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## **The Evolution of the Capacity for Observation: The Role of Primal Scene Phantasy<sup>1</sup>**

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Note: In the interest of confidentiality, all case material has been fictionalized. It is constructed of composites of several patients and multiple real-life scenarios with details altered to ensure anonymity. Any similarity to real persons, living or dead, is coincidental.

### **Introduction**

In his penultimate paper "Analysis Terminable and Interminable," Freud (1937/1958) wrote: "The business of analysis is to secure the best possible conditions for the functioning of the ego; when this has been done, analysis has accomplished its task" (p. 251). Among the essential ego capacities that Freud had in mind was the capacity for observing one's internal processes. The observing ego is both a requirement for psychoanalysis and an achievement that evolves from it. When we speak of the "capacity for observation," we refer to a conscious activity associated with psychological-mindedness and conceptualized as taking place in the domain of secondary process functioning. But a deeper and more phantasmal level of "observation" stands as the emotional foundation for this higher-level ego capacity. This observation takes places in the realm of phantasy and involves the challenge of observing the primal scene of infancy.

In this paper, I would like to build upon several contributions by Britton (1989, 1995, 1999) by elaborating his ideas concerning the consequences of refusing to accept

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one's position in relation to the phantasised primal couple. I will suggest that when this position cannot be tolerated, the reactions resonate along the primary emotional links defined by Bion (1962): Love (L), Hate (H), and Knowledge (K). I propose that this refusal takes shape as two different phantasies: one in the realm of L, and the other in the realm of minus K. I will present clinical material to demonstrate the way in which these phantasies result in an impaired capacity for observation and a collapse in imagination. I will also make some preliminary comments regarding their role in the use of the body rather than the mind for articulating unconscious conflict and unconscious gender confusion.

## **Background**

Freud (1918/1958) first used the term "primal scene" in attempting to reconstruct the Wolfman's infantile history. While he debated as to the degree of reality involved, Klein (1929, 1945) considered the primal scene a fundamental phantasy and positioned it as the essential element of the early Oedipus complex. In introducing her concept of the "combined parent figure," Klein (1929) emphasized that the child's emotional problem in the early Oedipus situation is not only love and rivalry toward the parental objects as individuals, but also hatred and envy at being excluded from their union as primal couple. Neo-Kleinians have continued to explore the clinical manifestations of primal scene phantasy as it emerges in the analytic relationship, and I would like now to briefly summarize Britton's relevant contributions.

In "The Missing Link: Parental Sexuality in the Oedipus Complex," Britton (1989) discusses the early Oedipus situation with particular attention to the link between the parental couple, a link that excludes the child. The recognition of the link between the parents provides a limiting boundary for the internal world.

It creates what I call a "triangular space"-- i.e. a space bounded by the three persons of the Oedipal situation and all their potential relationships. It includes therefore the possibility of being a participant in a relationship and observed by a third person as well as being an observer of a relationship between two people. (Britton, 1989, p.86)

In this way, tolerating one's position as excluded observer of the primal scene is central to the capacity for observing and for being observed. Britton considers two calamities that interfere with this development. In the first, an early failure of maternal containment makes it catastrophic to conceive of mother with father because this is equated with a total loss of mother. This may result in a condition in which the patient wholly lacks the ability to take up the position of the third. An observing ego fails to develop. On the other hand, in a developmentally later phenomenon, Britton describes "Oedipal illusions" that arise as a defense against the psychic reality of the primal scene. The parental relationship is "known" but its full significance and impact is evaded. In this situation, a rudimentary observing ego comes into existence, but its full development is precluded.

