

The emotional value of narrative and Infant Observation

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Abstract

Narration is defined between these two limits, historicizing and observation. Every narrative tends to be transformed into a history, every narrative is based on sensorial data and on the observation of others. Psychic temporality suitable for narration would not yet be that of historicizing, nor would it be the temporality of attention or observation. In this communication, we advance the hypothesis that narration introduces a kind of psychic temporality into bonds in order to face the "outside-of-time" of very primitive anxieties.

Using clinical data from work with babies, we regard the narration as a capacity of *rêverie* (Bion) that acquires an emotional value in intersubjective situations. First, we explore the "present moment" (Stern) and the relationship between narration and primitive sufferings, in order to differentiate the narrative process from historicizing. Secondly, we study the Esther Bick's method of infant observation. The time of observation is used to develop the observer's capacity of *rêverie* the group can contain and transform primitive sufferings by the work of "associating different points of view". An example illustrates our thesis.

Key words: Narration, reverie, associating

Narration is particularly related to the process of historicizing and the process of observation. On one hand, every narrative tends to be transformed into a history. On the other hand, every narrative is based on sensorial data and on the observation of others. In this communication, we will seek to show how narration is nonetheless distinct from history and from observation. Using clinical data from work with babies, we will show that narration acquires an emotional value in intersubjective situations. We advance the hypothesis that narration introduces a kind of psychic temporality into bonds in order to face very primitive sufferings. Psychic temporality suitable for narration would not yet be that of historicizing, nor would it be the temporality of attention or observation.

Narration is distinct from historicizing. Historicizing makes it possible to find the meaning of a recognized suffering, and here the time of absence and of representation is possible for the subject. Narration tends to recognize a suffering when the representation of absence is not yet possible for the subject. The question of narration thus arises in an acute way for bonds characterized by suffering, in particular for infants. When a person cannot verbalize, feel and even recognize his own suffering, narration can enable him to remain in contact with himself and others. The narrative can become a response to these sufferings while introducing

by means of its rhythm, its sense or its dynamics a psychic temporality, which is cruelly lacking for the subject. Narration would make it possible to introduce a plot, a psychic movement, where the suffering excludes any perception of time, any perception of a psychic link. Narration is connected here with the capacity of reverie of Bion (1962), as many authors have shown (Hochmann, 1990; Ferro, 1996).

Narration is distinct from observation. Paradoxically, the practitioner's narration relies on both his attention and his observation, because the value of the observation depends on his very descriptive and faithful noticing of attention and perception. This intermediate time makes possible the emergence of a psychic time. The psychoanalytical approach of infant observation according to Esther Bick (1964) develops attention to the psychic life of the baby in his family and tends to contain the primitive sufferings, which emerge in this group. This method depends on specific procedures, which give access to very diffuse sufferings, while using the purely descriptive time of observation, not narrative.

Thus historicizing, narration and observation appear to us to be three quite different processes. First, we will explore the relationship between narration and primitive sufferings, in order to differentiate the narrative process from historicizing. Secondly, we will study Bick's method of infant observation to show how the time of observation is used to develop the observer's capacity of reverie. An example will illustrate our argument.

Narration is defined between these two limits, historicizing and observation. Therefore, we highlight its value as a kind of emotional and intersubjective weaving.

I. Narration in the present: containing primitive anxieties

The concept of narration includes the idea "to make known, to tell" which comes from the Latin root *narrare* (Rey, 1990). In psychoanalysis, Roy Schafer (2004) promotes narration. He introduced this notion by criticizing the mechanical language of metapsychology. He is interested in the "language of action", which appears to him to be more suitable for the session. He currently highlights the importance of three actions that are inseparable: attending, empathizing and narrating. Narration is a part of a larger process.

Jean Laplanche (1998) defines narration as a defensive function, following the example of the dream with the "secondary elaboration" or the "problem of intelligibility". Narration is more connected to a story than to a verbal association. For other psychoanalysts, like René Diatkine (1989), René Puyelo (1999), Jacques Hochmann (1994), access to narration became a dimension of the care, in particular for autistic children in an institutional setting. For them, the reference to the capacity of reverie of Wilfred R. Bion (1962) is often very explicit. Let us recall that the alpha function operates on very archaic levels, at the edge of psychic time.

One could thus distinguish a primary narration from a secondary narration. The first would relate to the construction of the first containers of the subject, his envelopes (Anzieu, 1985, 1987). The second would relate more to the process of historicizing

by which the subject becomes aware of his own history (Aulagnier, 1976). Narration, story, and history are not interchangeable words, contrary to what their use in sociology can imply (Squire, 2005).

