

Discussion of
“The Creation of Psychic Space, the ‘Nest of Babies’ Fantasy and the
Emergence of the Oedipus Complex”
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In earlier papers, Dr. Houzel expanded Frances Tustin’s conceptions of autistic phenomena with further insights, and opened new clinical and theoretical understanding of the spectrum of autistic manifestations, from autism proper to autistic enclaves in ordinary people. In addition, Dr. Houzel’s contributions shed light on the conditions necessary for the growth of the mind and the catastrophic events that can impede such development. The present paper, focusing on sibling rivalry as an essential component of the autistic organization, leads to further understanding both in theory and in the application to clinical work. I am referring to the existence of the fantasy of primitive sibling rivalry, the ‘Nest of Babies’ fantasy, first brought to our attention by Tustin in 1972. To my knowledge this specific fantasy has not been addressed, even among child psychotherapists, until Dr. Houzel published his paper on the topic a few years ago. We can postulate that that omission is linked to the primitive nature of such a fantasy and the difficulty inherent in penetrating such a primordial mental state, which in normal children and adults becomes integrated in further phases of development. I would like to briefly review some ideas developed in Dr. Houzel’s previous papers on the nature of the autistic mind, as they seem relevant to the topic presented today.

In his paper on “Precipitation Anxiety”, Dr. Houzel, following Bion’s model, describes how the relation container-contained is rooted in the

capacity for transformation of emotional experiences through communication between the infant's self and the maternal object, and allows for the construction of an inner structure providing stability. Using Bion's model of 'caesura', he states that every relation of self and object is established as the result of a 'caesura', a break in continuity, requiring a transformation of the emotional and psychic experience in order to be integrated into psychic life. Each caesura engenders a dynamic of a gradient of energy that threatens a fall into a precipice, unless incorporated within an inner structure created by self and object communication. We can watch the beginnings of such a process in Infant Observation from the very first days of extra-uterine life within an ordinary daily interaction of an infant and mother. If the caesura leads to a rupture in communication, no transformation capable of being stored in the infant's mind takes place. Therefore no rudiment of a beginning inner world develops, which would eventually become capable of bridging the inevitable failures of existence. In autistic and psychotic children, there is closure of that bridging function leading to an absolute separation between the self and the not-self. It then establishes what Tustin and Houzel name a 'pathology of otherness' that engenders the failure of the development of a symbolic function.

In his paper "Splitting of Psychic Bisexuality in Autistic Children", - presented in the context of an earlier conference-, Dr. Houzel explores the importance of the male and female components of the maternal container, for the growth of the mind. The development of bisexuality is rooted in the early sensation experiences of the infant's "suckling experience". If there is "cooperation between the 'hard' entering nipple and tongue experienced as working together with the 'soft' receptive mouth and breast, then a marriage between 'male' and 'female' elements takes place" (Autistic States in

Children”, p. 84). If that integration fails, the containing object is split into masculine and feminine components. That fracture leaves the self, soft and vulnerable, while the not-self becomes experienced as hard and dangerous, and is projected into the external world.

The therapeutic task consists in making contact with the closed mental world of autistic conditions. Actively understanding how such a mind works, and penetrating the dynamics of the mental closure is fundamental to that task. It requires the therapist to make contact with his/her primitive mind dynamics and develop an awareness necessary to communicate with that primitive level of the autistic mind. Dr. Houzel ‘s exploration of the diverse components of the autistic mind reviewed above, not only informs our clinical and technical work, but also engages the participation of our own primitive emotional and mental processes.

Dr. Houzel starts his presentation by examining the topic of sibling relationships in the psychoanalytic literature. In an historical review, Dr. Houzel argues that relatively little exploration has been focused on that aspect, although sibling relationships have certainly been recognized as important to form the child’s psyche. He further contends that, except in Lacan’s theory, primitive sibling rivalry is considered secondary to Oedipal rivalry. It is Tustin who in her work with autistic children, developed a new understanding of sibling rivalry, as a distinct and more primitive fantasy.

In an interesting and detailed review of the role of sibling relationships in Freud’s theoretical and clinical work, Dr. Houzel points out that Freud, in a number of his writings, acknowledges the importance of brothers and sisters and recognizes feelings of rivalry and jealousy towards a new baby experienced as a intruder. In the ‘New Introductory Lectures”, in particular, Freud describes the feelings of being ‘dethroned, despoiled,

prejudicated in its rights” (p. 123), and he links the hatred for the new baby to grievances against the mother.

