

Infant Observation and Child Psychoanalysis

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Abstract

How did Infant Research and Infant Observation contribute in Child Psychoanalysis, and how much could they give to Child Psychotherapy? From pioneering ideas of Esther Bick to Italian Psychoanalysis' precious contributions, we deepen Infant and pre-Infant Observation topics addressed by the main authors from the Italian Psychoanalytic frame.

Key words: infant observation, participant observation, early misunderstanding, postnatal anxiety, emotive atmosphere

About the observer:

“He must let something happening and holding out against someone else. Instead of being active in the family, adding his personality to the organization, he must let the parents, particularly the mother, adjusting in the home familiarity, in its way.”
Esther Bick

Infant Observation, the child and family direct observation from the birth until the two years of the baby, has always been the preferential instruments approaching to the somatic and mental development of the young child, and an important instrument to discover mother/baby's emotional and interpersonal patterns. In any academic psychoanalytic training, this kind of experience is considered essential to enrich Infant Psychoanalytic knowledge background.

Direct Observation has been a precious instrument for Anna Freud, Winnicott, Spitz, Kris, Bowlby, Mahler, Sander and many others, they all dealt with children and set up several methods of experimental observation for the young child, such as observational room, controlled observational condition, combined, when necessary, with recordings. Especially Anna Freud, with Dorothy Burlingham left us very careful observations of spontaneous child behavior in the war nurseries, where the contact with the ten days old babies lasted throughout the war. The observational plan considered floating attention and the footage was pursued throughout; the object of the observation was represented by the effects of an early separation from the mother, by the feeding habits, by cleansing manners, by sleeping routine, distress, etc.

Anna Freud explored mostly the psychosexual development stages impact in the child behavior and she noticed that “it was impossible to distinguish the libido stages issued the mother responses or whom was replacing her: a greedy dependence (oral), a troubled and obtrusive possessiveness (anal), a furthered seeking and achieving

attention and admiration, with a indulgent protection toward the love object (phallic).” (1989).

Later, Donald Winnicott, on the contrary, designed a kind of “set situation”, that can be summed up in his office-ambulatory where he saw baby patients. He arranged the setting so that the mother found herself sat in front of the desk with the baby on her lap and he was attracted by a metal spatula placed on the edge of the table; by the study of many babies reactions, he postulated three steps through which he evaluated baby’s reaction and if it fitted the standard. Starting from the results, Winnicott explored baby distresses and he better realized the baby initiative and exploring limits; furthermore, the mother position came up clearly, according to the reactions of the spatula situation, it showed the domestic mother-baby relationship.

In the fifties, Margaret Mahler built a developmental theory through the direct child observation, especially concerning the dyadic mother-baby interactions, naming the early-development path as “separation-individuation process” and outlining the following steps whom became the trigger of psychoanalytical discussions. Then, in her observational method, Mahler focused on the baby in the playroom, where two or more observers watched the mother and the baby playing, through the unidirectional looking glass. The baby was free to play in the room and, in the meanwhile, the mother, in an adjacent room, could have open access to his child; the interesting thing was that the observers could also interact and play with the baby, having a more active role.

It’s been seventy years from the introduction of the direct Baby-Observation method in 1948 by Esther Bick (1902-1983), inside the Tavistock Clinic training course in infant psychotherapist, in London. Later this practice was adopted by the London Psychoanalysis Institute that in 1960 introduced an Infant Observation in the training, and since then it spread abroad, in Europe, South America, USA, Canada and Australia.

The observation method, called “Bick Method”, is longitudinal and take a cue from the Klein’s theorization on mental and emotional early processes, focusing on young child and mother-child relationship in the family. The observation concentrates on the study of the baby interaction with the environment and it notices the specificity and the uniqueness of the baby relation with the primary environment. In not unusual that the observer catches relational crisis in its tracks, when the developmental moment of the baby and parent’s internal world suffers a setback or a difficult moment, that can often be fixed by the environmental resources, while other times may lead to discomfort in terms of somatic and emotional issues.