In early caregiving, the mother speaks to her baby and she constructs with him a narrative in which he is the Hero. Later the child will be able to take his place in this story. With babies, narration is part of the containing function of their own psychic space. This dimension is central as authors like Daniel Stern (2004) or Bernard Golse (2004) have noted. We think that this point is important because the infant sufferings cannot be recognized and held without others and without associative and narrative bonds. In this case, the question of creating a link "in the present" with the infant is necessary in order to recognize and to feel what he is experiencing.

a) Primitive anxieties

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" (Delion, 2002; Mellier 2002; Roussillon, 1999). It is all the more difficult to perceive a suffering that it is not transformed into an anxiety symptom, into a clearly communicable emotion. In the primitive relations between the baby and his mother, this suffering cannot be represented for the baby; his self is not yet sufficiently constructed. The subject cannot feel these "primitive sufferings"; his attention is abolished there. Psychic time is crushed, these pains are paradoxically "outside of time" and yet so omnipresent, current. This creates tensions in the environment. Hallucination, acting out, addiction, psychosomatic trouble and much pathology may result from it.

The subject, the baby, cannot feel without vital risk the anxieties of falling forever (E. Bick, 1986), of precipitation (D. Houzel, 1995), the fear of liquefaction (F. Tustin, 1981), of unthinkable anxieties (D. W. Winnicott, 1958), of terrors without name (W.R. Bion, 1962). These primitive anxieties (McCarthy, 2004; Mellier, 2005c) emerge among the entire spectrum from health to pathology. They arouse strong counter-transferential effects because these amounted to a breaking into the Ego, a truly traumatic situation. They differ from the anxieties of loss, which are considered as an alarm signal for the Ego (Freud, 1926). They come before the depressive anxiety that Melanie Klein highlighted, before the anxieties of separation (J. Bowlby, 1969), before the anxiety of the 8th month noted by Rene Spitz (1965). They would lie outside of consciousness, outside the psychic apparatus, like Bion's beta elements. They do not have the same statute as a quite identifiable emotion from the intrapsychic point of view, when the anxiety affects the Ego.

Bick (1986) showed the existence of primitive defenses that the infant sets up to face these states of radical distress: clutching itself, gazing at a luminous point, becoming stiff, etc. These different psychic states are marked by adhesive identifications; the subject goes away from himself while being stuck to the surface

of the object, to its sensorial qualities. D. Meltzer (1975) emphasized that time is circular, and characterizes the bi-dimensional space. Time is without end, as suggested by the baby's infinite pedaling movements, or by the autosensual behaviours of autistic operations. Here time "is suspended", is outside the subject. Selma Fraiberg (1982) also described pathological defenses against early suffering, like the avoidance and freezing of emotions, which she links to quasi-biological defenses. Let us quote a passage to illustrate the question of avoidance: "This behavior seems to indicate that when the suffering becomes intolerable, there is a mechanism of rupture which functions to remove this feeling" (2002, 58-59).

These 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. We would not be in presence here of the timeless unconscious (Freud, 1920), which can forget time. In this case, the division between conscious and unconscious has not yet been established with the construction of the psychic apparatus. We are beyond the pleasure principle (Green, 2000) because suffering is amalgamated, confused, with pleasure. They are a-temporal phenomena with suffering that is in "distress".

At the time of a "primitive relationship" to the environment (Winnicott, 1958), there is not a psychic "signal" for the early suffering. The psyche of another ought to receive and decode what would make that signal. The psyche of another ought to feel and fully experience emotions before the baby can feel them. The psyche of another ought to introduce a psychic temporality, which in this case is lacking. Narration represents this attempt to establish links. Primitive anxieties must initially be contained by a psychic space in order to be "thought". Intrinsically there is a call to intersubjectivity but in a diffuse way, without a specific person being targeted.

b) Narration and "the present"

The works of Paul Ricoeur and Daniel Stern illustrate the interest of considering a "present time" for the baby (Mellier, 2005b) because this psychic temporality is opposed to the "outside-of-time" of primitive anxieties.