Dr. Houzel, however, believes that Freud did not fully develop the importance of that primitive rivalry. He contends that Freud showed some blindness and confusions in his self-analysis concerning the impact of the birth of his younger siblings and maintained that the ambivalence of the child toward his mother/father was secondary to the experience of Oedipal rivalry.

Melanie Klein, although considering sibling rivalry and jealousy extremely important in the development of the mind, also viewed such rivalry as deriving from the early stages of the Oedipal complex. The child, in his frustration against the mother, attacks the inside of her body, which in fantasy contains the father’s penis and internal babies. The sadistic attacks transform those contents into fearsome and persecutory rivals. Consequently, for Klein, the initial triangulation is part of the Oedipus complex, involving mother and father as part-objects (breast and penis) in a procreative parental relationship. Primitive rivalry, in her view, is not a separate form of rivalry. It is an early manifestation of an Oedipal rivalry.

I shall now focus on Dr. Houzel’s expansion of Tustin’s understanding of the existence of primitive rivalry as a distinct phenomenon.

From her clinical work with autistic children, Tustin describes a primitive form of sibling rivalry, deriving from the earliest awareness of the baby’s sense of having a ‘mind of his own”, at the same time as he experiences rudiments of an ‘awareness of otherness’. This primitive fantasy of rivalry blocks any development of an inner mental space created through the relationship of a mother-baby interaction.

In normal infants, states of at-oneness alternate with bearable brief states of awareness of space and separateness. In autistic pathology, an illusion of ‘at-oneness’ between mother and infant leads to a traumatic rupture, when the infant becomes aware of separateness and otherness. The trauma is experienced as a wrenching apart from the mother, immobilizing the infant in a panic-stricken adhesiveness to the mother, who then becomes an inanimate object to cling to. The trauma of ‘premature bodily awareness’ generates the fantasy of primitive rivals, “the Nest of Babies”, experienced as a world in which ‘special babies’ receive ‘special maternal food’, and exclude the infant, who feels broken off from the mother.

Deriving hypotheses from his observations and understanding of those primary psychic events, Dr. Houzel, in line with Tustin, formulates a new model of development of object relationships. He proposes that a preconception of a space for the ‘third’ element is intrinsically present in the mother-baby relationship. It exists from the very beginning of extra-uterine life, as a place for the yet unrealized space of the Oedipal third (Britton) and for the ‘room-for-the-new-baby’ (Segal). That proposition upsets the accepted model of development, which describes a sequential development, mother-baby fusion first, followed by a space for the paternal element, then by a place for siblings. In the autistic child, the closure that maintains the illusion of one-ness of mother and baby prevents the development of any space for a paternal and sibling element. At that primitive level of development, the paternal third is experienced as the largest of the sibling rivals (Tustin) and a terrifying threat to the maintenance of the illusion of one-ness.

In this paper, Dr. Houzel dates the preconception of space for otherness to the very beginning of post-natal life. I would like to add that

clinical work with adults and children, as well as infant observation, seem to point to the possibility that already in utero, the fetus might have experiences of the presence of elements of otherness. We know that the fetus perceives sounds from outside the uterus, as well as input and disturbances coming from the mother's bodily and psychic states. In later pregnancy, the larger fetus might experience pressure and limitation of movement, elements that might sustain a preconception of potential babies occupying the mother's body, which is not yet realized.

I would also like to mention that child and adult psychoanalytic work reveals the presence of fantasies involving babies imagined to inhabit the mother's mind and body. Dreams, children's play, drawings often display the existence of imaginative siblings living in their psyche. Evidence also points to the presence of 'ghost' babies, babies that have not been born, such as miscarriaged fetuses, or dead babies, whose existence remains stored in the unconscious mind.

Dr. Houzel provides an illustration of his conceptualizations, and I shall address a few points in the clinical material, which convincingly presents the evolution from a child caught in a fantasy of persecutory and destructive rivals, to the beginning presence of a space in which otherness is able to exist without destroying the child's existence.

Cyril, suffered physical and emotional traumas during a risky pregnancy. His mother had several previous miscarriages that threatened the fetus's viability, and induced a state of high anxiety in mother and father. It is plausible to hypothesize that the uterine environment was unsafe as it already engendered possible breaks of continuity. In addition, difficult post-birth events followed: abrupt early weaning and the birth of a sibling after another disrupted pregnancy. Dr. Houzel also points to the possibility of a

tendency to depression in the mother, a state that both Tustin and Houzel believe is an important factor in the ideology of autism. Could we consider that even before birth, the fetus Cyril experienced disruptions, possibly felt like attacks from dangerous ‘rivals’, and that autistic reactions originated in the prenatal stages of development, as a protection/defense against threatening experiences?