Baby Observation represents the stricter psychodynamic approach, because the integral part of an observation is mental attitude of the observer and participant listening of the emotions. Despite the baby is the privileged observation “object”, the observer can’t ignore the relationship between the baby and the environment, especially mother’s feedbacks.

Brief historical introduction on the Method

According to Ester Bick methodology (1964), the Infant Observation consists in observing, once a week for an hour, the newborn development inside the household, from the birth (or before, meeting the pregnant woman) until the baby is two years old. The observer must report what comes out from the observation, being careful not missing anything. The report must be read, discussed and processed during the supervision in group composed by the specialized group leader (psychoanalyst or baby observation experienced psychotherapist) and other observers. The method is organized in three steps:

- 1) baby observation in the family;
- 2) following observer's reports;
- 3) supervising work discussion seminar,

We need to proceed analyzing the observation report from an inference level to a formulation of constructs, that gives meaning to the observation moments leading to a dynamic comprehension of the dyadic interactions. This is called "participant observation" because the observer sets himself neutrally and participant, at the same time; he is the witness of the situation uniqueness, keeping the focus on what he experienced. Several feelings and emotions arouse in him and in who's been observed (mother – child – father), and they enrich and forge the observer's knowledge. The observer has the privilege of taking part to early mother-baby moments, he has the chance to intercept the intimacy of these memories that the mother chooses to share, making a gift to the observer.

It's the observer's counter transference and its consequential analysis that lay the direct knowledge's foundation of the development, because they help to pick the emotional meaning of interaction and behavior. Infant Observation allows to deeply understand a newborn as a subject in his daily live (breastfeeding, on mother's lap, changing the diaper, vocalizing, with or without the mother, with the father, with brothers and sisters, with grandparents, etc). Infant Observation gets us in touch with the newborn existential angst, his crisis through his life, often overcome by the suitable or not cares from the environment.

Observation researchers concerning personality and social skills development refer to the Infant Research methods and lay the foundation for clinical studies, being valuable links through observational methods and psychoanalytic technique.

Martha Harris, one of Bick's coworkers, working also in Italy, insisted on the precious work made by the discussion seminar; the group as the perfect place for the newborn's mental development hypothesis processing. Harris claims that the seminar group is the moment when the observer faces his observing prejudices, his involvement in the dyadic relationship and his improvable subjective observing-skills. The group offers to the observer interesting food for thought about the baby development and growing theories, and also about improving to remain an impartial

observer, avoiding to interfere with the material. The interesting thing is that the observer doesn't create an experiment but he grabs the material into the slice of time stolen by the dyadic relationship. The observation sequences are repeated many times, so the observer could see several times baby responses, questioning about meanings and obtaining useful answers to the infant development and dyadic relationship training.

Infant and Pre-Infant Observation in Italy

Infant Observation in Italy was introduced by Lina Generali Clements in 1971, with the famous article in *Rivista di Psicoanalisi* "Observation as a studying method in Infant Psychiatry". The Generali's pioneering work mostly consists in having introduced the newborn observation in Italy, giving the stimulation to an entire class of psychoanalyst and researchers. In an Interview she declares: "around 70's and 80's there was a trend of asking and also applying psychoanalytic treatment for a wide range of psychological and psychiatric disorders, a trend that has later watered down. My first patient was an eight years old boy with learning difficulties, expressing himself principally by drawing. The best help for me was the observation practice, whose Freud was been a promoter earlier. For many years, all along my working time, I lead observation seminars (mother-baby observation), ran under the Esther Bick method. I think that learning the observing technique with this method is a baseline for a psychoanalyst; not for nothing, the Infant Observation training is part of the academic in the British Psychoanalytic Society and also the foundation of Tavistock teaching in London. It's a very hard work, emotionally demanding for who is running the training and for the trainee. What have I learned by my work? I have no doubt: respect, appreciation, gratitude of all parents, lucky or unlucky; with their courage and resolve they are part of life. What have I learned on us like human beings? It might be better, but it could be worst!"