In a later paper, "Reality and Unreality in Phantasy and Fiction," Britton (1995) turns his attention to the capacity to imagine and relates this to primal scene phantasy as well. He proposes that to imagine things, we must have a fantasized space within which our imaginings can take place. Britton (1999) calls this space "the other room" and relates its origins to primal scene phantasies:

The other room of the imagination comes into existence developmentally when the primary object is believed to continue existing in its perceptual absence. It is the place where the object spends its invisible existence. I think it is conceived inevitably as in relationship with another object which is a condition of existence. The 'other room' is, in other words, the location of the invisible primal scene. (Britton, 1999, p. 8-9)

In "Getting in on the Act: The Hysterical Solution," Britton (1999) revisits the case of Anna O to propose that hysteria involves an unconscious phantasy of "mounting the stage of the primal scene theater" in order to become one or both members of the primal couple. Britton meticulously uses what is known of the Anna O case to demonstrate the way in which the dynamics of this internal phantasy were played out with Breuer. Taken together, Britton's ideas imply that the emotional basis for the capacities of observation and imagination are Oedipal in nature, and profoundly influenced by infantile vicissitudes of primal scene phantasy.

### **The Capacity for Observation with Respect to L, H, and K**

While Britton (1999) focuses on the impact of the "refusal of the primal scene" on the transference-countertransference relation, I would like to expand upon the impact of this refusal on the patient's relationship with him or herself and the difficulties which flow from it. The primary difficulty concerns the capacity to observe one's internal life of imagination, phantasy, and feeling. In a previous contribution, I have discussed this capacity in terms of what I call the "collaborative relationship with the Unconscious Other" (Rather, 2001). The term "Unconscious Other" is meant to signify the subjective experience of an internal foreign presence from which dreams, parapraxes, and other spontaneous phenomena are felt to emanate. While calling attention to the necessity of working through anxieties that form obstacles to collaborating with this internal presence, I explored these anxieties primarily in terms of the early Oedipal relationship with the maternal object. Here, I extend my exploration to Oedipal phantasies in which the Unconscious Other is experienced as a combined parental object defined by the unconscious conception of primal scene dynamics.

For the infantile subject, the fundamental emotional challenge of primal scene phantasy is being excluded from the primal couple and all that they might be imagined to

be doing with and to each other. Humiliation, hatred, envy, fear, and resentment at being excluded are states that must be tolerated and contained in order for the observing position to be established and maintained. When this position cannot be tolerated and accepted, what are the alternatives in phantasy and what impact do these alternatives have on the L, H, and K links?

The first alternative, described by Britton, is to “mount the stage” and join the action by taking the place of one or both players. This insistent bid for the total possession of love (L) is the phantasy enacted in the unfolding of the erotic transference. The subject refuses to accept the boundaries of the primal couple in the Oedipal situation and imagines or insists on being part of the analyst’s loving. The familiar protest that the analytic relationship is “not a real relationship” can be understood to mean that the analytic relationship it is not the relationship of primal love, which is the one really desired. The inevitable slide from dyadic “work group” (Bion, 1961) to the demand for love in the erotic transference has characterized the hysteric’s relationship with the analyst from Anna O forward. Britton provides us with a means of understanding the latent phantasy that underlies the analysand’s enactment in the erotic transference. As such, he has shed light on the vicissitudes of the L link in the Oedipus Complex, based on the phantasy of projecting oneself into the primal couple’s relationship rather than remaining as an observer.

### **The Minus K Link**

I would like to suggest a second alternative in phantasy. Rather than mounting the stage to project oneself into the action, an alternative means of refusing the primal scene is to destroy the theater altogether. I am proposing that this constitutes a movement toward minus K, eradicating knowledge of the primal scene by annihilating the psychic space in which it could be known. In this regard, it is interesting to note that the

descriptive diagnostic features of hysteria have always included phenomena which may be understood as consequences of attacks on K. Consider, for example: *la belle indifférence*, in which the gravity or import of a situation is dismissed; *fausse reconnaissance* in which there is a conviction of remembering something that never happened; and *pseudologica fantastica* in which outrageous untruths are told with seeming conviction. Furthermore, the impressionistic and global cognitive style of the hysteric is frequently noted as a diagnostic feature (e.g., Shapiro, 1965). In sum, we see avoidance of curiosity, untruthfulness about what is, and a lack of precision and certainty in observing and conceptualizing. Concomitantly, there is a resistance to letting anyone else observe and know something about oneself that one does not know, a resistance which includes an attack on the analyst's function and knowledge. Freud (1915/1958) noted this when he emphasized that the erotic transference is not only an expression of a wish, but also a resistance to the analytic task of acquiring insight. The following disguised and composite case material illustrates these dynamics in minus K.

