

## **Dreaming the unthinkable, narrating the non-memory. Precursors of the fairytale as “mediating object” and as “shared dream” in the psychotherapeutic treatment of psychoses**

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### **Abstract**

In this paper the author confronts the problem of how to make communication possible in the psychotherapy of child psychoses, in cases where the symbolic capacity is seriously compromised or never structured, and the self is extremely vulnerable, without a sense of temporality, and imprisoned in a “circular time” that seems incapable of articulations and resolutions.

Through a brief clinical presentation, the idea is suggested of a “mediating object” – synthesis of the patient’s scanty and chaotic contribution and of the analyst’s *reverie* – on which to base a “transitional communication” that does not prematurely impose a separateness (implicit also in the interpretation) that the young psychotic patient cannot yet tolerate.

A clinical vignette is then presented in which the role of “mediating object” is played by an invented fairytale that is progressively improved upon by the analyst and the patient together beginning with the very first “precursors” of the tale itself, and by an “omnipresent monster” who colonizes and imprisons every potential for psychic growth and symbolic competence in the child. The author shows how the fairytale constructed within the relationship begins to assume for the child the valence of a “shared dream”, there where he still had no access to a capacity for autonomous secondary elaboration.

In conclusion, the author describes the narration of a fairytale as a “transitional” and complex relational event, and the various levels of functioning that are involved in a structurizing manner in the child’s relationship, not only with the tale itself as “mediating object” but also, and above all, with the *story-teller* as “mediating *subject*”.

**Key words:** fairy tale, mediating object, shared dream, infantile psychosis

*Protect me from the knowledge that does not cry, from the philosophy that does not laugh and from the greatness that does not bow down before children.*

Gibran Kahlil Gibran

### **The impossibility of dreaming and remembering**

The clinical treatment of infantile psychoses - in cases where there has not been a breakdown of an ego, albeit unstable, but an inability to constitute itself – seems to challenge the basic classical instruments of psychoanalytic therapy and compel the

analyst to “re-adapt” them in his clinical work. Through a very intense, primitive and comprehensive countertransference, it seems that he is called to take upon himself the gathering together of the lacerated and often indecipherable threads of an originally failed primary relationship. When the patient’s symbolic communication (verbal, but also gestural or corporeal) is lacking, is not intentionally objectual (governed by the ego), or is strongly disorganized, then, on the basis of the theoretical assumption of “projective identification as communication”, the countertransference comes massively to the forefront for the analyst as more or less the only clinical instrument of comprehension though not yet of communication: prematurely restituting to the young patient the interpretative elaboration of the countertransferential experience would in fact be “re-acting”, or rather “re-evacuating, contents that he evidently cannot yet tolerate. But while it is true that most of the clinical work with psychoses is through an often silent metabolization of the beta elements, it is also true that the problem remains of how to communicate, how to “be with” the patient, how to sustain and support the relationship, what to use in order to substantiate it in a way that is not only the disorganized/disorganizing one that the young patient knows and re-presents.

Fundamentally, there are two basic instruments of clinical psychoanalysis that in some way distinguish it from other forms of psychotherapy: the interpretation of dreams, and the re-examination and elaboration of the past in the present through the so-called transference interpretations. The use of these two instruments, however, presupposes in the patient a psychic structure that the psychotic child seems to have never achieved. The capacity to dream, the capacity to be the protagonist of a history and therefore to remember, and the capacity to develop what can be called an objectual transference, cannot be considered as presuppositions in the psychotic child, but as the objectives of the therapy; and the problem is which instruments to use in order to reach them. The psychotic child, including the autistic child who in his massive isolation in any case clings to auto-reproduced sensorial fragments of the primary object, seems to have never reached that separation or individuation from the primary object that would allow him a symbolic capacity, a historic-temporal dimension, and the possibility of accepting interpretations without feeling them as a threat or a terrible expulsion when compared with that fusion-undifferentiation that the psychotic transference demands not only in its defensive but also in its reparational aspects.

I should now like to focus on two problematic areas that are connected with each other and are, I think, fundamental in clinical work with psychotic children. I also suggest the possible solutions that spontaneously presented themselves during my efforts to confront and manage them according to my way of working.

I have considered them under the following headings: (1) the problem of a hidden and very vulnerable self, and the need for a “mediating object” on which to base what Winnicott calls an “intermediate” or “transitional” communication; (2) the “impossibility of dreaming”, and the possibility of using the fairytale – or, better,

some of its important precursors and structural elements – as a framework of “shared dreaming”.

### **The Hidden and Vulnerable Self and the analyst’s *rèverie*.**

In infantile psychoses, during very early infancy, it appears questionable to talk about a breakdown or a rupture. Rather, one would talk about something that, because of a series of complex and interacting factors, seems not to have been constituted or structured in the self and the psychic apparatus of the child in what could be called its “originary version”, but has been precociously overcome by an extremely violent and desperate reaction (paradoxically destructive and protective at the same time) when faced with frustrations and impingements felt as being intolerable. “In fact”, writes Winnicott, thereby disputing indirectly Bettelheim’s concept of an “empty fortress”, “the real self becomes immediately hidden and only emerges, if indeed it does emerge, under very particular conditions. In this type of defence, the patient transforms himself into a psychiatric hospital and the true self is a patient hidden at the bottom in some place, in a padded cell.” [My translation.]

The earlier the psychotic reaction, the more the state of the potential self, hidden and protected inside the psychosis (to use a metaphor that seems particularly to apply to autistic defence, for example) remains frozen in a completely primitive embryonic state, not yet cohesive or integrated, even before it is inevitably and actively fragmented by the psychosis itself. Creating the environmental conditions favourable for the resumption of development therefore means, in the first place, creating conditions that will enable the young patient to feel safe enough to abandon his defences and re-entrust himself to a relationship. On the other hand, the child’s self, when it is on the point of abandoning the psychotic defence, is an overexposed, infinitely vulnerable self. In one way, it is no different from the self of a newborn baby in the so-called “absolute dependency” phase; but in another way it is very different because of the annihilation anxieties already experienced by the young psychotic patient that have never been abandoned and are inevitably re-heightened by the therapeutic relationship.

Due to the obvious fact that we cannot interpret the “not yet” without first creating the conditions for it “to be”, I think that one of the specific problems in the treatment of infantile psychoses is how to reach such an embryonic and primitive self so that it can “become”, how to receive it and recognize it without at the same time defining it and/or differentiating it too much or too soon: a fact that would inevitably only reproduce in the patient’s sentiments the originary impingement. In other words, how to “reach in order to make it become” a self that, once it has abandoned the psychotic defence, appears to be and probably feels extremely over-exposed, without touching it or threatening it directly? How to help it form that “psychic skin” that the psychotic defence, and even more obviously the “autistic shell”, has substituted in such a malignant and mortiferous manner, but that seems to be essential for the progressive definition of an internal world, and how to reduce the feeling of threat that can so easily re-induce the psychotic defence?

Winnicott (1963a) writes:

“At the centre of each person is an incommunicado element, and this is sacred and most worthy of preservation. (...) The traumatic experiences that lead to the organization of primitive defences belong to the threat to the isolated core, the threat of its being found, altered, communicated with. The defence consists in a further hiding of the secret self, even in the extreme, to its projection and to its endless dissemination. Rape, and being eaten by cannibals, these are mere bagatelles as compared with the violation of the self’s core, the alteration of the self’s central elements by communication seeping through the defences. For me this would be the sin against the self. We can understand the hatred people have of psycho-analysis which (...) provides a threat to the human individual in his need to be secretly isolated.” (p.187)

Winnicott wrote at length, on the theoretical plane, about those transitional phenomena in the area of which the communication is made independently of the fact that the subject - according to the particular moment or the more general developmental needs – may place himself in a position of greater or less fusion or separatedness regarding the object; phenomena that range from the primogenial creation of a potential space between mother and baby, to playing and cultural experiences. He also spoke about “intermediate communication” as that type of communication typical of playing and centred precisely on transitionality, that at the same time guarantees the secrecy and the protection of the central self, but also the joy of experiencing the true self in that – I quote – “sophisticated game of hide-and seek in which it is joy to be hidden but disaster not to be found.” (p.186)

In the clinical work of Winnicott I think that the simplest and happiest concrete realization of “intermediate communication” is represented by the “squiggles” in his *Therapeutic Consultations* of 1971: those kind of “a-bit-you-a-bit-me” drawings in which the analyst and the patient collaborated in an “interweaving of fantasies” and an alternation of contributions, and in which the actual page seems to intentionally represent the intermediate area or potential space.