In *Temps et récit*, Ricoeur studies Saint Augustine's critique of time (Gilbert, 2001). Given the impossibility of measuring time, Saint Augustine develops a subjective analysis of time with the idea of a triple present. Memories allow one to experience the "present of the past"; waiting allows one to experience the "present of the future"; and attention allows one to experience the "present of the present". According to Ricoeur, the plot of a narrative does not respect chronology or linear time. At the opposite extreme, narration would allow for a compromise between "objective" time and subjectively experienced time, due to the role of language. A narrative finds its center of gravity in the tensions between the "concordance" of events, which keep the story moving, and the risks of "discordances". That shapes a beginning and an end. It is a meaningful configuration. Narration is a part of a deeply humanistic perspective. Daniel Stern refers to this work in developing his conception of an early narrative addressed to the baby.

Through the microanalysis of infant observation, Stern promotes narration as a true experience of early symbolization, before language. Thus, he shows that plots start between the mother and the baby, as in suspenseful games of the "tiny beast, who goes up and up" (1997, p. 116). He underlines the "temporary feeling shape", which gives form to an affective experience of the baby and which constitutes the "protonarrative envelope": "Thus the protonarrative envelope is an envelope of time as much as an envelope of events. The elements of the intrigue are distributed temporally on a dramatic line of tension" (1997, p. 124). Stern emphasizes the importance of the plot as one of the criteria of narratives: "the idea of temporary feeling shape produces the line of the fundamental narrative tension: this framework links the affect schema to the narrative schema"(1997, p. 124).

The narration is founded on a "plot" which orders separate events in an immediate which is deferred. Ricoeur highlights the role of plot. His conception also took as a starting point the Poetics by Aristotle. The narration is *mimésis*, *muthos* and *catharsis*. "Ricoeur chooses to translate the word of *muthos* by "intrigue" or "narration", rather than "history" or "fable", because far from constituting a mere reproduction or a simple copy of the chronological sequence of the facts such as they took place or could take place in actual experience, the *muthos* - which Aristotle regards as the central element of any poetic composition - consists in representing reality according to rules which are its own" (2001, p. 49).

Stern (2004) then develops a theory of the " present moment ": "We conceive a 'moment' like a small subjective unit of time during which something important occurs, which will have an effect in the future". When some notes of music become after the third or fourth note a melody, a retroactive effect unifies what has occurred (the "past of the present"). Paradoxically this makes it possible to jump or to imagine what will occur, suggesting "the horizon of the future". Such moments between mother and baby, between therapist and patient, are seen like emergences of a complex dynamic system. These moments of meeting are marked by surprise; they reorganize the implicit intersubjective context between the partners: "the present moment is structured like a lived micro-history with a minimalist intrigue and a dramatic line of tension which is made up of vitality affects". We could talk about "insight", but it is for him a non-verbal process. He refers to a procedural memory that manages what is implicit in our acts.

It seems paradoxical to consider that infinite time is concentrated in such limited moments, but this conception of the "present time" is related to the work of authors who develop the idea of symbolization in the presence of the object. D. W. Winnicott (1958) highlights the emotional quality of what the baby experiences. In the experience of the set situation established for babies in 1941, he insists on the very precise attention to the present experience of the baby. After discussing the three phases suitable for the development of this experience, he specifies in a broader way: "that which is therapeutic in this work resides, in my opinion, in the fact that one leaves the field free for the course of the experience"(p. 285). He adds that just as a mother intuitively feels reluctant to interrupt the experience of her baby

in order to allow him to live it out until the end, the analyst lets his patient find his own pace. Marion Milner (1952-1955) had stressed the associative value of play for the child, so that he can create a zone of illusion, a kind of bridge, between his internal reality and external reality. In another way, Serge Lebovici (2002) underlines an empathy that uses metaphors, or a narrative, and that is suitable for introducing by acting an interpretation into the therapeutic relation with the baby. This relates to research concerning infant rhythm (Ciccone, 2005). Genevieve Haag (1993) stressed rhythm as a primordial component of the first psychic container, and Daniel Marcelli (1996) connects it with the first symbolization.

Psychic time is multiple and varied as Green (2000) indicates with his expression of "broken up time". Here time is not reduced to a linear, chronological, objective or developmental reality. The psychic apparatus is founded on a radical "heterophony" and "heterochrony". Green very firmly criticizes the developmental view, which flattens time by reducing it to the primacy of the biological time of maturation. Narration belongs to these intersubjective problems of time, in particular to the problem of the present time.

