightened!" Then her sadness gave way to laughter: "I am feeling my old feelings, but at the same time I can't stop laughing. It is good laughter. I spent years in therapy, years in the hospital, lived with the animals, killed animals, but I think I am slowly breaking the cycle." I felt that she was referring to the orbit of the satellite state.

Her interest in repairing furniture increased, and I told her this activity represented an attempt to repair herself. Within a month she asked Ken to move out. "I did this by myself without calling anyone to justify this or that," she said proudly. I said nothing, and during the hour I learned (1) that she had received what she called "a business letter" from her father before asking Ken to leave and had been pleased by the thought that she and her father might after all become "business partners," and (2) that she was spontaneously ready to talk about us as the patient and her analyst.

She was now showing a direct interest in her father, still hoping for him to redeem her childhood disappointment in him. She was excited by the possibility of becoming his business partner. At the same time, she was declaring her unwillingness to express thoughts and feelings about me more vividly. With Ken, an extraanalytic transference figure, removed, I thought she might be ready to develop a transference neurosis, and that we could proceed to Step Five. Pattie was approaching her fourth year in treatment, three years and eight months into her analysis.