Originally, Lina Generali Clements brought Infant Observation in neuropsychiatric training in the *Università Statale di Milano* and so in the psychoanalytic scenario (1978-1984) both as regards private sector and the *Centro Milanese di Psicoanalisi* with a psychoanalysts group from all over Italy (such as Dina Vallino, Gina and Franco Mori, Giusi Tirelli, Giuliana Boccardi, Antonino Ferro, Franco Borgogno, Barbara Serrati and many other), whose studies focused on the comparing mother-baby relationship in Infant Observation against the psychoanalyst-patient relationship on the couch.

Pre-Infant Observation was firstly studied by the pediatrician Gina Ferrara Mori, president of the *Osservatorio della Maternità Interiore*, one of the main Research and Prevention Group, originated from the integration process of Infant Observation and the psychoanalysis focused on the mother-baby relationship, which starts long before baby's birth and reveals itself in experiences and mother's mental representation.

Dina Vallino commented on Gina Ferrara Mori work: “The importance of Gina Ferrara Mori’s internalization comes from the developing of the “internalized motherhood” construct, very important to identify internal psychic links concerning “caring” to baby, or to someone in general.”. The psychoanalytic work of Gina Ferrara Mori let her early establish maternity blues’ signs, that may lead the mother to do not care for the baby (for example, depressive symptoms are clearly defined in pregnant dreams emerging from psychotherapy or psychoanalysis), but it enabled her to a cultural retelling of many intrapsychic, interpersonal and social obstacles that come with becoming mother. One of the Osservatorio’s first prevention is the “participant observation” and the listening of the mothers to be, turning the Osservatorio’s training professionals in a new social service climate for pregnant women.

Monique Bydlowski, a well known French scientist, has few times used the Pre-Infant Observation technique to comprehend mental processes during pregnancy. During the sessions came out a preventing and premonishing mood of the newborn’s world, and sometimes it was predictor of future balances break. Monique Bydlowski introduced the word “internalized motherhood” concerning the pregnant women’s internal truth that today is more and more obscured by of the physical processes and medical procedure, and also all the material and consumer requests offered to women. Other Osservatorio’s scientists consider “internalized motherhood” in a more relational meaning, closed to internalized object and internalized world of Melanie Klein’s ideas. Becoming a mother and assuming internalized motherhood and caring skills for the real baby, the pregnant woman passes through a transformation of the Self and her internalized world, into which is creating a new three dimensions internalized site where the baby can be accept in mind as well as in the womb. In this internalized site we can found many objects linked together in a complicated way: the mother to be gets in connection with a baby-herself and a adult-herself, with her parental characters, with especially her mother, during a backward journey through early infant experiences; she relates with her external end internalized partner’s character; the baby in forming as a new internalized object. Osservatorio’s scientists claim that Bick’s infant observation is the mother-baby relationship observation after birth, while the Pre-Infant Observation concerns the mother-baby/internalized object relationship before the birth. The internalized motherhood developing during pregnancy, set the motherhood with the real baby after birth and it could point out clearly any mother’s illness symptoms. Many studies in Italy, attachment for example, show the link going between “before and after” birth.

Monique Bydlowski argued: “(...) the mother-baby dyad’s gestures are a biologically determined smooth dancing, as an emotional deal which the young mother’s feeling and fears pass through”. The according moments are uneven, but they represent the mutual founding of deep emotions and baby personality’s core. Bydlowski changed up all the theories that consider the pregnancy as a psychological crisis, offering us the “mental disclosure” and “life debt” ideas, key words to understand the

psychological process within a pregnant woman through baby-project and image-baby, and also through the real motherhood after the baby birth. Psychological disclosure is related to a lowering of usual resistances used against the removed unconscious and marked by her personal issue and infant conflicts hyper-investment. Is important the mental representation plasticity focused on narcissistic polarization. Bydlowski claimed “(...) concerning human progeny, an unconscious life debt matches entities, in an intergenerational chain, with their parents, ancestors (...) for the future fathers and mothers this gratitude duty, this life debit, is the pivot of giving life”.