II. Narration, observation and the associative group work

The sufferings of the baby, the sufferings around the baby, are located in his bonds. Infant Observation (IO) according to Esther Bick (1964) is a particularly useful method of approaching these bonds (Briggs, 2002; Haag, 2002; Miller, 1989; Reid, 1997; Vallino, Maccio, 2004). These sufferings relate to the whole family group. E. Bick mentions the importance of the whole family in this process, she insists on the fact that the identity of each member changes when a new baby arrives. She thus summarizes her contribution in her last article (1986) by evoking "mother-and-the-child-in-the-family": "In my own work I have tried to trace the processes of the most primitive holding together of the infantile body-ego, as they are fashioned jointly by mother-and-child-in-the-family, in order to demonstrate the steps necessary for the operation of projection, introjection and splitting and idealization." (1986, p. 299)

The sufferings present in this space are sometimes difficult to perceive and to contain. The task of the observer consists in developing his attention to the infant in his family and developing his own containing capacity. The process of containing is an important goal of this psychoanalytical formation. Other authors after E. Bick highlight it well. C. Athanassiou (1992) explicitly shows how to understand the contribution of W. R. Bion. P. B. Sorensen (1997) explains the active role of the containing process.

Following in the footsteps of Winship (2001), who tries to bring this approach closer to Group Analysis, we will show that the work of the observer depends on the group's free-association work.

a) Infant Observation, a setting that deconstructs time

The work of the observer implies two extremely different narrations: initially, the writing down of an observation from each session with the baby in his family; secondly, the construction of narratives after the reading of the observation in the seminar. Two very different steps are involved:

- The first narration must be a faithful restitution of a clinical situation, so that a third person can imagine and represent it.
- The second one begins with the reading of this observation and continues with the different associations that emerge in the group.

The observer ought to resist, to perceive, or even to transform, the multiple sufferings embedded in the family links.

This approach demands a setting that deconstructs time. It would thus allow psychic work on the recording, the containment and the transformation of primitive sufferings, which are "outside of time". Following the example of the Ricoeur injunction, "to describe, to tell, to prescribe" (1990), the task of the observer could be described in this way: "to become involved, to describe, to tell" (Mellier, 2005a). A ternary rhythm (Houzel, 2002) is repeated week after week:

- To become implicated with or to be aware of the baby who has just been born in the family,
- To describe or to note, to remember how the situation evolves,
- To relate or to analyze and interpret this situation in the group.

The initial attention to the baby in his psychic environment is "stimulated", sustained and "detoxified" by the existence of these two other steps.

In the home, the observer is included in the family dynamics. He must resist the pressure of various feelings or anxieties. Esther Bick says concerning the observer's purpose: "He has to allow some things to happen and to resist others. Rather than establishing his own personality as a new addition to the family organization, he has to allow the parents, particularly the mother, to fit him into her household in her own way." (1964, p. 38). This position is always to be sought in this way; he is subject to the unconscious bonds that exist between the infant, the family and his own personality. However, his training is always subordinated to the interests of the baby, as recalled by Michel Haag (2001).

The following two steps are essential; they have a multiplying effect on listening and attention. After the immediate impression, the observer endeavors to think of it again, first when noticing it, second when relating it to the group. He thus reviews his experience during the time of the seminar and again after it has taken place. The narrative plot relates all these various moments for the observer.

1) A descriptive narration, without plot

The time of writing is sometimes long and difficult insofar as the observer is grappling with confused or forgotten elements, or elements that are too active in his psyche. He is instructed to note as carefully as possible what takes place in order to

be able to recreate it for a third party. L. Wittgenstein gives us a model for reaching this goal.

The restored observation results from complex psychic work carried out by the observer: he must overcome his reflex to interpret, set aside his judgment, try to recall that which disappears, to remain detached from what might be fascinating, to contain emotional agitation, to resist boredom or falling asleep, to establish links between scattered fragments, to record that which is nonverbal, etc.

The written notes are a "landscape" out of which the analysis will be able to develop. It has a capital function in this methodology; although this fact is often forgotten, it is a true form of mediation. In training, many participants find this kind of note-taking to be difficult. There is no place here for the spontaneity of a narration. The aim is not to tell a history, or to construct a plot. The observer has to resist using his imagination to compensate for the shortcomings of his memory. It must be a very descriptive narrative out of which associative work can later emerge.

2) A told and interpreted narration, "con-figuration" and "re-figuration"

The reading aloud of the observation in the seminar transports the initial situation into the group. Whereas the observer thought he was being understood thanks to his reading, he realizes that he must speak to clarify details, his position, that of the baby, etc. Listening to his narrative brings about interrogations and associations in each member of the group. Only at the end of a rather long period of time, is a representation of the initial situation sufficiently shared and constructed by all.