Concerning the psychoanalytic treatment of infantile psychoses, “squiggles”, although they are in fact useless because the patient’s contribution is minimal and chaotic, seem to me to be a useful metaphor for describing a certain way of relating to the “not yet” of the child’s self in order to “help him to be”; or even more so as a metaphor for a certain way of recognizing and relating to the “little that is already there” or to what is “about to emerge” in the relationship without naming it directly and therefore “digging it out” and forcing it again into extreme defence.

In re-examining Bion’s concept of *reverie* in a personal way, Winnicott (1987) writes:

“Bion uses the word *réverie* to cover the idea that I have stated in the complex way that it deserves: that the infant is ready to create something, and in good-enough mothering, *the mother lets the baby know what is being created.*” (Letter of 26 October 1964 to John O. Wisdom.)

Paraphrasing the quotation, it seems that here Winnicott wants to indicate a capacity for *réverie* (on the part of the mother but also, in the context of therapy *with subjects of the developmental age*, on the part of the analyst) *that specifically includes a dimension of the future*. In this complex sense, as Winnicott understands it, the *réverie* would be substantiated not only in a “metabolic” process (transformation into *alfa*) of the unthinkable and painful contents (*beta* contents) that the child really puts into the relationship *in the present*, but also, and at the same time, in the recognition of something that, although *more or less “formless” and not necessarily painful*, is about to emerge as the *child’s “creative contribution” to the relationship itself*: a contribution, however, that only through recognition and acceptance on the part of the other (this is the re-mirroring phase) can acquire for the child the “depth” and “consistency” of a *subjective* psychic experience. This would therefore be a function of *réverie* that could also be defined as a “*dreaming loan*” of *psychic functions and competences within a temporal orientation (towards the future)*. All this - so complex to express on the conceptual level - is basically none other than what takes place *naturally* during the so-called phase of “primary maternal preoccupation” between a mother, who is sufficiently free of anxiety and worry, and her baby. For example, when she smiles at him *long before* the baby is able to understand or to produce a really “sociable” smile; or when she speaks to him *long before* he is really capable of comprehension or “linguistic” production; when, in a kind of “narcissistic hesitation” that is the opposite of invading or projecting, she naturally leaves spaces within the rhythms of her own “dreaming dialogue” for a “reply” on the part of the baby that at first is only a “potential” and “dreamed/imagined” (“*revée*”) reply. This type of “primary dialogue” that the mother naturally offers to her baby is described exceptionally well in the various observational works of Daniel Stern (1985, 1995). He emphasizes not only the relational origin of the individual psyche, but also, and more specifically, how the mother, through her “dreaming dialogue”, contributes to the progressive development of the baby’s *sense of temporality*.

Working with psychotic children inevitably leads the analyst to *these* levels of the relationship, because it is here that the original trauma is inscribed, experienced by the infant not only as “annihilation anxiety” but also as “rupture of the continuity of being” (Winnicott), and therefore as the *collapse – or non-structurization – of a subjective sense of temporality*. At such early (or regressed) levels, however, temporality must above all be understood - at the level of experience of self and of subjective “psychic competences” - as a capacity to “bind/link”, i.e. *integrate*, the various states and experiences of the self. At first, this function of integration is offered (or “loaned”) naturally to the baby by the mother through her *holding* and *réverie* functions; but, for extremely complex reasons regarding the traumatic history of the mother as well as the particular constitution of the baby, something seems to have failed, in infantile psychoses, precisely at *this* level. Work with psychotic children therefore requires on the part of the analyst a particular capacity for *réverie* that, as I have wanted to emphasize, regards not only a sharing and a “metabolization” *in the present* of anxieties that are sometimes extremely distressing,

but also – and on this point the theory has been less insistent – the “dreaming loan” of an intentionality and a temporality oriented towards the future that is capable of “*recognizing in order to make it become*” (as Winnicott would say) the child’s contribution (also creative) to the relationship.

But the “creative contribution” of a very young psychotic patient, precisely because he is *not* a newborn baby in his natural relationship with his mother, must be extricated not only from the formlessness of the “not yet” (or the “never has been”), but also from the chaos of the psychotic defence. It must be offered a strong relational “support” – in terms of a “loan of psychic functions” through a complex *réverie* – on which to base a dialogue that, like a Winnicottian “squiggle”, can establish a progressive “narrative temporality” *through a channel other than that of fragmentation*.

On the other hand, while it is true that the analyst’s contribution to the relationship must be strong and in some sense “active” – inasmuch as the relationship is specifically avoided and “attacked” and there is the risk of leaving the child alone with his anxieties - it is also true that the extreme vulnerability of the self “hidden within” (or “protected by”) the psychotic defence requires of the analyst a capacity that is apparently the opposite to being active. That is, a capacity to “hesitate” at the narcissistic level (Ferenczi, as long ago as the 1930’s, even spoke about a “*professional narcissism*”) so as not to “intrude” (impinge), violate or “dig out” a self already deprived of boundaries and of “psychic skin”.

### **The “mediating object” and the “transitional communication”**

I believe that in these cases it is fundamental for the analytic relationship to be able to produce, as its own specific “creative event” (specific to *that particular* relationship), a “mediating object” that is the outcome of the analyst’s capacity for *reverie* on the material that the patient has *genuinely* brought, even though it may be extremely scanty and fragmented, on which the analyst as well as the patient can subsequently project their own fantasies. The task of this “object” – the synthesis of the analyst’s capacity to “recognize” and *at the same time* to “hesitate” – is to carry out an *intermediary and transitional* function in the communication, allowing the child a significant affective and subjective experience (that inevitably takes place and perhaps *he has to be able to have it*, at still undifferentiated levels), while at the same time leaving his very fragile self safe from a contact that is too direct.

As long as the “mediating object” is well chosen (and for this reason I think that the “internal state” and above all the timing of the analyst is fundamental), it can act as a “bridge” for the child and as a *semi-permeable* “diaphragm” that will guarantee the experience of recognizing his own subjectivity as well as the apparently opposite experience regarding the “secrecy” of the self. In fact, it is only thanks to the very difficult equilibrium that the analyst establishes between “recognition” and “*non-intrusion*” that such a fragile child will be able to allow himself a first lowering of defences and a first “regressive re-entrustment” to a relationship.

It was the clinical history of Lorenzo, that I am going to describe briefly, that allowed me to reflect on the importance of the “mediating object” in the psychotherapeutic treatment of psychotic children.

Lorenzo, an autistic child of just over four years old, was completely devoid of verbal language or of eye contact. During the sessions, in his almost total “closure”, he carried out in a completely stereotopic manner only one kind of activity: with a pair of scissors (mimicking the noise they made with guttural sounds of his voice) he cut the various materials that were at hand – paper and pongo – into increasingly tiny pieces that he then let fall, scattering them all over the floor.

After the time had gone by that I considered necessary for the child to understand that I could tolerate – that is, survive without “reacting” – the active (i.e. defensive) fragmentation and the sense of void and of desperation that he communicated, I decided to make one *very concrete* gesture. Cupping my hands together like a nest, I held them out to him and said: “Perhaps Susanna can hold the pieces together, so they don’t all fall into empty space and get lost”. After a time he began – apparently casually - to put the little pieces of paper into the “nest” of my hands, as though he were beginning to count on my potential and pre-symbolic function of “container”. But everything continued in complete silence, in the absence of reciprocal glances, and in sudden explosions of anxiety that led Lorenzo to “re-fragment” everything, “nest” included.

One day, among the dozens of bits of black pongo (Lorenzo only used the colour black) that I was holding in my hands, I found a piece that had a rather unusual shape: it was like a tiny worm, probably it just happened by chance. I showed it to him saying, “It is so tiny, it is such a funny shape ... rather sweet .... who knows what it could be? ...”. He hesitated and seemed to be surprised by what I had said, and to the fact that I was asking him something as though attributing to him a capacity for thinking. L. looked at it for a long time, screwing up his face in a typically autistic grimace. Then he relaxed, looked at me with great excitement and answered, or rather shouted, “Pente!!”. [Note: second syllable of *ser-pente* (snake) in Italian. Both Winnicott and M. Milner mention that in their work they have often come across the snake as the first symbol of very early embryonic aspects, at the self-awareness level of the bodily self. ]

I immediately felt that “Pente” was a name full of poetry, and not for a moment did I think of correcting it into “*serpente*”, which was probably what the child meant to say. I thus avoided forcing what was almost the first word of the child’s life into a vocabulary that was already known to “other than himself” and that perhaps he had refused *in toto*. “In the blackness”, I said, “we have found Pente! Perhaps we can take him out, we can save him.” “Pente!”, L. repeated enthusiastically with shining eyes. He looked at him for a moment, between uncertainty and fear, and then with a sudden violent gesture squashed him back into the black pongo that he cut up into little pieces with the scissors, while making extremely destructive noises and gestures. “Poor Pente”, I said, “he must be feeling so unhappy!! Or, who knows,

perhaps he is so frightened that if he comes out of the blackness and then they make him fall again, he'll end up in little pieces once more."