We witness the movement of the analysis, evolving over many years, I believe, from the expression of the ‘Nest of Babies’ fantasy in which all the objects in the room represent rival babies, to the beginning presence of a mental space allowing the existence of a third. In those first sessions, Dr. Houzel describes the material of throwing the sheets of paper and pens, then the ‘little cats’ Cyril drew, understood as attacks on rivals that he is trying to eliminate. His attacks on rivals put him in great danger of retaliatory attacks. Filling the container of the pens (rivals) with water, in fantasy replaces the rival babies with mummy-Dr. Houzel-milk, only available to him. However, the child then is in danger of being engulfed and stuck in the maternal object. As the work continues, Cyril becomes able to put some toys and pens in the water-filled box, seemingly sharing the environment of the maternal container.

Dr. Houzel’s understanding of that material is very helpful to make sense of some of my observations with both children and adults. For instance, for some patients, any change in the consultation room, even a slight deviation in the placement of an object, is experienced as the presence of a rival, destroying the connection with the analyst and leading to a violent break in contact.

As the analysis proceeds, Cyril models rudimentary figures of father, mother and baby, internal objects in a burgeoning psychic space. The 24

November 2005 session is particularly interesting as it demonstrates the importance of the combination of paternal and maternal elements in the containing function: Cyril 's 'squashing' of father in play leads to the child's collapse, as, in his fantasy, mother becomes devouring and dangerous. Father, confused with rival babies, as Tustin suggested, becomes the largest of the babies and the most dangerous. Father is then stripped of his protective qualities and unable to facilitate the child's strivings to separate and grow. Dr. Houzel's understanding and interpretation of that play seems to allow for change in Cyril's world. He is able to acquire a different identity, that of the 'big boy' who wants to go to his grandparents with his 'own suitcase'. Such a development is crucial for building a distinction between the protective father and the father as a rival baby. That distinction is a necessary condition to develop the Oedipal triangle.

In the last session, 25 January 2006, we witness the child's struggle between adhering to a mother-water and gluing himself to a sink-mother in an illusion of continuity, and freeing himself of that maternal stuckness. Houzel-father-hand is necessary to help the child detach himself from that adherence. The sequence points to the importance of the paternal element for establishing separateness and constructing a psychic space of one's own, containing both male and female components.

These observations lead me to emphasize the importance of the existence of both female and male elements in the analyst's containing function. Close monitoring of the countertransference in the treatment of primitively organized children and adults is necessary to resist the pressure of splitting and collusion.

In conclusion, I wish to summarize some salient points of the presentation:

First, Dr. Houzel offers important theoretical concepts for understanding primitive developments of the mind. He proposes that an internal triangular space is inherently present in the mother-baby relationship from the beginning of life and unfolds towards differentiation and integration of the family constellation, to create an Oedipal space. This seems to point to the existence of a preconception of parental intercourse and procreation, evolving, from early development, towards a realization. In that description, I believe, he concurs with a major theoretical proposition in Bion's theory.

Secondly, Dr. Houzel states that, for otherness to develop and for the infant to create a psychic space of his own, the containing function developed in the mother-baby interaction, requires the existence of a bisexual dimension. This bisexuality constitutes a primitive form of the Oedipal triangle.

Thirdly, Dr. Houzel extends understanding of sibling rivalry to include a primitive level of rivalry, which antedates Oedipal rivalry. It is present very early in life, before an internal space open for otherness has developed. In my experience, the origins of that type of rivalry can possibly have roots in pre-natal traumatic events. Primitive rivalry is of a predatory and violent nature, and the source of paranoid anxiety. This fantasy seems to dominate children locked in an autistic state. It may lead the child to experience the arrival of a new baby as a catastrophic intrusion, destroying the potential space for psychic life to unfold, and arresting all possibility for symbolic development. In less severe pathology, the presence of this fantasy may be at the core of some inaccessible emotional states, fiercely protected in closed-up enclaves.

To end, I wish to extend my appreciation to Dr. Houzel for presenting his understanding of such early and primitive psychic phenomena. Much got clarified and further developed in my understanding of such arcane and difficult to access mental events.