An analyst leads the seminar. It is thus a time for interpreting the clinical material, potentially leading to a new view of the situation. The seminar is the framework of the elaboration of the situation. Rosella Sandri (1995) highlights the work that the group has to do in order to transform the psychic suffering imported into the seminar by the narration of the observer. The group is likely to be impacted by unprocessed feeling or anxieties, which the observation transmits. These primitive sufferings have negative effects on associative work and so we will stress the capacity of the group to recover a certain kind of "free association" through the exchange of different points of view.

Annik Comby (1990) is a psychoanalyst and an Infant Observation trainer who worked with Esther Bick and Martha Harris. She speaks about the seminar as the work of "associating different points of view". It is not a question of associations of ideas or a free association starting from some given element. The associative work must remain very close to the presented material, to the perception of psychic reality -- the psychic reality of the infant in his home. "I particularly seek to follow and use something which I call the **association of points of view** (different from the association of ideas), which leads to another point of view than that initially proposed (often by the observer) and those which are expressed by each participant of the group. It was possible to reach this new point of view by observing the succession of these associated points of view; the new point of view then appears to be the emergence of a particularly creative moment "(underlined by the author,

1990, 53-54). This "association of points of view" suitable for a group is different from free association suitable for the cure as Rene Kaës (1994) and Claudio Neri (1995) have pointed out. It is like a "free flowing discussion" (Neri, 2003), but it is constantly centered on the initial situation.

When reading his observation during the seminar, the observer tells what he has experienced; he develops the narrative of his experience. Therefore, a certain "configuration" of the events emerges in an implicit way at the time of his reading. Each one perceives the situation according to his own vertex (Bion, 1970), according to his own identifications with an aspect of the mother, the baby, the father or the observer etc. Group associative work must remain very close to the presented material, each person having his own perception of the situation. At the time of the seminar, a new plot can emerge. In the group work, the various points of view of the participants have been expressed and have combined or clashed in different ways. The new point of view is the narrative that Ricoeur calls the "refiguration"; it is the reception of the recipients.

The discipline of the observer is thus quite demanding. This recalls the precepts of W. R. Bion concerning attention (1970). For example, each time the observer goes to the baby's home, from the moment he knocks on the door, he must endeavor to be very available to receive the state of mind, which reigns in the household at that particular moment. In *Second thought* (1967), W. R. Bion refers to his earlier texts while emphasizing each time the position of observation, and insisting that knowledge kills the emergence of a new encounter, of a new thought. The step of observation "freezes the frame" so as to restart emotional dynamics suitable for the encounter and the associative capacity.

b) An observation at home, in the postpartum period

Within the limits of this work, we cannot describe and comment on an observation in its entirety. We will however quote from two excerpts of a written observation, which typically lasts one hour. It is the first time the observer meets the baby in the family home. The first excerpt occurs just after his arrival, the second describes a small sequence in the middle of the visit:

I ring at the door. Mrs. B opens the door. Good afternoon, she smiles. "He is not sleeping, she tells me, he is over there", she points me toward the corridor I had gone down for the preliminary pre-observation visit. I precede her and enter into the living room. Two young women are seated, leaning on a small bed with bars, they are speaking to the baby who is lying on his back. We shake hands, they get up; the smallest one moves away in order to show me the baby. He is awake, he grimaces, moves his mouth as if to say "aheu", slowly he looks around; at one point, our eyes meet, I gently say hello to him. His mother sits down at the head of his bed, against it. Words are exchanged in their native language. The baby moves his eyes, his face, (his arms?); it seems to me that he tries to look behind him and in the direction of the voices.

The smallest girl says: "sit down", and shows me the chair she was occupying. I take off my jacket, and put it behind me on another chair.

"It is hot", Mrs. B. tells me.

- Yes, I say, of course.

I sit down. A short moment of silence then they speak, between them, with the baby, while seeking to catch his glance or commenting on the baby in their native language; "He is not hungry" his mother, who remains in the same place, tells me. He has the same movements; he is a little agitated, he grumbles. She comes in front of him and said that he does not smell good: "I am going to change his diaper"; she holds him and leaves the room.