"Pente" was Lorenzo's first word. In the countertransference it was the first poignant emerging from the "darkness" or "blackness" of the hope of a relationship, the first poignant promise of subjectivity. From this moment on, with lacerating hesitation Lorenzo continued in every session to look for Pente in the black pongo, in the little bits of cut-up paper, in my mind. He looked for him actively, and later on he actively asked me to "make him". Each time he communicated to me his terror of Pente's possible loss, or "annihilation", but also the "opposite" terror of his being found again; and his fear of what might happen to Pente once he had been "born" or was distinct and "extricated" from a chaos that, on the one hand, hid him and prevented his existence, but on the other hand protected him, although sacrificially, from the feared final annihilation.

A few months later, during an outburst of destructive anxiety, Lorenzo, spitting out in meaningless mixed-up syllables the few words that he was able to pronounce, discovered by chance – or better let me discover - that "pente", from the point of view of sound, resembled "*ponte*": "*tritta-tratta, pitta-patta, Pente-ponte!*" [Translator's note: Meaningless syllables chanted by the child and based only on sounds; but "Pente" sounds like "*ponte*" ("bridge" or "connection" in Italian) and this has an important significance in the context.] And so the "bridge" entered into our relationship; originally intended as the dismantling of a meaning, in reality it entered as an extremely significant element in its own right, also from an associative viewpoint, and what is more, linked to Pente perhaps in his very function of mediating object in the relationship.

For the first two years, Lorenzo's therapy gradually came to consist of the increasingly loving care of Pente who, each time, the child asked me to reconstruct *ex novo* or *ex nihilo*. He absolutely could not bear "finding" Pente there from one session to the next; almost as though he must not – or could not – have an autonomous existence outside the concrete contingency of Lorenzo's relationship with me. He saw him each time as its own specific creative event – a birth or rediscovery, every time repeated and renewed.

Pente – this "mediating" and "intermediary" object born of our relationship – had his own story as it was lovingly developed. At first a tiny shapeless little worm, or a kind of deaf-blind-mute embryo (just as Lorenzo, in the obstinacy of his autism, was too in some way), Pente gradually acquired – in a shared *rèverie* - a consistency of his own. He had a mouth and then two eyes; he was fed and he ate; he was washed, soaped and dried; he was cradled and sung tender lullabies; he walked along a road that each time we would build for him; he caught the train to "come to Susanna"; he crossed bridges, every time running the risk, or enacting the "tragedy", of "falling down" or "going to pieces". It seemed that the child was integrating in secret, using Pente as a bridge: as an intermediate object of communication, of love, of apprehension and of concern, of identification and perhaps of projection, and at the same time as a diaphragm (it was not Lorenzo, nor was Lorenzo ever named or

implied directly) that could guarantee the non-intrusion and the avoidance of exposure to a too direct or differentiated relationship with me.

Through his role as “intermediary”, Pente allowed us to communicate – something that had seemed absolutely impossible - at an undifferentiated and in any case “transitional” level: a level, that is, at which it was not important to distinguish and differentiate our (my and Lorenzo’s) different contributions to a shared creative process, but in which the initial link to concreteness, although necessary and even indispensable, became increasingly enriched by valences that were, by all rights, both *symbolic and relational*. The “*secret* identification” with Pente (and also – because of the still undifferentiated level – with “me-in-the-relationship-with Pente”) allowed Lorenzo an experience of self (it would be better to say “of *self-in-the-relationship*”) that the autistic defence had frozen and rendered impossible; it put into motion again the “wheel of time” from which his young life had become detached so early on.

As the therapy progressed and Lorenzo at last began to experience me as a “differentiated” object (necessary from the developmental viewpoint), his “unthinkable anxieties” re-emerged in a different form; but a good deal of the journey had already been made, and it had been possible for the trace – *between concrete and symbolic* – of a “good” experience to already be inscribed in him. He was no longer a child “outside time”.

As I have tried to show through the case of Lorenzo, the “mediating object” is a “creative event” of the relationship, the outcome of the analyst’s capacity for *réverie* on the material that the patient brings in a genuine manner. The material can be very fragmentary, slender, scanty; even, when there seems to be nothing else (as in the case of Lorenzo), an element of the patient’s *defensive process itself*, “recognized” and “reworked”, however, in a creative way by the analyst. I think it is essential that the child should be able to feel that, at some level, it is his *own* contribution that has been able to inspire the imagination and creativity (i.e. the *investment*) of the analyst, and in which the child also – between relationship and identification, between objectivity and narcissism – can secretly invest inasmuch as potential representative – *pars pro toto* – of his whole self.

The “mediating object” must be able to emerge from the analytic relationship itself, and not be introduced as a *pre-constituted* “object” imposed from the outside by the analyst (we shall see later on how the situation is very different in the case of *group therapy* with psychotic children). It is very probable, in fact, that the active suggestion of a pre-constituted object would be felt by the child as a defensive, intrusive and therefore traumatic gesture that could communicate to him only the analyst’s “intolerance” towards the void, the chaos and the anxiety; it would inevitably be inscribed in a super-egoic and de-subjectivizing register and, as such, would be contrary to the development of a promising analytic relationship.

I believe that the “mediating object” can be represented by any type of “psychic material” to which the analyst’s *réverie* can attach itself in an authentic, creative and affectively participatory manner: an imaginary character, a fantasy, a little “ritual”, a

countertransference image, or even an element of the patient's defensive process itself. In *no case must* it be represented by something that is "saturated" or too concrete and defined that would block in a potentially fetishistic way the fantasies and the investment, thus going in exactly the opposite direction to the intended one of a *first "transitional symbolization"*. On the contrary, it should be something, if possible *very elementary*, that already from the start allows for development, progressive and shared narration, the connection of the single sessions in a dimension of temporal continuity, and the subsequent linking and gradual integration between the various aspects and states of the self.

The "mediating object", as I understand it, is in reality the symbolic concretization of a creative and affective dialectic process that takes place between the patient and the analyst. This process is brought about through the synthesis of two contributions: the more structured/structurizing one constituted by the "*réverie* towards the future" of the analyst, and the more uncertain and fragmented one of the patient, but without there being any emphasis on the differentiation and the different origin of the two contributions. The child can therefore regressively recuperate the "*illusion*" of *having invented it himself*. (I refer here to Winnicott and to the natural relationship that he hypothesized at the origin between the newborn baby and a sufficiently responsive maternal breast.)

The "mediating object" could also be defined "intermediate" as far as its *collocation* is concerned. It is, in fact, situated in an "intermediate" or, rather, "transitional" space *between* the patient and the analyst, and contributes in a very definite way to the actual foundation of a similar "space" that, according to Winnicott and M. Milner, is the first matrix of the symbolic processes.

It could also be defined "intermediate" on account of its special function in the communication. The "mediating object" is the place where the fantasies of both are projected; it allows for the movement and the interweaving of investments and identifications (and also of interpretations), while at the same time guaranteeing the guardianship and "secrecy" of the child's central self.

### **The case of Marco: the impossibility of dreaming, and the possibility of narrating a shared dream**

I shall now present a clinical case in which the function of mediating object is carried out by an invented fairytale, progressively added to by patient and analyst together; it started with the first precursors of the tale itself and the very few elements that the child brought in a completely chaotic and "eruptive" state.

*In this case, the young patient had access to verbal language, but the symbolic processes seemed to have been ousted by the spreading of the primary process. It was as though, for this child, external reality and internal reality – traumatically confused between each other for lack of boundaries and a functioning ego – could in no way be "metabolized", "dreamed" or "thought"; on account of the traumatic charge, they were subjected to a compulsive "evacuation" that forcibly fragmented any*

*possible structurization of psychism from the standpoint of even temporal development.*

At the time of the consultation, Marco was four years old. His parents told me that his conception had been absolutely unwanted. They were very much preoccupied, both mentally and time-wise, with the meticulous care of their first-born baby – only 16 months older - who, since birth, had refused his mother's milk and subsequently any form of nutrition. On several occasions he needed invasive medical treatment, and in order to dedicate herself full-time to looking after him, the mother had abandoned her own profession as a medical doctor – a career that she had pursued with great enthusiasm – and probably fell into a depressive symbiosis with him. Moreover, he was invested very narcissistically; he was named after his paternal grandfather who had died a month before his birth, and who, like the baby's father, was a researcher in the field of nutrition.