Recently in Italy, Dina Vallino, gave her contribution to Infant Observation and “participant counseling” with parents, pregnant women and new mothers during their support. From the beginning, she argues the importance of Infant observation, adult clinical work and Child Psychoanalysis connections: “since the psychoanalytic theory is not self-sufficient, it needs to be contaminated by other subjects, such as Infant Observation that enriches or refutes psychoanalytic discoveries.”.

Dina Vallino introduces the concept of “Emotional Atmosphere” referring to embryonic mental conditions that we learn to feel during the course of an Infant Observation. “I call Emotional Atmosphere the baby family’s emotional mood, that arises in voices, motions, sights, sound tones, even in the Observer’s physical feeling” sets out Dina Vallino, trying to clarify not declared, but present, feelings in the mother-baby relationship, that seek Observer’s attention and represent emotional atmosphere, made by feelings, fragmented sensations, not easily translatable in thoughts. They are very important for observer’s impressions, who can report to the group and the group leader what he felt, so that the group can understand the emotional atmosphere of that moment. The observation’s emotional atmosphere is essential for the material’s comprehension and management. Dina Vallino insists on the emotional and proto-mental integration between mother and baby, and, since first months, the baby is ruled not only by the mother’s availability to catch his emotions, but also by the baby’s chances and skills to make himself understood by the mother; Vallino continues claiming: “for proto-mental experience I mean a psychic experience closely linked to somatic processes and still pre-symbolic”. In many observations, the mother shows her need to “know” something more about the observer’s role or some baby’s information, feeling anxiety that brings her to ask for advices and assurances from the observer. Through a careful observation, the observer would pick up when the mother misunderstood baby’s questions or requests. In her observer’s experience, without modifying observation’s rules, Dina Vallino, with brief comments, draw mother’s attention to baby’s behavior, helping her understanding baby’s reactions. The mother was grateful for this and was capable to make the baby feeling better. In other Infant Observations an evident mother’s misunderstanding toward the baby showed up immediately.

Vallino's consideration on early misunderstanding stems from the observation itself; in her experience she notices that the most elementary misunderstanding is between the mother (or attachment object) and the baby, when she attributes the baby something that's not him. Mother's misunderstanding is inevitable, it's life part, and a sane baby is accommodating, ready to forget and most of the time capable to tolerate mother's flawed responses, except where the misunderstanding is "malignant" and repeated. Not being understood immediately, doesn't cancel baby's capability to affective impetus with extra-verbal communications restoring the relationship. In case of intolerance, low attention, empathic deprivation or even aggression for the baby, a baby's communication disorder shows up.

Sometimes, during the Infant Observation, the repetition of misunderstanding by the attachment objects make the baby unhappy and angry due to his not feeling understood and listened, and it may cause acting up with suffering and a consequent distress in reintroducing needs or requests. Dina Vallino, in one of her papers, presents an observation's case in which "postnatal anxieties" are evident. During the observation the mother was giving the bottle to feed a 1 month and 23 days baby, but he shows suffering and distress, because it's different from the breast, and he is wailing with poor appetite and not being able to fall asleep. In this case, the mother, after few unsuccessful attempts, tells to a careful Dina Vallino that he will feel safe and calm if she get him in fetal position as he was during the pregnancy: in fact he falls asleep after a while. In this case the observer admits "The mother should get the baby to a previously experience of body contact with her, which replicate the intimacy in the womb. The union with the mother is found again and the breast separation is not an annihilation danger for the baby any more. "(...) the mother replies hanging him from the shoulders and keeping him in her arms, such as if the communication with her body is like a border to him, she is his protection fence."