### **Clinical Illustration**

Ms. A, a self-identified lesbian woman in her late fifties, presented with anger in the wake of being left by her partner of many years. In the opening phase of treatment, she was intent on persuading me of the injustice she had suffered, but it took some time to formulate more precisely what was distressing her. What gradually became clearer was that while she could tolerate losing her partner with the expectable difficulty, what she could not tolerate was being "left in the dark" about the inner workings of her partner's mind and heart. None of her partner's explanations about why she was dissatisfied had satisfied Ms. A, and every attempt to "get to the bottom of things" left her with new unanswered questions. My eventual suggestion that there might be a part of her partner that was ultimately unknowable was deeply disturbing. She insisted on her right and need to know and put subtle but continuous pressure on me to use my expertise to discover

what was going on behind the scenes in his mind. This situation was not resolved but faded with time as Ms. A moved into a state of nonchalance and “La belle indifférence”, only occasionally dismissing the fact that understanding her partner had ever mattered so much.

The therapy shifted to long-standing issues of discontent, primarily Ms. A’s inability to imagine and create for herself a life in which she felt passion and conviction. Her career and recreational life were characterized by fits and starts, loss of interest, abrupt changes in direction, and an atmosphere of frustration and ennui. She felt she had spent her life “spinning her wheels” never accomplishing anything, and she conveyed a pervasive sense that nothing could be consummated. Her previous experiences in treatment were consistent with this dynamic; she could get just so far before losing interest and dropping out.

A similar situation eventually evolved in our work together. As the impetus of the initial crisis faded, Ms. A found it difficult to move forward in treatment. She knew that she was “expected” to explore her inner world, but all of it seemed rather ordinary and uninteresting to her. When she did come across what she regarded as an irrational or childish thought or feeling, she berated herself for being so immature, and focused immediately on getting rid of such feelings. When she dreamt, she was particularly disturbed by the process of dreaming itself. She approached her dreams in a state of irritation and mild outrage that such improbable, “absurd” images and feelings could be occurring in her mind.

Generally, she responded to my attempts to reflect upon the nature of her experience with ruminative qualifications of whatever words, phrases, or metaphors I used, even if they were originally her own. It was as if nothing could be said by either of

us without it being qualified, balanced with its opposite, or negated a moment later. Often, she would dismiss what she had just been remembering or thinking about by saying that she was “probably just making it up.” All of this made it virtually impossible to arrive at a “selected fact” (Bion, 1962) which would stand still long enough to be observed with curiosity or yield knowledge. In the countertransference, I often observed myself attempting to back her into a corner like a prosecuting attorney trying to confront a hostile witness with the psychic facts. If I succeeded and an interpretation was made, whether by her or by me, Ms. A evaded its impact by emphasizing that, although it “might” conceivably be true, it was ultimately impossible for either of us to know anything for certain.

Ms. A’s preoccupation with her body emerged gradually. She was grim and fanatical about exercise, determined to eliminate body fat and keep as slim as possible. She lamented what she called the burden of “hips, breasts, and hormones” and wished that her body were more male. Although she rationalized this in terms of health, athletic prowess, and the cultural idealization of the “hard body,” there were many indications that she was waging a campaign against her concept of femininity (the “f” word she once quipped). In this case, the battleground had been moved out of the mind and into the body. Ms. A also engaged in periodic excessive drinking, and, sometimes while intoxicated and alone, engaged in ritualistic bouts of cutting. My concern about the inherent danger was also met with a classic *la belle indifférence* and she dismissed any attempts to link her behaviors with affective states. Characteristically, Ms. A insisted that none of her activities had symbolic meaning, and my most tactful suggestions that there might be subjective meanings, or processes outside of her awareness, were met with subtle forms of hostility.