The mother's pregnancy with Marco was therefore quite unexpected and "unthinkable", in an ambience that was already psychologically burdened with unelaborated aspects of depression and serious narcissistic injury and blocked up by unmanageable feelings of shame and lack of confidence. The mother told me, with relief, that she had "hardly noticed" the pregnancy, including the movements of the foetus. She then narcissistically enjoyed, at a completely corporeal level, breast-feeding this new baby "who at last did not refuse her"; but with her own mind and preoccupations and perhaps with her own narcissistic wound and sense of guilt, she remained totally "taken up" with the first baby, just as though Marco had never been born or was still part of a "gravidic self" that was repairing itself in secret, in a parasitical way. Given the serious preoccupations about the first child who was always on the brink of death, there had been no space, either during pregnancy or after the birth, for "dreaming" and then *seeing* Marco as a subject. It was as though *par différence*, the parents admitted tearfully, Marco was perhaps thought of only as an "algebraic negative", as a "not", as the one who – "fortunately" – "did *not* cause problems."

From our first meeting, Marco overwhelmed the boundaries of the setting and also, at least at first, my own capacity for thinking. Through his scenes of uncontrolled hyperactivity, he seemed to show a total and painful con-fusion between internal and external world.

In his distracted and purposeless use of the play material, it always happened that, after a few minutes of pseudo-concentration, a "monster" (not better defined) would arrive who destroyed everything, terrorized the family of dolls and threw the baby away with its cradle. Even at a chaotic and primitive level, it was not a real symbolic *representation*. The monster that arrived – it was only named – was not in itself materialized by any iconic or symbolic "support", and when it arrived Marco seemed to completely lose the subjective direction (organization) of the scene; from being the monster's prey, he suddenly himself become the "monster" and this filled him with terror. In a paradoxical, impossible and chaotic way, Marco had to escape from

himself; he began to run in all directions without purpose, desperately escaping not only from the room but also, sometimes, from the apartment.

My countertransference was total, extremely painful and itself very “concrete”. It brought into the here-and-now of the session a feeling of catastrophic danger (of the child, and also my own) that sometimes, because of his attempts to escape through the windows, extended to actual bodily survival. Trying to physically block Marco unleashed even more intense crises of physical violence, as though he felt materially forced to remain “imprisoned inside” the terrifying monster; or else as though, at that stage, I had become the monster who had reached him, captured him and imprisoned him. I also realized that, in extreme cases, my blocking him physically led to an anguish and a violence that although it was “blind” and panic-stricken was also real and was directed against a subject who was human and real (myself) - not only imaginary or hallucinatory (the monster) – and who could in any case “survive” him, being physically stronger than he was, at least at a bodily level. Very probably, this allowed him a first experience of “containment”, even though it was at such a high cost to both of us and at a still wholly *concrete* level.

The child’s movements seemed to be completely without purpose and without an object, almost a flight with no possible goal or refuge. It seemed to express a condition that I would define as “spatialized”, of total and panic-stricken immersion that could not be developed or temporally resolved. It reminded me somewhat of the “circular time” that Meltzer (1975) speaks about. On the other hand, the maniacal destructiveness of his endless flight - like a *moto perpetuo* (i.e. without time) - seemed to prevent, with its violently shaking divergence from a possible centre, even the slightest cohesion or coagulation of potential nuclei of an ego that was still inexistent.

Talking to him, or interpreting ( .... what?) served little purpose as far as the content of the words was concerned. Marco was confused; he was running away, hurling insults and abuse against the monster, himself or me (it was all absolutely indistinct and indistinguishable); he was desperately crying “Help!” without really addressing anyone, and in any case he could not hear me. Calmly and without mentioning a subject, I decided to name only the fear (“the fear is coming”); or, in an attempt to draw as close as possible to the child’s point of view rather than imposing my own as external/extraneous, to narrate what was happening *in the present* – monster included. In doing so, as I often do in these cases, I counted more on the rhythm and the intonation of my voice, and these seemed to gradually function as a sensorial modulator of the child’s basic rhythms, upset as they were by terror.

In my relationship with Marco, as far as material on which to work was concerned, I seemed to have at my disposal only my countertransference and the sense of suffering and desperation that he transmitted to me. He appeared to me to be a child invaded by monsters; by “monsters” I mean unthinkable “clusters” of violently shaking and fragmented contents that seemed to resist any temporal “putting into a story” or “putting into thought”. On the other hand, the primary process appeared to be so invasive and totalizing that he, too, seemed like a child imprisoned in a “living

nightmare” from which he could not awake. It took time, patience, and my “survival”, especially the survival of my “faith” (Neri, 2005) in a possible relationship. I felt slightly sustained in this direction by the only really relational expression that Marco used, perhaps not by chance, every time he left the session after having destroyed everything that he took hold of or met along the trajectory of his chaotic flight. As he said goodbye, he would shout at the top of his voice, with a very human and communicative sense of desperation: “Don’t shut the door!! Leave the door open.” He was afraid of being “chased away” for ever: himself, with all his (and my) desperation

Allowing for the necessary period of time for the child to understand my tolerating and surviving his destructiveness, I used my counter-transferential image of “the child imprisoned in a nightmare” to one day formulate not so much an interpretation, but, rather, a *réverie* of mine that included a dimension of the future and therefore of hope. I said to him that “perhaps all these monsters could also have been bad dreams”. Marco stopped his centrifugal movement as though he had suddenly been struck, and in a moment of surprising integration he replied: “I’m not worth anything: I can’t even dream!! ... I’m terrified.” So I suggested to him that I could hold his hand and we could try to dream together.

Robi Friedman (2006) writes: “In order to dream, there already has to be some psychic growth, which may consist of an internalization of the parental containing (alpha) function as a pre-requisite to the ability to think and cope with troublesome emotional material (...). (Bion, 1963; Ogden, 1979.) In the next stage, in order to tell dreams, there has to be the feeling that a relationship can contain the dreams told. (...) Bion made the remark about a psychotic patient, that he ‘could only dream in the presence of his analyst’ (1993, p.40).”

With Marco, what gradually developed – a long time before all this – was the feeling that the relationship could at least contain the chaos due to the impossibility of “dreaming”, without re-evacuating it with premature interpretations or “chasing away” the child himself. It was only at this point, I think, that Marco could accept drawing near to the “distant idea” of a *possible* dream; perhaps in order to better show me – but this time trustingly – how it really was *impossible*.

With this session there began what I like to remember as “the period of impossible dreams that little by little become possible”.

Everything was very concrete, very “not dreamed”. But Marco, now enthusiastic, came happily running to the sessions and announced: “Come on, let’s go dreaming!” The setting, whose boundaries Marco, until now, had continually upset (thus showing me, also at a spatial level, how it was impossible for him, under too intense and chaotic pressure, to define an internal world), began to figure in his fantasies as a “dreaming space”: a space that at last included me, too, as what could be called “substitute dreamer”.

For a long time, what Marco initially showed me (once again it was “presenting” and not “representing) was in reality only his *impossibility* to dream and even to sleep; this is what happened in his daily life too, for the child only slept two or three hours

each night. The “bed” that he chose for his very concrete *mis en scène* was very significantly *not* the soft bed in the playroom, but - outside the room (and outside my mind?) - the bare, empty, hard bath: a cold, alien container, completely refractory to any possibility of modulation or adaptation. I thought of a failure in the very early maternal holding, to which Marco could have perhaps reacted by developing, in the very early stages, some form of “shell” or autistic self-containment.

“Switch off the light, now I’m going to sleep!” Marco wanted it to be completely dark, but only to show me how that darkness was intolerable for him. In fact, after a few seconds he cried out: “Switch-it-on-switch-it-on-switch-it-on!!! ... I’m afraid of disappearing!!” He seemed to be showing his total lack of a “containing-comforting” internal object” that could sustain him in the “darkness” of the unthinkable: if he didn’t see me very concretely, then it seemed to him that he was disappearing too, in a kind of annihilation that was also corporeal. “Let’s do like this”, he said next, “that you stay here just to switch on the light.” I had to tolerate, tolerate the concreteness: he “presented”, he could not “recount”, something that is really unthinkable. I had to quickly switch on the light, in an alternation of “switch it off, switch it off: let’s *dream*” and “switch it on, switch it on: I’m *disappearing*” that really did have the feeling of a tiny fragmentation of the temporal continuity of the self.