Dina Vallino also studied distress anxiety and defenses in infants, especially about baby endurance capability of being separated from mothers' arms, making compares with adult patient as part of separation. The concepts of emotive atmosphere, misunderstanding and mother rêverie seen as Bion does: as a fantasy, contemplation, daydreaming. "Rêverie refers to an open mental state to receive all objects from the love object, the state of mind able to receive baby's projective identifies, regardless of the fact as he feels them good or bad." (Bion 1962, pp.73-75), they all are items helping understand rapidly what is happening during the analysis session with the baby and the family, and they could be a relevant starting point for an infant psychotherapy and a participant counseling.

In a Dina Vallino and Marco Macciò interview, they claim that in Infant Observation reports we don't find a primary narcissism baby as Freud said and Winnicott and Mahler supported but it's not even the Infant Research baby, fused and undiversified from the mother. They talk about "O", the last truth designed by Bion as the knowledge close to the truth, and being last truth, it cannot be known, objectifying like in K transformation, when the therapist offers explanation and inner facts

interpretations. They face also the fusional impulse as primary love. “I mean corporeal love, gravitational pulling baby and mother bodies together; the mother body has to get the baby body (that’s because, according to our reenactment, mother *holding* is the response to a baby’s need): Winnicott saw holding as a mother function that the baby cannot recognize. Family observations point out holding as a mother love response, also corporeal, to a baby request of corporeal love, it’s a real communication between them in this regard. This concept has an history in Italian Psychoanalysis. Family observations made us admit the neonatal fusion fact. Referring to jealousy, of which Freud speaks, Vallino and Macciò claim that it comes out during the first year of age, often it manifests itself with trouble in baby falling asleep, who runs in the parents’ bed in the middle of them, imposing the centrality of his loving body; internal and external conflicts will come out. Vallino and Macciò, continue talking of the dyadic fusion: “The fusion was defined by the Psychoanalysis as a baby undiversified sense and primal narcissism. The infant Research theory highlights that the baby undiversified sense doesn’t exist and it denies the neonatal fusional impulse. In short, the baby is diversified from the mother, so he cannot be fusional. The fusional dimension, so clear during the baby’s first month of life, so important for both, the baby and the adult, is thus deleted by Stern and Infant Research. Assuming the fusional impulse’s existence, we can untangle the knot. In my opinion, we have to distinguish two life situations. When the baby desires with fear and trembling the corporeal fusion with the mother, he feels diversified, separated, split, so well divided from the mother and there is suffering; when the mother takes the baby in her arms he feels fused with her, and because of this the baby’s Ego blossom in its potentials (based on age).”

Infant Observation was essential to investigate baby early defenses, already set out by Melanie Klein, such as projective identification, idealization, denial, splitting, omnipotent control, which are staged to protect Ego when they resist to any frustration or obstacle in early sufferings; they are staged to avoid an extremely painful experience. In early mother-baby relationship, suffering is not representable for the baby, his Self is not sufficiently formed, so we talk about “primitive sufferings”. Those sufferings are not felt by the baby, his attention is denied, temporality is broken, paradoxically “out of time” and omnipresent, “present”, source of pressure. Hallucinations could arise, violent acting out, dependence, psychosomatic disorder and multiple conditions. The baby cannot miss to feel endless falling anxiety, Bick in fact spoke about the baby fear of “loosing in space”, to crash (Houzel, 1995), to liquefy (Tustin, 1981), unthinkable anxieties (Winnicott, 1958), nameless terror (Bion, 1962). This primitive agonies (McCarty, 2004; Mellier, 2006) come out through all the health and pathology conditions. They have hard counter-transference effects because this suffering is connected with a concomitant Ego breakup, with a real traumatic situation. In contrast to loosing anxieties considered as an Ego alarm (Freud, 1926), these are prior to Melanie Klein’s depressive anxieties,

before separation anxieties (Bowlby, 1969), in particular at eight month's studied by René Spitz (1965). They are "out of mind" anxieties, like Bion's *beta elements* (1963). They don't have the same meta-psychological status of an intra-psychic traceable emotion, when anxiety get Ego sick.