Eventually she began dreading therapy and showed great reluctance about revealing more of herself. She was gradually able to acknowledge that she hated therapy because while it required “spilling her guts” to me, I revealed nothing private of myself. This, she felt, unfairly gave me the upper hand in “lording what you know over me.” Mutual self-disclosure, as among friends, provided a sort of “balance of power.” When I suggested that she might also be bothered that I could observe or know something about her before she did, she told me this was an impossibility. According to her, no one could ever know something about another person before that person herself. In short, she objected to me observing her, thinking about her, and knowing her.

It was the nature of Ms. A’s infrequent references to her family background that suggested difficulties at the level of primal scene phantasy. She was the only child of parents whom she described matter-of-factly as “typical parents and normal people.” She had grown up and left them behind, and it irritated her that I might think their influence persisted in any way. Although she humored me by describing her relationship with them, they emerged on the analytic stage as exceptionally bland two-dimensional players, as sexless characters with no passionate libidinal connection. She couldn’t imagine why they had ever married. They existed as discreet individual entities in her mind, and their physical or romantic union as a couple was inconceivable.

In terms of the phantasies under discussion, Ms. A’s dynamics could be formulated as follows: Ms. A’s fundamental response to the pre-conception of the primal scene is not the phantasy of becoming one of the primal couple, but rather “destroying the theater” altogether in an attempt to annihilate that which could be imagined and observed. The destruction of the theater results in the collapse of the triangular internal space described by Britton, and therefore a collapse in Ms. A’s capacity for observation and imagination.

The impairment in imagining something taking place in the “other room” is reflected in Ms. A’s difficulty accepting the existence of unconscious processes occurring “outside” of her awareness. This makes her dreams very disturbing in a manner separate from their specific content. That is, the very fact that she stands outside her dreaming mind is felt as an affront which leaves her trying to peek behind the curtains. The same impairment makes it difficult to enter poetic, symbolic, metaphoric communication. In the transference, I am experienced alternately as attempting an “intercourse” with her dreaming mind, or as engaging in my own internal mental intercourse as I reflect upon her. In either case she feels small, humiliated, and shut out. Concrete thinking, a rejection of subjectivity, and premature foreclosure of self-knowledge protect her from these feelings. This not only impacts her capacity for self-observation, but also her capacity for being observed. Her hatred of the primal couple is projected into me, and she then fears that I will observe her with judgmental contempt. Being observed is felt to be humiliating and is accompanied by a sense of powerlessness. (Retrospectively, we can better understand the complexity of Ms. A’s initial attempts to couple with me in focusing our attention on observing the inner workings of her partner’s mind.)

As Bion suggests, the dynamics of minus K result in the shattering of the primal couple as a pre-conception. Bion suggests that, in such cases, the analyst will find not a full-blown Oedipus complex, but the shattered pieces of the primal couple. In Ms. A’s case, several dreams eventually appeared in which the latent content shows her reluctantly coming to terms with the existence of the primal couple.

Dream 1:

She is observing her parents’ anniversary and a celebration is taking place. For a reason that wasn’t clear, everyone needed to go to the party in two separate cars. At the party, her parents were seated casually on the floor as if it were a 60s

hippie setting. This seemed rather shocking in the dream as she always thought of her parents as stiff, conservative, utterly non-sensual and “the opposite of free love.”

This dream suggests the need to split the primal couple and keep them separate (in separate cars). At the same time, it hints at intrapsychic movement towards reintegration in which their “loose” libidinal link can be imagined (a “free love” celebration).

Dream 2:

Her parents are admitting to her that they have had affairs. Her mother admits to a passionate fling with a popular singer whom Ms. A had always dismissed as trivial and unimportant.