And then one day, some time afterwards, when it seemed to me that he had enough trust in me, that I could “switch on the light”, i.e. *be there* each time, and not disappear/make him disappear into empty space in the dark, I finally said to him something very simple that alluded more closely to the affects: “You’re telling me that your fear of disappearing even breaks up your dreams.” “... But what fear!?”, he replied immediately, as though grateful: “I’m *absolutely terrified!*” He thought about it a bit and seemed to have found a clever way out: “Let’s do it so that *I sleep* and *you dream* ... But give me your hand, otherwise I’ll fall into empty space and I really will disappear.” It seemed, therefore, that as well as asking me to dream *for* him, perhaps even deeper down he was also asking me to dream *about* him, in the same way that a sufficiently serene mother can dream about her baby when he is still in the womb and before he exists objectively, thus preparing for him a vital (psychic) space in the centre of which he will be able to place himself when he is really born. This very primordial area seemed to be evoked by our holding hands like a benevolent umbilical cord that tied us together in his darkness, transforming that darkness – and perhaps also a Marco as yet “not born” – into a “possible history”: a history that, for the moment, I alone thought/dreamed about while I “held” him as he slept.

“Well, what are you dreaming about? ... I’m asleep, and aren’t you dreaming yet?” Marco was in a hurry – or was perhaps hungry – for a dream: *to be* dreamed. “I’m dreaming ...”, I replied slowly, “I’m dreaming about a child ... who is very cold ... who is very frightened ...”. “And then? ... And then?”, he asked impatiently. “And then one day he finds someone who takes him by the hand ...” I went on telling the story, not in the past but in the present. And in this way, through this “story in the present”, I tried to introduce a psychic temporality in the “outside-of-time” of his

primitive anxieties. Marco's past could not exist as the past; it was as though everything was only the present. Denis Mellier (2006), referring also to Winnicott, writes: "Some sufferings resist being given shape, or transformed into a scenario, with emotion, meaning and plot. Such is the case with the primitive anxieties, which are specific to the baby but more generally common. Like in a traumatic situation, the baby, the subject, cannot face a too painful experience; the subject 'absents himself' (...). The subject cannot feel these 'primitive sufferings' (...). Psychic time is crushed, these pains are paradoxically 'outside of time' and yet so omnipresent, current." He continues: "Narration would then make it possible to introduce a plot, a psychic movement, where suffering excludes any perception of time, any perception of a psychic link. Narration is connected here with the capacity of *réverie of Bion*." And so I found myself tying together in an elementary fashion images and sensations that were equally elementary (what I saw and what Marco "presented" to me) to form the outline of a "history" not past but present and still all to be invented.

In telling my "dream", I instinctively found myself saying that I dreamt about "a child" rather than more directly saying "Marco". Above all, I found myself using the present tense that, as well as being the tense of "certainty", when it is used to tell a story ("there is a child ... who meets ... and so he ...") can easily exclude, or leave undetermined, the details about space-time parameters. It thus sounds like a kind of "suspended", "mythical" or "fairytale" tense that can refer to the "now" as well as to the "then", to a specific child as well as to a "paradigmatic child", i.e. to "all children". It is a verbal tense intrinsically able to define a space (mental) that is different from that of ordinary reality. As I told this elementary story, linking together simple images through the use of "... and then? ... and then?", upon which Marco would ask me to continue, I purposely prefaced what I was saying with "I dream ...", or "I'm dreaming that ...". In this particular form, Marco seemed able to accept what he refused or fled from if it was more directly – or perhaps more "objectively" – addressed to him. It was as though, through this formula, he felt reassured about participating – in a kind of "benign fusion/immersion" – in something that was "mine", or at most "ours", rather than not participating in an "objectivating" comment *on himself* that would have opposed an "I" to a "you" and broken in a persecutory way the regressive fusion necessary at that moment.

My "dream" could therefore function as a mediating object, that did not necessarily impose a separateness between me and the child. The dream could speak about Marco and me, about the here-and-now of our relationship, but also at the same time about "another" and "somewhere else": about a space-time in respect of which – because it was indefinite, fable-like or transitional – Marco seemed able to place himself each time in a different way, thus regulating *by himself* and *in secret* his own tolerance to nearness, to self-definition, to objectualization.

With time, I noticed that the "switch-it-on, switch-it-on" with which the very distraught child compulsively interrupted the "dream" so that it could not develop in a temporal sense, gradually became more and more sporadic. The interruptions were more directly aimed and comprehensible, and seemed to indicate a less chaotic and

total anxiety, in any case more “constructive” than in the past; as though the embryo of an “I-container” was finally beginning to be structured, although it still relied heavily on my presence. Little by little, Marco began to trust in my ability to help him, and the arrival of the “anonymous monster” only needed for the dream to be interrupted and that I switch on the light. It was still a nightmare, but as though while sleeping, and so it was possible to wake up and ask for comfort; no longer did it require the child’s physical flight, the total fragmentation, the crises of pantoclastic violence.

Together with the arrival of the “monster” – and thanks perhaps to the progressive dis-aggregation/dis-articulation (also temporal) of its “cluster”(1) aspects – there also appeared for the first time another kind of interruption that seemed to suggest something new and completely different. As the monster, who was gradually breaking away from the chaos, referred always more clearly to aspects of anger or destructive orality, so this new type of interruption seemed to suggest for the first time a *commotion of the affects* or aspects of *excitement* that were themselves difficult for Marco to bear. “Switch-on, switch-on, switch-on!!!”, cried Marco: “I’m all red with love. Throw some water on me, otherwise I’ll burn up!” Marco was therefore beginning to ask me actively – even though at a very concrete level – for a precise function of “auxiliary-ego”.

This shared dream, born from my effort to extricate during the course of a story that “spatialized *cluster*” represented by the omnipresent, faceless monster, ended up by increasingly resembling a Winnicottian “squiggle” in which each one of us gave our own contribution to a common, shared and transitional construction. As time passed, Marco was gradually able to internalize a minimum of my “narrating” and “supplying images”. In fact, he accepted giving his own personal contribution, although fragmentary, to the “dream; and the “cluster” monster, who still remained in the background as an impending psychotic threat, gradually began to take the form of a series of more multi-faceted, differentiated, recognizable and evocative figures: ogre, dinosaur, devil, shark, zombie, terrifying mummy. (Perhaps not by chance, considering the family history, these were figures characterized, on the one hand, by anger and oral instinctuality not “metabolized” by an adequate *réverie*, and on the other hand, by depression/de-animation.)

“Come on, let’s go and dream!!” Now it was he who began the dreams, always leaving it to me to untangle the threads of a possible solution, about which he was extremely curious. Exactly like the beginning of a real fairytale (Propp, 1966), but for the first time talking (unconsciously) also about himself, Marco always suggested some kind of pre-announced unsolvable catastrophe. By now he was secretly confident that I would include it as I told the story, and in some way work out how to solve it, even though only through that playful adventure, or the “trial thinking”, that by now had become our “shared dream”. Every time I suggested a solution, he magnified the catastrophe, almost as though challenging me – I don’t know whether in “holding” or in creativeness. But in the meantime the dream continued from one session to another like a temporal uninterrupted thread that joined our sessions

together; it formed a kind of serial story that, with its own associative auras filled and repaired the void and the fracture – the darkness, as it were – of our separations. Apart from the “pre-announced catastrophe” and the “supplementary catastrophes” with which Marco filled our story as it went along, all the images and characters that he suggested as his own contribution had, in any case, a psychotic and omnipotent quality. So, with the characters that I suggested, I tried to modulate or counter-balance – outside of and before any possible interpretation – the more catastrophic or omnipotent aspects of Marco’s proposals. Just as in a real fairytale, I suggested heroes who were not super-human, but who could interact, in that “special space” where this is possible, with those who were super-human, thus offering to the child a first identificatory support that was trustworthy rather than psychotic or delirious. By this, I mean an identificatory support that would respect his objective vulnerability as a little, dependent child, but would at the same time (as in a “*réverie to the future*”) “lend” him subjective resources. So Marco put the monsters into our dream and I “countered” them: he would put in a giant dinosaur, and I would slip in a “clever little flea”. As an example of a character that I invented on the spot, Marco liked the clever little flea very much and it soon became a *very, very secret* identification object. Marco more or less “pushed the monster to the forefront” because he was afraid of too openly giving up his psychotic defence, but I noticed that he kept a close hold on the clever little flea, smiling furtively – as though reassured – when the flea came back again into the dream having survived the various monsters and the various catastrophes.