When there is a primitive relationship with environment, we have no early suffering signal. Mother should decrypt the signal (of an early suffering), mother's mind should fully feel and live emotions before the baby, she should introduce the missing temporality. The narration represents this creating linking's attempt. Primitive anxieties should be contained by the mother first, then they could be thought by the baby. Esther Bick showed the primitive defenses that the baby erects to face this radical despair status: grapping, staring a light, tensing up, adhesive identification. She assumed a prior step to the three-dimensional projection and introjections world, a bi-dimensional functioning, or even mono-dimensional, more primitive. It's a self-defense system which may be used to, since early steps, when a containing experience is missing, so it will be hard to feel an internal or external chance of containing. The baby will look for a psychic equivalent of the skin that protect his body: he will try to recreate the sensation of "keeping together" all his personality issues. We can see efforts concerning an equivalent of containing skin creating, the one Bick calls second skin.

Bick focused her studies on early baby moments through the skin experience in first object relationships, meaning the role played by the baby skin and his first objects. Bick assumed that the personality issues, in their more primitive form, don't have cohesive skill and used the skin as a border, as an internal containing function of Self; it depends on external object introjections which manages the function end, then let the baby get though non-integration status and it origins the dual fantasy space, internal and external. Is this where, according to Bick, primary splitting and self and object idealization come into play "since the containing functions are introjected, cannot be an internal space in Self, that stop the introjection, that is the object's internal space creation. If the introjectional mechanisms aren't joining the process, the projective identification is the only one that works, so show up all the concerning identity confusions". We can submit that the primal splitting and Self and object idealization are based on early Self and object containing process, in their skin border. In the first non-integration status, the baby is driven, by a containing object need, to an object's frenetic research which is able to activate attention, so to be experienced, at least for the moment, such as a personality components' keeper together. The optimal object is represented by the nipple in the mouth, holding by the mother, with her smell and the sound of her voice. A unhealthy development during this skin's primal function could be caused by real external object failure or phantasmatic attacks stopping the projection. Primal function disorders may lead to a second skin creation, which in turn produces a pseudo-dependence, and improper use of mental functions or inborn skills, with a view to establish a surrogate skin container.

There are many ways the newborn tries to establish this defensive structure and each of these has a particular “ sticker” or adhesive quality: for example staring a sensorial object, visual (a light), auditory (a repetitive sound), tactile (being dressed up or a surface contact), muscular (strain and contract body parts), making repetitive motion (stroking, licking, dillydallying). These babies seem to keep themselves together as they have been threatened by the falling to pieces sensation at any moment. Later the tendency to remain “button up”, up and down walking, no stop talking (patter, gab), may be consequences. The “second skin” phenomenon represents a primal form of omnipotence such as a primal self preservation function. This kind of armor may protect the baby from psychic disintegration fears and panic, isolating him. Bion used the word endoskeleton to point this psychic defense which develops in trusting dependence or interiorized containing functions. Second skin may be a pseudo-independence: it is as the baby is autonomous, but in fact, at a psychic level, he is in research continues for a surface to which adhere to survive.

In conclusion, it is essential, for psychoanalytic and child developmental knowledge and concepts, making use of most cutting-edge tools, but it’s impressive how Infant Research’s direct observation is so precious to capture the mother-baby relationship aspects, which otherwise passes to the scientist’s eye; the relationship’s warm, the intimacy, emotive atmosphere, as well the early misunderstanding, and the foreseeable events for the baby during personality’s development.

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