The observation continues, one woman is joking, comparing the infant with a pet, and confusing the observer with the father ... It is just a short moment which the observer remembered and which he noted with his own words in order to be close to what happened. One can wonder why the mother says that it's "hot", why the observer has answered, "of course", etc. The aim is to think about the observer's position for when he returns to the baby's home, it is to "detoxify" him of the anxieties he was the receptacle for. Obviously, the observer tries to find his place in this first meeting at home. His identity "floats" and the recourse to the chair does bring a solution! Is there a place for everyone? The look of the baby is sought, as if he could reassure us of our identity. The sentence, "It is hot", reveal the very charged climate full of emotions around the infant, whose name is Liam (we will find this talk of heat very often later, in particular when the mother is afraid of fever). The observer will then learn that the mother has just given the feeding bottle for the first time. No suffering is expressed but the atmosphere is "charged".

A short while later, small signs of distress appear. The mother leaves her baby in order to accompany her friends to the door:

"Liam makes gestures like pedaling, with his arms. His mother comes back. She looks at him, takes him and sits on a chair against the wall. He squirms a little; he changes positions. She says to me that he holds his head up well; I say, "Yes he is a beautiful baby". She says that he is starting to speak, I agree by saying that I heard him. She says that he looks around everywhere. I agree, "Yes he is alert". Liam is on her knees, at a short distance from her, as during his feeds. He looks away and his glance moves towards the center the room, for a short moment he stares at the small chandelier. "Lamp", "xxx", she then says to him in her native language."

The baby is not held well; his arm movements and his staring at the lamp are obvious signs of his distress, of primitive sufferings. In fact, the mother seems to be quite preoccupied by the observer. The observer is embarrassed; his answers are a bit mechanical. He is probably too identified with the infant whom, intuitively, he feels is badly held. When the mother becomes aware of the situation, she begins to hold her baby differently.

At first, the observer feels this situation to be truly banal. Yet the observation looks "agitated", if we are penetrated by the full atmosphere (Neri, 1995) of this small

fragment. The observer looks for his position, he is too close, too far; there is a very strong emotional density around this one-month-old baby. In such an observation, the observer is not there to lead a consultation, to satisfy a demand for care or to be an expert; he is in a learning position.

During this observation, the family group is under the impact of the birth of the baby. The identities of each one float. This atmosphere is typical in the post-partum period (Bick, 1964, Carel, 1989, Rochette, 2005). In this case, the mother is also considering the passage to the feeding bottle, because she will have to leave her baby in day care in two months, this is also a cause of anxieties. The observer was under the impact of these anxieties and intense feelings. Note-taking was very difficult: what can be said about such scenes when nothing seems to happen? It was a nonetheless a very important moment. It allowed him to "update" his own thinking; to observe himself in this situation and to perceive for example, how much this mother was expecting from him. The observer needed to be recognized in and contained by his identity, but of course beyond all this lies the question of Liam and his environment. Psychic work involves the meticulous description of the observation and then the working-through that takes place in the group seminar.

Narration relates to the work which the observer accomplishes, in renewing contact with his own budding emotions, in putting difficult moments "into a plot", in developing his "capacity of reverie" so as to be as available as possible, in a state of "alive receptivity", at the time of his next visit with the family. This narration is of course related to the family's own narrative capacities relative to the baby. This narration also depends on the psychic work carried out in the group seminar that accompanies the observer.

Extending the work of Bion, Antonino Ferro (2004) very closely links narration and emotion: "psychoanalysis can be the method which makes it possible to dilute emotions in narrations and to create narratives which give body to the emotions and make them visible. It is thus not the narrative in itself which counts, but the fact of seizing the emotions which lie beyond the narrative, which is a narrative derivative of the emotions themselves".

In Infant Observation, the narration is due to the formidable emotional impact of the birth of a baby. If the narration solidifies into a history, it becomes a container that will be too constraining for the growing psychic life of the baby. If on the other hand, the narration does not lead to the work of free associations, it is likely to be diluted in the emotional tensions of any family group.

The infant is a subject, who is still barely differentiated from his psychic environment. His primitive relationships to the world alter the way adults position themselves relative to him, particularly when there are sufferings. This "immediacy" between him and others can be plugged up, as by a cork, by the act of language. This immediacy thus makes speech difficult but necessary, words which are addressed to him, or a narrative which is told for him. This immediacy makes it invaluable to be emotionally "in the present" with him.