As time passed, together with the non-omnipotent heroes I gradually began to introduce their feelings as well by personally giving voice to them (“*I feel so angry that I want to break everything*” ... “*I feel so sad that I want to cry*” ... “*I feel in my heart that I really need .....*” ... “*I feel so afraid that I would like to have with me here ...*”). This was my way of offering to Marco the possibility of a cross-identification (“I am you/you are me”) that was silent and secret. It seems to me that sometimes this is the only way to gain access to the feelings of psychotic children, when an interpretation is not possible because their feelings are not yet “subjective” and therefore “contactable”. Denis Mellier (2006) writes that primitive sufferings “... overwhelm the psychic space; they are repetitions ‘outside of time’. They are not appropriated by an unconscious, which produces dreams. They call into question the possibility of being transformed into a plot.”

With the introduction of feelings, we were by now in reality well outside the fairytale world that, in its occult mission of “secondarization”, is never openly concerned with the internal world of the personages (Propp, 1966). Marco, however, did not exclude these sentiments from our dream, but appeared to be eager and curious about them, probably with the implicit deceptive certainty that “... *anyway, those feelings were not his*”.

It was exactly during this period that he began to get out of the bath-couch a few minutes before the end of the session, very intentionally – and now politely – interrupting the dream and asking me for soap, broom and brush because he wanted

to “*help me clean the bath before going away*”. Probably he wanted to “clean away” his “monsters”, his anxieties, his chaos and aggressiveness (or destructiveness), thus showing that he had reached a very first capacity for concern (Winnicott) or reparation (M. Klein): a capacity that I have come across on other occasions in psychotic children, expressed when it first arises in such a concrete way. Several times, in what could now be called symbolic play, Marco arrived at the session with a whole team of “cleaners” (almost as though he wanted to indicate quantitatively the entity of his anxieties, anger and sense of guilt): cleaners who were all none other than the non-omnipotent heroes of our dreaming. Among them, in the front line as “team leader”, was the clever little flea of his first most secret identification. “He has a heart of gold”, Marco told me, “and he wants very much for you to have a nice clean bath!” And perhaps (who knows?), through this personal contribution” to my “wellbeing” he was re-living/repairing in the transference – but this time joyfully and affirmatively – a difficult beginning in which he probably felt that, through his own birth, he had not been able to “comfort” and “repair” his parents’ depression.

### **Comment: the fairytale as “mediating object” and as “shared dream” in the psychotherapeutic treatment of psychoses**

The story of this “shared dream” is the story of the first two years of my therapy with Marco, and it is the only way I have found for contacting and holding onto this child who is so violent and desperate.

I think that this psychotherapy is interesting because the attempt (and effort) to construct a therapeutic relationship starting from the chaos of the attack against the bond and from the imprisonment of the child in the “circular time” of psychotic desperation *coincides*, to some extent, with the attempt to construct a fairytale with its own temporal articulation, starting from *one monster only* (apparently *not articulatable and “spatialized”*) and trying to unravel the threads of the tangled knot that it represents. In this clinical process, the “construction site” of the relationship somehow coincides with that of the fairytale; and the fairytale itself, *that here occupies the place of “impossible dream”* is constructed following as far as possible the typical guidelines of the traditional fairytale, beginning with its most elementary “precursors”: in first place, and for a long time, simply the voice that narrates and - long before the “narration” in its fullest sense can really be used by the child – calms, contains and “modulates”.

The fairytale, whose origins are lost in the mists of time, was “normalized” or “institutionalized” years later by being written down (“in the masculine”, as Raufman (2007) would say). I believe that it all originated with a maternal voice that narrated and soothed, perhaps even before a true or full comprehension of the content was possible. The “first fairytale”, or the “evolutionary precursor” of the fairytale in the development of the child and the mother-child relationship, is perhaps the lullaby that, not by chance, is present in all cultures. Although it possesses words and narrative concepts, the lullaby, like a real fairytale, functions first of all as a “sound envelope” that soothes and reassures, contributing decisively to the constitution of the

very first “*moi-peau*”. Denis Mellier (2006) writes: “One could (...) distinguish a primary narration from a secondary narration. The first would relate to the construction of the first containers of the subject, his envelopes. The second would relate more to the process of historicising by which the subject becomes aware of his own history.”

The story of the psychotherapy with Marco, therefore, seems to show how the telling of a fairytale – with all its repertory of images, actions and “links” – can gradually become a valid mediating object that is able to “deputize” *from the outside*, *at least at first*, for those “oneiric processes” that are almost absent in the psychotic child. It can allow for the gradual internalization of: (1) a “space for dreaming”, a very first metaphor, and therefore precursor, of an “internal psychic space” that at first, as in the normal development of a child, must be able to be “transitional” and thus “*shared*”: (2) a narrative structure that can “link/connect” (and also “contain” and “put into shape”) different and fragmented states of the self; (3) “dreaming” itself, above all in the sense of *process*, or capacity for secondary elaboration.

“Dreaming”, as Bion says, means not only having night dreams: it also means being able to metabolize (or dream) *the experience of reality while awake* (internal states of the self *plus* external reality) so that it does not remain totally external/extraneous and *therefore* traumatizing in the form of an *impingement*, but is somehow *appropriated* for the purpose of constituting the subject’s history. The capacity for dreaming, continues Bion, is an extremely sophisticated acquisition (usually spontaneous and unconscious) that, as do all the basic processes of subjectivity, has its origins in the very early relationship between the baby and the mother: and it is an acquisition that, subsequently internalized, at first needs to be supported by the function of *réverie* that the mother carries out for the baby.

Gianni Rodari – not a psychoanalyst, but one of the greatest modern writers of books for children – describes with surprising accuracy the complexity of that “integrated relational event” that is the telling of a fairytale, and the multiple “levels” involved in it.

Rodari (2001) writes:

“First of all, the fairytale is, for the child, an ideal instrument for keeping the adult with him. (...) While the gentle stream of the fairytale flows quietly on between them, the child can finally enjoy his mother at his ease, observe all the details of her face, study her eyes, her mouth, her skin ... (...) He willingly lets himself be distracted from listening – for example, if he already knows the tale (...)

His mother’s voice does not only speak to him about Red Riding Hood or Tom Thumb: it speaks to him about herself. A semiologist could say that the child is interested, in this case, not only in the content and its form (...), but in the substance of the expression, i.e. the maternal voice, its nuances, volume, modulations, its music that communicates tenderness, that solves his worries and chases away the ghosts of fear.” (pp.140-141)

One has the feeling that in the structure of the fairytale the child contemplates the structures of his own imagination and at the same time fabricates them, constructing for himself an indispensable instrument for knowledge and the control of reality.

(...) For him, the fairytale is as serious and real as playing: he needs it for involving himself, knowing and measuring himself. For example, measuring himself against fear. Everything that is said about the negative consequences that the “horrors” of the fairytale could have for the child – monstrous creatures, terrifying witches, blood, death (Tom Thumb who cuts off the heads of the ogre’s seven daughters) – does not convince me. It depends on the conditions under which the child meets, so to say, the wolf. If it is the mother’s voice that evokes him, in the peace and security of the home, then the child can defy him without fear. He can “play at being afraid” (a game that is significant for the construction of the defence mechanisms); certainly, it would only take father’s strength or mother’s slipper to chase away the wolf. (...)

If, on the other hand, the child feels the agonized fear against which he cannot defend himself, we must conclude that the fear was in him already, before the wolf appeared in the story: it was inside him, in some conflictual depth. The wolf is therefore the symptom that reveals the fear, not its cause ...” (pp.142-143)

As a plain and expert teller of fairytales – and outside of any more strictly psychoanalytical conceptualization or language – Rodari seems to describe here with unexpected richness all the complexity of the “negotiations”, “exchanges” and “permutations” that the telling of a fairytale puts into motion between the child and the mother-narrator, as well as the various levels – from the deepest unconscious emotions to the almost corporeal, but cohesive, level of the self, of the psychosensorial “envelopes” – in which these negotiations can involve the child, in a process of gradual integration.