This dream, which consciously disturbed Ms. A because it represented such an improbable “absurdity,” showed an unconscious development of the capacity to observe her mother’s sexuality and the potential for a passionate link with a man. The fact that the singer’s first and last initials were identical with mine constituted a thinly disguised transference link in which I was placed as the father in the primal couple.

Dream 3:

She is with her mother and a previous male therapist. It seems that Ms. A and the therapist are on the verge of an affair. A female voice tells Ms. A she should forget about the therapist because he is already married.

Dream 4:

She is observing her father on the couch and a young woman is laying across him. They are kissing. Ms. A notices that this woman is dressed in very feminine fashions that she herself holds in contempt.

These last two dreams, with their transparent transference references, indicate that the primal couple and its exclusionary boundaries are taking shape in Ms. A’s psyche. Along with this, the phantasy arises of “getting in on the act” by projecting herself into her mother’s place in the couple. This phantasy involves the reintegration of a split-off

feminine side of herself that is now projected into the primal scene to arouse her father's passionate love. This dream material suggests that only after the shattered pieces of the primal couple begin to reassemble does the phantasy of becoming one of the primal couple become possible. Clinically, one would predict that this should manifest as a shift from the annihilation of knowledge (-K) in the treatment to a bid for love in the transference, which in Ms. A's case did gradually occur.

Regarding the last two dreams, I would like to further hypothesize that Ms. A's issues with her female body and her quest to be "more male" relate to primal scene dynamics. What does it take to tolerate gender differentiation? I would like to propose that the separation of the combined parental object into its constituent aspects of mother/father and male/female is a developmental achievement arising out of a successful negotiation of the early Oedipal constellation. Sustaining the position of "observer" of the primal scene is necessary to observe gender differentiation within the primal couple and to observe oneself as similar and dissimilar to each member of the couple. This creates an emotional foundation for accepting the reality and limits of one's own gender, a foundation which cannot come into existence when the refusal of the primal scene impairs the observing function.

### **The Dialectic of Imagination and Observation**

The capacity for imagining and the capacity for observing may be distinguished in terms of the phantasies underpinning each activity. The creation of the "other room" of imagination is based on the absence of the primal couple, while the infantile subject bears the absence. The capacity to observe, by contrast, is based upon the presence of the primal couple, observed from the infantile subject's excluded position. However, I want to propose that these capacities for observation and imagination exist in dialectical relationship. In the realm of phantasy, we are always observing what we can imagine, and

always imagining what is there to be observed. When the primal scene can be imagined, it can be observed; when it can be observed, one's imaginings can be further elaborated. The development of the dialectic between observation and imagination evolves throughout life. This evolutionary movement is reflected in Bion's (1963) Grid. However, as Britton has pointed out, "the other room" of imagination is the room where the object exists in its absence, so imagination in dialectical relationship with observation depends on separation between subject and object and the ability to tolerate the object's absence. In this sense, one could say that the capacity for imagination and observation will coincide with the depressive-position ability to recognize the separateness of the object -- in this case the combined parental couple.

### **Concluding Comments**

In this paper, I have proposed that when the phantasy of "mounting the stage" of the primal scene theater is in ascendance, the patient's most obvious conflicts will be concerned with loving and being loved. By contrast, when the phantasy of "destroying the theater" is in ascendance, the conflicts will center around attacks on K.

If there is anything comparable to a "cure" offered by analysis, it is not in the eradication of phantasy, primary process, neurotic passion, or defensive maneuvering, but more in the increase of psychic freedom that flows from the capacity for observation, imagination, and management of such psychic activity. For the infantile subject, a sense of humiliation must be supplanted by a state of humility in accepting one's position both with regard to knowing and with regard to loving. One must accept that some things are, at least for the moment, unknown or out of reach. The subject cannot possess all knowledge nor all love. This means sustaining a depressive-position realization that one cannot have everything, whether it be love, knowledge, or gender.

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