Bibliography

- Anzieu, D. (1985). *L'Io-pelle*. Borla, Roma: Borla, 1987.
- Anzieu, D. (1987). *Les Enveloppes psychiques*. Paris: Dunod.
- Athanassiou, C. (1992). Contribution de W. R. Bion à l'observation de bébé en famille. *Devenir*, (63-74.)
- Aulagnier, P. (1975). *La violenza dell'interpretazione*. Roma: Borla, 1994.
- Bick, E. (1964). Notes on infant observation in psychoanalytic training. *International Journal of Psychoanal.*, 45, 4, (558-566.)
- Bick, E. (1986). Further considerations on the function of the skin in early object-relations, findings from infant observation integrated into child and adult analysis, *British Journal of Psychotherapy*, vol. 2, 4, 292-299.
- Bion, W. R. (1962). *Apprendere dall'esperienza*. Roma: Armando, 1972.
- Bion, W. R. (1967). *Analisi degli schizofrenici*. Roma: Armando, 1970.
- Bion, W. R. (1970). *Attenzione e interpretazione*. Roma: Armando, 1973.
- Bowlby, J. (1969). *Attaccamento e perdita*. Torino: Boringhieri, 1972.
- Briggs, A. (2002). *Surviving Space. Papers on Infant Observation*. The Tavistock Clinic Series, London, Karnac.
- Carel, A. (1989). Transfert et périnatalité psychique. La fonction alpha à l'épreuve de la naissance. *Gruppo*, 4, (49-67).
- Ciccone, A. (2005). L'expérience du rythme chez le bébé et dans le soin psychique, *Neuropsychiatrie de l'enfant et de l'adolescent*, 53, (24-31.)
- Comby, A. (1990). L'approche psychanalytique de l'observation du nourrisson dans sa famille, apport à la pratique psychiatrique. In Carel A., Hochmann *et al.* *Le nourrisson et sa famille*, Lyon, Césura Lyon édition.
- Delion P. (2002). (a cura di) *La souffrance psychique du bébé. Approches pluridisciplinaires*. Paris: éditions ESF.
- Ferro, A. (2004). *Un modèle de l'appareil psychique et ses implications cliniques: associations libres et rêve de la veille*, communication Université Lyon 2, colloque sur la réalité psychique, CRPPC, Bron.
- Ferro A. (1996). *Nella Stanza d'Analisi. Emozioni, Racconti, Trasformazioni*, Milano: Raffaello Cortina.
- Fraiberg, S.H. (1982). Pathological Defenses in Infancy. *The Psychoanalytic Quarterly*, 4, (612-635) 1987. In Fraiberg, L. (a cura di) *Selected Writings of Selma Fraiberg*. Columbus, Ohio, Ohio State University Press. (Trad. Franc. Mécanisme de défenses pathologiques au cours de la petite enfance. In D. Mellier (a cura di) *Vie émotionnelle et souffrance du bébé*. Paris: Dunod, 2002.
- Freud, S. (1920). *Al di là del principio del piacere*. In *Freud Opere* Vol.9, Torino: Boringhieri, 1977.
- Freud, S. (1926). Inibizione, sintomo, angoscia. In *Freud Opere* Vol.10, Torino: Boringhieri, 1978.
- Gilbert, M. (2001). *L'identità narrative. Une reprise à partir de Freud de la pensée de Ricœur*, Labor et Fides, Genève, Suisse.