The specific “place” of these permutations is that “transitional space” that the fairytale – by suggesting through its initial “Once upon a time ...” a “somewhere-else *suspended* and *special*” – inaugurates purposely, or *re-proposes* and *facilitates* every time between the child and the mother-narrator, or a therapist, who is able to function in a regressive-undifferentiated serene but always vigil manner. Inside this space, the demarcations between me and not-me, between imagination and perception, between illusion and reality, and even between primary and secondary process, are returned blurred, permeable and “gradable”. The child can silently and secretly measure himself against those aspects of his own internal world that the tale itself puts “into form”, “into motion” and – through the happy ending – “resolves”; and that the mother-narrator “*presents*”, *filters and modulates through her own psychic competences as an adult: real competences, but also imagined and projected by the child according to a need* (the beautiful “wolf” that Rodari speaks about, “chased away with the mother’s slipper”), *that she calmly and imaginatively accepts in the truest psychic sense of loving and protective support to a nascent ego.*

The mother-narrator presented here is not, for the child, the Winnicottian “mother-object” or, rather, the mother – subjectively differentiated and *potentially persecutory*

(or “retaliatory”) – of drive excitement. But she is (and this is how she offers herself to the child) a “mother environment”: that is, a mother who is capable of suspending the imposition of herself as differentiated object (in the context of therapy this is what happens *also* through the interpretation), thus allowing the child to have moments of quiet and of return to the non-integration/non- differentiation, a regressive entrusting to an environment (or “object-environment) that he feels can modulate the drive “emergence”. “While the gentle stream of the fairytale flows on between the two”, as Rodari expresses it, underlining also the psycho-sensorial element of the narration, “the child can at last enjoy the mother *at his ease*, observe all the details of her face [and ...] willingly let himself to be distracted from listening.”

Through a “permutation of functions” and a play of “cross-identifications” that only a transitional functioning can permit (in reality, the transitional space is basically also the product of an extremely sophisticated method of psychic and relational functioning that the mother, or the therapist, spontaneously puts at the child’s disposal), the mother-narrator – evolutionary heir to the “primary mirroring” mother – thus takes upon herself a function of object-presenting. In this case, however, the function seems to concern the internal more than the external world. By accompanying and supporting the child, she protectively “ferries” him between conscious and unconscious, between imagination and perception, between projection/expulsion and subjectivizing appropriation. She helps him to articulate or “narrate” *by releasing it in a temporal development*, the maelstrom of drive excitement and psychotic anxiety that is sometimes so violent and quantitatively “spatialized”, as in the case of Marco, promoting in him also the gradual construction of an ego through the internalization of a containing/metabolic function.

In reality, the traditional fairytale, by merit of its most characteristic contents (only *apparently* happy and light-hearted) seems to offer itself as a mediating object that is particularly suitable for encouraging in the child a similar “ferrying” between conscious and unconscious, imagination and reality.

The symbolic figures and metaphors that it typically uses, in fact seem to put into motion, narrate and solve the anxieties and ubiquitous phantasmes of infancy, whether they are drive anxieties (especially oral but also anal and phallic) or of the affects (the initial theme, omnipresent and always resolved, of abandon and helplessness). Moreover, at the level of its constructive processes, the traditional fairytale makes full use of the mechanisms and “rules of thought” more typical of so-called secondary elaboration (censoring, displacement, condensation, use of symbols, etc.): the same that, in the child as in the adult, preside over the formation of the dream, with which the fairytale has much in common (see also Raufman). In this sense, thanks to their possible internalization, the fairytale constitutes for the healthy child, and even more so for the psychotic child, a first “experience of awake dreaming”, i.e a first “external precursor” of the dream with its valuable integrating potentiality. “One has the impression”, writes Rodari, “that in the structures of the fairytale the child *contemplates* the structures of his own imagination and at the same time *fabricates* them.” Thanks to the good-*versus*-bad polarization (a simplification

that, however, meets the needs of infantile thought), to the guaranteed “happy ending”, and above all to the censorship (*basically also a form of “modulation”*) that, in the fairytale, always vigilates over the unmasking of its deeper contents, the child can allow himself a first structured/structuring approach to his own unconscious contents and, through more or less unconscious identifications, a first “protected” and “dislocated” experience of subjective truth.

However, as Rodari himself emphasizes, the bare content of the fairytale *is not in itself sufficient* to provide integrating and therapeutic potentiality for the child. The wolf in the fairytale, to take a symbol that is paradigmatic of the unconscious urging of drives, *in any case frightens* the child; and, especially in pathology, fear also means anxiety and disorganization. Bringing again to the forefront the indispensable element of relational mediation, Rodari writes that everything “*depends on the conditions in which the child meets, so to say, the wolf*. If it is the mother’s voice that evokes him, in the calm and security of the home, the child can defy him without being afraid.” In order to be able to perform its fundamental therapeutic and integrating function, a “mediating object” – even the most valid, as the fairytale can be, *in any case* needs a “mediating *subject*” with which it can be shared, in a transitional space that the mediating object itself helps to found.

To use a metaphor that well describes the dream (Freud’s “guardian of sleep) from the nightmare that “breaks” the dream and the ego’s ability to preserve it, the wolf in the fairytale, if left *alone* with the child, could easily “come out of the tale and come into the room” if there were not someone there who could be trusted to chase him away, tame him, or “make a pact” (*psychic pact*) with him, thus filtering the direct impact on the child.

And so it is not only the bare “content” of the fairytale that has integrating and therapeutic potential for the child, but the relational event of the narration itself on the part of a story-teller. As guardian, filter and narrator, she places herself on the threshold between two worlds that are as yet not connected to each other on account of immaturity or defence, and enables the child to “protectively experiment” fear and drive anxiety. That wonderful “playing at being afraid” of which Rodari speaks, that already in itself speaks of a transitional and shared space within which to experiment the anxiety in the context of its own containment, thus allowing it to be gradually reduced and controlled through the progressive internalization of a modulating function – necessary premises for a future expansion of the symbolic capacity of the ego.

It is only in this sense that, thanks to the indispensable function of modulation/containment that the mother offers in her role as story-teller, the fairytale can constitute for the child a first “awake” oneiric *experience*, and a first “external precursor” of a *subjective capacity* to dream. As is the case of every other fundamental acquisition of the human psyche, this capacity, too, needs at first to be able to “lean” on a containing and comforting external relationship that subsequently gradually becomes internalized.

In *The Basic Fault* (1968), Michael Balint, arguing with the Freudian hypothesis of a “return to the primary narcissistic stage” while asleep, says that in reality one always sleeps in the presence of an internal object. I think that this theoretic hypothesis very well explains the absolute impossibility of psychotic children to dream, precisely through the absence of a containing/comforting object (for example, the case of Marco).

I think that “shared dreaming” is in any case indispensable in the therapy of *any* psychotic child. By “shared dreaming” I mean, at a more overall and metaphoric level, the regressive restoration in the therapeutic relationship of that “phase of very early illusion” or of “non-separatedness” that Winnicott considers essential for the healthy development of the infant. In the case of the psychotic child, the “phase of illusion” has certainly failed at the origin; and because it is developmentally rooted in the “shared illusion”, there is also a failure of the subsequent constitution of a “potential space” or “transitional area” between the child and the mother; an area inside of which the “me/not-me” separatedness could be graduated in a non-traumatic way, thus preparing the way for the development of symbolic competence. In fact, Winnicott and also Marion Milner (1955) say that it is the place from which those symbolic processes start that are so deficient in the psychotic child, who often appears to be totally “prey” (as Marco was) to the primary process. To me, this does not seem to be too different - at least as far as this discourse is concerned - from saying, perhaps in a more Bionian way, that in the psychotic child there has been a failure of the “alphabetization” of the sentiments made possible by an adequate “maternal *revérie*”.

Also the “Pente” of my relationship with Lorenzo was basically the product of a “shared dreaming”; and exactly like the “shared dream” with Marco, it was at the same time a “mediating object” with a “transitional” function.

With Marco, I could not find any other solution or means of access except our “awake dream”; and perhaps every single psychoanalytic therapy, apart from the internal setting of the analyst and his hopefully solid and stable theoretic reference points, is also, each time, *a special encounter*.

In constructing and “dramatizing” the dream with Marco, I was certainly helped by my familiarity - almost an inveterate internalization of their structure and morphology - with the traditional fairytales that the young neurotic patients ask for in continuation, and with the characters (witch, ogre, wolf, devil) on which they often “base” their as yet uncertain symbolic competence that is, in any case, easily fragmented by anxiety. They use them as well-tested “containers” that guarantee in advance a “happy ending”, and as places for projection (of others and “thirds”) that, as such, are more reassuring compared with relationships of real dependence that could - at least in the imagination - be endangered by the *conscious* subjective appropriation of what they feel as “wild” impulses.

I think it is worth noting that when the young patient is unable to dream (e.g. in psychoses), or has insufficient symbolic competence to organize contents and very early psychic impulses in images and representations (of words but also of affects), or

in cases where the anxiety is so violently urgent that it cannot be “secondarized” or “put into a dream”, then the common patrimony of traditional fables and fairy-tales can provide the analyst with an extremely useful and reliable tool for building an “intermediate area” or a “space for dreaming” within which, between narcissism, objectuality and undifferentiation, the young patient, with the help of the analyst, can begin to try out the possibility of a first containment and a first temporal articulation, or “putting into narration”, of chaotic disorganizing and “spatialized” impulses.

On the other hand, I think it should be pointed out that the use that can be made of the fairytale as “mediating object” and “shared dream” in the treatment of child psychoses, in my opinion is very different in the context of individual and of group psychotherapy, starting from the specific problems that the reality of child psychosis presents to the analyst in managing the therapy.

One of the greatest difficulties - and greatest risks - in the clinical treatment of child psychoses regards knowing: (a) how to choose between and “graduate”, from time to time and from one period to another, respect of the patient’s defences and anxieties that alone can give the patient the feeling that the analyst can tolerate and contain, and therefore also comprehend and share, psychotic anxiety and chaos; and (b) how to “actively propose” himself – this is to some extent necessary in order not to leave the little patient alone with his desperation, but it can also be dictated by a countertransferential reaction to an inevitable feeling of uselessness if not, more directly, of anxiety.

Within an individual psychotherapy, when he actively suggests material, images and figures that can help and support a first temporal or narrative organization of what I have described as unthinkable “cluster anxieties”, I think that the analyst always runs the risk of a subjective “going adrift that is potentially projective, narcissistic, maniacal and anyhow defensive. This attitude, together with the intense countertransferential reaction that psychoses always provoke, could end up by reproducing in the child’s feelings aspects of the original trauma.

This is what I mean by trying to underline how, in a similar therapeutic context, the “mediating object” *must in no way* be imposed from the outside, like a pre-constituted plan that would inevitably be felt as being “extraneous” and “intrusive”, or in any case *functional for the defensive equilibrium of the analyst; but it must be sought for within the material brought by the child, through a very sophisticated rêverie on the part of the analyst: a rêverie* that can leave with the patient the “illusion” (in the Winnicottian sense) that it is his *own* subjective contribution to the relationship, and this is also true *in part*.

In an individual psychotherapy, I think it is *in any case* useful and necessary for the analyst to have a good knowledge of the traditional fairytales (see also Raufman, 2008) and especially of their morfo-structural regulations. He is thus able to construct a “narration” – usually original – that “binds together”, articulates, and can “counterbalance” in a non-maniacal and defensive manner (as I have tried to show in the case of Marco) the more psychotic, omnipotent and catastrophic aspects of the

scanty material that the young patient brings so chaotically, and to form a kind of “counterpoint” or “adhesive narrative” *long before an interpretation is possible*.

I think that when working *with small groups* of psychotic children the situation is very different – if not the opposite. It is a type of clinical work of which I have not had much direct experience, but excellent examples can be found in the “fairytale atelier” of Pierre Lafforgue and, in Italy, in the work of Susanna Messeca and colleagues (2006).

In those cases where the “mediating object”, and even more so the “shared dreaming”, form part of a project designed for use with several children who are different from each other, and where the sharing acts as “membrane” and “adhesive agent” of the group and as “circulation factor” for shared affects and thoughts (or *proto-thoughts*), I think that, thanks to its universal trans-cultural elements radicated in a “collective unconscious” of which it is also a witness, and the fact that it is a “model of secondary elaboration” that has been tried out and tested for centuries, the fairytale can offer itself as a guarantee absolutely without equal while at the same time preparing the children’s access to a “shared childhood culture”. And this is even more so in the case of a group of psychotic children for whom socialization is, almost by definition, one of the areas of functioning that has been more generally compromised.

As a kind of inversion of the normal “group processes”, *in this case I think* it must be the “mediating object” itself that generates the formation of the group, rather than the opposite (that would not be possible). *In this sense, the traditional fairytale, by presenting itself as a “shared (certainly in this case) dream”, can facilitate the dis-latentization of anxieties in the context of the gradual internalization of a “setting of narrating thought”, that already in itself is the conveyor of “modulation”, “binding”, containment and defence processes that are not dysfunctional: a setting within which the fragmentation (of the group as a whole and of each single child) can function and be “re-signified” thanks to the indispensable mediation of the group leader, also as a “plurality of associations” to a “shared dream” as an aid to progressive integration.* Although for the time being they may be simple “concrete associations” or *acted-out reactions*, often disordered and anxious, on the part of various children in the group, they are valuable occasions for the leaders to “accompany” the group in understanding how and to what extent each child – even more so because psychotic – can act-out/present the disassociated or split aspects of self of each of the others.

### **Concluding with a “beginning”**

I should like to conclude now with a beginning, so as not to forget how, with psychotic children, we are first and foremost narrators - and we must therefore be able to narrate.

Claudia is eight-and-a-half years old. She is in her second year of therapy, three sessions a week: serious borderline with marked autistic traits. Whether she likes it or not (and in her omnipotence, she certainly does not like it at all), she has made a very strong bond.

After our separation for the Christmas break, she runs agitatedly towards the room without even looking at me or greeting me. She runs as though she feels that *even the room* could have “disappeared”. She grabs hold of her pencil, all covered with tooth marks and congealed saliva, and points it dangerously towards my eyes crying: “Today you are my slave! Write!!!” She has missed me, I had broken up the fusion: now she must be able to control me. However, to interpret at this moment would be like fleeing from guilt, from recognition of the *legitimacy* of the need. To interpret would be, above all, to *underline and confirm* the separateness that she is not able to tolerate. “I said write!!!”, she cries. “What?” I ask. To my great surprise she answers: “*a story*”. I make a mistaken comment; I am not yet tuned in to the depth of her desperation: “Perhaps we can write it *together*.” Claudia replies, shouting: “Bitch! *I can’t do it! I don’t know how it ends!* Write!!!” How it ends, “she has known” in reality for eight and a half years. Perhaps today, for the first time, she is hoping not to know it in such an irrevocable way. After all, she has in any case found me again. I write while she dictates. She doesn’t know how to write: she is dyslalic and completely dyspraxic. So she dictates and I write.

“*Once upon a time there was a egg – that its mother nobody knew who it was. But the little puppy managed very, very well – even so. But one day a nasty bird – kind of a dinosaur – stole the egg away – just to be bad – ‘cos he wanted to make an omelette. But ‘cos the nasty bird was very vain – and he flew very high up – he opened his beak. And the egg fell down – with a big CRACK (“write it big: ‘a big CRACK!’”). It fell into hundreds of pieces – in a country that was .....*” [She hesitates. Then in a small voice says:] ... *strange*. [“Strange” in Italian is “*strano*”. Because she is dyslalic, she pronounces it “*cciano*”, exactly how – if she wanted to use the word - she would pronounce “*sano*” which means “healthy”.] “*It was the country of poor people – that a woman lived there – a poor thing – called Nonus....*” She stops here. It is *here*, when faced with Nonus *who is me* (Nonus – nobody, the nullity, the “poor thing”) that she *doesn’t know how it will end*. “... Now you go on”, she orders me. “Perhaps ...”, I hesitate. She shouts: “You go on, if not even the room will go CRACK!! You go on, if not I’ll break you into pieces!!!”

A thousand interpretations inside my head, an entire manual. Perhaps they mask my fear of not knowing how to continue adequately. But all I have to do is continue the story: a question of life or death, a question of “collapses”, balancing on the edge of a giddy precipice, I must be able to go on. Urgently – when Freud is no longer of any help.

I must know how to “bend down” towards the world of the child (she has thrown me to the ground, “a poor thing” like herself, with the broken “egg” in front of me) *rather than* “raise up” that world to the heights of an intellect that “understands and translates” but, by so doing, avoids the need.

We are the narrators of stories that are not written, catastrophes that are not remembered but that “run around in circles” always looking for a different ending.

## Notes

1) In dodecaphonic music, the word “cluster” defines an aggregation of disharmonic notes played all together, thus purposely breaking up the melodic musical line and creating a “noise” that has a lacerating and static effect, like an irruption of non-music.

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