- Golse B., Missonnier S. (2005). *Récit, attachement et psychanalyse*, Toulouse, édition Érès.
- Green, A. (2000). *Le temps éclaté*, Paris: éditions de Minuit.
- Haag M. (2002). *La méthode d'Esther Bick pour l'observation régulière et prolongée du tout-petit au sein de sa famille*, Paris: autoédité.
- Haag, G. (1993). Hypothèse d'une structure radiaire de contenance et ses transformations. In Anzieu D. et al. *Les contenants de pensée*, Paris: Dunod.
- Hochmann, J. (1994). *La consolation*, Paris: éditions Odile Jacob.
- Houzel, D. (1995). Precipitation anxiety. *Journal of Child Psychotherapy*, 21, 1, (65-78.)
- Houzel, D. (2002). *L'aube de la vie psychique. Études psychanalytiques*, Paris: éditions ESF.
- Kaës, R. (1994). *La parola e il legame*. Roma: Borla, 1994.
- Laplanche, J. (1998). Narrativité et herméneutique. *Revue française de psychanalyse*, 3, (889-894.)
- Lebovici, S. (2002). *Le bébé, le psychanalyste et la métaphore*. Paris: éditions Odile Jacob.
- Marcelli D. et al. (1996). Les origines du travail de penser entre mère et bébé. *Psychiatrie de l'enfant*, XXXIX, 1, (5-40.)
- McCarthy, J. B. (2004). Primitive anxiety and countertransference. *Psychoanalytic Psychology*, 21, 4, (618-621).
- Mellier, D. (2005). Temps présent et travail d'attention du bébé lors des retrouvailles après une séparation. *Neuropsychiatrie de l'enfant et de l'adolescent*, 53, 1-2, (3-10.)
- Mellier, D. (2005). Narrativité et souffrances primitives: "s'inscrire, décrire et raconter". La question des différents récits dans l'observation du nourrisson selon la méthode d'Esther Bick. In Golse B., Missonnier S., *Récit, attachement et psychanalyse*, Toulouse: édition Érès.
- Mellier, D. (2005). *Les bébés en détresse, intersubjectivité et travail de lien. Une théorie de la fonction contenante*. Paris: PUF.
- Mellier, D. (2002). (ed) *Vie émotionnelle et souffrance du bébé*. Paris: Dunod.
- Meltzer, D. (1975). (ed) *Explorations in Autism: A Psycho-Analytical Study*. Strath Tay, Clunie.
- Miller, L. (1989). (ed) *Closely Observe Infants*. London: Duckworth.
- Milner, M. (1952). Aspect of the symbolism in comprehension of the not-self. *International Journal of Psycho-analysis*, 33, (181-195)
- Milner, M. (1955). The role of illusion in symbol formation. In Klein M. (ed) *New Directions in Psycho-analysis*. Maresfield, London, 1977, 2^e éd.
- Neri, C. (1995). *Group*. London: Jessica Kingsley, 1998.
- Neri, C. (2003). Free associations, free flowing discussions and group thought. *Group analysis*, 36, 3, (345-357.)
- Puyuelo, R. (1999). L'Odyssée analytique. In Konicheckis A., Forest J (ed) *Narration et psychanalyse*. Paris: L'Harmattan.

- Reid, S. (1997). *Developments in Infant Observation*. London: Routledge.
- Rey, A. (1992). (ed) *Dictionnaire historique de la langue française*. Paris: Dictionnaire Le Robert.
- RICŒUR, P. (1990). *Soi-même comme un autre*. Paris: éditions du Seuil, 1996.
- Rochette, J. (2005). Le temps du post-partum immédiat. Une clinique du « qui-vive » et de l'après coup. The time of the immediate postpartum. An clinical position in alert and in afterwards. *Neuropsychiatrie de l'enfance et de l'adolescence*, 53, (11–18.)
- Roussillon, R. (1999). *Agonie, clivage et symbolisation*. Paris: P.U.F.
- Sandri, R. (1995). Le groupe d'observation : écoute, rêverie, transformation. In Lacroix M-B, Monmayrant M. (ed) *Les liens d'émerveillement. L'observation du nourrisson selon Esther Bick et ses applications*, Toulouse, Érès.
- Schafer, R. (2004). Narrating, Attending, and Empathizing, *Literature and Medicine*, 23, 2, ProQuest Medical Library, (241-251.)
- Sorensen , P. B. (1997). Thoughts on containing process from the perspective of infant/mother relations .In Reid S. (ed) *Developments in Infant Observation*. London, Routledge.
- Spitz, R. A. (1965). *The first year of life*. New York: International Universities Press.
- Squire, C. (2005). Reading narratives. *Group Analysis*, 38, 1, (91-107.)
- Stern, D. N. (1985). *The Interpersonal World of the Infant: A View from Psychoanalysis and Developmental Psychology*. NY: Basic Books.
- Stern, D. N. (1995). *The Motherhood Constellation: A Unified View of Parent-Infant Psychotherapy*. NY: Basic Books.
- Stern, D. N. (2004). *The Present Moment in Psychotherapy and Everyday Life*, New York: W. W. Norton & Company.
- Tustin, F.(1981) . *Autistic states in Childre*, London: Routiedge & Keagan Paul.
- Vallino D., Macciò M. (2004) *Essere neonati. Questioni psicoanalitiche*. Roma: Borla.
- Winnicott, D. (1958). *Collected papers: through paediatrics to psycho-analysis*. London: Tavistock.
- Winship, G. (2001). Notes on the technique of psychoanalytic Infant Observation: a Group-analytic training perspective. *Group Analysis*, 34, 2, (253-266.)

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